This Annual Progress Report provides a summary of the United Nations’ (UN) collective contribution to assisting the Government of Papua New Guinea (PNG) achieve its development goals over the period 1 January - 31 December 2012. The UN’s support to PNG is guided by the priorities set out in the UN Development Assistance Framework 2012-2015 (UNDAF), which was endorsed by the Government of PNG in February 2012. As such, this is the first Annual Progress Report for the 2012-2015 UN programming cycle.

In PNG, the UN resident and participating agencies, funds and programmes work together across their respective mandates to deliver a joint and multi-sectoral programme – “Delivering as One” – thereby enhancing the efficiency, effectiveness and coherence of the UN Systems activities in PNG (please see the chapter The UN Delivering as One in Papua New Guinea). The Government of PNG has been an enthusiastic supporter of UN Reform and has reiterated its backing for the Delivering as One modality to be followed in PNG in Prime Minister Peter O’Neill’s speech to the UN General Assembly in September 2011 and by Foreign Minister, Rimbink Pato in September 2012.

Papua New Guinea continues to benefit from a strong UN presence through its delivery of various development programmes, which we highly value. We have been implementing the “One UN – Delivering as One” concept since 2006, as a “Self-Starters” country. So far, this is working exceptionally well for Papua New Guinea.

Hon. Rimbink Pato, Bachelor of Laws, Officer of the British Empire, Member of Parliament
Minister for Foreign Affairs and Immigration of Papua New Guinea
At the 67th United Nations General Assembly, September 2012

A synthesis of the key development results that have contributed to improving the quality of life and access to services for Papua New Guineans can be found in the Executive Summary. The chapter Overview of Development Trends gives an account of the national development context and the challenges and opportunities presented to the United Nations Country Team (UNCT) for action. The chapter Overall Analysis of 2012 UN Programme Progress analyses our performance with regard to the collective deliverables and expenditure rates set in our Annual Work Plans. For an in-depth look into concrete results by each of the ten thematic Task Teams, please refer to the chapter Analysis per Inter-Agency Outcome. Lastly, the chapter Challenges and Recommendations provides some reflections on our work over the past year and considerations for the UN development initiatives in 2013. The following agencies contributed to the UN programme in 2012:

- International Organization for Migration (IOM)
- Office for the Coordination of Humanitarian Affairs (OCHA)
- Office of the High Commissioner for Human Rights (OHCHR)
- Joint United Nations Programme on HIV and AIDS (UNAIDS)
- United Nations Development Programme (UNDP)
- United Nations Population Fund (UNFPA)
- United Nations High Commissioner for Refugees (UNHCR)
- United Nations Children’s Fund (UNICEF)
- United Nations Entity for Gender Equality and the Empowerment of Women (UN WOMEN)
- World Health Organization (WHO)

As UN Resident Coordinator, it is my pleasure to present this report on behalf of the United Nations Country Team. I take this opportunity to thank the Government of PNG for its close collaboration and the dedication of key ministries to making the MDGs and social progress a reality in PNG. I also commend the dedication of the team of the Resident Coordinators Office and note that core funding for their work in support of the UNCT is still not a reality. This will need to be urgently addressed, particularly at a time of globally shrinking Overseas Development Assistance, by the United Nations Development Group and key donor partners, which provide the UN System with its core financial resources. Finally, I extend a vote of thanks to our Development Partners from Australia and New Zealand who have made generous contributions to UN work through the PNG UN Country Fund in 2012. In this context, the UN is ‘Delivering as One’ in PNG and working collaboratively with other important donors to ensure that PNG continues to receive targeted and effective assistance, which is directly relevant to national development priorities.

DAVID MCLAICHLAN-KARR
United Nations Resident Coordinator
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LIST OF ACRONYMS

ABG  Autonomous Government of Bougainville
AIDS  Acquired Immune Deficiency Syndrome
ARB  Autonomous Region of Bougainville
AusAID  Australian Agency for International Development
CEDAW  Convention on the Elimination of all Forms of Discrimination Against Women
DEC  Department of Environment and Conservation
DJAG  Department of Justice and Attorney General
DNPM  Department of National Planning and Monitoring
DOE  Department of Education
DRM  Disaster Risk Management
GBV  Gender-based violence
HIV  Human Immunodeficiency Virus
IOM  International Organization for Migration
MDG  Millennium Development Goal
MSM  Men who have sex with men
MTDP  Medium Term Development Plan
NACS  National AIDS Council Secretariat
NCD  National Capital District
NDOH  National Department of Health
NEC  National Executive Council
NGO  Non-Governmental Organization
OCHA  United Nations Office for the Coordination of Humanitarian Affairs
OHCHR  Office of the High Commissioner for Human Rights of the United Nations
PCCB  Provincial Capacity Building
PLHIV  People living with HIV
PNG  Papua New Guinea
PPTCT  Prevention of Parent to Child Transmission
RPNGC  Royal Papua New Guinean Constabulary
SGP  Small Grants Programme
TGP  Transgender Person
UBE  Universal Basic Education
UN  United Nations
UNAIDS  Joint United Nations Programme on HIV/AIDS
UNCG  United Nations Communications Group
UNCT  United Nations Country Team
UNDAF  United Nations Development Assistance Framework
UNDP  United Nations Development Programme
UNFPA  United Nations Population Fund
UNHCR  United Nations High Commissioner for Refugees
UNICEF  United Nations Children’s Fund
UN WOMEN  United Nations Entity for Gender Equality and the Empowerment of Women
UPNG  University of Papua New Guinea
UPR  Universal Periodic Review
WHO  World Health Organization

ANNUAL PROGRESS REPORT

2012
Governance for Equitable Development

The overall delivery rate in 2012 on the programme’s outputs is 75% and the expenditure rate against available resources is 84%. The programme delivered on USD 20 million.

UN services across the 10 Inter-Agency Outcomes include the standard-setting and strengthening of national systems through the provision of technical advice, support to policy development, policy implementation, financial contributions and capacity-building of implementing partners. The Millennium Declaration and the MDGs provide the basis for the UN’s strategic positioning and support to national development plans. Drawing on best practices from a global perspective, the UN coordinates and formulates innovative approaches to development that are suited to the unique political, economic and social context of PNG.

The enabling environment to deliver on programmes faced a number of challenges during the year. The overall available resources have not increased between 2010 and 2012, while the cost of operating in PNG has increased significantly. Effectiveness of delivering the programme with implementing partners and counterparts was an issue in 2011 and remained an ongoing challenge in 2012. Besides an enabling environment in partnerships, the UN experienced additional programme-related bottlenecks.

Below are several of the highlights from 2012 around the four Cluster Outcomes. For a complete result of narratives please see the chapter Analysis per Inter-Agency Outcome.

Cluster Outcome 1 | Governance for Equitable Development

The Provincial Capacity Building Programme (PCaB) is a Government of PNG initiative, supported by the UN through policy and technical advice, and funded by AusAID to improve public sector service delivery at sub-national levels through effective and efficient public financial management. A total of 74 Department of Finance staff, of which 48% were women, graduated as competent with the knowledge and skills to produce accurate financial reports in the six pilot provinces.

A total of 74 department of Finance staff, of which 48% were women, graduated as competent with the knowledge and skill to produce accurate financial reports in the six pilot provinces. These long-running serial dramas, Echoes of Change / Nau Em Taim, address a range of interrelated issues such as: Promoting the use of effective family planning methods; reducing violence against women; building support for universal education; increasing favourable attitudes towards locally protected and managed marine areas; one drama broadcasts in Pigdjin and the other broadcasts in English. In 2012, awareness of the MDGs was raised through 168 episodes of the MDG Radio Campaign which have benefitted thousands of PNG listeners.

Cluster Outcome 2 | Social Justice, Protection and Gender Equality

The UN continued to support the Government of PNG to take action by 2015 to respect, protect and fulfil human rights for all people in accordance with its obligations. The 3rd annual PNG Human Rights Film Festival 2012 contributed to a growing human rights community in PNG and an increase in people participating in advocacy to address the human rights situation in country. For the first time, the Festival travelled to the ARB and Eastern Highlands Province. More than 1,500 people attended the festival and many others listened to the debates around the country broadcast on national radio FM100 and NBC.

With respect to increasing capacity of national women’s machineries and other selected institutions for gender equality and women’s empowerment, the UN focused on supporting women candidates in the 2012 national elections. Key activities aimed at supporting women candidates were conducted with the National Women’s Machinery and its partners, including a first ever practice parliament and training for intending women candidates. Three women were elected to the PNG National Parliament in July 2012. A total of 135 women contested the 2012 elections, the highest number recorded since PNG independence in 1975.

The Government of PNG with UN support is in the process of building a child protection system. The Child Protection Act 2009 is under review to address barriers to its effective implementation. To support victims of violence against women and children, the hospital-based Family Support Centres provide a ‘one-stop shop’ for coordinated medical, paralegal, psychosocial, case management support and referral services. Together with other development partners, the UN supported the establishment of Family Support Centres. It also supported the training of staff and community child protection advocates in 13 Family Support Centres, which served over 17,000 women and children.

The UN is an important partner for us in Papua New Guinea. Over the past couple of years we have been supporting the UN in ‘delivering as one’, on its work in gender-based violence and maternal health. We strongly support the UN’s efforts towards an efficient and integrated approach to programming. We are pleased to see that our financial contributions have led to real outcomes for Papua New Guineans.

Rebecca Lineham
Counsellor – Development (acting)
New Zealand High Commission Port Moresby

Effective HIV prevention approaches include strategies for working directly with people more at risk of HIV. In December 2012, the National Network for men who have sex with men ( MSM) and Transgendered Persons (TGP) - Kapul Champions was launched, which is the first such group in PNG. This group will: engage with the Government of PNG and Stakeholders to advance universal access to HIV prevention, treatment and care; promote non-judgmental, non-stigmatizing services; and raise awareness of legal issues affecting MSM and TGPs in PNG. The UN has also provided legal literacy and organisational capacity training to the organisation’s membership and executive.

With UN support, the Government of PNG revised HIV care and treatment guidelines to include early initiation of antiretroviral therapy and adopted the use of life long antiretroviral therapy (option B+). The Patients' Rights Act 2008 provided the legal framework to support expanded access to ART. This led to an increasing number of over-aged students enrolling in secondary schools which has given rise to behaviour and protection issues. The UN supported the training of teachers.
in primary schools in five provinces to maintain protective environments inside and outside the classroom as part of the Child Friendly School concept. As a result, over 80,000 students are benefitting from child-centered learning, understanding personal safety and hygiene, receiving guidance on how to achieve their learning goals, manage conflict amongst themselves and address their personal problems.

August 2012 review of the PNG UN Country Fund found that the key outcome areas covered by the UN Delivering as One approach in PNG are closely aligned with the development priorities of the Government of PNG and complement the priorities of the Australian aid program in PNG. AusAID has made financial contributions to the One UN Fund and envisages contributing funds to the UN in the coming year to achieve mutually agreed development outcomes in PNG.

Stuart Schaefcr
Head of Aid, PNG
AusAID
Australian High Commission Port Moresby

Cluster Outcome 4 | Environment, Climate Change and Disaster Risk Management

The UN provided technical, policy, and strategic advisory services to the Government of PNG to scale-up national interventions to achieve environmental sustainability and address emerging threats of climate change with an emphasis on community empowerment. This led to programmatic guidance sought from the UN by the Department of Environment and Conservation (DEC) to promote environmentally sustainable economic development through increased recognition of the ecosystem values and highlight development needs of isolated rural communities who are custodians of vast biodiversity of PNG. This was a paradigm shift of the Government of PNG to focus its interventions to explore income-earning opportunities for communities as alternatives to the rapid natural resource exploitation by the extractive industries.

The UN also supported the development of a five-year Disaster Risk Management (DRM) strategy and costed the budget requirements for the National Disaster Centre. As a result, the Government of PNG, for the second consecutive year, has allocated PGK 3 million for the DRM from its development budget. Part of the funding has been invested to improve community resilience through investment in local risk reduction measures. With UN support, the Department of Education (DOE) is the first sector to have a policy on education in emergencies and DRM followed by the pre-positioning of essential non-food items for 13 vulnerable provinces as part of emergency preparedness.

**OVERVIEW OF DEVELOPMENT TRENDS IN 2012**

PNG is the largest and most populous Pacific nation (7.5 million). PNG is ethnically and linguistically extremely diverse, with over 800 ethnic groups living a largely subsistence way of life based on small-scale agriculture and fishing. The majority of the population lives in rural areas (95%), many in remote mountain valleys and on widely scattered islands for which the delivery of services has always posed infrastructural and logistical challenges. PNG is also rich in natural resources and after years of slow growth, is now on the cusp of a resources boom (mining, forestry, fisheries, oil and gas) which, fuelled by high regional demand, presents both challenges and opportunities for the country’s development.

In 2012, PNG’s Human Development Index value was 0.466, giving it a ranking of 156 out of 187 countries. Progress on the MDGs has been generally disappointing, with attention needed on improving access to basic health and education services. Women and girls are especially disadvantaged, many of whom face discrimination and a lack of economic and political opportunity. Rates of gender-based violence (GBv) are among the highest in the region. HIV prevalence is just below 1% and well low by world standards, still represents over 95% of all HIV cases in the Pacific region. Weak governance militates against the successful implementation of national development strategies as insecurity, a lack of transparency and financial mismanagement affect service delivery especially at the provincial and local government levels. Added to these challenges is a high population growth rate which is expected to double the population to 15 million by 2050.

The past year was especially eventful in the political domain. A military challenge to the ruling Government of PNG was successfully quelled in the first quarter and a General Election was held in 2012 to elect a new national parliament. A record 4,000 candidates vied for 111 parliamentary seats, with over 40 political parties registered. One-hundred and thirty-five female candidates contested the elections, an increase of 35% over the 2007 elections, and a record three women Members of Parliament were declared. Violence marred voting in the Highlands region and a significant number of election-related deaths were recorded. Peter O’Neill was sworn in as PNG’s ninth Prime Minister on 4 August. A new UNDAF 2012-2015 was signed with the Minister for National Planning in March, although the uncertain political climate hampered programme implementation for much of the year.

The Special Rapporteur on Violence Against Women, its Causes and Consequences, Ms Rashida Manjoo, visited at the invitation of the Government of PNG in March. Her findings confirmed that violence against women is pervasive in PNG, with a wide range of manifestations occurring in the home, community and institutional settings, with varying levels and prevalence across the country. A priority for UN work in PNG is improving the condition of women through political, social and economic empowerment.

The economy continued to experience strong growth of 7% in 2012. The Kina continued to appreciate (45% over the past 3 years) against both the US and Australian dollars, with inflation peaking at 10% in 2011 before stabilizing at 8% in 2012 (ADB, 2012). The cost of living maintained an upward trend. Parliament passed an historic PGK13 billion (USD 6.2 billion) national budget in November under the theme “Growing our Future”. The direct allocation of 80% of the budget to provinces and districts is a welcome move. However, concern is raised on system and implementation capacity at sub-national levels to maintain fiscal discipline and reach expenditure targets.

Two major Liquid Natural Gas projects are being developed in PNG: A USD 15.7 billion Exxon-Mobil project approved in 2009 and expected to treble PNG’s exports and boost Gross Domestic Product by at least 20%, and a USD 6 billion Liquid Natural Gas project led by InterOil in Gulf Province. Despite entering a new fiscal deficit to cover budget spending, the Government of PNG expects that revenues from extractive industries will see a return to surplus by 2017. A challenge during the next 12 months will be managing 8,000 local workers who will begin reemployment from the construction phase of the Liquid Natural Gas pipeline-laying project.

PNG endured a series of disasters in 2012. A maritime tragedy cost over 300 lives, mostly women and children, who drowned when an over-laden vessel capsized. Flooding in Western Province and heavy rain and landslides in the Highlands resulted in scores of deaths as local villagers were displaced and food gardens and infrastructure (bridges) washed away. An increase in volcanic activity on Manam Island led to more than 200 people fleeing to the mainland to escape lava flow and heavy ash fall. Another 400 villagers were moved until volcanic activities receded. The new Government of PNG has allocated USD 50 million to disaster preparedness and is currently reviewing the National Disaster Plan with UN support.

Photo credit: RCO / Iwona Spytkowski / 2012

How: Jon Barlow, Minister for National Planning and David McLachlan-Karr, UN Resident Coordinator at the UNDAF signing, April 2012
OVERALL ANALYSIS OF 2012 UN PROGRAMME

Programme Design Overview

The implementation of the UNDAF 2012-2015 was in its first year in 2012. This Annual Progress Report reflects progress as per the UNDAF Action Plans Results Matrix. Results progression flows from the Cluster Outcome, Inter-Agency Outcome and Outputs levels.

CLUSTER OUTCOMES | The intended or achieved short-term and medium-term effects of an intervention’s outputs, usually requiring the collective effort of partners. There are four Cluster Outcomes in the UNDAF 2012-2015:

1. Governance for Equitable Development addresses the areas of legislative processes, MDGs, population, aid coordination and peace building in Bougainville;
2. Social Justice, Protection and Gender Equality addresses human rights, gender equality and women’s empowerment, child protection, Human Immuno-Deficiency Virus and Acquired Immune Deficiency Syndrome (HIV and AIDS);
3. Access to Basic Services deals with education and health; and finally,
4. Environment, Climate Change and Disaster Risk Management is in support of conflict prevention, sustainable livelihoods and managing risk associated with disaster.

INTER-AGENCY OUTCOMES | The Inter-Agency Outcome reflects the changes in development conditions which occur between the achievement of outputs and the achievement of outcomes. As such, it constitutes a contribution of partners and UN agencies to achieve the Outcome:

1. Governance
2. MDGs, Population and Aid Coordination
3. Peace-building | Bougainville
4. Human Rights
5. Gender Equality & Women’s Empowerment
6. Child Protection
7. HIV and AIDS
8. Health
9. Education
10. Climate Change, Environment & Disaster Risk Management

OUTPUTS | The products and services which result from the completion of activities within a development intervention. In 2012, the UN System delivered 52 Outputs across the 10 Inter-Agency Outcomes. Outputs are a result of annual deliverables or activities. Each of the Outputs has several Indicators with Annual Targets which demonstrate evidence on achievement of an Output.

Programme Result Overview

The delivery and expenditure rates on the Inter-Agency Outcome and Output levels are good barometers of progress towards achieving development results. In the first year of implementation of the UNDAF 2012-2015, all Inter-Agency Outcomes are ‘on track’. For the corresponding Outputs, 75% are on track and 25% are delayed. The overall Output delivery rate in 2012 is 75%.

Financial Resources

The first implementation year of the UNDAF finished with an 84% expenditure rate. The total expenditure was USD 20 million over the available budget of USD 23.9 million.

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Sources Available</th>
<th>Total Expenditures</th>
<th>Exp. Rate %</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>23,986,466</td>
<td>20,040,778</td>
<td>84%</td>
</tr>
</tbody>
</table>

For a comprehensive overview of core, non-core and PNG UN Fund resources available and expenditures for each of the Inter-Agency Outcomes please refer to Annex I.
The PNG UN Country Fund

OVERVIEW

The PNG UN Country Fund allows the UN System in PNG to move towards a single financing mechanism for development and provides a means for further harmonisation of the UN funding mechanisms in PNG. In order to minimize transaction costs for partners, the UN jointly mobilized the required additional resources and developed a single report for the Government of PNG and donors to provide an annual update on UN contributions to development results.

In 2012, AusAID conducted an independent review of this funding mechanism which recommended that AusAID continue supporting the UNs Delivering as One approach in PNG and continue channeling funds through the PNG UN Country Fund.

THE ADMINISTRATIVE AGENT

The UNDP Multi-Partner Trust Fund Office (MPTF Office) in New York has been appointed by Participating Organizations as the Administrative Agent of the PNG UN Country Fund. As per the Memorandum of Understanding concluded between Participating UN Organizations and the Administrative Agent, the responsibilities of the AA include the receipt, administration and management of contributions from Donors; disbursement of such funds to the Participating UN Organizations in accordance with the approved programmatic documents; and provision of consolidated reports, based on individual programme reports submitted by the Participating UN Organizations, on the PNG UN Country Fund to the Resident Coordinator for onward submission to the UNCT, Government of PNG/UN Programme Steering Committee and to each donor. The MPTF Office maintains the MPTF Office GATEWAY (http://mptf.undp.org), an online portal providing transparent fund management in real time and which also includes a dedicated website to the PNG UN Country Fund. The GATEWAY includes extensive, real time information on contributions to the PNG UN Country Fund; on transfers made to Participating Organizations; as well as annual expenditure data and all key documents related to the Country Fund.

GOVERNANCE

The governance arrangements of the PNG UN Country Fund ensure national ownership and alignment with national priorities through the Government of PNGs co-chairing of the UN Programme Steering Committee. The management responsibilities are divided between the Resident Coordinator, the Government of PNG | UN Programme Steering Committee and the UNCT.

The Resident Coordinator is responsible for the strategic leadership of the PNG Country Fund, engaging in Joint Resource Mobilization for the PNG UN Country Fund, ensuring that the allocation process is documented and for ensuring consolidated PNG Country Fund level reporting, in collaboration with the Administrative Agent and based on submissions received from Participating UN Organizations.

The Government of PNG | UN Programme Steering Committee is responsible for monitoring the overall results of the UNDAF, outlining of programmatic priorities and allocating resources at the Inter-Agency Outcome level.

The UNCT is responsible for monitoring the overall delivery of Joint UN Country Strategy results, mediation of disputes in case of disagreements on allocations / utilization / or management of the Country Fund, as well as, in their role on the Programme Steering Committee, outlining of programmatic priorities and allocating resources at the Inter-Agency Outcome level.

The UN Budgetary Committee advises the Programme Steering Committee on resource allocations and governance arrangements of the UN Country Fund (for example annual revision of allocation criteria).

ALLOCATION PROCESS

As a general rule, donors to the PNG UN Country Fund are encouraged to contribute un-earmarked resources. Besides the preferred un-earmarked method, donors may earmark thematically by inter-agency outcome in the UNDAF. In addition, donors may earmark per agency where earmarked funds are specifically attributed to agency staffing cost or activities within the joint annual work plans.

FINANCIAL PERFORMANCE

The financial information in the tables included below has been provided by the MPTF Office in its capacity as the Administrative Agent of the PNG UN Country Fund. Expenditure data is consolidated based on financial reports submitted by Participating UN Organizations’ Headquarters to the MPTF Office. Due to rounding, totals in the tables may not add up. All amounts in the tables below are in US$. 
The tables show net amounts transferred by the Administrative Agent to Participating UN Organizations and include multi-year funding. The net transfers as of 31 December 2012 are not limited to the budgeted expenditures for 2012 and, in some cases, also include allocations against budgeted expenditures for 2013. Please refer to Annex I for the 2012 expenditure rates, which were reported in-country by Participating Organizations through the Thematic Task Teams.

**TABLE 1 | FINANCIAL OVERVIEW**

The below table provides a financial overview of the PNG UN Country Fund as of 31 December 2012, highlighting the key figures as well as the balance available, both with the Administrative Agent and with Participating Organizations.

<table>
<thead>
<tr>
<th>Annual 2011</th>
<th>Annual 2012</th>
<th>Cumulative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sources of Funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gross Contributions</td>
<td>12,564,199</td>
<td>4,083,550</td>
</tr>
<tr>
<td>Fund Earned Interest and Investment Income</td>
<td>10,124</td>
<td>2,954</td>
</tr>
<tr>
<td>Interest Income received from Participating Organizations</td>
<td>7,711</td>
<td>16,102</td>
</tr>
<tr>
<td>Refunds by Administrative Agent to Contributors</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Fund balance transferred to another MPTF</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Other Revenues</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total: Sources of Funds</strong></td>
<td><strong>12,582,034</strong></td>
<td><strong>4,102,606</strong></td>
</tr>
</tbody>
</table>

| Use of Funds | | |
| Transfer to Participating Organizations | 11,679,228 | 3,683,345 | 20,552,704 |
| Refunds received from Participating Organizations | - | - | - |
| **Net Funded Amount to Participating Organizations** | **11,679,228** | **3,683,345** | **20,552,704** |
| Administrative Agent Fees | 125,642 | 40,838 | 223,116 |
| Direct Costs (Steering Committee, Secretariat…etc.) | 777,871 | 574,065 | 1,570,986 |
| Bank Charges | 69 | -57 | 11 |
| Other Expenditures | - | - | - |
| **Total: Uses of Funds** | **12,582,809** | **4,298,188** | **22,346,817** |
| **Change in Fund cash balance with Administrative Agent** | -775 | -195,582 | 19,113 |
| **Closing Fund balance (31 December)** | **214,895** | **19,113** | **19,113** |
| **Net Funded Amount to Participating Organizations** | **11,679,228** | **3,683,345** | **20,552,704** |
| **Participating Organizations’ Expenditure** | **6,465,903** | **5,558,231** | **15,174,086** |
| **Balance of Funds with Participating Organizations** | **5,213,325** | **-1,874,886** | **5,374,606** |

**TABLE 2 | DONOR CONTRIBUTIONS**

Three donors contributed to the PNG UN Country Fund in 2012. From 1 January through 31 December 2012, donor contributions to the PNG UN Country Fund amounted to $4,083,000. In prior years, $18,228,049 was contributed, resulting in a cumulative contribution to the PNG UN Country Fund as of 31 December 2012 of $22,311,599.

<table>
<thead>
<tr>
<th>Prior Years as of 31-Dec-2011</th>
<th>Current Year Jan-Dec-2012</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Australian Agency for International Development</td>
<td>12,030,099</td>
<td>1,595,550</td>
</tr>
<tr>
<td>Colgate-Palmolive (PNG) Ltd</td>
<td>36,950</td>
<td>-</td>
</tr>
<tr>
<td>Expanded DaO Funding Window</td>
<td>3,681,000</td>
<td>583,000</td>
</tr>
<tr>
<td>Government of New Zealand</td>
<td>1,880,000</td>
<td>1,925,000</td>
</tr>
<tr>
<td>Population Services Intl.</td>
<td>600,000</td>
<td>-</td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>18,228,049</strong></td>
<td><strong>4,083,550</strong></td>
</tr>
</tbody>
</table>

**TABLE 3 | RECEIVED INTEREST AT THE FUND AND AGENCY LEVEL**

Interest income is earned in two ways: i) Fund earned interest, is the interest earned by the PNG UN Country Fund Administrative Agent, which amounted to $26,051 as of 31 December 2012. ii) Agency-earned interest, is the interest earned by the Participating Organizations which is expected to be credited to the PNG UN Country Fund Account unless the governing bodies of the said organization has approved decisions that govern the specific use of interest earned on donor contributions. The refunded interest will be used to augment the availability of funds for project funding. In 2012, $16,102 was reported and returned by UNDP.

In total, as of 31 December 2012, cumulative interest earned under the PNG UN Country Fund amounted to $54,332. This amount has been and continues to be an additional source of income for the PNG UN Country Fund and increases the amount of funds available for allocation.

<table>
<thead>
<tr>
<th>Prior Years as of 31-Dec-2011</th>
<th>Current Year Jan-Dec-2012</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrative Agent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fund Earned Interest and Investment Income</td>
<td>23,697</td>
<td>2,954</td>
</tr>
<tr>
<td><strong>Total: Fund Earned Interest and Investment Income</strong></td>
<td><strong>23,697</strong></td>
<td><strong>2,954</strong></td>
</tr>
<tr>
<td>Participating Organization (PO)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNDP</td>
<td>10,211</td>
<td>16,102</td>
</tr>
<tr>
<td>UNWOMEN</td>
<td>1,369</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total: Interest Income received from PO</strong></td>
<td><strong>11,580</strong></td>
<td><strong>16,102</strong></td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td><strong>35,276</strong></td>
<td><strong>19,056</strong></td>
</tr>
</tbody>
</table>

**TABLE 4 | TRANSFER OF NET FUNDED AMOUNT BY PARTICIPATING ORGANIZATION**

From 1 January to 31 December 2012, the PNG UN Country Fund had funded approved projects/programmes for a net total of $3,683,345. The distribution of approved funding by Participating Organizations is summarized in the table. Cumulatively, as of 31 December 2012, a total of $20,552,704 had been net transferred for funding projects/programmes.

\*One of the donors, the Expanded Delivering as One Funding Window for Achievement of the Millennium Development Goals (EFw), is a global funding facility established to support Delivering as One countries; current donors to the EFw are the Netherlands, Norway, Spain and the United Kingdom.
TABLE 5 | EXPENDITURE BY SECTOR WITHIN COUNTRY

<table>
<thead>
<tr>
<th>Sector</th>
<th>Net Funded Amount Prior Years as of 31-Dec-2011</th>
<th>Current Year Jan-Dec-2012</th>
<th>TOTAL</th>
<th>Delivery Rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLU 1 2012 Governance</td>
<td>198,000</td>
<td>-</td>
<td>-</td>
<td>0</td>
</tr>
<tr>
<td>CLU 2 2012 Justice, Protection &amp; Gender</td>
<td>762,300</td>
<td>-</td>
<td>195,152</td>
<td>195,152</td>
</tr>
<tr>
<td>CLU 3 2012 Basic Services</td>
<td>1,143,450</td>
<td>-</td>
<td>174,288</td>
<td>174,288</td>
</tr>
<tr>
<td>Change Management</td>
<td>100,000</td>
<td>786,235</td>
<td>-683,089</td>
<td>174,288</td>
</tr>
<tr>
<td>Foundations for Human Development</td>
<td>7,580,940</td>
<td>2,809,868</td>
<td>1,711,606</td>
<td>4,581,474</td>
</tr>
<tr>
<td>Gender</td>
<td>873,490</td>
<td>596,177</td>
<td>253,366</td>
<td>852,542</td>
</tr>
<tr>
<td>Governance and Crisis Management</td>
<td>6,635,757</td>
<td>3,676,908</td>
<td>2,717,079</td>
<td>6,393,888</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>2,584,716</td>
<td>1,443,222</td>
<td>943,546</td>
<td>2,386,768</td>
</tr>
<tr>
<td>Sustainable Livelihoods and Population</td>
<td>399,337</td>
<td>116,073</td>
<td>145,370</td>
<td>261,443</td>
</tr>
<tr>
<td>UN Communication and Advocacy</td>
<td>197,705</td>
<td>188,383</td>
<td>-</td>
<td>188,383</td>
</tr>
<tr>
<td>UN Operations</td>
<td>77,000</td>
<td>-</td>
<td>76,913</td>
<td>76,913</td>
</tr>
<tr>
<td>TOTAL</td>
<td>20,552,704</td>
<td>9,619,867</td>
<td>5,558,231</td>
<td>15,178,098</td>
</tr>
</tbody>
</table>

EXPENDITURE TABLES

During the reporting period, 1 January to 31 December 2012, a total of $5,558,231 was reported by Participating Organizations as expenditure. The cumulative total expenditure since 2009 amounts to $15,178,098 as of 31 December 2012. This is the equivalent to 74% per cent of the total approved funding that was transferred to Participating Organizations as of 31 December 2012. The net transfers as of 31 December 2012 are not limited to the budgeted expenditures for 2012 and, in some cases, also include allocations against budgeted expenditures for 2013. The Delivery Rates in the tables provide the percentage of actual expenditures against the total net transferred amounts. Project expenditures are incurred and monitored by each Participating Organization and are reported as per the agreed upon categories for harmonized inter-agency reporting. Effective 1 January 2012, the UN Chief Executive Board modified the original six categories. Therefore, all expenditures reported from 1 January 2012 are presented in the new eight categories. The old and new categories are noted below in Table 6. In 2012, the highest percentage of expenditure was on General Operating.

TABLE 6 | EXPENDITURE BY STANDARDIZED UN DEVELOPMENT GROUP BUDGET CATEGORIES

<table>
<thead>
<tr>
<th>Category</th>
<th>Expenditure Prior Years as of 31-Dec-2011</th>
<th>Current Year Jan-Dec-2012</th>
<th>TOTAL</th>
<th>% of Total Prog. Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Supplies, Commodities, Equip. &amp; Transport (old)</td>
<td>603,703</td>
<td>-</td>
<td>603,703</td>
<td>4.22</td>
</tr>
<tr>
<td>Personnel (old)</td>
<td>4,257,805</td>
<td>-</td>
<td>4,257,805</td>
<td>29.75</td>
</tr>
<tr>
<td>Training of Counterparts (old)</td>
<td>896,568</td>
<td>-</td>
<td>896,568</td>
<td>6.26</td>
</tr>
<tr>
<td>Contracts (old)</td>
<td>1,900,870</td>
<td>-</td>
<td>1,900,870</td>
<td>13.28</td>
</tr>
<tr>
<td>Other Direct Costs (old)</td>
<td>1,448,803</td>
<td>-</td>
<td>1,448,803</td>
<td>10.12</td>
</tr>
<tr>
<td>Staff &amp; Personnel Cost (new)</td>
<td>-</td>
<td>905,481</td>
<td>905,481</td>
<td>6.33</td>
</tr>
<tr>
<td>Supplies, Comm, Materials (new)</td>
<td>-</td>
<td>826,241</td>
<td>826,241</td>
<td>5.77</td>
</tr>
<tr>
<td>Equip, Vehicle, Furniture, Depn (new)</td>
<td>-</td>
<td>205,156</td>
<td>205,156</td>
<td>1.43</td>
</tr>
<tr>
<td>Contractual Services (new)</td>
<td>-</td>
<td>407,697</td>
<td>407,697</td>
<td>2.85</td>
</tr>
<tr>
<td>Travel (new)</td>
<td>-</td>
<td>1,196,628</td>
<td>1,196,628</td>
<td>8.36</td>
</tr>
<tr>
<td>Transfer and Grants (new)</td>
<td>-</td>
<td>365,362</td>
<td>365,362</td>
<td>2.55</td>
</tr>
<tr>
<td>General Operating (new)</td>
<td>-</td>
<td>1,297,749</td>
<td>1,297,749</td>
<td>9.07</td>
</tr>
<tr>
<td>Programme Costs Total</td>
<td>9,107,799</td>
<td>5,204,312</td>
<td>14,312,062</td>
<td>100</td>
</tr>
<tr>
<td>Indirect Support Costs</td>
<td>512,117</td>
<td>353,919</td>
<td>866,036</td>
<td>6.05</td>
</tr>
<tr>
<td>Grand Total</td>
<td>9,619,916</td>
<td>5,558,231</td>
<td>15,178,098</td>
<td>73.85</td>
</tr>
</tbody>
</table>

COST RECOVERY

The cost recovery for the PNG UN Country Fund is guided by the applicable provisions of the Memorandum of Understanding concluded between the Administrative Agent and Participating Organizations and the Standard Administrative Agreements concluded between the Administrative Agent and Donors. Cost recovery, as of 31 December 2012, was as follows:

(a) The Administrative Agent fee: One per cent charged at the time of donor deposits and is for the entire duration of the PNG UN Country Fund. As of the end of the reporting period (31 December 2012), the Administrative Agent fee amounted to $223,116 ($15,950 in 2009, $40,689 in 2010, $125,642 in 2011 and $40,836 in 2012).

(b) Indirect Costs of Participating Organizations: As per the PNG UN Country Fund Memorandum of Understanding and Standard Administrative Agreement, Participating Organizations may charge 7 per cent indirect costs on approved programme costs. As of the end of the reporting period (31 December 2012), indirect costs across all programmes and projects amounted to $886,036, or 6.05 per cent of reported programme expenditure ($14,312,062).

Direct Costs: As per PNG UN Country Fund Memorandum of Understanding and Standard Administrative Agreement, the Programme Steering Committee may request any of the Participating Organizations, to perform additional tasks in support of the PNG UN Country Fund not related to the Administrative Agent functions. Such costs are to be charged as Direct Costs to the PNG UN Country Fund. In 2012, direct costs of $574,065 were charged, bringing the total cumulative direct costs to $1,570,986.
This Chapter provides an analysis of each of the 10 thematic areas, or the Inter-Agency Outcomes, to which the UN has provided its support through the UNDAF 2012-2015. There are 10 UN Agencies which contributed in 2012. The UN plans, monitors and reports on its work in these areas through thematic Task Teams. A Task Team is composed of advisors who are thematic experts from the UN Agencies which are working within that particular area. The UN Agencies which are contributing to each Inter-Agency Outcome are noted before the start of each narrative (e.g. 4 | Human Rights | Contributing Agencies: OHCHR, UNHCR, IOM, WHO, UNICEF, UNDP, ILO, UNFPA, UNAIDS).

1. Governance
Contributing Agency: UNDP

PCaB is a Government of PNG initiative, supported by the UN through policy and technical advice, and funded by AusAID to improve public sector service delivery at sub-national levels through effective and efficient public financial management. Accurate and timely submission of financial reports from provinces to the national level have positive consequences as it results in immediate release of public funds which allows for further service provision. PCaB is a pilot project developed in six provinces; Morobe, East New Britain, Eastern Highlands, Central, Milne Bay and Western Province. It has been running since 2008 and ended in December 2012. A new phase of the Programme was approved to expand the initiative to new prioritized provinces. Thus, four new provinces – West Sepik, Eastern Highlands, Central, Milne Bay and Western Province. It has been running since 2008 and ended in December 2012. A new phase of the Programme was approved to expand the initiative to new prioritized provinces. Thus, four new provinces – West Sepik, Eastern Highlands, Central, Milne Bay and Western Province. It has been running since 2008 and ended in December 2012. A new phase of the Programme was approved to expand the initiative to new prioritized provinces. Thus, four new provinces – West Sepik, Eastern Highlands, Central, Milne Bay and Western Province.

The PCaB programme is executed by the PNG Department of Finance. Using a practical approach of on-the-job training, mentoring and coaching, the PCaB programme has been able to build capacities and has contributed significantly to an accountable and transparent management of public funds in the six assisted provinces.

In this context, the six pilot provinces have steadily improved in the delivery of financial reports from up to 18 months in delayed time in 2008 to 1 month on average in 2012, which falls within public financial management international standards. The respective provincial administrations and treasuries are starting on-line banking with the local Bank of South Pacific, improving and modernizing their activities in order to benefit the population. Starting 2013, the programme will address three new components: (1) Transparency and Accountability; (2) Public Expenditure and Financial Accountability standards; and (3) Minimizing the Risk of Corruption at sub-national levels. In this vein, and as part of these new Programme components, advisers are gradually taking part in Provincial Audit Committees as observers, supporting ad-hoc technical accounting requirements that will allow the programme to monitor the Government of PNG’s anticiption initiatives in the provinces. A total of 296 Department of Finance staff in the six pilot provinces were trained in Information & Communication Technology in order to prepare the roll-out of the Integrated Financial Management System in these provinces. Ten of them have received International Information & Communication Technology accreditation & certification by the Project and the Australian International Computer Driver’s License.

A total of 74 Department of Finance staff, of which 49% were women, graduated as competent with the knowledge and skill to produce accurate financial reports in the six pilot provinces. These Project trained staff are the best guarantee for sustainability and ownership of the Programme as the Programme extends its support to other priority provinces and regions.

2. Millennium Development Goals, Population and Aid Coordination
Contributing Agencies: UNDP, UNFPA, UNICEF

The second national MDGs progress report of PNG 2009/2010 concludes that “At the beginning of 2010, PNG did not achieve any of the global MDG targets, but it achieved some of the national (talled) targets that were set in 2004 and incorporated in the Medium-Term Development Strategy 2005-2010.”

Lack of adequate awareness on MDGs at the sub-national level (provincial, district, Local Level Government); low levels of service delivery; lack of utilization of certain services such as family planning; lack of qualified technical manpower to develop; implement and monitor sub-national development plans based on MDGs and human development with equity; and lack of adequate coordination at the sub-national level are serious bottlenecks for the achievement of MDG and human development goals in PNG.

Youth – in particular young women – are often excluded from such planning, decision-making, coordination and implementation processes. Although 76% of PNGs population is under 35 years old, low levels of education and employment opportunities marginalizes them from development activities and benefits, causing them to face critical challenges such as poverty, unemployment, alcohol and drug abuse, law and order issues, unplanned / unwanted pregnancy and HIV. As such, they represent an important group of development agents as well as beneficiaries, which needs to be included into sensitization, informed policy development and implementation related to MDGs, population and human development.

The challenge for Papua New Guinea is to ensure that the development of our natural resources is sustainable and the benefits are effectively translated into the improved livelihoods of our people. This will assist us to meet our MDGs, especially the 22 Indicators and 90 national targets that we have set ourselves to achieve. With the support of our development partners such as the European Union and the United Nations, Papua New Guinea is to trial the Millennium Villages concept.

Hon. Rimbink Pato, LLB, OBE, Member of Parliament
Minister for Foreign Affairs and Immigration of Papua New Guinea
At the 67th United Nations General Assembly, September 2012
Department of National Planning and Monitoring (DNPM) requested its officers to assist provinces whose development indicators are much lower compared to the national average, e.g. Sandaun (West Sepik) Province, the so-called “Hot Spot” provinces.

Furthermore, as per its Alotau Accords 2012, the Government of PNG is decentralizing political and fiscal decision-making powers and responsibilities to provinces and districts. As such, it substantially increased its grants to through the Provincial Support Improvement Programme and District Services Improvement Programme for 2013 substantially increased.

The basis for these changes was the increased understanding of such development issues and the acquisition of appropriate technical tools and skills by government officials, service providers and the rights-holding general population. It is in this context that the UNs year-long advocacy, lobbying and sensitization combined with continuous technical assistance on MDGs, population and human development and related data gathering and analysis – at both upstream policy as well as downstream implementation level - contributed to these results.

Several policy and planning documents – including a manual on MDGs, Human Development and PNGinfo, a community needs and bottleneck analysis on MDG 4 on reducing child mortality and MDG 5 on improving maternal health for Kairuku district, a report on the way forward for potential expansion and replication of the MDG Acceleration in Kairuku until the MDG deadline 2015, an analysis on “Narrowing the gaps to meet the MDGs: Advocating an equity-based agenda for children in PNG”, the draft National Population Policy and the launched Bougainville Youth Policy – helped the Government of PNG to improve planning and monitoring of development programmes at national and sub-national level.

Thirty-six officials of DNPM, 12 of National Statistics Office, 44 of University of Technology, 3 from Morobe province were trained on MDGs, human development indicators, government plans, PNGinfo database system and MDG Acceleration Framework. This led to the decision of the University of Technology to introduce a course on MDGs and human development in the university beginning 2013. Similarly, 50 people, including local government officials, service providers and community members of Kairuku district, Central province were trained on the MDG Acceleration Framework. This led to the preparation of two community coated action plans to improve maternal and child health (MDG 4 on reducing child mortality and MDG 5 on improving maternal health) in Kairuku and Mekeo-Kuni LLGs. This was complemented by an MDG awareness programme in Marochara Higher Secondary School of Kairuku district which reached about 600 students and teachers of the school.

As part of the efforts to increase the public awareness on the MDGs, the MDG Radio Advocacy campaign is a project which utilizes an innovative approach for behaviour change through a radio drama series. These long-running serial dramas, Echoes of Change / Nau Em Taim, address a range of interrelated issues such as: promoting the use of effective family planning methods; elevating women’s status; increasing HIV awareness, decreasing stigma and encouraging testing; reducing violence against women; building support for universal education; increasing enrolment of boys and girls in primary school; preventing deforestation and promoting reforestation; reducing the use of harmful marine practices such as coral mining, overfishing and dynamite fishing; increasing favourable attitudes towards locally protected and managed marine areas; and decreasing the use of clear-cutting agricultural practices. One drama broadcasts in Pidgin and the other broadcasts in English. In 2012, awareness on MDGs was raised through 158 episodes of the MDG Radio Campaign which have benefitted thousands of PNG listeners.

The bottom-up MDG Acceleration Framework methodology, which identifies and addresses bottlenecks for MDG acceleration, was introduced in 13 districts of the ARB and respective District Development Action Plans initiated. This provides the opportunity to link peace, security and post-conflict recovery to longer term development and accelerate the progress towards MDG targets, in the context of the UN-assisted District Peace and Security as well as Development Coordination Committees.

To improve the inclusion of youth in the areas of MDGs, population and human development, “Youth Organizations’ capacities were strengthened, enabling them to better lobby and advocate for young people’s needs and rights in the national development context. As a result, a Youth Council was established in Enga Province and a youth networking mechanism was completed in both Enga and ARB. The youth policy for ARB was completed and launched, while the youth policy for the other pilot three provinces is in draft form. The National Youth Commission has owned and partly funded these activities.

As a result in the increased understanding of professors, lecturers and senior management officials of the University of Technology through the UN and DNPM supported training, a course in MDGs and Human Development will be introduced into the curriculum for 2013. The university is expected to become a centre of excellence in the area of MDGs and Human Development in the South Pacific region.

Lastly, the Government of PNG established a “Special Interventions Branch” within the DNPM. With four permanent government officers: (1) Assistant Secretary, (2) Senior MDGs and Population Officer, (3) MDGs and Population Officer, and (4) Senior Sustainable Development Officer, this setup hardwires thematic areas into institutional capacity of the Government, with the goal of PNG, ensuring that they will be addressed permanently.

2012 was not free of challenges in terms of programme implementation. While the census of population in PNG was held in 2011 and preliminary findings disseminated in 2012, the full analysis of census data is expected to be completed in 2015, delaying important guiding documents, such as the population monograph.

In the area of aid coordination, political commitment and strategic planning in DNPM is a challenge, given that the topic is almost disconnected from the development planning processes, and therefore often sidelined by Senior Government officials. This, combined with internal restructuring of DNPM, as well as the 2012 General Elections, delayed the upgrade, maintenance and operationalization of the Development Assistance Database.

To address this challenge, following the 2012 Elections in August, the UN shifted its support from ‘aid coordination’ towards broader ‘development finance’, which looks at resourcing PNGs development plans and priorities, strengthening medium and longer term fiscal planning, maximizing effectiveness of all development finance sources, strengthening transparency and accountability, complementarily and value added of aid, institutional arrangements and delivery of development at provincial and district levels. This will be particularly important in an environment where the political and financial management capacities at the provincial and district level do not match the increased powers and responsibilities allocated under the Governments decentralization process. The UN will therefore further assist sub-national governments in strengthening these capacities in order to accelerate MDG acceleration through a bottom-up approach.

2012 saw very good developments in terms of development frameworks, plans and budgets aligned with MDG targets, human development indicators and population issues and trends. DNPMs strong ownership, leadership and coordination – in particular through the MDG, Population and Aid Coordination Core Group – were indispensable for well-targeted UN assistance. This Government of PNG leadership, its strengthened institutional capacity, 2012 achievements, lessons learned and good practices, as well as strategic support needs identified, lay the foundation for the years beyond the deadline of the MDGs in 2015.
3. Peace-building – Bougainville

Contributing Agencies: UNDP, OHCHR, UNIFRA, UNHCR, UNICEF, UN Women, WHO

Eleven years have passed since the conflict in ARB – then North Solomons Province – where 20,000 men and women died and many more were left traumatized and without family or access to basic services and infrastructure. More than a decade on, the ARB is making slow but steady progress towards political, economic and social normality. However, the time for a possible referendum on the political status of ARB – the 2001 Bougainville Peace Agreement determines the period between 2015 and 2020 – is fast approaching. Since its establishment and democratic election in 2005, the ABG has focused on peace-building, peace-consolidation, conflict prevention and post-conflict recovery through political as well as socio-economic means. In the context of the respective UN 4-year Strategic Plan for Bougainville, the UN supports the ARB through an area-based, multi-sectoral approach, to ensure that its efforts remain focused on peace building and reconciliation, but also meet Bougainvillean aspirations of longer-term socio-economic recovery, including reintegration, rehabilitation and trauma counselling for ex-combatants and others affected by the conflict.

The UN, with its different agencies, funds and programmes, and its established offices in the three regions of North, Central and South ARB, is the only international organization that has maintained an uninterrupted presence across the island since the days of conflict. The UN support is targeted towards the expected outcome, that by 2015, the ABG leads post-conflict recovery and development planning and budgeting, and provides a safe, secure, stable and sustainable environment in which girls, boys, women and men enjoy their rights to equitable access and utilization of basic services and their protection from violence, discrimination, exploitation and other forms of abuse. 2012 witnessed substantial progress towards this goal. While adopting an overall ‘peace through inclusive governance’ approach - with an increasing emphasis on bottom-up governance structures linked to policy and strategy development at the Regional level – the UN worked in six strategically linked areas, namely: (1) rule of law, community security and human rights; (2) inclusive socio-economic recovery; (3) transparent governance structures for effective delivery of social service; (4) inclusive participation and representation in decision-making processes; (5) information management and technical information for informed development planning and implementation and; (6) health priority interventions.

In spite of the signing of the 2001 Bougainville Peace Agreement and the 2011 Komnou Peace Accord, the situation throughout Bougainville remains fragile and the need for concerted efforts to create the conditions for lasting peace is a priority. The combination of persisting trauma and societal fragmentation, continued prevalence of small arms, excessive consumption of alcohol and other substances, high rates of unemployment and violence against women, a ‘lost’ generation without education, and the need for improved and metropolitanization are among the challenges facing the Region. 2012 witnessed good progress in the areas of peace, rule of law, community security and human rights. Upstream dialogue between different actors was crucial for trust building. Dialogue between the Mekamukai and ABG prior to the national elections created safe corridors for campaigns and election monitoring in South Bougainville, and dialogue between ABG and the National Government contributed, in part, to the long-awaited meeting of the Joint Supervisory Board, the body overseeing the implementation of the Bougainville Peace Agreement. Dialogue between the ABG President and the Regional Members to the National Parliament resulted in a new commitment of aligning District Support Improvement Programme funds to fill ABG’s development budget gaps. With its impartiality, the UN played the key brokering and convening role for these often politically sensitive dialogues to materialize.

At the downstream implementation level, the Peace and Security Committees and Development Coordination Mechanisms were established at the district and local level, which are the proven instrument to support ABG in its endeavour to address peace, security and development issues in an integrated and locally adapted manner, and to mitigate crime, drug abuse and violence, in particular during the end of year festivities. As such, it is at this level that upstream policy engagements and downstream implementation converge, with strong collaboration with non-state actors and bilateral development partners, such as AusAID and NZAID. An important contributing factor for success was the public sensitization on rule of law, security and human rights, achieved through activities such as the PNG Human Rights Film Festival which was hosted for the first time in Buka in 2012. In addition, three small grants were made to the following community-based organizations, Hako Women’s Collective, Leitana Nehan Women’s Development Agency and North Bougainville Women’s Federation, for awareness raising campaigns. These small grants sessions were held for civil society members to lead, design and facilitate inclusive and participatory dialogue processes through the exchange of good practices of Pacific approaches. Increased awareness fed into greater engagement in the institutions, decision-making processes and peace and security initiatives at the local level, such as joint community policing between the police and former combatants in South ARB. The participation of women and youth and the consideration of their particular vulnerabilities, needs and capacities were emphasized strongly throughout these achievements. As such, the Southern Bougainville Women Human Rights Defenders were incorporated into Peace and Security committees, whereas the Bougainville Forum on Gender and Human Rights was launched in June and will guide the implementation of the Bougainville Strategy on the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), including aspects of UN Security Council Resolution 1325 on ‘Women, peace and security’. Important progress was also made in the area of capacity development for the promotion of inclusive socio-economic recovery and development. The Peace and Security as well as Development Coordination committees at the district level are the institutional framework for these initiatives. Through partnership with the DPNM, the ABG Planning Division initiated the establishment of District Development Plans in all 13 districts. Data gathering started in 2012 and will feed into the development of local development plans and respective action plans, including socio-economic recovery initiatives, in alignment with the ABG Medium-Term Development Plan and the MDG indicators and targets. Proper development planning and budgeting by districts is expected to strengthen their capacities for the planned increase of development budget channelled to the district level. These plans also include vulnerabilities and remedy actions with regards to potential natural disasters, displacement and environmental degradation, including climate change, not least on the Carteret Islands where rising sea levels pose a threat to human security. All these district plans will inform the DPNM Joint Development Plan, which is integrated in 2012.

Also, following a successful orientation on livelihoods and social integration, the area of environmental sustainability was identified as a priority area for the income generating opportunities for women and youth. Two local initiatives, one on eco-tourism and one on agricultural activities, have been identified as recipients of small grants in 2013. The UNs convener and broker role with regards to the dialogues, as well as its technical expertise and assistance on matters related to peace, security and governance were a crucial contributing factor to progress in these areas. Its strategic lobbying, convening and capacity building through technical expertise of ABG, fractions, local chiefs, women as well as youth for peace and development under the overall leadership of ABG – especially through strong engagement at the local level - proved instrumental to support this improvement of the peace, security and human rights situation.

In the area of improved, democratic and transparent governance for effective delivery of social services, progress seen in 2012 with regard to combating political clientelism resulted in the areas of governance and decentralization as a duty-bearer for the Bougainvillean population increased as a result of targeted skill development from the Regional ABG level to the district and local level committees for peace an security as well as development planning and coordination. While the ABG Planning Division initiated the development of a Monitoring and Evaluation Framework for its development activities, district committees’ initiated development action plans, aligned with the overall Mid-Term Development Plan as well as MDG targets. Furthermore, the concept of joint responsibility for development was endorsed by the UN, which led to the request for a Corporate Plan for the Division for Community Development as a key entry point for gender equality and women’s empowerment. In partnership with AusAID and NZAID in the context of the Governance Implementation Fund, the UN provided technical assistance to strengthen the monitoring & evaluation skills in the Planning Division at the Regional level. This was complemented by the UNs advocacy and technical assistance for local level institutional development – a combination which yielded the above-mentioned tangible results and influenced central level willingness to devote power to local level, as regional government officials feel challenged by the strengthened capacities and creativity demonstrated by the district officials. This dual approach of Regional and local support bridged the gap between the upstream policy and planning and downstream implementation, as well as the flow of budgetary resources for these purposes. This will form the basis for the PCaD programme – a joint effort of the UN and AusAID in support of improved financial management at the provincial and district level – to start its work in Bougainville in 2013. Closely linked to democratic and transparent governance structures and processes is the level of inclusiveness, in particular of the most marginalized groups. Generally speaking, women and youth, including former combatants, are often excluded from public discussions, planning, decision-making and implementation. In order to promote their inclusion and as a result to allow for better catering for their needs. ABG increasingly involved rights-holders from marginalized and discriminated groups in the above-mentioned district and community committees. As such, the latter serve as a platform for participatory development processes and implementation. As a result, the number of women and youth in these forums, most notably in Siassi, Buni, Bana, Panguna and Buka, increased by 85% compared to 2011. Four of these districts also established sector committees on health, security, information management and gender, taking into account special needs and capacities of women and youth. Good practices of this approach are expected to be replicated in the other districts and feed into sectoral coordination mechanisms at the Regional level. Complementing these downstream activities is the policy formulation at the upstream level, where policies and strategies on ‘gender equality and women’s rights’ in the context of CEDAW, ‘women, peace and security’ as well as socio-economic aspects of ‘younger generation and former combatants’ has significantly strengthened the trust and collaboration between these population groups and ABG.

Having catalyzed the inclusive governance approach by ABG, the UN, once again through its convener role and technical expertise in the area of ‘peace and development through
Bougainville. Focusing on the bottom-up level, ABG initiated management is therefore a vital element of the UN’s support to rights and responsibilities of each Bougainvillean. It is this lack of recovery and democratic governance options available, including the nexus between peace, security, human rights and post-conflict the general public of the Bougainville Peace Agreement, the A major challenge in Bougainville is insufficient awareness of decentralized focus support for local-level implementation. An upstream policy and strategy support is complemented by the activities in Bougainville. A two-tier approach that addresses making and implementation of peace, security and development governance’, supported the latter in strengthening the institutional setup as well as substantive discussions, decision-making and implementation of peace, security and development activities in Bougainville. A two-tier approach that addresses upstream policy and strategy support is complemented by the decentralized focus support for local-level implementation.

A major challenge in Bougainville is insufficient awareness of the general public of the Bougainville Peace Agreement, the nexus between peace, security, human rights and post-conflict recovery and democratic governance options available, including rights and responsibilities of each Bougainvillean. It is this lack of information that creates confusion, mistrust, misunderstanding and potentially conflict. Communication and information management is therefore a vital element of the UNs support to Bougainville. Focusing on the bottom-up level, ABG initiated ‘Information Centres’ alongside the Development Planning and Coordination mechanism in four districts. Training on data collection and dissemination for development planning resulted in active involvement of the ABG Division of Coordination in disseminating government policies and awareness raising material on the Bougainville Peace Agreement as well as population issues. As a result, the same centres also became of great interest to youth, with volunteers, leadership and mentoring on the rise. This model is expected to be replicated in four more districts in 2013, and to feed into an ABG strategy on information management and communication. The UN, in strong partnership with the local-level authorities, provided the technical guidance to the district committees on information management, an important ingredient for trust-building, awareness raising and thus peace, security and development.

Lastly, the UNs support to ABG in the area of health targets a sector that suffered from the conflict, resulting in inadequate service delivery in an environment marked by high maternal and prenatal death. Adequate access to quality services is a key component of post-conflict recovery and development. As such, ABG strengthened the capacity of district health facilities which now use a micro plan for equitable access to Expanded Programme on Immunization, maternal and child health, family planning, and limited curative care services. Through the UNs support on District Coordinators training, a regional review, the roll-out of new Rapid Diagnostic Tests and Artemisinin-based Combination Therapy drugs, as well as the procurement and distribution of laboratory equipment and supplies, prevention, case management and control of non-communicable and communicable disease increased. At the policy level, UN advocacy on the prevention and reduction of disease, disability and premature death from chronic non-communicable diseases fed into the development of the Bougainville Plan for Health 2012-2030.

It is obvious that programme delivery was affected by a variety of challenges. At the beginning of 2012, the main challenges identified were ABGs limited capacity to absorb and contribute to the UNs support activities to sustain peace and development gains, weak intra-Governmental coordination, a disconnect between policy development and on-the-ground implementation, a high-cost environment, logistical/infrastructural challenges and insufficient funding. Most of these challenges have decreased in importance, not least because of the UNs mitigation strategies and its strategic support to ARB. Consistent mentoring of relevant ABG Divisions and the district level governance mechanisms led to a significant improvement in the internal coordination capacity of the ABG, and to bridging the gap between policy development and on-the-ground implementation. Decentralized development planning and coordination also helped change attitudes and mindsets of the ABG leadership and partners in terms of risk of ad hoc implementation with a ‘quick fix’ syndrome. This being said, issues of limited social cohesion, lack of public awareness on most peace and development matters, very high operational costs, limited available budgets as well as weak infrastructure remain. Political, economic, social, and even physical uncertainties – as a result of the 2015 elections, the referendum, the potential re-opening of the Panguna mine and the availability of weapons – illustrate the remaining complexity of this post-conflict environment.

In its first year of its 2012-2015 Strategic Plan for Bougainville, the UN built on the achievements of previous years, and further strengthened its area-based development approach in ARB. This allows the UN sister agencies to increase effectiveness and efficiency and avoid duplication, both internally as well as when engaging with external partners. It also ensures cross-cutting development issues - such as human rights, gender, capacity development, conflict sensitivity, decentralization and HIV and AIDS – are addressed in the supporting activities. This is of utmost importance in a post-conflict environment as such an approach allows to tackle the root causes of and contributing factors to socio-economic, political and physical insecurity which hinder the full participation of all Bougainvillean in the peace, recovery and development process.

Despite these achievements in 2012, the continued need for peace consolidation, security and development is obvious. Following requests from both, National as well as Autonomous Government, the UN, with its mandate and expertise on peace, development and human rights, and as the only multilateral organization present in all sub-regions of Bougainville since the end of the crisis, will continue building on the achievements in support of Bougainville’s strive towards post-conflict recovery and development.

4. Human Rights


The UN continued to support the Government of PNG to take action by 2015 to respect, protect and fulfill human rights for all people in accordance with its obligations by supporting increased ratification of international human rights instruments and compliance with treaty reporting obligations; increase compliance of law, policy and programs with international human rights standards; support law enforcement, justice and accountability mechanisms to function in accordance with international human rights standards; and support the establishment of the National Human Rights Commission and a functioning civil society and strengthen rights holders awareness of their human rights and international and national protection mechanisms.

In 2012, there was an increase in Government of PNG cooperation with UN Human Rights mechanisms through two replies sent to Special Procedures and the creation of an implementation matrix to address recommendations by the Human Rights Council on the Universal Periodic Review (UPR). The Government invited the UN Special Rapporteur on Violence Against Women, Ms Rashida Manjoo, to conduct an official fact-finding mission to PNG which took place in March 2012 and was accompanied by a media awareness campaign and a public lecture at the University of PNG. The official report from the Special Rapporteur’s visit to PNG will be presented to the Human Rights Council in June 2013. The development of the UPR implementation matrix was facilitated by the Department of Foreign Affairs and Trade and confirmed by the UPR Task Force, comprised of key agencies responsible for implementing the UPR recommendations. The UPR Task Force approved 96 UPR recommendations and assigned them to relevant Government of PNG departments for implementation. The UPR recommendation to withdraw PNGs reservations to the 1961 Refugee Convention was accepted and a National Executive

Refugee Convention was accepted and a National Executive
Council submission to remove the reservations is currently pending approval from the Minister for Foreign Affairs. The Department of Justice and Attorney General (DJAG) is currently reviewing national law in relation to ratification of the Convention on the Rights of Persons with Disabilities and Convention Against Torture and optional protocols. Ratification of these treaties will increase PNG’s international commitments and obligations to provide the rights of all its citizens. The Department of Labour staff also improved their level of understanding and capacity on international law standards after completing training provided by the UN PNG, including the ARB, increased its preparedness to address and promote gender equality and women’s rights through the development of a strategy to implement the concluding observations of the Convention on CEDAW. This strengthens its ability to comply with international reporting obligations, as PNG is expected to provide a progress report on CEDAW in 2014.

The National Human Rights Forum continued to contribute to greater coordination and engagement on human rights work and was chaired in 2012 by the Secretary of Justice with the UN. The National Human Rights Forum brought together senior government officials, UN, development partners, donors and civil society and tracked the progress of key human rights developments throughout the year.

Progress to harmonize national legislation with international human rights treaties was made in 2012 with technical support from the UN. A working group established under PNG, the Department of Labour completed a second assessment of the Employment Act and agreed that the Employment Act needs reform. To criminalize trafficking in persons and people smuggling in PNG, the People Smuggling and Trafficking in Persons Bill was endorsed by the National Executive Council and is pending to be tabled in Parliament. Government agencies also recognized that the current legal migration framework does not adequately deal with asylum-seekers and refugees, and agreed on the need for a National Refugee Policy and review of the Migration Act. To address these protection gaps, the UN provided a draft chapter to the PNG Immigration and Citizenship Service Authority containing relevant provisions for asylum-seekers and refugees, and a draft regulation in refugee status determination for further consideration during the review of the Migration Act.

A revised Refugee Policy, which incorporates consultations with a wide group of stakeholders, will be developed in 2013.

Progress was also made to address national legislation which discriminates against persons living with HIV/AIDS. The UN coordinated the submission requesting the Government of PNG to eliminate all laws, regulations and practices that restrict entry, stay or residence of people living with HIV on the basis of HIV status alone as part of the review of the Public Health Act (1978) and Migration Regulation (1979) in PNG. Additionally, the National AIDS Council Secretariat (NACS), with support from the UN, continued to move forward the advocacy agenda on legal reforms to accelerate the national HIV response. There were continued dialogues on the review of the Criminal Code Act and Summary of Offences Act which criminalize Sex Work and MSM and hence hinder access and delivery of HIV prevention and treatment services to these groups. To improve access to justice and protection to persons affected by HIV and AIDS, NACS established a Technical Working Group to oversee this initiative which will continue previous work on amending the two relevant Acts. The draft is yet to be presented or tabled for Cabinet review and recommendation.

In 2012, the UN continued to support increased participation of the people of PNG, or rights holders from marginalized groups, in national planning processes. Persons affected by HIV and/or AIDS are regularly stigmatized and discriminated against. To address systemic marginalization of this group, MSM, Sex Workers and People Living with HIV contributed to the PNG provincial development planning and budgeting processes in Central Province Provincial AIDS Committee through structured community conversations. The report on the National Dialogue on HIV, Human Rights and the Law was launched at a discussion forum and included a set of resulting recommendations. The forum brought together legislators and the affected marginalized groups including sex workers and MSM to voice their human rights concerns, and explore the way forward to implement the report recommendations.

Furthermore, two regional forums aligned themselves to the UN "Three Zeros", (ZERO new HIV infection, ZERO stigma and discrimination, and ZERO HIV related deaths) targeting persons most at risk of contracting HIV/AIDS, which include sex workers, MSM and TGPs in provinces, as part of enabling environment. This initiative significantly accelerates discussions and advocacy at the provincial level for improved access to HIV and Health services for at risk persons.

In 2012, the UN continued to support the Government of PNG to improve the access of marginalized and discriminated groups to justice and basic services. To strengthen access to accurate information and legal mechanisms of most at risk persons, the UN supported Kapuai Champions (an MSM network) and Friends Francipani (a sex workers network) to develop and implement the first stage of the Community Legal Education Program. This program with MSM, TGPs, sex workers and people living with HIV is intended to: (1) improve the ability of groups more at risk of HIV to use the law and legal system as part of personal protection, (2) improve the capacity of groups more at risk of HIV to participate in or influence law making processes, and for pursuing law reform through collective action where appropriate and (3) Reduce barriers that stop those more at risk of HIV from accessing legal help. In the longer term, it is expected to contribute to a protective social and legal environment that enables the effective implementation of national responses to HIV and increased equality of access to social and legal justice for all members of society.

A zero tolerance for dishonest, corrupt, unethical, non-performing and undisciplined officers was issued by the Police Commissioner and senior management of the Royal PNG Constabulary (RPNGC) in response to widespread concern on police misconduct and abuse, in particular killings and torture. The RPNGC also officially launched a revised edition of the Guide for Police Conduct and Behaviour, a handbook to guide officers on their responsibilities and obligations.

The UN also continues to support police officers to function in a more human rights compliant manner. Research in 2011 by the DJAG with the UN revealed that the international border provinces of the National Capital District (NCD), ARB, West Sepik Province and Western Province are vulnerable to people smuggling and trafficking in persons and that the capacity of authorities to deal with these issues is limited. In order to increase the capacity of local authorities to identify and respond to cases of human trafficking and people smuggling, training was facilitated by the DJAG with UN support. Training included 78 law enforcement officers across these four border provinces from the RPNGC as well as PNG Customs Service, PNG Immigration & Citizenship Service Authority, PNG Defence Force, Office of the Public Prosecutor, Department of Labour & Industrial relations and border officials. The attendance of police officers in different capacity-building events ensured increased awareness on refugee protection and understanding of protection principles, e.g. non-refoulement; non-penalization of asylum-seekers for illegal entry/stay. Collectively, 280 officers were trained.

Correctional Services officers were also supported by the UN to carry out their functions in a more human rights compliant manner in 2012. Health in prisons is a major public health issue in PNG and has significant implications for respecting, protecting and fulfilling the right to health. To ensure provision of adequate health services to prisoners and capacity building of the prison officers, the Departments of Correctional Services and the NDOH are working together to create links between public health and the prison health systems. Thirty-four Correctional Service officers also enhanced their understanding of refugee issues through participation in refugee protection trainings.

To support free legal services to human rights victims, the UN supported arrangements with a law office to provide legal aid to refugees on a pro bono basis; furthermore, 16 cases filed against the state using the Human Rights Track of the National Court were recorded in 2012, including 3 cases on forced housing evictions.

In 2012, the National Executive Council approved the enabling legislation and constitution amendment for the establishment of the National Human Rights Commission which are currently being reviewed by the Minister of Justice before being introduced into Parliament for passage.

Human Rights Defenders continued to document human rights cases which were sent to UN special procedures for action. To support human rights defenders working to promote and protect human rights, 25 representatives of civil society were trained on human rights monitoring, documenting and reporting in Port Moresby as part of a series of capacity building initiatives to enhance the skills of human rights defenders to monitor and report on the human rights situation in PNG. Furthermore, 82 trafficking protection stakeholders across the four vulnerable border provinces of ARB, NCD, Western Province and West Sepik Province increased their capacity to profile victims of trafficking and respond to their basic needs through DJAG facilitated training workshops supported by the UN. Trained protection stakeholders included officers from the Department for Community Development, faith-based organizations, non-governmental organizations (NGO), rehabilitation centres, AIDS organizations, counsellors and hospital workers. Community members in towns and villages across the same four vulnerable border provinces also gained greater understanding on the signs and dangers of human trafficking through the “Stop human trafficking in PNG” awareness campaign conducted by the DJAG with UN support. The campaign utilized community-level awareness sessions and included a toll-free information hotline on human trafficking which received 500 phone calls a month from across the country. 20% of which were genuine calls for information and support on cases of trafficking.

Forced evictions and lack of adequate housing are prevalent human rights concerns in PNG. Forty-one residents of settlements, NGOs and Local Level Councillors increased their capacity on the right to adequate housing after completing a housing rights workshop in Port Moresby, delivered by the UN. This knowledge can be used to influence policy making with regards to the urban poor and prevention of forced evictions.

A new network of human rights defenders The Housing Rights Network was created and an NGO on the protection of human rights is being established, by representatives of communities living in settlements. With assistance from the UN, the Housing Rights Network is using the National Urban Forum to raise awareness on housing rights and forced evictions with decision makers in the country. Information was provided to participants in the Urban Forum about the situation in the settlements and the right to adequate housing. To assist human rights defenders further in protecting rights the UN implemented a National Urban Forum Guide on Housing Rights and Forced Evictions. As part of the campaign to end forced evictions and improve housing rights the UN participated in a national TV programme with a special focus on housing rights which was broadcast nationwide.

To raise PNG public awareness on critical human rights issues, a press statement by UN High Commissioner for Human Rights expressing concern with regards to threats to the independence
5. Gender Equality and Women’s Empowerment

**Contributing Agencies:** UN Women, UNDP, UNFPA, UNICEF, UNHCR, WHO, UNAIDS

Gender equality and women’s empowerment have both long been recognized as core human rights that are linked inextricably to a nation’s substantive development. Although PNG has advanced economically over the past decade, with one of the fastest growing economies in the Asia/Pacific region, the status of women in PNG remains low. The national parliament has only 2.7% female representation which is below the Pacific average of 7% and the international average of 20%. Pervasive sexual and GBV remain key social and development issues. PNG has some of the highest levels of violence against women and girls in the world. Women’s economic participation is also low. Health indicators demonstrate that women and girls have low levels of health care and medical support.

Acknowledging the unique situation of PNG, the UN System through the Gender Task Team, has supported the Government of PNG, its agencies and partners under the UNDAF 2012-2015 with funding and technical assistance to support the Mid-Term Development Plan that states: By 2015, women, men, boys and girls have increased opportunities to access services, resources, rights and decision-making processes through equal participation and benefits from the economic, social and political development of PNG. The assistance of the UN system has been to: increase the capacity of national women’s machineries and other selected institutions to address gender equality and women’s empowerment; strengthening laws, policies and mechanism to support women, youth and adolescents to advance gender equality; support to national plans, budgets and systems in key sectors to mainstream gender equality and human rights; and support to strengthen legal, social services and awareness mechanisms to address GBV, eliminate discrimination and promote peace and security.

With respect to increasing capacity of national women’s machineries and other selected institutions for gender equality and women’s empowerment, the UN focused on supporting women candidates in the 2012 national elections, the work on addressing the findings of the Capacity Assessment was delayed. Work to strengthen the capacity of the National Council of Women through a restructure of the organisation and capacity building on programming and management was delayed due to changes in leadership in the Department for Community Development, under which the Council functions.

In terms of strengthening and promoting gender equality and women’s rights in the health sector, the Health Sector Gender Policy 2012, the first of its kind to be formulated in the Health Sector since Independence in 1975, has been launched with strong endorsement from senior NDHO programme managers. The Policy builds upon the first two National Goals and Directives of the PNG Constitution including Integral Human Development and Equity and Participation. The goal of the PNG Health Sector Gender policy is to integrate a gender perspective, including legislation, policies and programs, at all levels of the health system. It also aims to increase gender equity in health information and access to and use of service delivery in order to improve the health status of the population equitably. Following this, a gender mainstreaming training was conducted for 16 NDHO program managers, policy and technical officers to promote equitable, gender-responsive and human rights-based awareness health policies and programming. As a result, the Technical working group has been formed at NDHO to coordinate all Gender mainstreaming, equity and human rights trainings in the country.

In regards to PNG having laws, policies and mechanisms in place to support women and youth in leadership for gender equality, there was only one woman Parliamentarian in the previous Parliament and only seven women Parliamentarians since Independence in 1975. Despite Parliament’s failure to pass the enabling legislation to make operational the Constitutional amendment to bring the women’s reserve seats in to the 2012 elections, several key activities aimed at supporting women candidates were conducted with the National Women’s Machinery and its partners, including a first ever practice parliament and training for intending women candidates. The practice Parliament was aimed at giving an insight to the intending women candidates on the role of a parliamentarian and legislator; training of women candidates for election preparation; a media campaign to help raise awareness on women’s rights and the need for equal participation in decision making; and support to women candidates with the development of campaign materials and a dedicated webpage. These activities increased awareness of various stakeholders, including political parties and voters on the capacity of women candidates as leaders and decision makers. The result includes; increased political party support to women candidates compared to past elections and an increase in the number of women candidates for the 2012 elections. A total of 136 women contested the elections, the highest number recorded since independence; many women...
which shows a significant shift in the political landscape. Three women candidates were elected to the national parliament. One has been appointed as a State Minister and the other a Vice Minister. With respect to on-going support to women’s participation in decision making and political governance, a post-election diagnostic workshop was conducted to assess factors affecting the performance of women candidates in the 2012 national elections in PNG. The objective of the workshop was to understand what systems, processes, issues and other cultural or political phenomena contributed to the success recorded around the increased participation of women in 2012 elections, and what acted as barriers to their success. Findings from the post-election diagnostic will inform the Government of PNG, the UN and other development partners in developing programmes to further empower and increase women’s participation in the political and development decision making roles in PNG. In addition, a national consultation aimed at increasing women’s representation through the 2013 Local-level Government Elections was conducted with the Department for Community Development. The two-day workshop focused on discussion areas to support women to run for Local-level elections and identifying joint initiatives to further empower women and voters in 2013 Local Level Government Elections. The major outcome of the national consultation was a Joint Strategy and Action Plan for Women’s Political Empowerment. In terms of legislation and policies to advance gender equality and women’s empowerment, Section 101 of the Constitution was delayed as the Government of PNG went into elections. The results are promising as NACS allocated PGK 100,000 in funding to the National Commission and Kundiawa Town Authority were conducted. A UN Scoping Study found that the Gerehu market in Port Moresby was one of the most dangerous in the capital. As part of the protection of the rights of minority groups, the UN has paid special attention to women in refugee camps to enable them to have a voice and participate in decisions that have an impact on them. As a result of the renewed interest in the Iowara Refugee camp, there are now 21 women in leadership and decision-making roles, including two in the Central Committee and 14 in the Iowara Women’s Association. Training on conflict resolution/peace-building and advocacy further focused on enhancing leadership skills. Furthermore, youth and women leadership training were conducted in Port Moresby and in Kiunga. In order to further gender sensitization and implementation of national plans, budgets and systems in key sectors, the UN supported a Scoping Study on entry points to introduce gender responsive budgeting through integration of gender concerns and issues into the Government’s planning and budgeting processes. The Scoping Study was completed and submitted to the Government for comments. Gender responsive budgeting training with NACS, the NCD Commission and Kundiauw Town Authority were conducted. The results are promising as NACS allocated PGK 100,000 in their 2013 work plan to support gender mainstreaming in the National HIV Strategy, and the NCD Commission is making commitments for allocations on gender programmes in 2013. In addition, an evidence-based assessment on gender-related barriers to poverty reduction and sustainable and inclusive economic growth was conducted through production of the PNG Country Gender Assessment. The Assessment will assist the Government of PNG and other national agencies to advocate for greater attention to gender barriers, and for the provision of more resources to support action by core economic agencies and line ministries. The UN played a lead role in identifying gender barriers to development. This included gender analysis of the national development plans, access to justice and the legal environment, women’s political participation and gender responsive budgeting. Furthermore, to advance women economically a strategy has been developed in partnership with the International Finance Corporation to promote women’s economic empowerment. The strategy focuses on women with small scale and medium enterprises. Work on this strategy will commence in 2013. There were several key activities and initiatives to support and strengthen legal, social services and awareness mechanisms to address GBV and promote peace and security. Together with the PNG Health Sector Gender Policy, the Family Support Centre National Guidelines and the Family Support Centre National Standard Operational Plan will guide provision and implementation of quality health services for GBV in the 10 existing Family Support Centres and extended to the rest of the provincial hospitals, rural hospitals and Health Centres in the country by 2013. Upon the completion of the rapid assessment of service provision in the existing Family Support Centres, a GBV disaggregated age and sex reporting mechanism will be developed to enhance GBV disaggregated age and sex reporting. The National Guidelines for the Family Support Centres have been finalized. Printing and distribution to guide implementation will be done in 2013. A rapid assessment of health service provision at the Family Support Centres to integrate GBV disaggregated age and sex reporting will be conducted in 2013. In regard to Sexual and GBV prevention work with refugees, a Gender Training for 67 community advocates was conducted in East Awin, Port Moresby, Kiunga and border areas. There has been positive feedback from the East Awin local and refugee communities, indicating that there is now less violence in light of increased awareness and action taken. Information packages were translated into Bahasa and distributed to the communities, including a leaflet on the type of support a victim would be able to obtain. In regard to urban safety and security, grassroots organisations were trained to conduct safety audits with a gender lens in selected NCD markets. Efforts were made on working in partnership with men and boys to be agents of change. The result is that grassroots groups and vendor associations in the markets, which are almost non-existent, are becoming visible and claiming their rights. A Protection Incident Rapid Reporting Form was produced to support referral of cases of violence in the markets. It will assist in the ongoing monitoring of the situation of violence in the markets. The interventions resulted in NCD Commission contributing to infrastructure development and maintenance as it recognized the fact that adequate management and operational structures are needed to ensure public markets are safe, gender and age inclusive, clean, and accessible. Further in the UN response to widespread GBV, trainings aimed at providing skills and knowledge to young men and boys to report and refer cases of GBV were conducted in Enga and Western Highlands provinces. In addition 28 young men and boys from 7 schools in Gerehu suburb of NCD were provided with skills, knowledge and tools to report and respond to cases of violence and bullying in school and in their communities. The training will be continued in the beginning weeks of 2013 for their schools for reporting cases of violence to relevant people both in schools and communities to respond to these cases. In terms of working with the RPNGC on GBV prevention, in 2012, 40 police officers and 65 health workers were trained in GBV and cross cutting issues. As a result, the officers will be able to address GBV issues and be able to assist GBV survivors. They will also be able to effectively refer GBV survivors between RPNGC and the health care system. The officers will also be able to address GBV in their homes and communities in a peaceful manner rather than resorting to violence. One health worker is training in New Zealand on forensics and analysis of data. As a result, the officers will be able to take samples and report to police and to court for prosecutions of sexual offenders in Port Moresby. Funds have also been provided to RPNGC to start on the establishment of the GBV data collecting system in the three family Violence Units in NCD as a pilot and expanded to selected provinces 2013-2015. This will provide basic data required for strategic planning and budgeting. Activities planned to develop a PNG National Action Plan on Women, Peace and Security under UN Security Council Resolution 1325 has been delayed pending the finalisation of a Regional Women, Peace and Security Framework. The framework has now been drafted and is pending intergovernmental endorsement. The current focus of support is to assist Bougainville to develop its Action Plan on Women, Peace and Security and has commenced and will be completed by June 2013. Finally, a comprehensive Family Health study is planned to start in 2013, with planned financial support from AusAID. It is aimed at exploring the extent, effectiveness, and prevalence of sexual violence. The is also taking into account the knowledge and attitudes of men and boys towards family sexual violence and suggesting possible avenues/strategies through which to engage both men and boys as partners in prevention. Qualitative assessments were completed including translation of the findings. Qualitative data collection will take place in 2013. Findings from this study will provide evidence to develop strategies for prevention as well as to scaling up service delivery including legal aid, psychosocial support and health interventions for affected victims.
Playing the political game in PNG

Ms Janet Sape loves netball. A mother of six, and grandmother of two, she has always been passionate about the predominately female game. It was this passion that led to her run for the Port Moresby North West seat for the PNG Parliament in 2002.

“There was no government support for netball. I had represented PNG at a national level, and been President of the PNG Netball Association, so I thought that running for parliament was the next thing I could do to help the sport,” said Janet.

There were 32 candidates contesting that seat, only three of whom were women. Janet came fifth in that race and then second when she contested the Governor’s seat in 2006.

The 2007 PNG national elections saw only one woman elected into Parliament, alongside 107 men. This was well below the world average of 18% female representation at a national level, and the Pacific average of 3.5 per cent.

Thus, the UN began its Women in Leadership programme in 2008, which aimed to raise awareness of female representation with both the general public and the political elite, build the capacity of the many women’s groups advocating for women’s political representation, and to provide technical and advisory support to the Government of PNG in the area of gender equality.

In the lead up to the 2012 elections, the UN focused on helping and preparing the women who planned to contest the elections. In May 2012, sixty women participated in the first ever PNG Practice Parliament for Women that was broadcast live on national radio.

“While I already had some exposure to working with the media and parliamentary systems, a lot of the women planning to run were unaware of how the Parliament functioned. The Practice Parliament gave the women a lot of courage,” exclaimed Janet.

While Janet placed third in her seat, three women were elected to the PNG National Parliament in July 2012. One of the women, Ms Loujaya Toni, who participated in the Practice Parliament, has been appointed Minister for Community Development, Youth and Religion.

So, will Janet run again in 2017? “I will consider it when the time comes. I really believe when women are strongly resourced and represented it cuts across all other issues. Empowering women will empower PNG.”

6. Child Protection

Contributing Agencies: UNICEF

In PNG, three in four children witness and experience violence at home, according to the 2005 Global Study on Violence against Children. Anecdotal evidence shows that the situation has not changed considerably since publication of that report. An updated study is urgently needed to understand the magnitude of violence against children, and in order to provide sufficient evidence to develop relevant policies and strategies to reduce such violence. Communication and awareness will be supported to address the negative societal acceptance of violence, which will require long term behaviour change strategy.

CHILD PROTECTION SYSTEM BUILDING

The Government of PNG with UN support is in the process of building a child protection system. The Lukautim Pikinini Act (Child Protection Act) 2009 is under review to address barriers to its effective implementation. The passing of the reviewed Act in 2013 will enable the establishment of Children Courts and National Child Welfare Council. The reviewed Act will be accompanied with a child protection budget using Government of PNG funding that proposes increasing staff at the National Child Protection Office in the Department for Community Development and child protection officers in all provinces and districts and allowances for Community Child Protection Volunteers in Districts to fully implement the Act at all levels. The UN will enhance the department for Community Development capacity in using evidence for advocating and negotiating with the DNFM and the Department of Treasury and Finance in getting the required budget allocation.

The UN-supported assessment of the implementation of the Lukautim Pikinini Act 2009 has revealed challenges and developments in terms of child protection capacity and systems building. The review has addressed inadequacies in the current set-up, including staffing and funding at national and provincial levels to effectively implement the Act.
UN support to the Department for Community Development in developing guidelines, standards and training manuals to implement the Act, resulted in three provinces completing all required training for Community District Officers, other government sectors, community child protection volunteers, and faith-based organization staff. The 150 trained officers will enable appropriate responses to child protection cases. Sixteen out of 20 health and education institutions funded by Incentive Funds, have integrated child protection into their core business. The Incentive Fund is an AusAID infrastructure development fund which, along with the Department for Community Development, developed a checklist for funding which included child protection as a key integration priority that successful agencies are required to meet under the social inclusion approach in infrastructure development. This checklist is used to guide funding proposals. The Incentive Fund also institutionalized child protection as an entry point among other options for agencies applying for funding requiring them to have child protection policy in their institutions. Less than 10% of children have their births registered. Progress on birth registration is slow due to a highly centralized system, limited funding and human resource capacity. The UN is advocating the revitalization of birth registration and will support a review of the Civil Registry Act, development of birth registration strategy and partnership with health, education, planning and magisterial services to increase birth registration of children in 2013.

FAMILY SUPPORT CENTRES

To support victims of violence against children and women, hospital-based Family Support Centres provide a “one-stop shop” for coordinated medical, paralegal, psychosocial, case management support and referral services. The Provincial Health Authorities are integrating Family Support Centres establishment and operations into their planning and budget as directed by the NDOH.

Together with other development partners, the UN supported the construction of Family Support Centres. It also supported the training of staff and community child protection advocates in 13 Family Support Centres serving over 17,000 women and children. The UNs support will shift from construction to solely providing increased capacity building and outreach programmes to raise awareness. Coordination among different partners supporting the Centres will lead to better results with increased leadership from the Government of PNG. One Family Support Centre reported that 50% of cases received were sexual violence cases, of which 75% were under 18 years of age. UN will support a pilot community-based response to address issues in communities with high sexual violence prevalence. Challenges remain in data reporting on violence against children, which need to be systematically addressed. UN will support the Government of PNG in conducting a Violence Against Children study in 2013. With a weak police and justice system, communities use traditional practices of mediation processes and pay compensation out-of-court to resolve family and sexual violence issues to maintain peace. This allows perpetrators to continue repeating violence with the backing of the UN. UN will support partners to develop a communication strategy to address the issues of violence against children and strengthen child protection system.

Faith-based organizations are incorporating a child protection curriculum into their chaplaincy training, and in two provinces are working with communities to develop community-based child protection plans and committees. The UN will expand its support to faith-based organizations to include children affected by AIDS.

JUSTICE FOR CHILDREN

The UN is represented in the National Juvenile Justice Committee, which brings together agencies that implement juvenile justice reform. The Provincial Juvenile Justice Working Groups are replicated at the provincial level and its Volunteer Juvenile Court Officers support children in conflict to ensure that they are treated fairly by the law throughout the court processes. The UN supported seven Provincial Juvenile Justice Working Groups by training Volunteer Juvenile Court Officers and raising awareness on juvenile justice. This prompted collective support from the Police, Correction Services, Courts and other stakeholders to use diversion options for young offenders. In 2011, 163 children out of 445 cases in five provinces were diverted.

Police are usually the first point of contact for children in conflict with the law. The UN is supporting the police to develop and implement curricula for pre-service and in-service Police training to strengthen police capacity on juvenile protocols.

The Salvation Army, a faith-based organisation working with the National Court in the capital, provides social support services to child victims and witnesses before, during and after the trial. The UN supports the replication of similar programs in two other cities. Young Women Christian Association is supported to prevent in-school and out-of-school children from coming in contact with the law through awareness and a peer-to-peer protection network in three communities in the capital.

Village Courts is the largest single government service to reach every community and deliver restorative justice. The UN supported the National Village Courts Secretariat to enhance the capacity of Village Courts in five provinces to understand human and child rights. Four provinces institutionalized Village Court provincial technical advisor positions, initially funded by the UN. Village court magistrates are increasingly discussing rights and protection, a meaningful change in a culture that previously did not recognize women’s or children’s rights.

7. HIV and AIDS

Contributing Agencies: UNAIDS, UNDR, UNFPA, UNODC, UNICEF, WHO, UN Women, UNESCO

UN support to strengthen the capacity of the Government of PNG and its partners in delivering on the goals and strategic priorities of the National HIV and AIDS Strategy 2011–2015 focused on key areas during 2012: (1) increasing human rights protections for MSM, transgendered individuals, sex workers and those who engage in transactional sex and their clients, people living with HIV, prisoners, people who use and/or inject drugs, women at higher risk, children, and HIV affected families; (2) integrating health related HIV services with mainstream health services; (3) improving the collection, management, analysis, dissemination and use of strategic information to guide the national HIV response; (4) establishing the coordination, partnership and leadership mechanisms needed to achieve the National HIV/AIDS Strategy; and (5) ensuring all UN HIV programs are gender inclusive.

Increasing awareness on human rights and legal protections for groups more at risk of HIV is an important strategy in removing barriers to people accessing services, reducing vulnerability, stigma and discrimination and creating an enabling environment for the prevention and the development of HIV Strate, and uplifting to UN continued to build the capacity of MSM and TGP and Sex Worker groups to access available mechanisms for monitoring investigating and redressing legal and human rights violations, participate in influential law making processes, and pursue law reform through collective action. There was little progress made in reviewing or revising laws that present barriers to the successful implementation of the National HIV response, however the UN was able to contribute towards progressing priority 9 of the 2011 Political Declaration on HIV/AIDS “eliminating related travel restrictions” by coordinating the development of a submission to the review of the Migration Act (1978) and Migration Regulation (1979), requesting the Government of PNG to eliminate all laws, regulations and practices that restrict entry, stay or residence of people living with HIV on the basis of HIV status alone.

Effective HIV prevention approaches include strategies for working directly with people more at risk of HIV. In PNG, this includes MSM and TGP. A critical component of developing and scaling up prevention interventions for these groups is their meaningful involvement in the development and implementation of programs. In December 2012, the National Networks for MSM and TGP’s - Kapu Champions was launched, which is the first trans gender and MSM group in PNG. This group is planning to engage with Government of PNG and Stakeholders to advance universal access to HIV prevention, treatment, care & support for MSM and TGP, promote non-judgmental, non-stigmatizing services relevant to their needs, and raise awareness of legal issues affecting MSM and TGP’s in PNG.

UN support to the National HIV/AIDS strategies of scaling up HIV counselling and testing and expanding treatment, care and support services continues to focus on integrating health related HIV services with mainstream health services. Integration of PPTCT, HIV testing for children and elimination of congenital syphilis into mainstream maternal and child health and sexual & reproductive health services is progressing. The Government of PNG received USD 19 million to support scaling up HIV prevention, care and treatment services in priority provinces with a high burden of HIV in particular focusing on the U-24 age group as an entry point. The UN is supporting implementation and monitoring of this grant to leverage funding which will facilitate HIV testing for 1.5M people over 5 years, percentage access to antiretroviral treatment for people living with HIV to 65% and increase the percentage of pregnant women receiving antiretroviral therapies to prevent mother to child transmission of HIV to 90% in provinces with a high burden of HIV. The Government of PNG adopted use of life long antiretroviral therapy (option B+) for PPTCT which is a more effective measure of reducing mother to child HIV transmission and provides protection to discordant couples. With UN support the policy guidelines and protocols required to implement the new guidelines were developed and a coordination team was recruited to support activities at the national and regional levels. PPTCT programs have been implemented through the development of a PPTCT strategic plan, and a national PPTCT training package, protocols and standard operating procedures for community based workers and 18 master trainers have been trained who will support provinces to conduct PPTCT training and mentor health workers.

Furthermore, 30 health workers in the Highlands region were trained and their capacity built to implement PPTCT in line with the new HIV care and treatment guidelines. To strengthen the monitoring system, the UN is supporting the Government of PNG to review the HIV monitoring tools and report forms to improve quality of data reported and provide disaggregated data to inform programme planning and implementation. These tools are based on a comparative assessment conducted which revealed major gaps in data quality particularly regarding HIV care for women and children. Despite the high burden of syphilis in the country, little focus has been put on elimination of congenital syphilis and less than 10% of pregnant women receive screening for syphilis. The UN continues to advocate for increased government action and in 2012 successfully advocated for elimination of congenital syphilis to be included in the terms of reference for the PPTCT and Paediatric HIV Care Technical Working Group.

The capacity of Catholic HIV and AIDS Services, a faith-based organization which supports 50% of HIV prevention and treatment services, has been enhanced through training for skills building in PPTCT programme management. Furthermore, the UN in collaboration with AusAID and Catholic HIV and AIDS Services is supporting a pilot project for training and equipping 7. HIV and AIDS
HIV positive women to provide peer education and psychosocial support to new clients receiving PPTCT services, reducing drop out of mothers from the PPTCT programme and increasing male participation in antenatal care and PTCT. Currently many women entering the HIV care programme drop out, without receiving the continuum of care to reduce HIV transmission to their infants and treatment for their health. Only 1% of male partners participate in PPTCT despite its added importance of supporting women to access PPTCT services. Research supported in 2012 in PNG’s Arhctic care and PTCT provided information on key actions for addressing barriers to male participation. A formative assessment of the quality of PPTCT data collection and management processes was completed which will be used to develop standardised Maternal & Child Health data management tools to improve monitoring of the elimination of paediatric HIV and congenital syphilis during 2013. Technical assistance was provided to NDOH and stakeholders to mark the World Breastfeeding Week. Posters and messages were developed to create awareness on the importance of breastfeeding to child survival including safe breastfeeding in the context of HIV and funding was leveraged through partnership with media houses to air messages on breast feeding. These activities directly contribute towards the achievement of Target 3 of the 2011 Political Declaration on HIV/AIDS, “Eliminate mother-to-child transmission of HIV by 2015 and substantially reduce AIDS-related maternal deaths”.

In line with priority 1 of the 2011 Political Declaration on HIV/AIDS “reduce sexual transmission” the UN has supported the NDOH to introduce new & emerging HIV prevention technologies including microbicides, antiretroviral treatment as prevention, and rapid testing. More than 500 health care workers were trained in HIV rapid testing using the 2 test algorithm (process) which means, delays between initial testing and confirmation have been eliminated, allowing for much earlier commencement of antiretroviral treatment for those who meet the criteria in all point of care health facilities in 11 provinces. The use of intravaginal microbicides as a female-initiated HIV prevention method that reduces the risk of HIV acquisition has been integrated into relevant HIV/STI training. The UN has developed a regional framework and guidelines on antiretroviral treatment as prevention. This has been introduced at national level, incorporated into HIV/STI and HIVQUAL training, and the NDOH STI/HIV Technical Officer has been supported to attend an international workshop on national strategic development of antiretroviral treatment as prevention. The National Guidelines for HIV Care and Treatment have been revised and incorporated to the five pillars of Treatment 2.0 with support from the UN. Treatment 2.0 is a simplified HIV treatment platform that aims to reduce the barriers to care and improve access to care for people living with HIV. It was developed with the input of communities and those living with HIV, and could also greatly benefit HIV prevention efforts. It seeks to simplify the way HIV treatment is currently provided and scale up access to treatment. One thousand copies have been published and distributed to all antiretroviral treatment clinics in the country.

PNG has adopted lifelong antiretroviral therapy as the mode of care for HIV-infected pregnant and breastfeeding mothers, which means all HIV infected pregnant or breastfeeding women are started on lifelong antiretroviral treatment, regardless of clinical stage or CD4 count. The UN has supported the establishment of Tuberculosis/HIV committees in 6 provinces which aim to reduce the burden of tuberculosis & HIV for people living with HIV, increase access antiretroviral treatment & Isoniazid Preventive Therapy to prevent tuberculosis for all people living with HIV and tuberculosis in male. The UN has supported NDOH to develop requirements for antiretroviral therapies, drugs for preventing and treating opportunistic infections, HIV test kits and syphilis test kits and facilitated the placement of timely orders to avoid a repeat of the stock outs which occurred in late 2011 and early 2012. To improve HIV care and treatment data collection, analysis and dissemination; three staff were supported to attend a workshop in Laos and participated in capacity building and experience sharing workshop for management of data related to HIV care and treatment.

Evidence provides an important tool to guide the planning, coordination, and implementation of the HIV response; assess its effectiveness; and identify areas for programme improvement. Evidence on the impact of stigma & discrimination was augmented during 2012 when Igat Hope, the National Network for people living with HIV released an interim progress report on HIV related Stigma and Discrimination and Human Rights in PNG. The report highlighted that discrimination in the PNG context is concerned with: i) attitudes and behaviours, ii) not treating people living with HIV with respect and iii) the effect of the moving the stigmatized person, the people living with HIV away from the group, whatever that particular group may be. The findings and recommendations of this report will be used to develop and implement actions to effectively reduce stigma & discrimination. Evidence supporting public health approaches for HIV prevention, treatment & care services for those living in prisons & other closed settings has also been strengthened during 2012 with the UN commissioned PNG Institute of Medical Research assessment of alcohol and drug use & HIV risk and HIV risk, prevention, treatment and care in closed settings in NCD, Western Highlands, Mombre and West Sepik. The relationship between drug and alcohol use and HIV risk and vulnerability is significant and well documented. The findings and recommendations from this research will be used to develop: alcohol and drug harm reduction strategies which limit the negative impact of alcohol and drug use on peoples decision making in relation to sexual behaviour and their ability to protect themselves and others from HIV. Despite on-going, long standing capacity issues within NACS and NDOH is relative to collection, management, analysis, dissemination and use of strategic information, PNG has met all of its international HIV reporting requirements for 2012, with significant UN and development partner support. The principle report was the 2012 PNG Global AIDS Report which was submitted on time with 80% of indicators being reported against. The figures will be updated once the analysis of the 2011 program and surveillance data has been completed. Even with the high level of external support, PNG has not yet fulfilled its national HIV reporting requirements. The 2011 Annual ST, HIV/AIDS Surveillance Report and the 2011 HIV Annual Progress Report remain incomplete. The final reports are expected to be completed by March 2013. Once completed this information will be used to refine the planning, coordination, and implementation of the HIV responses for 2013/2014; assess effectiveness; and identify areas for programme improvement.

All UN key stakeholders and implementing partners participated in the successful review of the 2012 UN annual work plan and the development of the 2013 UN annual work plan which supports the Governments national priorities in HIV prevention, treatment, care and support.

Delivering a truly multisectoral response to HIV hinges on greater integration of HIV in government development planning frameworks, key sectoral plans and provincial government planning and budgeting processes. The UN has assisted NACS to support provincial planners from 6 provinces, Manus, East New Britain, and Eastern Highlands; NCd, West New Britain & Western Highlands, to develop AIDS sensitive budgets for 2012 which demonstrates the commitment of these provincial administrations to HIV mainstreaming. There are also a number of Provincial Administrations who have not yet allocated specific budgetary support to HIV. It highlighted that the following can assist in overcoming structural inequities that drive the epidemic and serve as barriers to treatment, testing, care and support. In Western Highland Province, community action plans were shared with the Provincial Administration and incorporated into the 2012 Provincial Plan. The NACS has committed to providing additional grant funds to Western Highlands for the implementation of the Community Action Plans, which will support community led HIV interventions.

The revival of the Development Partners Round Table Forum provided greater opportunities in 2012 for donors and stakeholders to build a better understanding of the issues faced by programme implementing organizations; and to achieve more effective use of development partner resources in the overall response to the epidemic and its related issues. Three round tables were held in 2012. Actions generated from these forums included: (1) Port Moresby General Hospital established a working group to identify options for increasing funding and staffing related to provision of care for people living with HIV; (2) Igat Hope was able to articulate to donors and implementing partners where and how they would like external assistance to be budgeted, resulting in on experiences and lessons learned from other organizations, Anglicare was able to integrate services targeting MSM, TGs and sex workers into their existing health program.

Addressing the different needs of women and girls, men and boys and transgendered people is fundamental to reducing risk and vulnerability to HIV. A Gender Core Group has been established within NACS to plan and implement key instrumental in driving key transformational changes in the corporate approaches of NACS and its programming. The 2011-15 National HIV/AIDS Strategy and its 2012-13 work plan reflects gender specific issues in the national HIV response and makes provisions in HIV operations to address these. Individual and divisional Gender Action Plans have been developed by NACS which include gender as selection criteria for small grants applications. NACS have shown significant commitment to make the national HIV response gender inclusive and have fully funded the pilot roll out of the Introduction to Gender Equality Training to 5 highlands Provincial AIDS Committees. NACS has allocated PGK 100,000 of their National HIV/AIDS Strategy solely to incorporate gender mainstreaming trainings at both a Provincial level and with partnering implementing NGOs in 2013.

Scaling up of programs to promote the leadership and participation of HIV positive women to shape policies, programmes and resource allocations to address their needs has been significantly delayed due to the limited presence of well-established local NGOs to implement the programme. Despite this HOPE worldwide PNG assisted HIV positive women in Western Highlands and Chimbu to develop a media advocacy strategy utilizing print and radio. Both segments focused on disseminating the three key messages of change that the positive women had unanimously identified as most important to them. These were: (1) HIV medications being available to all who need them; (2) the greater involvement of people living with HIV in Care, Treatment and Support for planning and delivery of health services and; (3) an end to stigma, discrimination and human rights abuses for all people living with HIV. Two of the HIV positive women were coached and mentored to lead one on one interviews with talkback radio stations in Mt Hagen. The successfully completed interviews were broadcast both provincially and nationally throughout the NBC network. It is difficult to evaluate the exact reach or successes of the media campaign. In terms of visibility, gender equality and human rights in the national AIDS response was displayed prominently across media platforms, successful training and capacity building sessions for positive women were completed and the capacity of women living with HIV to conduct media interviews, lobbying and advocacy was increased.
During 2012, the UN finalized the report of the “Rapid Assessment of Institutional Readiness to Implement GBV and HIV Services in Five Provinces of PNG”. The assessment identified the strengths, gaps and challenges in policy, capacity and physical resources for providing effective services in the areas of GBV and HIV. It examined how services respond to victims and survivors of GBV and the facilitating factors and constraints in the environments in which the services operate. The UN will support implementation of the recommendations on how the health, justice and social sectors can collaboratively improve their responses to HIV and gender-based violence in 2013.

8. Health
Contributing Agencies: WHO, UNFPA, UNICEF

The UN System is providing support to the Government of PNG and relevant stakeholders in line with the priorities of the National Health Plan to strengthen health service delivery and to achieve universal access to comprehensive Primary Health Care services, focusing on improving the health status of women, children and other vulnerable groups, and the implementation of interventions to reduce the burden of communicable and non-communicable diseases.

MATERNAL AND CHILD HEALTH

The key result area 4 of the National Health Plan focuses on reducing morbidity and mortality of children from the vaccine preventable diseases towards the attainment of MDG 4 on reducing child mortality. Rural children are twice as likely to die before their fifth year as urban ones. In 2012, the Government of PNG re-committed to improving the health and well-being of children by signing the pledge “A Promise Renewed”. This led to increased advocacy for commitment from all sectors to accelerate a reduction in preventable deaths with an initial focus on newborns considering that over 30% of deaths of children under the age of five occur in the first month of life. In order to eliminate neonatal tetanus and measles, the Government of PNG with support of the UN and other development partners launched the first round of immunization campaign. Of targeted children: 88% received Measles vaccines, 84% Polio vaccines, 73% deworming and 84% Vitamin A while 77% of child bearing age women received the first dose of tetanus toxoid. The campaign also boosted routine vaccines coverage. The NdOh decided to run the second round, conducted October through December 2012, through the routine outreaching. This approach was implemented to strengthen the capacity of the National health system to improve the immunization coverage in a sustainable way.

The National Health Plan key result area 5 has, its main objective, to reduce maternal mortality in PNG which counts for around 1,400 maternal deaths per year. The maternal mortality ratio in PNG is 733 deaths every 100,000 live born babies. The UN is supporting the Government of PNG to establish a system for reviewing all the notified maternal deaths, understand why the women died and the avoidable factors that lead to death, to provide recommendations at different levels on how to avoid the very same situation to happen again. For this purpose, the maternal death review committees have been facilitated in 12 Provinces. At National level a National Maternal Death Review Committee has been established and the maternal deaths Registers developed. All the visited provinces can now monitor the maternal deaths notification through the Register. After the visits, 4 out of the 12 Provinces had established the maternal death committee and are committed to use and update the register. The UN worked with the Family Health Department in developing the Youth and Adolescent, the Sexual and Reproductive Health, The Family Planning and the Gender policies. These policies guide the provinces in planning and implementing activities in line with the National Health Plan. The UN also worked with DOE, University of PNG and Young Women Christian Association on the Adolescent Sexual Reproductive Health program. This is done through the development and teaching of the Sexual and reproductive health curriculum as core subject in schools, training of teachers to teach the subject, peer education program in secondary schools and University of PNG, advocacy in radio and television for in-and-out of school youth.

The acceleration of progress towards achievement of MDG 4 on reducing child mortality was supported by development of national and subnational guidelines to implement child survival interventions through infant and Young Child Feeding Policy and the Integrated Management of Childhood Illness Policy. The development of the New-born Health Policy is still in its initial phase. Laws and regulation to protect breastfeeding, the Baby Food Supply Act, was amended and submitted for approval by Parliament. Additionally, due to the increased case fatality rate due to pneumonia in children under five years of age, oxygen concentrators and pulsometers were purchased and their installation will resume in first quarter of 2013 to improve the quality of care and decrease pneumonia case fatality in district hospitals. Resources were secured and local plans are being developed for implementation of integrated strategies to promote breastfeeding in Madang Province. Improvement of adolescent health outcomes is being supported by finalization of Youth and Adolescent Health Policy with a 10 year Implementation Plan. The Policy, with its national implementation plan, will be submitted for approval by Senior Executive Management and National Executive Council in first quarter of 2013.

Despite a high rate of stunting (being too short for their age) at 48% of children below 5 years (according to the 2009-2010 survey), nutrition remained a low priority due to significant capacity limitations in the health sector. This was exacerbated by low public awareness on nutrition and its contribution to optimum child development and learning. Following high level advocacy by the UN with the Health Minister and Secretary on the importance of nutrition, the profile of the nutrition programme at the NdOh was elevated.

UNAIDS and UN Women enable HIV positive women’s advocacy campaign in the lead up to World AIDS Day

The National AIDS Council Secretariats national report in 2012 highlighted that women living with HIV were a group most at risk of people living with HIV. 61% of all new infections annually were women. Acknowledging this challenge, UN Women and UNAIDS conducted a joint advocacy program encouraging women in the pandemic Highlands regions of PNG to advocate for themselves and service providers on HIV health, care and treatment in their day to day lives. Through this, the need to mainstream gender equality and human rights in the national HIV response would be given recognition and the attention it requires.

Consultations to identify their needs and challenges were conducted with positive women’s groups called Tra Prees (True Friends) and Stewards of Life in Mt Hagen and Simbu. Through these sessions, the positive women identified critical areas of change for them; HIV medications readily available and accessible; greater involvement of people living with HIV in care, treatment and support for planning and delivery of health services; and to end stigma, discrimination and human rights abuses for all people living with HIV. Following this, a week-long training was conducted on lobbying and advocacy skills, and dealing with the media.

An advocacy campaign through the media was also organised. The initiative focused on disseminating the three key areas of change that the positive women had unanimously identified. Two women were selected from each province in the highlands to participate in interviews and talk back shows hosted by the radio stations. The advocacy was done on the national and provincial level on the National Broadcasting Corporation radio network across PNG.

The World AIDS Day on 1st December 2012 was used as a platform to bring out the issues identified by the women living with HIV in the highlands to participate in interviews and talk back shows hosted by the radio stations. The advocacy was done on the national and provincial level on the National Broadcasting Corporation radio network across PNG.

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Multi-intervention Measles Supplementary Immunization Activity April - May 2012: A success story

Measles had been a major cause of morbidity and mortality among children in Papua New Guinea, which until 2000, ranked second to malaria in terms of burden of disease. In an effort to eliminate measles, the Government of PNG, through the Department of Health, implemented a supplementary immunization activity in 2002. The measles supplementary immunization activity is a special immunization activity that the Government of PNG carries out every two years to strengthen and improve measles vaccination coverage amongst children in the country.

In line with the commitment to eliminate maternal and neonatal tetanus, the Government of PNG, in 2012, implemented the first round of the tetanus toxoid vaccination along with the measles supplementary immunization activity. For the first time, the Government of PNG with support from the WHO, UNICEF and AusAID, implemented an integrated measles supplementary immunization activity with five other interventions. Unlike previously, this supplementary immunization activity provided a one-stop shop for children under three years to receive the measles and oral polio vaccines, get deworming medicine to prevent intestinal worms, and vitamin A. Women of child bearing age between 15 and 45 years including pregnant women received the tetanus toxoid vaccination to prevent tetanus, a highly preventable but deadly disease that potentially kills many women and children in PNG. The supplementary immunization activity provided a platform to deliver integrated services to women and child in a resource constraint setting like PNG.

The results from the first round were very impressive. Of the targeted children nationwide, 88% received the measles vaccine, 84% received the oral polio vaccine, 73% received the tablets for deworming and 84% received Vitamin A. In addition, 77% of child bearing age women received the first dose of tetanus toxoid vaccination. The campaign also boosted routine vaccines coverage.

Apart from technical assistance, WHO provided vitamin A and deworming tablets while UNICEF provided 56% of measles vaccines and all of the tetanus toxoid vaccines. UNICEF led a social mobilisation drive that also, for the first time, involved other government sectors, NGOs, Churches and the private sector.

COMMUNICABLE DISEASES

Malaria, tuberculosis and communicable diseases remain major public health problems in PNG. Supporting the Government of PNG to control these diseases and prevent their further spread is an important component of the National Health Plan 2011 – 2020 and will facilitate the achievement of sustainable health outcomes in line with some key result areas 6 and 8.

The control of tuberculosis and multi-drug resistant tuberculosis remains a major challenge in the country. The financial assistance provided through the Global Fund grant, secured by the Government of PNG through UN technical assistance, has made it possible to strengthen diagnosis and treatment of tuberculosis throughout the country with the expansion of the Directly Observed Treatment Short course treatment throughout the country in 2012. Strengthened surveillance has resulted in an increase in the number of tuberculosis patients diagnosed and has also contributed to identifying the existence of drug resistant and multi drug resistant tuberculosis in the country.

However limitations of the existing surveillance system in the country results in it being difficult to determine the extent of drug resistance to anti-tuberculosis medicines in PNG. Therefore, it was decided to conduct the Drug Resistance Survey in PNG to measure the prevalence of drug resistance among new smear positive and previously treated tuberculosis cases in Madang, Morobe, NCD and Western Provinces in PNG. The survey is currently being carried out with assistance from the UN.

In order to coordinate efforts to control effectively multi-drug resistant tuberculosis and to improve its management, the Core Working group on Programmatic Management of Drug Resistant tuberculosis has been created. As the results of the regular Core working group meetings and with technical assistance of the UN, for the first time some data has been collected in PNG regarding managing multi-drug resistant Tuberculosis. In addition to that, national training modules and guides to Record and report multi-drug resistant tuberculosis have been developed and endorsed by the group.

During the reporting period, the UN provided technical assistance to the National Tuberculosis Programme to mobilize financial resources and to implement its strategy. The UN also assisted the proposal development to the National Executive Council to seek resources and to implement its strategy. The UN also assisted the proposal development to the National Executive Council to seek funds for 2013-2015. If this is approved by the Government of PNG, USD 66 million will be available for the National Tuberculosis Programme to improve the quality of tuberculosis care provided to PNG nationals. In addition, a no-cost extension of USD 2.5 million for the Global Fund was approved, due to a submission by the UN the National Tuberculosis Programme and other partners. The NDOH has also agreed to provide PGK 4 million as bridge funding following the end of the funding in 2013.

A PNG Institute of Medical Research report released in 2012 indicates a dramatic reduction in malaria prevalence from 18% to as low as 6.8% in the general population between 2008 and 2011. This reduction is possibly attributable to large scale distribution of insecticide treated bed nets that occurred in PNG over the last 2 years with support from the Global Fund Round 8 Malaria Grant. However, observational studies in sentinel sites run by the Institute suggest that 9 out of 10 fever cases are still prescribed anti-malarial medicine when only about 20 – 25% of these actually have confirmed malaria. The roll out of Rapid Diagnostic Test kits to health facilities carried out during the year and the implementation of the New Treatment Guidelines for malaria will contribute to a further reduction in malaria prevalence.

The new treatment which is the recommended first line treatment for uncomplicated malaria – artesinin based combination therapy will contribute to significantly reducing morbidity.

During the year and building on this momentum, a 10 day National Training on Management of Malaria for Field Officers in Port Moresby was conducted. The course was designed to equip the participants with operational and practical skills in malaria program management, including correct diagnosis, effective treatment and prevention, logistics monitoring, malaria surveillance, as well as evidence based planning. 28 participants from the NDOH and Provincial Health Services completed the course. Training programmes were also conducted in NCD, Eastern Highlands, Morobe, ARB and Southern Highlands for provincial and clinical staff. These trainings have contributed to effective roll out of the new diagnosis and treatment policy and will result in a further decline in malaria prevalence and mortality.

To strengthen diagnosis capacity microscopists were also provided with refresher in-service training and this has already contributed to an increase in the number of microscopically detected cases.

In an effort to contribute to behavioural change in schools and communities, particularly hand washing with soap, the national department of health in collaboration with partners and various stake holders both from the UN and NGOs such as World Vision conducted a programme for hand washing with soap activities in 10 selected schools and communities during the Global Hand Washing Day in October and in December for World Toilet Day. The 3 critical times of hand washing with soap, which are before touching/eating food, after using toilets and after cleaning baby’s bottom, were emphasized. Advocacy campaigns in both media and print were also conducted to disseminate the importance of hand washing with soap targeting both schools and communities.

In order to determine the impact of climate change to water and health, NDOH has been supported by the UN to research and study the environmental health risks caused by climate change. Centre for Climate Change and Sustainable Development, the University of PNG in collaboration with NDOH, has initiated a study to determine the effects of climate change to water and health in two provinces, Central and Eastern Highlands provinces. One of the aims of the research is to strengthen country level capacities in developing plans for national adaptation program on climate change with better health surveillance system, by supporting vulnerability assessment and its impact.
Two training programmes were conducted to train and equip national and provincial environmental health officers with the capacities to deal with climate change and its impact on water quality and health.

HEALTH SYSTEM STRENGTHENING

Strengthening the health system establishes a conducive environment for program implementation and service delivery. In 2012, the proportion of health facility staffs benefiting from supportive supervision continued to increase. The use of the revised integrated supervision checklist will contribute to improved quality of services provided to rural communities. Whilst the number of aid posts that are open has a significant impact on access to health services by rural communities, the numerous factors which affect this indicator are unlikely to be influenced by support from the UN agencies. Ten PNG nationals benefited from short- and long-term health fellowships which contributed to the number of specialist trained practitioners in PNG. By the end of 2012, all the 5 provinces implementing the Provincial Health Authority health reform agenda to improve the quality and management of health care services had inaugurated their management boards. The target for additional provinces implementing the Provincial Health Authority has now been revised downwards. This reform aims to achieve efficiency gains in service delivery by integrating the management of rural health services and hospital services under one authority.

Weak procurement and distribution system have resulted in shortages of quality essential medicines and medical supplies in PNG. Where these are available they are often of substandard quality. The UN assisted the NDOH in the selection, quantification, and procurement of the new “100% medical kit” from a reputable international NGO. In 2012, a total USD 24 million worth of medical supplies were distributed twice every 4 months to 743 Health Centres and hospitals and once to all the 1995 Aid Posts around the country.

Access to essential medicines is closely linked to their selection based on morbidity and mortality data and their national use by prescribers. The UN assisted the NDOH to update the adult Standard Treatment Guidelines, Medicines and Dental Catalogue, which haven’t been updated since 9 and10 years, respectively, and the first publication of PNG National Medicines Formulary which will contribute to efficient and equitable use of available resources and access to safe and effective use of medicines by consumers of health services.

Significant progress was made in building the capacity of laboratory services to effectively support the diagnosis of patients in PNG. In 2012, 10 laboratories in the ARB has increased community access to improved laboratory services and improved the quality of treatment of patients. Since a majority of pregnant mothers die from bleeding during pregnancy and delivery, the distribution of cold chain equipment for blood banks in ARB has contributed to efforts to reduce maternal mortality in ARB. The training of 40 laboratory staff in a number of specialized areas contributed to a significant improvement in the quality of laboratory services, patient diagnosis and treatment. Safe blood transfusions are a major component in the treatment of pregnant women with bleeding complications and victims of disasters and traffic accidents. A draft National Blood Policy and 5 year strategic plan which were developed and the reorganization of Blood Transfusion Services in PNG will facilitate improved patient access to safe blood and blood products.

Non-communicable diseases such as diabetes and hypertension are a major contributor to deaths in PNG. The NCD forum convened in 2012 brought together the various sectors that can contribute to the prevention and control of NCDs in PNG and promote healthy lifestyles.

9. Education

Consortium Agency: UNICEF

Net enrolment rates at basic education level (Preparatory to Grade 8) have increased from 50% in 2007 to 75% in 2010. However, female net enrolments continue to lag behind males (73% to 77% in 2010). At provincial levels, gender disparities are larger. The Highlands region showed 85 girls in primary school to every 100 boys. Inherent gender discrimination has been identified as a key impediment to increase female access and completion at all levels of the education system.

UNIVERSAL BASIC EDUCATION

The UN supports the DOE to update the Education Management Information System and school census. These help to monitor the progress of the UBE plan by addressing issues of access, retention, quality and equity based on the Performance Assessment Framework.

Education officers at the district level have also acquired the skills to set up Education Management Information System databases. This facilitates DOE to understand education trends from 2007 to 2011 and make informed decisions in relation to the UBE plan. For instance, the pupil to teacher ratio in 2011 was 44 to 1 teacher compared to 36:7 in 2007; instead of decreasing it has increased in the past four years, whereas the target is 32 students to one teacher. DOE is strategizing to address such issues effectively during the Strategic Planning and Monitoring forum with national education planners and all provincial education planners in 2013.

With the UN’s continued support, the school management and financial management skills acquired by different levels of management at the school, provincial and national levels will contribute to an improvement in the quality of education in primary and secondary schools in coming years. All 86 District education administrators will also be capable of monitoring and reporting on equity aspects. Monitoring will be undertaken down to the school level where head teachers will carry out school self-assessments that will take care of quality and equity issues.

EDUCATION IN EMERGENCIES AND DISASTER RISK REDUCTION

With UN support, the DOE is the first sector to have a policy on education in emergencies and DRM followed by the repositioning of essential non-food items for 13 vulnerable provinces as part of emergency preparedness.

The launch of the Education in Emergency and Disaster Risk Management Policy, supported by the UN, resulted in sensitization of all provincial education advisors on the importance of developing individual provincial emergency plans. Half of the 22 provinces have already developed provincial emergency plans, with the remaining half planned for 2013.

Education officers and teachers still lack the capacity to implement the policy. All provincial emergency education focal points will be established by 2013, followed by earthquake mock drills, awareness on non-structural hazards and first aid training done in 15 selected schools.

The UN supported the Government of PNG in pre-positioning non-food items as part of emergency preparedness, as 100 schools in a tent, 330 school in a box, 2,500 emergency family kits and 1,000 blankets were procured for DOE for 13 vulnerable provinces. An Provincial Education Board will accommodate around 30 students, replaces a damaged classroom to help children continue with their schooling and bring an element of normalcy to their lives during an emergency. One school in a box contains teaching and learning materials for 40 children that can be used in two shifts for 80 children.

Since this is the first time the Government of PNG is managing such an initiative, the provisions were procured on a small scale and will increase later. Effective management and distribution of these items to schools needs to be emphasized.

The UN supported the development of Riskland game, a fun and educational board game that conveys messages to help children understand how some actions can reduce the impact of disasters while others can increase vulnerability. The game was initially distributed to 21 provincial education advisors and 15 primary schools. Distribution to the remaining schools will be completed in 2013. This will help to educate children on disaster risk reduction and prepare them for emergencies.

CHILD FRIENDLY SCHOOLS

The Child Friendly School concept addresses issues of gender responsiveness, inclusiveness and access among others, for deprived and marginalised children to quality education to support the implementation of the UBE Policy. With UN support, more than 160 primary school head teachers (40%) in five provinces were trained in the Child Friendly School concept. As a result, around 63,000 elementary and primary school students are benefitting from child-centred learning, understanding personal safety and hygiene, engaging with the community, improving their morals and ethics, learning social skills and participating in extra-curricular activities. A training of teachers on behaviour management resulted in over 24,000 primary school children in the Highlands region receiving guidance on how to achieve their learning goals, manage conflict amongst them and address their personal problems.

Support of Child Friendly School is being aligned with DOE’s initiative on School Learning and Improvement project which mainly addresses child-centred learning and school governance aspects. Fifty one female and 70 male teachers from primary and secondary schools at provincial level, and 26 DOE officers are proficient in school based counselling. Consequently, more students will become self-reliant and motivated to continue schooling.

A recently conducted Child Friendly School assessment confirms that different Child Friendly School components are currently being implemented in different schools across several provinces instead of being consolidated in the same schools. In 2013 the UN will strategize to ensure that minimum standards of this concept are executed as a package in a school.

The Global Partnership for Education supports the Reading Education Project for which the UN is the Coordinating Agency and the World Bank is the Supervising Entity. Aimed at increasing the availability of books and learning materials to promote reading and to undertake Early Grade Reading Assessment, this project is improving education quality as primary school children are increasingly becoming skilled in reading.

The results from the 2010 Household Income and Expenditure Survey show a high level of gender disparity, both at the enrolment and primary school completion levels especially in the Highlands region – only 60% of girls enrolled compared to 73% boys. The reason of ‘family did not allow’ was given for never attending school for 20 per cent of girls never enrolled, compared to 12 per cent of boys.

The UN supported the Government of PNG to train gender focal point at provincial level to increase awareness of the importance of girls going to school. In 2013, twl also support a qualitative assessment in this region on why girls do not enrol in schools and drop out of primary school. These findings will...
help DOE to introduce effective interventions. The Accelerating Gender Equity in Education National Steering Committee to support the work of Gender Focal Points for DOE and provinces has been revived. To maintain focus on gender equity in the education sector, the Accelerating Gender Equity in Education Committee from 2013 will be one of the technical working groups of the Education Sector Improvement Programme which is within the framework of the Sector Wide Approach.

The country has a Gender Equity in Education Policy and a Gender Equity and Strategic Plan 2009-2014. However, the capacity for its coordination, implementation and monitoring is limited. The recruitment of a Gender Officer in DOE has been delayed which slowed down implementation at the national level. In 2013, DOE will recruit a gender focal person.

The UN System will collaborate on the gender audit and will help develop the gender training manual. DOE staff and provincial education advisors in three provinces will be trained to mainstream gender in education and facilitate implementation of the policy.

With UN support, 17 of the 26 special education resources centres trained staff (20 females, 16 males) to address early intervention on special learning needs of children. These are inclusive centres in remote areas for children aged 4–6 years. The Centre’s staff was trained to perform ear and eye screening in schools and initial centre-based rehabilitation responses with those screened, and to make referrals as required. The staff is learning to practice care, safety and protection for children particularly vulnerable due to disability. With support provided to the Applied Diploma course on special needs education focusing on hearing impairment, there will be an increased number of teachers for children with learning challenges. Education officers are becoming sensitized on the need for more inclusive schools.

National curriculum and training materials are adapted for children with disabilities. A baseline survey will be undertaken in 2013 to assess the age range of children with different types of disabilities attending mainstream education and special education resources centres in eight selected provinces, to introduce strategic interventions. Limited number of staff with knowledge and skill on special educational needs in DOE is hampering effective programme implementation. DOE relies on a faith-based organisation, Callan Services National Unit to provide training and related teaching and learning materials. DOE has included early childhood care and development in all 22 provinces, and is reviewing the introduction of early childhood care and education in the National Education Plan to be implemented in 2014 and is reviewing the introduction of early childhood care and education as part of basic education.

Parents are unaware of the benefits of sending children with special needs to schools and are concerned about children being harmed by others. The Government of PNG needs to improve coordination and allocate sufficient funds to include special education services, inclusive infrastructure, and specialist training. The UN will support DOE in raising awareness among people at large and policy makers; establish a network; and review the existing policy on Special Education to include special education need of children.

LITERACY

In the 15-24 year age group, only 70% of men and 65% of women are literate. That is far below the average rate compared to the Pacific region which is 91% and 92% for girls and boys respectively. In the Household Income and Expenditure Survey 2010, 66% of men compared to 57% of women consider themselves literate (can read and write). Significant regional variations are found with women quite close to literacy parity in the Island region but very far behind in the Highlands region.

Non-formal education programs and opportunities for second chance education are limited, with no linkages into the formal education system. The demand for literacy is not there and neither are services available to address the literacy needs in the country.

The overall implementation of UN supported activities was stalled due to delayed liquidation issues in DOE. The UN facilitated the raising of awareness on the importance of improved literacy in children’s education during the National Literacy week which started on the International Literacy Day. In 2013, the UN will support the National Literacy and Awareness Secretariat in the DOE to review and revise the National Literacy Policy.

EARLY CHILDHOOD CARE AND DEVELOPMENT

To address low completion rates at primary level, the UN is advocating for early childhood care and development to ensure school readiness and right-age enrolment. The DOE included early childhood care and development in the National Education Policy for 2014 implementation.

With UN support, the Department for Community Development is taking the lead to undertake a baseline survey on early childhood care and development in all 22 provinces, and is in the process of reviewing the relevant policy in 2013. The current policy does not indicate clear roles for early childhood care and development in departments like Education, Health, Labour and Employment, National Planning and Personal Management, which consequently don’t have personnel in place to manage issues on early childhood care and development. The inter-sectoral working group will be revived to help improve coordination amongst stakeholders.

DOE has included early childhood care and development in the National Education Plan to be implemented in 2014 and is reviewing the introduction of early childhood care and education as part of basic education.

An increased interest in by the Government of PNG in early childhood care and development is the result of UN’s continued advocacy since the 2010 national consultation identified early childhood care and development roles of relevant departments. The PNG Education Advocacy Network also advocates for early childhood care and development to be a national priority.

There are no nationally validated early learning development standards in place. The University of Goroka initiated the use of standards in its pilot early childhood care and development centre. In 2013, the UN will support the Government of PNG to develop indicators based on early learning development standards that was validated for East Asia and the Pacific region with the help of the University of Hong Kong and Asia Regional Network on Early Childhood.

There are many private early learning centres in urban areas. The demand for such centres in rural areas is absent since parents are not aware of the benefits. Once the early learning development standards and indicators are in place, early childhood care and development centres will be established in rural settings in selected provinces in 2013, before going to scale.

10. Environment, Climate Change and Disaster Risk Management

Contributing Agencies: OCHA, UNDP, UNFPA, UNHCR, UNICEF, UN Women

ENVIRONMENT CLIMATE CHANGE AND SUSTAINABLE DEVELOPMENT

The UN provided technical, policy, strategic advisory services to the Government of PNG to scale-up national interventions to achieve environmental sustainability and address emerging threats of climate change with an emphasis on community empowerment. This led to programmatic guidance sought from the UN by the DEC to promote environmentally sustainable economic development through increased recognition of the ecosystem values and highlight development needs of isolated rural communities who are custodians of vast biodiversity of PNG. This was a paradigm shift of the Government of PNG to focus its interventions to explore income earning opportunities for communities as alternatives to the rapid natural resource exploitation by the extractive industries, given the Governments export driven policy to promote economic growth. As a result, the UN and DEC have initiated implementation of a pilot project titled “Community-based Forest and Coastal Conservation and Resource Management in PNG, worth USD 29 million. The funds were mobilized from the Government of PNG, Global Environment Facility, AusAID and Bishop Museum.

In addition, the Government of PNG has collaborated with the World Bank and Oil Palm Industry Cooperation to design a national Oil Palm Code of Practice following the UN’s intervention through Capacity Building for Sustainable Land Management Project with DEC. Similarly, DEC has taken the lead to finalise the Environmentally Sustainable Economic Growth Policy following a series of advocacy and capacity building efforts on environmental mainstreaming. Finally, the UN provided substantive comments on the draft discussion paper for the national Protected Areas Policy for PNG.

The UN provided similar support and services on climate change to the Government of PNG through the Office of Climate Change and Development. This contributed to Office of Climate Change and Development mobilizing USD 0.3 million from Adaptation Fund to implement pilot integration of climate change adaptation and disaster risk reduction through policy formulation, preparedness, response plans and strategies to enhance the capacity of agencies and officials of the public and private sector, civil society organisations and vulnerable communities of the North Coast and Island Region of PNG.
As a result of the partnership for institutional strengthening, the UN provided technical and policy support for the design of PNGs draft national Climate Change Policy which is expected to be endorsed in 2013. The policy, once approved by National Executive Council, will provide the overall policy framework to guide future climate change investment and actions in the country. Similarly, UN System continued to support and facilitate capacity building and knowledge sharing with the Asia Pacific region for public, private and civil society organisations on how to reduce emissions from deforestation and degradation. The UN will continue to support the development of a national strategy followed by Benefit Sharing Distribution System and Free Prior Informed Consent guidelines.

Aligned to the Government of PNGs commitment of meeting UN Convention on Biological Diversity and UN Convention to Combat Desertification targets, the UN/Global Environment Facility Small Grants Programme (SGP) has worked with communities in new and existing PAs and Community Conserved Areas with an aggregate of 1.923 million hectares for this year alone. At present, less than 4% or 1.9 million hectares is under the terrestrial Protected Areas (PA) system while less than 0.07% covers terrestrial waters or 280,000 ha is classified as a Marine Protected Area (MPA). As a result, SGP completed and even exceeded targets set for 2012 with the commitment of USD 157,524 financial grants to new 14 community-based conservation initiatives. More than 80 women are undergoing training on disaster risk reduction and adaptation. Likewise, SGP supports the establishment of field schools for an extensive hands-on, practical forest management field training of students and adults alike. Four (4) community-based organizations enable local residents to directly apply the theories they learn in the classroom on coast/forest management for Kasing and forest ecosystems in Abaipa of Arfij and Chimbu. In Chimbu, SGP subsidizes school fees of 119 indigent students from Grades 7-12 across Mindinge, Chimbu, of which 32% or 39 students are girls. Through the forest restoration project of United Nations-Geod-Gor Incorporated, at 6 schools advocates for environmental education. As youths plant, clear and monitor trial plots, school fees, are directly deposited by the SGP grantee into the respective schools bank account to ensure their studies are completed.

Other contribution of SGP on conservation and environmental management includes:
1. Conservation of rare and endangered species as well as their habitat and nesting sites, namely the leatherback turtle and dugong in Huon Coast and Wasu of Momere and Gidipasi coast of Madang. Support sustainable habitat in the YUP conservation area and Torricelli Mountain Range;
2. Support processes leading to its gazettement include carrying out biodiversity assessment for the proposed Katiruul conservation area straddling the provinces of Chimbu and Eastern Highlands, and social impact studies carried out in villages around the Carter Mountain WMA, Hovape Conservation Area near Mt. Michael of Eastern Highlands, Keapoki village along the Maghi Highway in Central Province and the Telefomin village of Sanduan Province;
3. Promote increasing forest and non-timber forest resources, particularly ecotourism schemes, for Wakiun in Central Bougainville and Namatana district in New Ireland; and mangrove rehabilitation in the Madang Lagoon and for Nuikata, Isam and Pahidele Islands of Milne Bay.

A total of 110 women accessed skills training from a target of 20 women benefiting from capacity development support in environment, climate change and sustainable livelihoods initiatives. More than 60 women are undergoing training on sustainable farming practices and 30 women or 31% of 96 participants in SGP-led community consultations were carried out to assist grass root organizations in the provinces of Madang, Manus, New Ireland and Morobe. The UN contribution through the SGP to reach these vulnerable communities severely affected by the increasingly observed direct and indirect impacts of climate change, and assist community groups in their submission of concept papers to SGP which relate to Global Environment Facility focal areas, e.g. biodiversity conservation, land degradation and climate change adaptation. Likewise, SGP supports the establishment of field schools for an extensive hands-on, practical forest management field training of students and adults alike. Four (4) community-based organizations enable local residents to directly apply the theories they learn in the classroom on coast/forest management for Kasing and forest ecosystems in Abaipa of Arfij and Chimbu. In Chimbu, SGP subsidizes school fees of 119 indigent students from Grades 7-12 across Mindinge, Chimbu, of which 32% or 39 students are girls. Through the forest restoration project of United Nations-Geod-Gor Incorporated, at 6 schools advocates for environmental education. As youths plant, clear and monitor trial plots, school fees, are directly deposited by the SGP grantee into the respective schools bank account to ensure their studies are completed.

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**DISASTER RISK MANAGEMENT**

While the vulnerability to hazards and associated disaster risks are very prominent PNG, there are many challenges that the country is facing on different fronts in relation to effective management of disaster risks. Coordination between Government of PNG agencies on the one hand and also with non-Government partners, donors and international development partners continues to be a challenge. The DRM institutional framework is weak and there is a need to strengthen the current institutional or governance arrangements for DRM so as to improve interaction and dialogue on matters of emergency response and as well on disaster risk mainstreaming into planning and budgeting. The low profile of disaster risk reduction in existing discourse is a challenge that needs to be addressed. In PNG National development budgets are often diverted to address relief and rehabilitation arising from major disaster events. As a result planned development programmes are compromised. The challenge is to provide a range of opportunities through targeted interventions to highlight the importance of planning with hazards and related risks in mind when considering development activities. There is a need to strengthen the capacity of key agencies to more meaningfully address the issue of disaster risk. There is a need for a more comprehensive approach to DRM at the provincial level whereby local stakeholders can be mobilized to identify the root causes of vulnerability and risk and to identify measures to address these. There are gaps in the ability to carry on risk management and the support of the decision-making by Government of PNG and non-Government agencies. There is also a corresponding challenge to ensure that a systematic approach is established to ensure that national/ sectoral and other agencies are aware of the existence of this hazard and risk information and know how to act on this to strengthen advice in relation to the planning of development interventions.

In the above context, the UN in the year 2012 worked with the National Disaster Centre to improve the overall DRM system in PNG. The overarching strategy of the UN was to systematically incorporate hazard consideration into development planning and budgetary process and strengthen the Governance arrangements relating to DRM. Particularly, UN provided support to the National Disaster Centre to improve its disaster preparedness and response capacities public awareness and education programmes. Capacity building of provinces to effectively manage disaster risks was also one of the strategies of the UN.

In line with the above strategy, the UN provided policy and technical support to strengthen the DRM institutional arrangements through the development and Government of PNG endorsement of a National DRM Plan. The Plan provides an institutional framework for DRMs at all levels and paved the way for the revision of the existing DRM legislation. With the technical assistance from UN, for the first time, the Government of PNG has reviewed its progress and challenges in the implementation of disaster risk reduction and recovery action undertaken at the national level, in accordance with the Hyogo Frameworks priorities. This has renewed the Government of PNG to refocus on its efforts to strengthen its capacities and to identify strengths and gaps in relation to DRM. The findings from the review will help Government of PNG for forward planning.

In order to strengthen response and preparation mechanisms within and between the Government of PNG and the Development Partner Community, the UN facilitates the Disaster Management Team, which is an inter-agency body made up of participants from Government of PNG, UN agencies and NGOs that coordinate emergency preparedness and response in PNG. As a result of 2012 efforts, membership of this coordination mechanism has increased with more number of partners/ agencies.

The Disaster Management Team finalized an inter-agency National Contingency Plan for PNG and tested the Plan through a simulation exercise. As a result of this exercise, coordination gaps were highlighted and managed in times of emergencies that occurred in the year 2012. As a follow up to the Contingency plan, the UN facilitated the conclusion of a series of Humanitarian Clusters/Working Group (Protection; Water, Sanitation and Hygiene; Non-food Items and Emergency Shelters; and Health). The establishment of a Cluster System in PNG has improved coordination amongst government agencies, donors and development partners (specifically, the inclusion of or leadership by the respective government agencies). Following several disasters which occurred in 2012 such as floods, the passenger ferry incident, and landslide, the UN assisted the National Disaster Centre in reviewing and improving its response capacity through a lessons learnt workshop.

As part of its capacity building effort, UN provided training to 31 PNG Red Cross staff on protection in DRM which has resulted in enhancing the understanding of the Red Cross on the issue. The UN also conducted a three-phase Learning Programme on Protection in Emergencies, 30 disaster managers and/or responders from the national Government of PNG, provinces, NGOs and UN have a better understanding of protection and activities to be carried out in case of an emergency. The learning programme further assisted in the drafting of the protection input for the National Contingency Plan, as well as equipped provincial participants to revise or include protection when drafting their provincial contributed plans. Together with colleagues from the National Disaster Centres Training Team, the UN designed and delivered a training module on protection in DRM as part of National Disaster Centres Community Based DRM training course which was successfully piloted in West New Britain in June 2012 for 20 participants including members of West New Britain’s Provincial Disaster Committee, NGOs and the Private
Sector. This module is ready to be rolled out in other provinces. The UN has provided training to 25 humanitarian responders in Sexual Reproductive Health that has resulted in enhancing the awareness of disaster responders to mainstream the issue in disaster response.

UN also supported the development of a five year DRM strategy and costed the budget requirements for the National Disaster Centre. As a result, Government for the second consecutive year has allocated PGK 3 million for DRM from its development budget. Part of the funding has been invested to improve community resilience through investment in local risk reduction measures.

The launch of the Education in Emergency and DRM Policy, supported by UN, resulted in sensitization of all provincial education advisors on the importance of developing individual provincial emergency plans. Half of the 22 provinces have already developed provincial emergency plans, with the remaining half planned for 2013. UN has supported the Government of PNG in pre-positioning non-food items as part of emergency preparedness plan by pre-positioning 100 schools in a tent, 330 schools in a box, 2,500 emergency family kits and 1,000 blankets in 13 vulnerable provinces. One school tent can accommodate around 30 students and can be used as a classroom that is damaged or destroyed and help children to continue with their schooling. A Riskland game developed by the UN has been distributed to 15 primary schools that will help to educate children on disaster risk reduction and prepare them for emergencies.

With UN lobbying and technical support, the Office of Security Coordination and Assessment of the Department of the Prime Minister initiated and made – despite slow-down during the General Elections - major progress towards a National Security Policy that looks at both conflict and disaster issues in the broader context of human security. UN also facilitated the first multi-stakeholder Steering Committee for the formulation of a National Human Development Report on Natural Resource Management and Human Development. Research started in 2012 and will feed into the 2013 publication, which will provide policy options and recommendations for the Government of PNG in this area.

A 10-person PNG delegation of Government and civil society representatives participated in a Pacific regional exchange with Fiji, Solomon Islands and Tonga on ‘Capacities for Peace and Development'. This helped the members - active in local peace initiatives - develop their skills to lead, design and facilitate inclusive and participatory dialogue processes by exchanging tools, conceptual frameworks, lessons learned and good practices of Pacific approaches. This mentored small grants scheme, resulted in four local peace agreements and initiatives in four provinces of PNG and is the first step towards a broader PNG network for ‘Peace and Development'.

THE UN DELIVERING AS ONE IN PNG

In 2012, the UN marked the first year of implementation of the UNDAF 2012-2015, which is the second joint programme where the UN coordinated human and financial resources under the Delivering as One modality. This Chapter provides a holistic analysis of the UN System’s progress on Delivering as One in the context of the management arrangements which support implementing our programmes.

ONE PROGRAMME

The UNDAF 2012-2015 was signed in 2012 by the Minister for National Planning, on behalf of the Government of PNG, and the Resident Coordinator, on behalf of the UN System. The UNDAF was developed as a result of extensive consultations with key line ministries and with other Development Partners - to ensure coherence and maximum alignment with national priorities. The UNDAF 2012-2015 is supported by a single UNDAF Action Plan and a single Results Matrix. The UNDAF is gender mainstreamed and integrates a Human Rights-Based Approach into its Results Matrix.

The UN Results-Based Management Committee has further reduced transaction costs by following on the recommendations from UN Headsquarters, donor partners as well as the Programme Coordination Committee, and by reducing progress reporting from quarterly to bi-annually. The rationale for this decision is to streamline the preparation and review of quarterly reports where the interval in the reporting period is minimal. The Task Team structures and joint planning processes have reinforced inter-agency dialogue and planning and alignment with regards to programming. The Joint Annual Work Plan process has reduced duplication of programming efforts between agencies, as well as reduced reporting requirements.

ONE BUDGET | PNG UN COUNTRY FUND

Over the past year, one hundred per cent of resources mobilized in-country for the Joint Annual Work Plans were allocated through the UN PNG Country Fund, with the exception of core agency resources. The functioning of the “One Fund” represents positive progress on the harmonization of resource mobilization efforts across the system and is a milestone in terms of global progress on implementing Delivering as One. In 2011-2012, both Australia and New Zealand, the two largest bilateral donors to PNG, channelled the sum total of their financial contributions to support UN Programmes through the PNG UN Country Fund. In July 2012, AusAID commissioned an independent review of the PNG UN Country Fund and One Programme mechanisms, which concluded that AusAID should continue working with the UN through Delivering as One, channelling funds through the PNG UN Country Fund and should initiate multi-year funding to increase efficiency.

ONE COMMUNICATIONS

The UN Communications Group (UNCG) aims to support the UN System by increasing awareness and understanding of UN work and Delivering as One principles internally and with donors, partners and the general public. The UNCG in PNG consists of focal points from each agency. By far, the most successful activity for the UNCG in 2012 was the outreach and visibility around UN Day. For example, one activity included the UN4U school visits programme. Close to 1,500 students learned about the UN when 13 UN staff visited 11 schools in Port Moresby to discuss the UN and development priorities in PNG. As part of the visits students were asked to fill out slips of paper answering the question ‘What is the future YOU want?’ to contribute to the national consultation process the UN will be conducting around the Post-2015 Global Development Agenda. UN Day activities received wide coverage in the local and regional media such as newspapers, TV and radio, and the Resident Coordinator conducted a number of radio interviews in PNG and Australia.

In addition, in 2012 the group continued to meet with the media through informal UN-coordinated get-togethers for the media and development communication practitioners. The goals of the get-togethers are to increase the media’s capacity regarding reporting on development issues and to raise awareness around UN work in PNG. The UN will be partnering with the EU for these get-togethers in 2013. There was a marked increase in media articles and broadcasts that referenced the UN or UN agencies, up from approximately 200 in 2011 to nearly 350 in 2012.

ONE OPERATIONS

The inter-agency UN Operations Committee is comprised of Operation Managers from the UN System. Their mandate is to foster already existing common services and to increase common operations in order to reduce cost and improve on operational efficiencies across the UN System in PNG. In 2012, the UN Operations Committee initiated steps to lower the exorbitant travel cost for PNG for the UN System by agreeing to units in soliciting travel services from select vendors, thereby allowing for a discount to be offered to the UN System per vehicle. In addition, the Committee negotiated and eliminated banking fees for the UN.

UN HAUS

A UN Haus will allow the co-location of all UN agencies in PNG in one single building. Having all agencies in one building will further support the easy implementation of joint UN Operations. In 2010, the Government of PNG has presented the UN System with a land deed for the construction of a purpose-built UN Haus in the heart of the Government of PNG administrative district of Waigani. Despite the Prime Minister’s call on UN Day in 2012 for land to be granted to the UN, issues related to transfer of the title from the Lands Department are still to be finalized.

CHALLENGES AND RECOMMENDATIONS

The programme delivery in each of the ten programme areas is diverse, yet there are commonalities in the challenges experienced by the UN System in delivering on programmes. The UN System documents these challenges in order to mitigate issues and identify solutions. This chapter provides an overview of the most common challenges of 2012 as well as the recommendations to alleviate these.

Increased cost of working in PNG: The overall available resources have not increased between 2010 and 2012, while the cost of operating in PNG has increased significantly. In order to mitigate this risk, resource mobilization efforts have continued, both within the UN System, as well as outside, such as Government of PNG cost-sharing, pursuing non-traditional donor funding and public-
private partnership. Please see below for a sample of specific challenges:

- **PNG UN Country Fund**: While AusAID continued contribution to programmes where multi-year commitments were previously agreed, the UN was informed mid-year, after annual work plans were already signed, that AusAID funding for the PNG UN Country Fund would not be forthcoming in 2012, leaving several thematic areas with unanticipated funding gaps.

- **Environment**: A high cost of programme implementation in PNG impedes service delivery at the community level.

Enabling environment to work with implementing partners: Effectiveness of delivering programme with implementing partners and Government of PNG counterparts was an issue in 2011 and remained an ongoing challenge in 2012. Political instability, leadership changes and shifting priorities continued to stall programme implementation, leading up to and after the national elections. Existing mechanisms, which foster national ownership, such as, the design, implementation and reporting on annual work plans support implementing partners with capacity building. Nevertheless, the challenges raised above require due diligence in order for the UN to be empowered to work effectively with implementing partners. Please see below for a sample of specific challenges:

- **Bougainville**: The enabling environment for effective draw down of powers depends on the decisions made by the Joint Supervisory Board overseeing the autonomous arrangements. With this forum not having met in 2012, targeted technical support to ABG Divisions is challenging.

- **Child Protection**:  
  
  + Statistics from implementing partners are slow in reaching UN which makes reporting challenging.
  
  + Leadership changes at Department for Community Development and staff turnover has slowed down roll out of Lukatim Pikininhi Act and most vulnerable children and Birth Registration implementation.

- **Education**: The overall implementation of UN supported activities was stalled during the year due to delayed liquidation issues in DOE.

- **Environment**: Lack of clarity and cooperation among government departments. Lack of clarity and guidance to facilitate readiness Reducing Emissions from Deforestation and Forest Degradation institutional and management arrangements for a national Framework for PNG.

- **Gender**: Implementing partners are increasingly outsourcing most of their activities to local partners and agencies for implementation, sometimes over scheduling these activities.

- **Health**: Restructuring of the NDOH took too long to complete, resulting in loss of experienced staff and institutional memory.

- **HIV and AIDS**:  
  
  + NDOHs inability to recruit and retain staff is impacting many areas including supplies of medicines and commodities and the supply chain

  + Shifting Government of PNG priorities has meant that limited staff resources have been drawn away from planned activities to new priority Government of PNG programme areas (for example PPTCT programs on hold while staff participated in supplementary immunisation programs.)

  + The Special Parliamentary Committee on HIV and the National AIDS Council, two key implementing partners in law reform were largely non-functional during 2012.

  + The Chair of the Technical Working Group on Law Reform and the only member who was a politician, Dame Carol Kidu, retired. A replacement chair is yet to be identified. Legislators and leaders continue to choose not to recognise or prioritise law reform related to sex work and MSM.

  + Poor quality, accuracy and timeliness of surveillance strategic information due to serious management and capacity issues in the NDOH HIV surveillance unit.

Programme related bottlenecks: Besides an enabling environment in partnerships, the UN System experienced additional programme related bottlenecks which impede further programme delivery. While there is no ‘one size fits all’ solution, the UN promotes the concept of decentralized development planning which is helping to change attitudes and mindset within leadership of the Government of PNG and appreciation of the risks associated with ad hoc planning and ‘quick fixes syndrome’. Please see below for a sample of specific challenges:

- **Bougainville**: The absence of a proper development framework to guide the development of Bougainville, as the Mid-Term Development Plan is not yet finalized.

- **Disaster Risk Management**: Mainstreaming of disaster risk reduction into key development sectors as well as capacity to carry out comprehensive assessment of risk to support planning and decision-making by Government of PNG and non-Government agencies remains a challenge.

- **Environment**: Lack of capacity at community level to access resources including funding for community-based environment and climate change interventions.

- **Gender**: Coordination and timing are dependent on availability and readiness of the communities, which do not always happen as planned.

- **Human Rights**: Human rights defenders face harassment and threats due to their work to protect victims (particularly regarding sorcery-related violence). Continuation of political instability

- **HIV and AIDS**: The capacity of groups more at risk of HIV to lobby and advocate using their collective voices to bring about change remains extremely low.

- **MDGs, Population and Coordination**: District and LLG areas deserve the greatest attention, given that they are rural and most marginalized from development benefits. At the same time, project implementation at the sub-national level is time and cost intensive, due to infrastructural and security challenges.

### ANNEX I: EXPENDITURE RATES BY INTER-AGENCY OUTCOME

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<th>EXPENDITURES</th>
<th>EX RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcome</td>
<td>Core Available</td>
<td>Non-Core Available</td>
</tr>
<tr>
<td>1. Governance</td>
<td>266,000</td>
<td>–</td>
</tr>
<tr>
<td>2. MDGs, Population and Coordination</td>
<td>872,424</td>
<td>424,560</td>
</tr>
<tr>
<td>3. Peace building - Bougainville</td>
<td>785,990</td>
<td>169,680</td>
</tr>
<tr>
<td>4. Human Rights</td>
<td>451,620</td>
<td>209,860</td>
</tr>
<tr>
<td>5. Gender Equality and Women’s Empowerment</td>
<td>630,069</td>
<td>246,746</td>
</tr>
<tr>
<td>7. HIV and AIDS</td>
<td>463,800</td>
<td>1,241,816</td>
</tr>
<tr>
<td>8. Health</td>
<td>1,406,749</td>
<td>6,740,075</td>
</tr>
<tr>
<td>9. Education</td>
<td>23,540</td>
<td>1,205,744</td>
</tr>
<tr>
<td>10. Envi. Climate Change and Disaster Risk Management</td>
<td>1,206,137</td>
<td>1,010,083</td>
</tr>
</tbody>
</table>

**TOTALS**: 6,220,679 | 11,495,684 | 6,270,124 | 23,986,446 | 5,986,920 | 9,227,627 | 5,226,239 | 20,140,778 | 84%