



Millennium Development Goals: Is Papua New Guinea meeting them?



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The National Disability Magazine

What a year 2009 has been for Disability in Papua New Guinea!

Congratulations to all individuals, disability organizations, stake holders, partners and others that have fought long and hard for the rights and well being of Persons with Disabilities and their families this year.

In June, the disability society marked another milestone, when the National Disability Policy was launched. Showing that disability issues in the country is finally getting the attention it deserves from our National Government.

Also early this month, the PNG Assembly of Disabled Persons launched its Strategic Plan 2010 - 2014. Congratulations to the Chairperson of PNGADP Ipul Powaseu and the team. Let us all look forward to the fruition of both policies.

In this last issue of TNW for 2009, we are looking at the UN Millennium Development Goals and how far Papua New Guinea is in its progress of achieving this 8 goals.

The goals were set in 2000 and are supposed to be achieved by 2015. We have only six years before the deadline. Do we have enough time? Do we have the capacity? Can we still make it?

Find out in this edition our progress and how we as individuals, organisations and communities can contribute to achieving the MDGs.



I would like to thank all individuals, organizations and partners who contributed to this last issue. Especially to Pacific Disability Forum, Save the Children, Institute of Medical Research, Alotau General Hospital and VSO as well.

I would also like to appeal to our individuals and partner organizations please share your activities, news and other interesting stories so that we can all learn from them and work to together to improve and build our Disability sector in Papua New Guinea.

May you all have a Merry Christmas and we look forward to a more fruitful 2010 for Disability in PNG!

Editor,
Bonnie Abola

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What is The Network

The Network started in 2004 is a quarterly magazine for all people involved and interested in the disability sector in Papua New Guinea

The aims are to empower, share views, and spread accurate and inspiring information about disability in the country and abroad.

The Network is one of the activities of the National Disability Resource & Advocacy Centre. The magazine is free-of-charge, however we do like to encourage anyone who can to make donation.

The production of this national disability magazine is supported in different ways by,

- > Divine Word University
- > Creative Self-Help Centre
- > Voluntary Service Overseas
- > Callan Services
- > Government of Papua New Guinea

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What are the MDG's?

By Bonnie Abola

During one of the largest gatherings of world leaders in September 2000, the eight (8) Millennium Goals were born out of the Millennium Declaration.

Papua New Guinea was one of the 189 member states that committed itself to the achievement of the Millennium Development Goals (MDGs) by 2015. The aspirations that underscore the MDGs are consistent with development values enshrined in the Constitution of Papua New Guinea.

But, PAPUA NEW GUINEA is lagging far behind in achieving the Millennium Development. Poverty is reported to be increasing in both urban and rural areas. Some indicators, particularly those for health, show deterioration, while in other areas, such as education and promoting gender equality, there is little or no progress towards meeting the targets by 2015. For most indicators there is a significant disparity between urban and rural areas and among islands. One of the key issues is delivery of basic social services, which often fail to reach the poorer strata of society and rural areas.

Surprisingly though, during the information gathering and interviewing for the production of this edition of The Network Magazine, a good number of interviewees and experts did not know about the Millennium Development Goals!

This goes to show just how far behind we really are. For those who need reminding and for those who do not know, these are the 8 Millennium Goals that are to be achieved by 2015:

 Goal 1. **Eradicate Poverty and Hunger**

 Goal 2. **Achieve Universal Primary Education.**

 Goal 3. **Promote Gender Equality and Empower Women**

 Goal 4. **Reduce Child Mortality**

 Goal 5. **Improve Maternal Health**

 Goal 6. **Combat HIV/Aids, Malaria and other Diseases.**

 Goal 7. **Ensure Environment Sustainability**

 Goal 8. **Develop a Global Partnership for development.**

The first seven goals are inter-related. Poverty and hunger can be causes or effects of lack of education for children, as the main reason why children are not at school is unpaid or unaffordable school fees.

Gender equality is also a continuously debated issue; boys and men are favored more than girls and women and so they get the best of everything.

For example, boys are sent to school, and girls are expected to work and take care of the family alongside their mothers even if they are the eldest in the family.

This culture is rapidly changing and many girls have been given an opportunity for education, but many people among the 80% of the population who live in the rural areas still practice this form of discrimination against women. Papua New Guinea is an obviously male-dominated society, as shown in the Parliament where only 1 out of the 109 members is a woman, as National Politics is concerned.

Papua New Guinea has yet a long way to meet the MDGs. According to Dr Mark McGillivray, chief economist of AusAID, Papua New Guinea has failed to progress towards meeting the United Nations Millennium Development Goals in the South Pacific. But PNG is not alone; many other Pacific countries are off the track in achieving the Goals as well. Dr McGillivray pointed out as well that PNG could achieve better governance to make greater progress towards these goals.

He advises that greater government effectiveness by contributing towards higher incomes would lead to improved health and education services. He said the country was still struggling to address gender equality, and that PNG is among four other Pacific countries that had not addressed poverty issues (Post Courier, Aug 19, p. 3).

Papua New Guinea's first National Report on the MDGs was prepared in 2004, with help from the United Nations. This showed the progress being made by the country towards meeting these goals.

Although much has been achieved, there is still more work to be done if PNG is to come anywhere near attaining the MDGs by 2015.

For more information about the MDGs or the National Progress Report for Papua New Guinea log onto:

www.adp.org or www.un.org



Goal 1: Eradicate Poverty and Hunger

Sourced by: National MDG Progress Report, 2004

Papua New Guinea is really lagging behind in improving and stabilizing its poverty situation.

Consultations conducted for Priorities of the Poor indicate that the poverty situation has worsened in the last five years. Poverty in urban areas is perceived to have increased due to growing rural-urban migration mainly as a result of poor service delivery in rural areas. Other factors cited as contributing to the rise of urban poverty were price increases for food, rising school fees, higher unemployment, population growth and the lack, breakdown of and/or inadequacy of traditional social safety nets that would provide for the most vulnerable groups. In rural areas, service delivery (transport, access to markets and services such as education, health and safe water) is said to have declined while unemployment among school leavers is rising.

Based on a poverty line of US\$350 (K800) per adult per annum, 38% of the population lives below the poverty line. There are significant discrepancies between rural (41% below poverty line) and urban (16% below poverty line) areas. 75% of the poor lives in the Highlands and Sepik region. The poverty gap ratio was estimated at 33% in 1996. The most affected groups are elderly people and widows, single mothers, orphans and abandoned children and the disabled whose relatives are unable to support them.

Also the share of income or consumption held by the poorest 20% of the population was 13% in 1996. There are great regional variations. Consumption levels in New Guinea Islands are only 52% and in the Highlands region only 70% of those in the National Capital District. The Gini coefficient (a measure of inequality of income or wealth) in 1996 was 0.484 reflecting a moderate to high degree of inequality of consumption. There was a small improvement in reducing the proportion of malnourished children from 35% in 1985 to 29% in 1997.

Again, there are huge regional variations. In the Highlands region, for instance, children are 30% more prone to stunting than the national average and children from the Momase-North Coast region are 50% more affected by wasting than the national average.

In spite of the continuing emphasis of the government on poverty reduction, the very limited evidence suggests that the proportion of people under the national poverty line has not changed significantly during the last two decades of the 20th century. (It should be noted that the population of PNG has approximately doubled since that year).

In 1996, an independent Household Survey estimated that 30 per cent of the people of PNG was living below the lower poverty line of K 399 per year. This baseline figure has been adopted in the Medium Term Development Strategies. Disparities in income and even more so, in

consumption are great and is indicated by the very high Gini coefficient of approximately 0.50, the highest in the South Pacific Region. This coefficient measures the extent to which the distribution of income (or consumption) among individuals or households within a country deviates from a perfectly equal distribution. A value of 0 represents perfect equality, a value of 100 perfect inequality.

Furthermore, in 1996, the richest quintile of the population earned about 56 per cent of the entire national income. Differences in poverty at the sub-national level are also very large. The 1996 Household Survey suggests that regional poverty lines and the percentage under that line in each region differ very widely. The Northern Coastal Region has not only by far the lowest poverty line but also by far the highest proportion of people below that line.

Unfortunately, no direct information on differences in the level of poverty at the provincial level is available. However, the average life expectancy at birth can to some extent be considered as a proxy index of development and of poverty. The provincial distribution of this index suggests that differences in the degree of poverty between provinces are very large indeed with the highest levels in the provinces of the Northern Coastal Region and in Gulf Province.

Furthermore, the level of malnutrition also provides an indirect indication of poverty and hunger in PNG. Not surprisingly, the level of malnutrition of children under age five is highest in those provinces that also have by far the highest level of child (as well as overall) mortality, West Sepik and Gulf but also Milne Bay Province.



"Based on a poverty line of US\$350 (K800) per adult per annum, 38% of the population lives below the poverty line"



–Pacific Operations Centre, for agreeing to jointly fund the Ministerial meeting.

Meanwhile, Head of the UNESCAP Pacific Operations Centre, Iosefa Maiava acknowledged the Forum Leaders' support and said: "It is important that those with disabilities which constitute a significant proportion of the Pacific population have access to greater and more equitable opportunities to enhance their quality of life and fully enjoy all inalienable human rights." Mr Maiava added that UNESCAP was very pleased to assist the initiative as the Commission's goal is to promote "inclusive and sustainable development".

The PNG delegation to the Regional Ministerial meeting worked very hard and consisted of officers from the Department For Community Development, the President of the PNG Assembly For Disabled Persons and myself. While at the meeting we also took the opportunity to enter into bilateral talks with Australian Parliamentary Secretary Hon Bob McMullen (**photo**)

Readers will be pleased to know that these initial bilateral talks have been followed up with AusAID here in PNG and I also had a special meeting with the Australian Minister responsible for Disability recently when I was in Canberra on other matters.

Documentation is now in progress for the provision of specialist technical and professional support to help draft the Disability legislation and also to guide the signing and ratification of the Convention for the Rights of People with Disabilities. The timeframe we hope to keep is to have the work completed by end of 2010. One very good thing is that there has already been a lot of consultation about the disability legislation and the Convention so it is now time to get on with the task of preparing all the paper work necessary to bring these matters to Parliament.

For me, the launching of the PNG Games on 19th November has been another very significant event. I am proud that this sporting event has grown to be the largest sporting event in PNG in terms of participation and especially proud that it is an inclusive Games including disabled sporting events as well as the able-bodied sportspeople. I was really pleased to note that all of the provincial teams had their wheelchair sportspeople leading the team. A special feature at the Games Opening ceremony was a brief inspirational speech by Mr Kurt Feanley, a four times paralympic marathon gold medal winner who had just finished a 10 day walk (crawl) the Kokoda Track expedition the day before the Opening. 2009 has been a very exciting year for me because there have been many disability activities throughout the year but I am disappointed that I will miss World Disability Day this year because of some international commitments that clash with that event. I hope that 2010 will be an even more exciting year with a lot more work and a celebration before the end of the year for a new legislation and the signing of the Convention.

I wish all readers a safe and happy Christmas and New year that focuses on relaxing and celebrating with family and friends.

I am aware that this edition of the Network Magazine is focusing on the Millennium Development Goals and disability. It is important that everyone reminds themselves that the MDGs is a inclusive statement. The MDGs includes all people and so automatically is relevant to the percentage of our population that are living with some type of disability. When we marginalize and neglect the needs of 10% of our people living with disability then we certainly lower our capacity to achieve the MDGs by 10%.

Fortunately disability has gained increasing prominence in regional forums during the last year and awareness amongst leaders has improved accordingly. This was made clear at the 40th Pacific Islands Forum leaders meeting held in Cairns in August at which the Pacific Prime Ministers reaffirmed the need for more attention to be directed to the people with disabilities in the region and expressed strong support for the holding of a Ministerial meeting to consider a Regional Disability Strategy.

The meeting for Ministers with responsibility for persons with disabilities was held in the Cook Islands in October this year with support from the Australian Government and the United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP). I was proud to lead the PNG delegation to this important Ministerial meeting which for the first time combined civil society with the Ministers and bureaucrats to discuss many disability issues and to endorse a Regional Disability strategy.

In the final communiqué of the 40th Pacific Islands Forum, the Leaders stated: "The Regional Disability Strategy should focus attention on the need to address issues facing persons with disabilities in the Pacific, to build greater awareness on the importance of allowing those with disabilities access to greater and more equitable opportunities to enhance their quality of life and fully enjoy all inalienable human rights."

"People with disabilities are among the poorest and most vulnerable in the world. People with disability face many barriers to full participation in society and this is no exception in the Pacific," Forum Leaders stated.

Echoing the Leaders' sentiments, the Secretary General of the Pacific Islands Forum Secretariat, Tuiloma Neroni Slade said he was pleased with the Leaders' strong support for the meeting. Mr Slade also thanked AusAid and UNESCAP

Save the Children in Papua New Guinea (SCiPNG) is a joint programme of Save the Children New Zealand (SCNZ) and Save the Children Australia (SCA), who are members of the International Save the Children Alliance, the largest global movement for children.

Save the Children fights for children's rights. The organisation delivers immediate and lasting improvements to children's lives worldwide.

Save the Children in PNG

Save the Children has been working in PNG for over 30 years, with programmes providing significant contributions to improving the lives of women, children and communities. SCiPNG currently works in the areas of health, education, HIV AIDS, adult literacy, disability, family violence and child protection; as well as promotion of the rights of children. We are expanding with over 80 staff and operates from our country office in Goroka, as well as from project sites in Wewak, Port Moresby, Lae and Madang.

HIV & AIDS Programme

Save the Children manages projects which support in a range of important areas of HIV prevention, treatment and care, and alleviation. The intention is that component projects of the SCiPNG HIV and AIDS Programme will together form a comprehensive response. Also it is aimed that the programmatic approach will facilitate collaboration between projects, allowing lessons to be freely shared, and greater efficiency and effectiveness to be achieved. Save the Children manages projects which support in a range of important areas of HIV prevention, treatment and care and alleviation. The intention is that parts of the projects SCiPNG HIV and AIDS Programme will together form a broad response.

Save the Children implements targeted HIV prevention interventions, the Youth Outreach Project, and the Poro Sapot Project and with three of the country's most at-risk groups: out-of-school youth, women in sex work, and men who have sex with men. By reducing HIV transmission amongst the groups which are most vulnerable to its spread, Save the Children helps with reducing the HIV epidemic's future impact on all children



Youth Outreach Project (YOP)

The Youth Outreach Project operates with an aim to improve and promote the availability of educational materials on sexual health, relationship, and the prevention of HIV/

AIDS appropriate for urban and rural young people in PNG. The project focuses on peer education in order to deliver right information on HIV/AIDS through formal and informal networks. This way HIV/AIDS awareness will be carried out in schools, settlements, villages and urban communities. Madang is one of the project locations of the YOP of Saven the Children in PNG under the funding from Unicef. The project does awareness, peer education and advocacy on HIV/AIDS to young people between the ages of 13 to

25. They work with volunteers that have been trained to do outreach work mostly in and around Madang town and near by villages when invited.

The Youth Outreach Project in Madang also works in partnership with Povincial AIDS Council, the Madang Youth Core Group, RD Tuna Cannners and recently with NDRAC. The project works with an aim to improve survival of young people in PNG. This includes:- improvement of the availability of educational materials developed for urban and rural young people on sexual health, relationship and the prevention of HIV/AIDS; -young people having access to information and materials (including condoms) from Youth-Friendly Outreach Centers in three Provincial towns (Goroka, Kainantu, Madang) and a selected remote area- Megabo in the Eastern Highlands of PNG; - selected young people are trained and supported to provide information and education to other youth through existing formal and informal youth networks; - increased community awareness of young people's vulnerability to HIV/AIDS;-to ensure the effective and efficient management of the project.



Youths during the Youth & Disability Workshop in Madang at CWA

For more information on the Youth Outreach Project by Save the Children in PNG please contact:

Youth Friendly Centre Coordinator;
Tamara Babao
PO Box 21
Madang
PH: 852 1211/FX: 852 3596

Making the MDGs Inclusive

By Soloveni Vitoso
Pacific Disability Forum, Fiji

"Empowerment of persons with disabilities and their communities around the world"

The annual observance of the International Day of Persons with Disabilities on 3 December, aims to promote an understanding of disability issues, the rights of persons with disabilities and gains to be derived from the integration of persons with disabilities in every aspect of the political, social, economic and cultural life of their communities. The Day provides an opportunity to mobilize action to achieve the goal of full and equal enjoyment of human rights and participation in society by persons with disabilities, established by the World Programme of Action concerning Disabled Persons, adopted by the United Nations General Assembly in 1982.

Globally, almost one in ten people is a person living with a disability and recent studies indicate that persons with disabilities constitute up to 20 per cent of the population living in poverty in developing countries. Many persons with disabilities continue to face barriers to their participation in their communities and are often forced to live on the margins of society. They often face stigma and discrimination and are routinely denied basic rights such as food, education, employment, access to health and reproductive health services. Many persons with disabilities are also forced into institutions, a direct breach of the rights to freedom of movement and to live in their communities.

The United Nations has a long history of promoting the rights and well-being of all people, including persons with disabilities. The Organization has worked to ensure their full and effective participation in the civil, political, economic, social and cultural spheres on an equal basis with others in order to achieve a society for all. The Organization's commitment to the full and equal enjoyment of all human rights by persons with disabilities is deeply rooted in a quest for social justice and equity in all aspects of societal development. The World Programme of Action concerning

Disabled Persons and the Standard Rules on Equalization of Opportunities for Persons with Disabilities translated the Organization's commitment into an international policy framework, which has been further strengthened by the Convention on the Rights of Persons with Disabilities, an international legal instrument, to empower persons with disabili-



Soloveni Vitoso during the Pacific Internet Conference, in September 2009 at Port Moresby.

ties to better their lives and that of their communities around the world.

MDGs and persons with disabilities

The United Nations and the global community continue to work for the mainstreaming of persons with disabilities in all aspects of society and development. Although many commitments have been made to include disability and persons with disabilities in development, the gap between policy and practice continues. Ensuring that persons with disabilities are integrated into all development activities is essential in order to achieve internationally agreed development goals, such as the Millennium Development Goals (MDGs). The MDGs can only be achieved if persons with disabilities and their family members are included. This in turn will ensure that people with disabilities and their family members benefit from international development initiatives. Efforts to achieve the MDGs and implement the Convention are interdependent and mutually reinforcing.

An Important Tool for Action: Community-Based Rehabilitation (CBR) a bridge between policy and practice

A thriving approach to integrate persons with disabilities in development that is practiced in over 90 countries around the world is community-based rehabilitation (CBR). CBR is part of the general community-development strategy intended to reduce poverty, equalize opportunities and involve individuals with disabilities in society. CBR is a flexible, dynamic and adaptable strategy to different socio-economic conditions, terrain, cultures and political systems throughout the world. It includes access to health care, education, livelihood, community participation and inclusion. Empowerment of disabled people and their family members are key components of a good CBR programme.

CBR provides a link between people with disabilities and development initiatives. CBR is implemented through the combined efforts of persons with disabilities, their families, organizations and communities, and relevant government and non-governmental organizations (NGOs) working in the development sector. CBR works to ensure development initiatives are inclusive of people with disabilities and is increasingly considered as an essential component of community development. Through community action it serves to empower persons with disabilities (individually and within groups) to realize their rights and promote respect for their inherent dignity, ensuring that they have the same rights and opportunities as other community members.

This year, new ideas and options may be further explored as to how CBR can be used as a tool in operationalizing CRPD, Inclusive MDGs, similar national legislations and highlight the crucial importance of the inclusion and participation of persons with disabilities and their contributions in the development of their societies.

"A Partnership of Pacific Organization of and for People with Disabilities"

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MADANG: White Cane and World Sight Day

Only 13 people took part in a walk from Laiwaden Sports field to the Modilon hospital marking International White Cane Day.

Dr Steven Demok, Eyecare Specialist at the hospital raised concerns that eye care was not a priority with the health department. He said many equipment that was needed to test, correct and treat eye diseases weren't available at the hospital. In replying to Dr Demok's speech, Provincial Health Department representative, Arthur Walgun thanked NGOs such as Fred Hollows Foundation in the long serving dedication and efforts in carrying out much needed operations to many patients

that had curable and correctable eye diseases. He said he supported Dr. Demok's concerns as well and said resources should be pumped into all health sectors. Jenny Kaidang, a visually impaired woman, challenged the Government Offices to look at visually impaired persons as one of the priorities as many public servants and government leaders also had problems with their eyesight, or are bound to have problems eventually. The day was celebrated by a number of NGOs; National Disability Resource and Advocacy Centre, Creative Self-Help Centre, Save the Children, and staff of the Eye Clinic of Modilon General Hospital.



Jenny Kaidang with relative marching during the White Cane Day and World Sight Day



Youths, Gloria and Dayamo from Save the Children participating in the Youth and Disability Workshop.

MADANG:HIV/Aids & Disability Workshop

14 Youths from Madang have something more to teach their peers after completing a weeklong workshop on HIV/Aids Disability.

The youths were Peer Outreach Volunteers and Youth Friendly Centre hosts who are under Save the Children's Youth Outreach Projects. The workshop was facilitated by National Disability Resource and Advocacy Centre (NDRAC). Save the Children's Mactil Bais, praised the

workshop for giving more insight, clarity and understanding to the youths so that they can identify more PWDs in the community. Partnership and Development Officer for NDRAC Marleen Nelisse says the main purpose of the workshop was to equip and instill relevant information, skills and knowledge on disability issues in order to share with the wider communities who are not aware of disability issues. Most of the participants were youths who take part in the youth outreach project in which is developed by Save the Children in Madang.

MADANG, Kranget Island: Youth Projects Workshop

"Make Madang a model city!" were the words of Madang Governor Sir Arnold Amet whilst addressing Madang districts youth representatives that attended the first ever Youth Project and Planning Workshop on Kranget Island last week.

The aim of the workshop was to equip youths with necessary skills and knowledge on how to write up project proposals, planning and prioritizing on projects in their respective districts. The 50 Youth Participants came from the 6 districts; Madang, Sumkar, Raicoast, Walium, Bogia and Middle Ramu.

The youths told the Governor, in their address to him that they were using this workshop to further establish their organizational structure from Provincial to district, LLG and ward level as well.

They also assured the governor that they would be using the workshop to put together their constitution in place and to assess many other fundamental issues that have been left unattended to over the past 30 years such as good governance, transparency, accountability and active participation by youths, and grassroots.

MADANG: International Day of Persons with Disabilities was celebrated with World Aids Day on the 1st of December.

Disability sector organisations such as Creative Self-Help Centre and National Disability Resource and Advocacy Centre were present at the venue of the celebrations at Madang's Bates Oval to advocate, carry out awareness and relate the issue of Disability with HIV and Aids as well. Peter Momo, a Person Living with HIV and Aids (PLWHA) and an active advocator for PLWHA's in Papua New Guinea through Igat Hope, said that disability is a growing epidemic in the country. He said, a lot of Persons with Disabilities (PWDs) were deprived of their rights to be included in government services, such as education, accessibility into public buildings and facilities.

He gave an example of many hotels and public buildings not having proper ramps and toilet facilities for persons using wheelchairs to access easily. Other speakers were the Madang Governor, Sir Arnold Amet and founder of Friends Foundation, Tessie Soi. The day-long event was attended by many other HIV&Aids advocators and organisations; Madang Provincial Aids Committee, NGOs such as People Living with Higher Aims, Save the Children, World Vision, Family Health International, National Disability Resource and Advocacy Centre, Tingim Laip and its mobile Voluntary Counseling and Testing centre.



Madang residents marching during World Aids Day and International Day of Persons with Disabilities.

CSHC students performing at St Michael's Primary during Children's Day

MADANG: Universal Children's Day

Students of St Michael's Primary School were amazed at the talent and enthusiasm of the special needs children of Creative Self-help Centre in Madang during Universal Children's Day last Fiday.

The special needs children visited the school to perform dramas and songs in sign language and left a lasting impression on the staff, students and parents who came to attend the days events. Francis Jonz, Headmaster of St Michael's who invited the special needs children to his school, first saw them performing during National Teachers Day in October and decided to invite them over for the occasion. "Our main aim was to show the students, staff and community of St Michael's Primary School that these children were like any other children and should

also be in school as well" he said. So far in Madang, Lutheran Day Primary School is the only school that has enrolled students from Creative Self Help Centre to do their Primary School education. Many visually, hearing and speech impaired children have not been included in mainstream schools as their parents are not aware that they can and should be in school.

Mr Jonz, also added that he had identified several children in his community that had impairments and thus were not attending school. He says a good number of his teachers have been through special training in the Teachers Colleges that they attended and are well equipped to teach special needs children. He and his teachers have identified a few students in their classes with impairments as well and he is planning to propose to the school board to look into including more special needs children.



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Meet Kurt Fearnley

Australian athlete Kurt Fearnley is the Marathon Man of wheelchair sports. The two-time Paralympic champion has won all around the world from New York and Chicago, to Seoul, Paris and Sydney, he has conquered the globe. In November Kurt Fearnley accomplished a great achievement by 'crawling' the Kokoda Track in 10 days. This incredible achievement has made a devastating impression on PNG. This is the first time that a Wheelchair person has crossed the Kokoda Track.

Name : Kurt Fearnley
Age : 28 years
Place : Carcoar, Australia
Marital status : Engaged
Profession : Athlete
Disability : no lower spine (born without the lower portion of his spine)



Kokoda Crawl

Kurt Fearnley is the world's leading wheelchair marathoner, aiming for a third consecutive gold medal at the 2012 Paralympics in London. He admitted that Kokoda could break him and end his racing career. It was a big risk, but the 28-year-old prefers to focus on the rewards.

Only a week since winning his fourth following New York wheelchair marathon, Kurt Fearnley dragged himself on the palm of his hands along the tough 96km track with the support from 15 family members plus his team of porters and guides.

In burning heat, mud and pain, the group tracked through the Owen Stanley's Range's unforgiving mountains and dense jungle. "The people here are amazing" he said. "What a few days! I am incredibly grateful for every positive message of support. It has really helped. No matter what has been said, a positive change has come for those in chairs".

Before he set off on November 8, Fearnley visited Cheshire Homes in Port Moresby for an inspiring talk with residents with disabilities.

Friends helping Friends

Kurt Fearnley raised the idea of trekking Kokoda at a family member's wake who was a long time sufferer of depression. He used the trip to raise awareness for Beyond Blue and Movember, both campaigns for men's health. He wants to emphasise the point that friends helping friends can find solutions to almost every situation. Kurt Fearnley is a big believer in the phrase that anything is possible.

"In some ways Kurt's crossing emulates and honours the memories of the Australian Soldiers who fought and suffered great hardships along the Kokoda Track".

Family

Family has made Fearnley the man he is, simply by treating him no different to anyone else. As a kid, he would flip himself over barbed wire fences and follow his brothers into the bush. He would be the test-pilot for a home-made go-kart. He won his first school athletics medal in the high jump. "If we were playing footy they wouldn't let me sit on the sidelines. Whatever it was, going rabbiting or fishing

in the river," Fearnley says. "If I wasn't crawling across the paddock, they were dragging me. If I wasn't finding my way through a blackberry bush they were pushing me. They're the blokes who made me the way I am, that made sure I wasn't a passenger, I was a participant."

Fighting Airline Policies

After having crawled 96 km of the Kokoda Track, he ended up doing the same through the airport terminal in Brisbane after Airline Jetstar refused to allow him to use his own wheelchair. Fearnley was told the airline's policy was to take some wheelchairs from PWDs to check in as baggage and offered him a less-mobile wheelchair. He did not want to be pushed around the airport. "I said there is not a chance that I am going to sit there and be pushed through an airport. An able-bodied equivalent, a normal person's equivalent would be having your legs tied together, your pants pulled down and be carried or pushed through an airport", was his comment.

"I made a choice and that was to make my own way to the gate," Fearnley said. "I jumped on to my brother's shoulder then I crawled."

Fearnley talked about this incident in a speech at the 2009 National Disability Awards at Parliament House in Canberra, during his duties as an ambassador and emcee for the event. "I need to pick my battles here. I'm exhausted. Kokoda has taken a very heavy toll. But I just want to see this one through.

"Disability advocates hope the Paralympian Kurt Fearnley can do what others are already trying to do in the courts: force airlines to change the way they treat passengers with disabilities.

Sources consulted for story:

kurtfearnley.com

The National, November 19 2009

www.news.com.au/www.disabilitytelegraph.com



Paul Na'au, Physiotherapist, Alotau General Hospital

Paul Na'au is very strong and passionate about his job as Physiotherapist at Alotau General Hospital.

He was a pioneer graduate of Divine Word University Physiotherapy Department in 2006.

"Recalling back, I am glad I chose to take up Physiotherapy after completing year 12," he said.

Paul got interested in taking up Physiotherapy at the University as he saw that it was a new profession in Papua New Guinea but most importantly he saw that Physiotherapists would be needed in many hospitals in the country. He was one of the 10 first Physiotherapists of Papua New Guinea that graduated in 2006.

After graduating, he did his residency at Angau Memorial Hospital under the Supervision of VSO Physiotherapist Michael Estanislao before moving to Alotau General Hospital's Physiotherapy Department.

There he was part of a team of 4 Physiotherapists who provide in-patient and out-patient assessment and treatment, Fracture management, fitness management where they now have forty clients.

He is also heavily involved in Community Based Rehabilitations where home visits of patients and Outreach activities are predominant.

He is also proud to be part of the newly introduced concept of the Ponseti Treatment. Ponseti Treatment is a minor operation on children with Club Foot (a deformity of the feet that cause the feet to point downward and inward). If left untreated, persons afflicted often appear to walk on their ankles, or on the sides of their feet.)

The Ponseti Treatment is a simple procedure performed by Orthopedic Surgeons. By this technique a Club Foot can be treated successfully by sequential manipulation and plaster casting. The approach is easily performed in the outpatient clinic, is effective, with 80% of good or



excellent results, efficient, with complete correction in 2 months, and economical with no major surgery required.

Paul says that they have had their first two Club Foot patients that have successfully been operated on and would be renewed in January 2010.

Paul is now is now taking up a new challenge of treating patients as well managing the Physiotherapy Department.

"I'm not only attending to clinical needs here but I'm also helping to manage the Physiotherapy Department which is a great challenge and I'm enjoying that at the moment" he says.

He updates the hospital statistics of the different Physiotherapy cases that get treatment at the hospital, draws up schedules for its staff as well as reports monthly to the CEO of the Hospital.

Paul wishes to increase the capacity of his colleagues through more training as well as making the other hospital staff such as nurses and Health Extensive Officers aware of the Physiotherapy services.

Paul is also keen on furthering his diploma qualifications in Physiotherapy by going back to Divine Word University to receive his Bachelors Degree in Physiotherapy in the near future.

He encourages, young men and women who are completing high school to take up Physiotherapy as he sees it as a great need for more Physiotherapists in the country.

"Working with disability is challenging especially when some patients are reluctant to let you help them, but very fulfilling when you see someone gain his full mobility or a child smiles at you when he can move around with ease."



Goal 2: Achieve Universal Education

By Charlye Ramsey, Inclusive Education Advisor
and Anne Marie Gregory, VSO Volunteer

Is PNG meeting the Millennium Development Goal 2: Achieve Universal Primary Education



Celebration of Universal Children's Day in Alexishafen 2009

Other countries are making great progress in expanding education opportunities to all their children. Yet PNG is lagging behind poorer countries of Africa and Asia. The 2007 school census reported 674,169 school-aged children are out of school in PNG. But why?

Our government here simply faces a much tougher challenge than others. PNG is a land of diversity: there are remote communities in isolated mountain valleys, others on tiny islands and many accessible after days' journey up river in a motor canoe. To build and maintain these schools is a big undertaking: it is not simply a matter of constructing new classrooms. We also need to staff them with trained and motivated teachers, and provide the stability and support they need to develop the next generation. This is an enormous undertaking to ensure that all of PNG's children have access to a quality education that will enable them to fulfill their potential.

Education Department officials, in collaboration with partners and donors, have developed a Plan to realize its international commitments such as the Convention on the Rights of the Child, Education for All and Millennium Development Goals. This Plan is titled 'Achieving Universal Education for a Better Future.'

Within the PNG context some children however never enter the education system. The decision to abolish elementary school fees is a truly great moment in PNG's history. Many children 'lusim skul' due to school fee problems, health problems, long and dangerous walks to school, absent teachers, overcrowding, textbook shortages and poor school facilities. We all can cite appalling examples of why children we know have had to drop out. Retention is a priority under the NEC's Papua New Guinea Universal Basic Education Plan 2010-2019. Research in Africa found that on average 15 years of education must be paid for to get one child to complete primary school! Frequently those children never again get the opportunity to receive an edu-

cation and expand their opportunities in life. For example, many teenage girls become pregnant and have in the past not been allowed to return to school.

It is expected the Plan will address issues such as expansion of school infrastructure, pre and in-service teacher training, advocacy and awareness raising, water and sanitation facilities in all schools and provisions for remote and overcrowded schools.

Our leaders have also set themselves a tough challenge in extending primary education up to the end of grade 8 (i.e. 9 years of schooling). This is longer than many other countries, but necessary if PNG is to have a well-educated workforce developing agriculture and commerce in this country and competing with Asian and Pacific neighbours. However, we need to provide more support to teachers in rural areas if we want the majority of children (who live in villages) to receive a quality education. Rural children have the same rights as urban children and we should not condemn them to a second-class education because of where they were born.

If we are to achieve universal primary education then we need to embrace diversity in schools: some children will speed through the education system and complete grade 8 at age 14 then go on to secondary, others need educational support to learn to read and write and others need social support to help them stay in school. We must build inclusive schools that respect diversity and encourage the participation of all children including street children, girls, children with disabilities, those from remote areas, and children affected by HIV/AIDS.

So what can we do? In order to achieve universal primary education we need to make it our top priority, after all it is our future. We also need to work together more effectively, government, agencies, NGOs, parents, teachers and communities. It's tough and costly, but one we cannot afford to ignore.



Children in Salagu Primary School, Madang



BY John Taime
Institute of Medical Research

Malaria, like many other deadly diseases was thought to be caused by evil Spirits or "Sanguma" in Papua New Guinea. But Communities have come to realise that mosquitoes are causative agent for malaria and other related diseases and disabilities.

Around 1950-97 the Government of Papua New Guinea introduced insecticides that were used to spray mosquito dwelling places. This had very little impact on malaria morbidity and mortality. Maintenance of the insecticides had failed also due to no government support and also due to the difficulties accessibility to the most remote districts in the country.

Antimalarials Prophylaxis treatment (treatment whereby tablets are taken weekly to kill malarial parasites) was an alternative solution and was introduced to ensure reduction of malaria morbidity and mortality focusing on vulnerable groups. It was considered to be another means of reduction of malaria in endemic areas especially for pregnant women and people from non malaria endemic areas coming to malaria endemic areas.

However, the Anti-malarial Prophylaxis treatment did not really eradicate malaria in the most endemic areas.

In 2008 onwards the National Health Department began taking a new approach towards the reduction of malaria in the general population by distributing mosquito nets as a national strategic plan because malaria now is a nation wide problem, including the Highlands provinces of Papua New Guinea.

Papua New Guinea Institute of Medical Research (PNGIMR) conducted research specifically in the Highlands Provinces and provided results of the findings and the recommendation to National Department of Health. Continual research conducted in different approaches by PNGIMR and other health institutions to find other means and ways of controlling or reducing malaria and other diseases are on-going.

A new research study however, conducted by the PNG Institute of Medical Research, with help from scientists in Australia, Spain and America, started in October, 2009



PNG Institute of Medical Research

to investigate a new method for the prevention of malaria and anaemia in pregnant women, and low birth weight in babies. Pregnant women are at a higher risk of getting malaria being than other adults. The study will use a method called 'Intermittent preventive treatment', whereby pregnant women (whether they are sick or healthy) will be given regular treatment with antimalarial drugs at the time of antenatal clinic visits, to help reduce the effect of malaria on the mothers and her babies. This type of intervention has been previously found in African countries to greatly reduce the amount of malaria illness, anaemia and babies born with low birth weight.

Half of the women in the study will receive a medicine called **azithromycin**, combined with **fansidar**, and half of the women will receive the standard treatment of fansidar and chloroquine. At the end of the study researchers hope to discover which treatment is a better option for pregnant women in Papua New Guinea.

The treatment with the medicine azithromycin may also help to treat sexually transmitted infections that pregnant women may carry, which can cause severe effects in the baby. All women enrolled in the study will have the option to be tested for sexually transmitted infections and receive treatment.

Women in the study will also have ultrasound scans performed to check on the age and growth of the baby, and be given a treated bed net to sleep under to prevent new malaria infections. Women and their babies will be followed up by IMR staff throughout pregnancy and delivery, as well as after delivery at 6 weeks and 3 months of age. Pregnant women within the first six months of pregnancy, who plan to have their baby in Madang Province, were invited to take part in this study which will be conducted at several antenatal clinics throughout Madang.

These sites include Modilon, Alexishafen, Jomba, Sisiak, Town, and Yagaum clinics, with further clinic openings anticipated at Danben and Mugil clinic later in the year.

Women were particularly encouraged to present to antenatal clinics early in their pregnancy, as the benefits of early pregnancy care for both Mother and baby have been well documented.



Goal 6: Combat HIV/Aids, Malaria and other diseases

By Marleen Nelisse

Papua New Guinea (PNG) faces alarming challenges in achieving the targets of the Millennium Development Goals (MDGs). According to the Asian Development Bank, PNG ranks last among the Pacific developing member countries on both the Human Development Index and the Human Poverty Index of the United Nations. Goal 6 of the Millennium Development Goals is "Combat HIV/AIDS, Malaria and Other Diseases". AIDS and other infectious diseases can cause disabilities. On the other hand People Living with HIV and AIDS (PLWHA) may develop impairments as the disease progresses and may be considered to have a disability when social, economic political or other barriers hinder their full and effective participation in society on an equal basis with others.

Moreover Persons with Disabilities (PWDs) and PLWHA share many challenges in terms of discrimination and stigmatisation.

In PNG there is yet not much known about the relationship between HIV/AIDS and disability? The roughly 600.000 individuals who live with a disability are among the poorest, least educated, and most marginalized of PNG society. They are at serious risk of HIV/AIDS and more attention need to be focussed on them.

NDRAC has addressed this issue and started to collaborate with HIV/AIDS stakeholders as Madang Provincial AIDS Council and Save the Children in PNG. With the latter, NDRAC has facilitated a 4 day workshop on Disability and HIV/AIDS with their youth volunteers. The aim of this workshop was to bridge a gap in disability awareness education and change attitudes and acceptance towards PWDs as well as to learn about the HIV/AIDS impact on PWDs.

Triple Burden

Often PWDs are subject to whatknown as the "Triple Burden" of disability, poverty and HIV/AIDS. The most common causes are a lack of access to service provision, a lack of awareness of the disease, and the stigma that



PLWHA Advocate Peter Momo speaking during World Aids Day & International Day of PWDs in Madang

first goes along with being disabled, and additionally by having contracted HIV/AIDS.

Because of certain assumptions about why PWDs are not at risk of contracting STIs, PWDs are therefore not included in HIV prevention and AIDS outreach effort.

Myths about PWDs

- People with disabilities do not feel the desire to have sex.
- People with disabilities can not be infected by HIV.
- People with disabilities are no victims of (sexual) violence.
- People with disabilities do not use drugs or alcohol.
- People with disabilities cannot be homosexual.
- People with disabilities cannot comprehend or are not interested in HIV prevention messages.

The "Global Survey on Disability and HIV/AIDS" conducted by Yale University in the USA and the World Bank has proven these assumptions are wrong. PWDs have equal or greater exposure to all known risk factors for HIV infection. Men and women with

disabilities are even more likely to be victims of violence or rape, although they are less likely to be able to obtain police intervention, legal protection or prophylactic care (Groce and Trasi 2004).

According to International NGO Inclusion International there is a need to raise awareness about the relationship between HIV& AIDS and Disability; organisations need to design accessible materials for PWDs effected by the epidemic and have to work with governments to ensure that policies and practices aimed at stopping the spread of HIV&ADIDS include concerns affecting PWDs and their families.

Why are HIV information and services not reaching people with disabilities?

- Billboards do not reach blind people.
- Radio spots do not reach deaf people.
- Complex and vague messages do not reach persons with learning disabilities.
- There is a lack of counsellors who are able to use sign language.
- Health staff is not sensitive to the needs of people with disabilities.
- People with disabilities are usually too poor to be able to access HIV services.

Exclusion of PWDs from HIV/AIDS prevention and care is insensitive. In order to achieve universal access to HIV/AIDS prevention, treatment, care and support by 2010 and the Millennium Development Goals by 2015, HIV/AIDS policies and programmes need to be made inclusive and accessible for people with disabilities.



By Ian N. Apeit

Partnership for Disability & Development

Some progress has been made in meeting the Millennium Development Goals (MDGs) in 2015, but major gaps are evident, for example in official development assistance, market access (trade), debt relief, gender equality, access to essential medicines and access to technology. The global financial crisis, rising food prices and climate change have significantly impacted achieving the MDGs. Thus there is a renewed need for strategizing in international as well as local partnerships to realize the Goals and consider what we need beyond them.

It is anticipated that MDGs will not be achieved if their policies, programmes, monitoring and evaluation do not include persons with disabilities. The World Bank's findings states that "...persons with disabilities make up ten per cent of the world's population and that disability is associated with twenty per cent of global poverty". Currently, there are no references to PWDs either in the MDGs themselves or in the accompanying body of guidelines and policies, programmes and conferences that are part of the ongoing MDG efforts. In addition, the new revisions of the MDGs currently in process do not include PWDs.

The challenge is for the development partners from across sectors and disciplines, and diverse communities – academics and students within and beyond the development studies, development practitioners, business and policy makers – who will explore ways to make change happen in a time of complexity by forming local and global partnerships that can respond to current challenges as well as carry forward the implementation momentum of the MDGs so far.

As an information focal hub for disability rights issues in PNG, National Disability Resource and Advocacy Centre (NDRAC) does emphasize on networking and partnership building across various

sectors or in any mainstream of life, within and abroad PNG for disability inclusion. NDRAC believes partnership for development is about inclusion, which means inclusion of everyone-counting persons with disabilities.

The theme of this year's International Day of Persons with Disabilities



Ian Apeit & Pauline Kleinitz at the ANTARES conference

(3rd December) "Making the MDGs Inclusive: Empowerment of PWDs and their communities around the world" is very clear. The MDGs do not cater for the political, social, economic and cultural life or needs of persons with disabilities in their communities. How far have we included persons with disabilities while realizing the MDGs in PNG?

In efforts of realizing this and as well the Convention on the Rights of Persons with Disabilities ensuring societies are barrier-free, rights-based and disability inclusive, NDRAC advocates and lobbies that this be in PNG since its beginning in 2006. Lately, as part of our partnership with international agencies, I was among other humanitarian aid workers who attended the 2009 Annual Forum organized by Antares (the then Mandala) Foundation Inc. The forum was about "The Science of Stress and the Art of Managing Wellbeing for Humanitarian Aid workers" in Melbourne. Together with Pauline Kleinitz-a Senior Capacity Development Officer of CBM-Nossal Institute, we ran a session and advocated for disability inclusion.

Apparently, there were no persons with a disability who attended the forum so we advocated for inclusion. We advocated too of making a Braille and audio visual versions of materials on Stress management aspects so persons with visually and hearing impaired can have access to such information, knowing some of them are at the managerial positions.

While we are doing this at our scale in PNG with other partner organizations working for, with and of persons with disabilities for disability inclusion, the international community needs urgently to act to mainstream disability in the MDG processes. This requires collective efforts from wider stakeholder consultation and collaboration. This calls for the policy makers specifically tasked with the programming, monitoring and evaluation of current MDG programmes to begin considering disability so that the next phase of the implementation of the MDGs will include disability as an important component of its core mission.

The former World Bank President Paul Wolfowitz said "People with disabilities are also people with extraordinary talent. Yet they are too often forgotten. When people with disabilities are denied opportunities, they are more likely to fall into poverty -- and people living in conditions of poverty are more likely to develop disabilities. As long as societies exclude those with disabilities, they will not reach their full potential and the poor in particular will be denied opportunities that they deserve...we cannot achieve these goals alone.

We must work closely with our development partners to remove the barriers that exclude disabled people and ensure equality of opportunity for every member of society."

**TOGETHER IN PARTNERSHIP
WE CAN CREATE AN
INCLUSIVE, BARRIER-FREE
PNG SOCIETY!**

Advertise in The Network!

Via The Network you can advertise your business, services, products or any other information. The Network is widely received; currently we have an estimated readership of over 2000 people and organisations in PNG and abroad...and our recipients list is growing with every issue!

If you have any information to advertise targeting the entire society, use The Network! With your advertisement you will directly support disability advocating activities.

The flat rate for 1/4 page is K 150.

Please contact The Network for more information.



The Network wants to include articles from all over the country and to have great involvement from person with disabilities. Local knowledge of what is happening on disability issues is easier to access through people who are living in that area. So we have established a promoters network team who are constantly sending us information. Articles and information presented in this issue is the product of their effort.

We have promoters in Mt. Hagen, Goroka, Lae, Madang, Alotau, Popondetta, Kiang, Port Moresby, Aitape, Wewak, Bougainville and Rabaul. Now we have David Iriap in Markam, Nick Mark at Tabubil, Finley Tuoreke in Wewak, Lawrence Kaekae in Central Province and Warian Wafie in Gulf Province.

The editor is regularly in contact with all promoters and gives guidances if needed. Our promoters are looking for inspiring stories and relevant information and they are encouraging other organisations and persons in their region to submit materials to share with the National Disability Magazine.

Is there no promoter in your area above? Do you want to be The Network promoter in your area? Please contact the editor for more information on the duties and terms of reference.

Acknowledgements

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We also thank all people who sent materials which unfortunately could not be published in this edition.

The next edition will be published in March 2010.

Next

Do not forget to send in your news and views for the next edition before February 2010

The Network started in 2004, is a quarterly magazine for all people involved and interested in the disability sector in Papua New Guinea.

The aims are to empower, share views and spread accurate and inspiring information about disability.

This edition has over 2000 recipients and an estimate readership of 3000.

Among the recipients are individuals with and without disabilities, government, media, business houses, donor agencies, church groups, NGO's within PNG as well as overseas in the Pacific, Europe, Asia, America and Africa.

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The editor will try to publish all material received but reserves the right of refusal and to edit stories for space and clarity, as appropriate.

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