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# THE LONG WAY HOME

Relocation of survivors of gender-based violence in PNG

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**OXFAM**

## INTRODUCTION

Inspiring and courageous work is being carried out across Papua New Guinea (PNG) to improve the treatment and status of women, and to support survivors of violence. Many people and agencies, including Oxfam, are helping survivors of violence and people at risk, raising awareness of gender-based and sorcery-related violence, and advocating for changes to reduce violence and the threat of violence against women and girls in PNG.

Gender-based violence (GBV) is a pervasive problem in PNG. It can take many forms. The World Bank 2011–2012 Country Gender Assessment for PNG distinguishes seven main types: intimate partner violence; forced marriage; polygamy related violence; honour violence; violence against girl children; violence by state agents such as the police; and community violence, which includes sorcery-related violence.

This research, funded by Oxfam, focused on one aspect of our support to survivors of violence; helping to remove people from violent situations or the threat of violence and supporting them to settle in another community where they can feel safe and work to re-establish their lives. Relocation is often repatriation to a home village, but sometimes it is relocation elsewhere.

This research was funded through a project that supports the Human Rights Defenders Network (HRDN) in the Highlands, which is part of the broader Oxfam Ending Violence Against Women (EVAW) program (funded by the Australian Government through the Department of Foreign Affairs and Trade as part of the Pacific Women Shaping Pacific Development Program). The EVAW program provides support for those subject to, or at high risk of, violence. This support, which is provided by local partner organisations, includes providing crisis services such as counselling, safe house accommodation, paralegal advice, referrals to specialist service providers, and, in cases of extreme and direct threat to life, relocation support. It also aims to tackle the underlying causes of violence through outreach workshops that target boys and men and promote positive behaviour change, particularly in areas with high violence rates.

The need to respond to sorcery-related violence, as well as the challenges in resolving such cases locally, has been a significant part of developing relocation services. But such services are not limited to sorcery-related violence. The broader context is GBV and the need to protect those who are targeted for whatever reason. Oxfam partners and other agencies can help when women need to escape from partner violence and relocate and rebuild their lives elsewhere. They can also help with the relocation of men and children at risk.

## RESEARCH METHODOLOGY

This research was undertaken from 8 May to 13 June 2014. It involved three components: a national assessment of available relocation services and any related policy; a provincial level assessment of the Highlands and covering the Eastern Highlands, Simbu and Jiwaka; and case studies of people who have moved in response to violence.

Four main research questions guided the national and provincial level analyses:

1. What is the scope and type of relocation mechanisms available for survivors of violence and those at serious risk of violence (such as people accused of sorcery) in PNG?
2. What funding, guidelines, and criteria are documented for formal relocation support in PNG?
3. How do formal and informal relocation mechanisms operate in Simbu, Eastern Highlands, and Jiwaka?
4. What measures could be considered at national and provincial levels to improve the quality and availability of relocation services for survivors of violence in PNG?

Stakeholder interviews were the core source of information. In all, 29 interviews and small group discussions were conducted, involving 47 people, two thirds of whom were women (31 women, 16 men). These covered government officials and advisers, development partners, community-based organisations (CBOs), faith-based organisations, and local and international non-government organisations (NGOs), including Oxfam and partner staff. Of the people interviewed, 26 (15 women, 11 men) were based in Port Moresby and 21 (16 women, five men) in provinces, with 17 (13 women, four men) of these being in the Highlands.

The other main research activity was five case studies (three women and two men), which were conducted through semi-structured interviews. Three of these case studies are included in this summary. Oxfam and HRDN partner agencies selected and organised the case study participants, who had been receiving relocation help. Accessibility, availability at the time of the research, and willingness to participate were key considerations in the selection. An Oxfam staff member provided interpretation for the case studies.

A draft report based on the analysis of the information gathered was produced, and the preliminary findings and draft recommendations were presented and discussed at a dissemination workshop on 6 June 2014. There were 48 participants: 71% women (34 women, 14 men). They represented 28 organisations: government agencies, development partners, CBOs, and local and international NGOs. Five media organisations from the press, radio, and television were also present. During the workshop discussions, participants validated the findings and built on the recommendations. The main points from the workshop discussions were then incorporated into a final report, which is available through Oxfam Australia.

The research took into account the prevalent subordination of women in PNG, the sensitivity of GBV issues, and the fear of talking about sorcery-related violence. Gaining the trust of agencies and the clients involved was very important. All the research work was done in line with Oxfam Australia's Research Ethics Guidelines, particularly informed consent for the case studies.



Early in April 2012 6-year-old Julie was kidnapped and assaulted by four men in Lae. The men raped the young girl for eight hours and then left her in the street. Julie spent more than three weeks in the hospital, and is now receiving psychological treatment. Because of the injuries inflicted on her, Julie can barely walk and can never have children. Her tormentors were arrested by the police and are awaiting trial in custody.

## KEY FINDINGS

### 1. Networks have been essential for helping survivors of violence to relocate.

Key networks involved are the Family and Sexual Violence Action Committee (FSVAC) network, the HRDN network in the Highlands, networks within the Community Development Department, and various church networks. These networks overlap and have links with various other individuals and agencies. No organisation was found to work on its own. Each relies on working with other agencies.

### 2. The types of violence that force people out of their homes and communities are diverse, complex and challenging to respond to, especially sorcery-related violence.

Economic, social and cultural transformations have been contributing to the changing face of the violence that forces people out of their homes and communities, and sorcery-related violence has become the most challenging form of violence to which agencies respond. The generally poor state of law and order, and the lack of consequences for most perpetrators, allow a lot of violence to go unchecked, which contributes to its severity.

### 3. There has been a long history of support for people who have had to move, but only a small number of those needing help could be supported to relocate until funding became available in the past year.

Relocation help stretches back at least as far as colonial times, and has increased in recent years. For over a decade, agencies in the FSVAC network, human rights defenders in the Highlands, faith-based organisations and other agencies have been helping people move out of places where their lives are at risk and to reach safer places, usually by repatriating. The HRDN started as a formal network in March 2011 and it was resourced with donor funds to provide relocation support in mid-2013. Understanding the history of relocation support is helpful, as lessons can be learned from past experiences.

### 4. There are now some effective local networks in place that can respond rapidly and have saved lives.

The pilot work on relocation support carried out by the HRDN and other agencies in the Highlands has resulted in the development of some effective local networks and rapid response teams that have saved lives through quick action.

### 5. Relocation work typically involves a number of distinct stages, all of which need resourcing.

Most relocation cases involve: emergency evacuation; temporary refuge while critical health and legal services are accessed and the relocation is planned; the actual move to the new location to live; and settlement and reintegration support in that new location.

### 6. There are some common criteria that agencies use to decide when to help someone relocate.

The criteria that need to be satisfied for agencies to help with relocations can be summarised as follows: (1) the threatened person's life is at grave risk; (2) they want and request relocation; and (3) the seriousness and context of the violence is such that safe return to the community is not possible, at least not in the medium term, and often not likely to be possible in the future.

### 7. Relocation support needs to be properly resourced, and existing services need to be expanded and replicated.

The only funding specifically allocated to relocation work is provided by the Australian Government through DFAT. This funding has meant lives have been saved, and since these funds became available the number of people seeking relocation help has rapidly increased. But only a relatively small number of cases are supported. Most agencies that encounter people needing help to relocate do not have the funds to support a move, and there is a gap in funding for the reintegration of those who do relocate.

### 8. Data collection by frontline agencies has been insufficient to show the scale of the need for relocation support and to provide good data on the cases where people have been helped.

Due to insufficient data collection, it is very difficult to get a clear picture of the extent of the need for relocation and even good data on supported relocations. Data collection needs to be improved to provide solid data on incidents of all forms of GBV, including sorcery-related violence. This includes the need for gender-disaggregated data on the number of people affected by each form of GBV, and the numbers of people who relocate with and without help from agencies.

### 9. The critical field level challenges revolve around having adequate resources and handling security issues.

A common refrain from key informants was that there is a lack of basic resources for emergency evacuations and relocation support. In particular, agencies highlighted the need to fund wider communication networks so they could know when people are at risk, as well as transportation to get them to a safe place. Many of the service providers interviewed put their lives at risk while taking action to protect those subjected to violence. Ensuring security and support for frontline workers is an operational challenge, and providing security for survivors is also a major challenge, especially while they are in transit and in temporary refuge.

#### What is sorcery-related violence and why is it a form of gender-based violence?

Sorcery-related violence is violence directed against a person or people because of a belief or accusation that they have performed sorcery or witchcraft to cause harm, such as natural disasters or death. People accused of sorcery or witchcraft are called *sangumas* – witches or sorcerers. Punishment can include being burned at the stake, buried alive, hanged, stoned, shot, beheaded or mutilated.

In 2010, Oxfam research found that people accused of sorcery, particularly women between 40 and 60 years of age, are among the most vulnerable. People accused of sorcery are "tortured and interrogated sometimes at gunpoint to admit to the offence and to call out the names of other sorcerers" (Oxfam International 2010, p.11). In some instances those accused of sorcery are tortured and killed. Many cases go unreported for fear of retribution against those accused and their friends and family members. Oxfam has supported community-based organisations to address GBV in PNG since 2006. In 2013, this work was expanded to encompass sorcery-related violence under the Highlands HRDN initiative, in recognition of the gendered nature of many sorcery accusations.



Mariana (36), a victim of domestic violence, in the imam's house near the mosque of Waigar village (Simbu Province). Mariana's husband constantly beats her and often kicks her out of their house. Though Mariana is not Muslim, she is always welcomed by the imam, Abdul Salam (39), who gives her moral support and shelter.

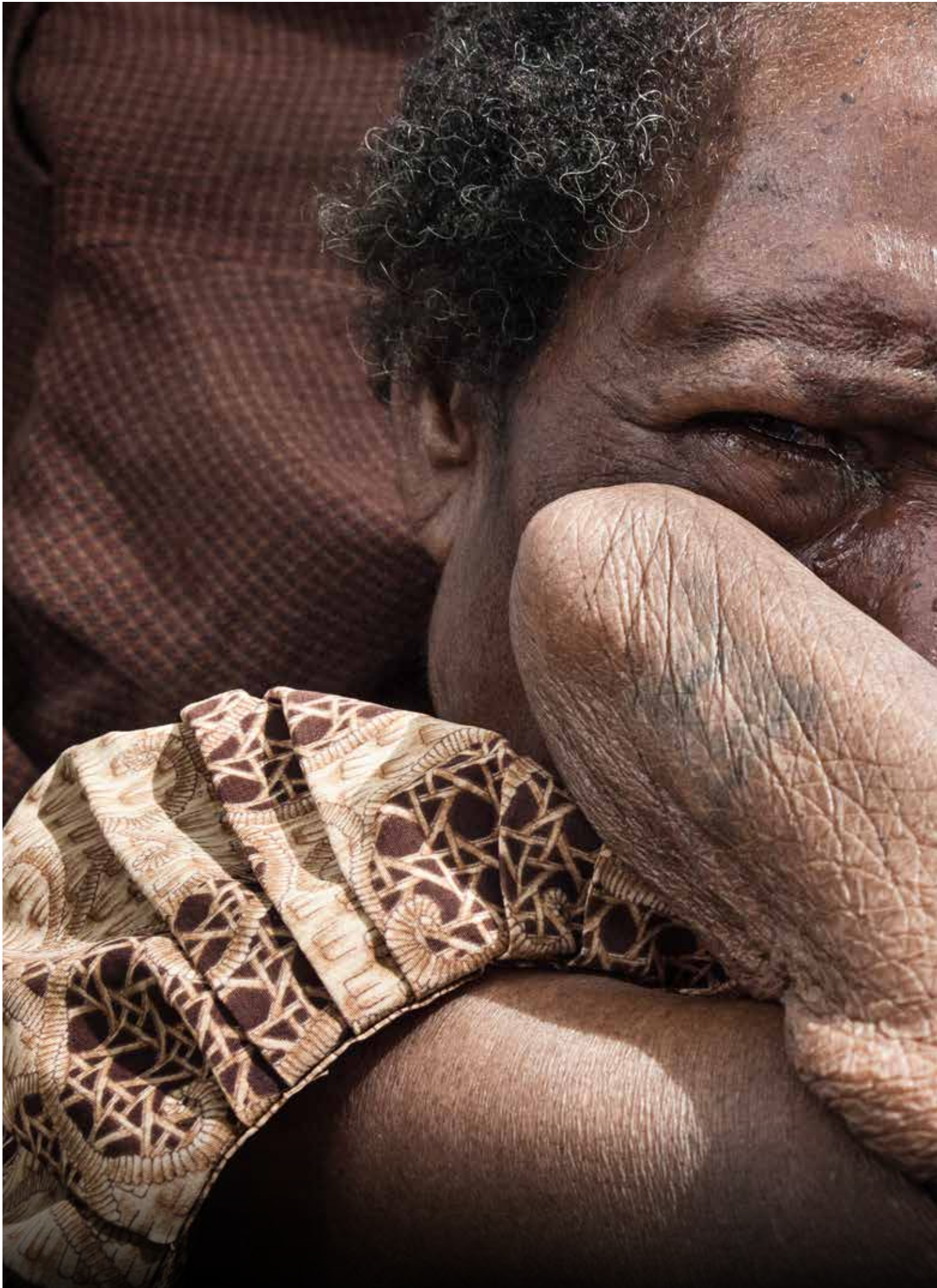
## KEY RECOMMENDATIONS

The assessment of past and present relocation arrangements and the case studies has highlighted a range of measures that are needed to better respond to the violence that pushes people out, and to help people at risk. The key recommendations are:

- 1. Plan relocation and reintegration help within a development context.**
  - 1.1 Seek ways to address vulnerability and poverty in the communities from which people have fled through GBV awareness-raising work and by linking with development initiatives, such as livelihoods, WASH (water, sanitation and health), and education programs.
  - 1.2 Plan reintegration support as part of broader service delivery and development initiatives in the communities to which people relocate.
  - 1.3 Attend to any “Do No Harm” issues, such as transfer of risk.
- 2. Strengthen the networks of agencies and people involved in relocation support.**
  - 2.1 Provide funding and technical support to the HRDN secretariat.
  - 2.2 Provide support to the Family and Sexual Violence Action Committee (FSVAC) at the national level and the FSVAC networks at the provincial level for the relocation support that the FSVAC provides, especially in facilitating moves between provinces.
  - 2.3 Strengthen local GBV referral networks in each province and work towards having a Family Support Centre (FSC), a Family and Sexual Violence Unit (FSVU), and at least one safe house in each province.
  - 2.4 Strengthen networks within government and between government and other agencies at national and provincial levels, developing cooperation across government sectors for work on GBV issues and, in particular, relocation issues.
  - 2.5 Expand local networks of focal points in communities for early warning, reporting of incidents, and taking local actions towards preventing violence, and include more members of women’s councils in these networks.
  - 2.6 Support and promote positive engagements by churches and church networks in tackling GBV issues.
- 3. Establish agreed criteria and develop local level protocols for relocation support.**
  - 3.1 Based on the experience of service providers to date, further develop and seek consensus on criteria for providing relocation support.
  - 3.2 Drawing on the good practices of local referral networks and rapid response teams, develop formal protocols for the cooperation of agencies in local referral networks.
- 4. Adequately resource relocation support, including emergency evacuation, temporary refuge, transport to the new location, and settlement and reintegration.**
  - 4.1 Expand and replicate donor-funded relocation services in other provinces.
  - 4.2 Ensure funding mechanisms and approval processes work efficiently and do not cause delays in urgent cases.
  - 4.3 Advocate with the government for resources to support all stages of relocation support, especially through funding of the Community Development Department and better resourcing of police services for emergency evacuation and security support.
  - 4.4 Advocate for the government to set up an urgent action fund that agencies could access for urgent relocation cases when other sources of funding are not available.
- 4.5 Lobby for the government to fulfill its commitment in the Medium Term Development Plan 2011–2015 to establish safe houses, starting with areas that have a high need for GBV services.
- 4.6 Further engage the private sector through corporate social responsibility (CSR) initiatives, especially in relation to help for communications and transport.
- 5. Expand the availability of counselling services, including trauma counselling, for survivors of violence and the people helping them.**
  - 5.1 Support and expand existing counselling services, including resourcing more trauma counselling services.
  - 5.2 Provide access to counselling for frontline GBV service providers.
- 6. Conduct further training for frontline service providers.**
  - 6.1 Provide further training for the police and health services, focusing on GBV sensitisation, human rights, and counselling skills.
  - 6.2 Provide recognised training, including in counselling skills and paralegal training, for frontline service providers in villages, CBOs, and other agencies that deliver services for GBV survivors.
- 7. Expand awareness-raising activities.**
  - 7.1 Expand awareness-raising activities in communities and schools, especially on GBV issues, human rights, and related government law and policies.
  - 7.2 Expand awareness within government and among development agencies of relocation issues and help being provided to foster links with existing and planned livelihoods, WASH, education and other development programs.
- 8. Develop relevant law and policy and better resource the justice sector.**
  - 8.1 Develop policies and laws that target all forms of violence against women and that protect and support survivors of violence.
  - 8.2 Advocate for a witness and survivor protection law.
  - 8.3 Expand avenues for obtaining legal help for GBV cases in the provinces, including the establishment of a Human Rights Desk in each province.
- 9. Use research to better inform the development and implementation of relocation services.**
  - 9.1 Map livelihoods programs in PNG to help agencies link survivors with support for livelihoods when they are relocated.
  - 9.2 Draw on the results of existing research to inform the planning and development of relocation services.
  - 9.3 Share the results from this research on relocation support to help inform broader planning processes, such as the development of the “National Action Plan to Address Sorcery Accusation-Related Violence in PNG”.
- 10. Improve and consolidate data collection and analysis related to relocation needs and services.**
  - 10.1 Develop a standardised format for service providers to use for data collection.
  - 10.2 Develop and keep up-to-date a database of service providers and services for relocation.
  - 10.3 Identify and resource a lead agency to collect, analyse and share data.



A nurse of the Antenatal Clinic of Port Moresby is conducting a medical examination of five months pregnant Doring (23), who was brutally attacked by her husband and expelled from her house early in the morning. Doring's drunken husband assaulted her, kicking her in the abdomen, and repeatedly striking her face against the wall. During the ultrasound the doctors did not hear the heartbeat of the unborn baby.







Mama Rasta was accused of sorcery by the people in her village after the death of a local young man in 2003. She was set upon by a crowd at his funeral then beaten and strangled before she escaped. She lost her hand in the attack.

## CASE STUDIES

The following case studies illustrate a range of relocation cases. Each features people who needed to move because of sorcery-related violence. For the purposes of anonymity, names of people have been changed and specific locations not identified.

### CASE STUDY 1

Moro, a woman in her late 30s, is from a Highlands Province where she has been living in her home village. Her father died when she was a small child. She has two brothers, one who was adopted by a relative, and one who moved to a coastal province when he began to work there. Moro has one adopted child who she has looked after since he was a small baby. This child's father is in the village but does not admit this is his child, and the mother, who was not married to the father, abandoned the child soon after it was born and went to her home province. This child is HIV positive and on drug treatment. One of Moro's uncles has had three daughters die of HIV and AIDS in the past five years, the most recent one in 2012. After each death, this uncle and other family members accused Moro and her mother of being sorcerers responsible for the deaths.

When Moro was a young girl and her father was still alive, her mother had been accused of being a sorcerer following the death of a child in the village. At that time, her mother was being tortured and would have been killed if not for the intervention of a respected businessman who rescued her. Since then, whenever there has been sickness, death or other misfortune in the village, the widowed mother has been accused and threatened.

Since the deaths of the uncle's three daughters, there have been continuous death threats against Moro and her mother, and the perpetrators have wanted to burn Moro's house with her, her mother and adopted child in it. Whenever Moro and her mother have seen potential perpetrators getting drunk they have sought refuge. They go to houses of friends for a night or two and then go back to their own house. On three occasions they went to the house of a human rights defender based in the area. Subsequently, this human rights defender was also accused of being a sorcerer because she was helping them, and people ransacked her house and threatened her, forcing her to move.

The family continued to live in constant fear. In late 2013, the human rights defender, who works with an HRDN organisation in the area, arranged for them to stay at a guesthouse for four nights while arranging to move them out of the province. By this time the organisation had received some funding support for relocation cases. This organisation helped Moro and her adopted son go by vehicle to the coast and then by boat to another province to stay with one of Moro's relatives. The mother stayed behind and went back to her village because she didn't want to move and felt it would be degrading to live with this relative.

The relative kindly took care of Moro and the child, and they were safe there. But within two weeks the adopted child started getting medical problems in the new location because of the change of climate and food. So Moro felt that they had to go back to the Highlands. The relative supported them by paying for the trip back, which they made on their own. They went back to their village, and back to the situation they were in before. They told the HRDN organisation that they had returned, and the organisation has been monitoring their situation closely, ready to help them get out if they're under immediate threat. Moro and her mother cannot sleep at night, as they take turns to sleep and watch for threats.

Life is extremely hard. Moro thinks that her only option will be to relocate to another place in the Highlands. But this will be very expensive and difficult as they do not have other family they can safely live with in the Highlands. They will need some land of their own to be able to live and support themselves.

### CASE STUDY 2

Ambai is from a Highlands province, and was living in her husband's village in the same province. She is in her mid-40s and was attacked after a one-year-old child died in her community. Her husband is the child's uncle. Ambai was at the mourning rituals (haus kraik) in the house of the deceased child after the burial, and in the late afternoon she left to go down the hill to her house to get some money to contribute to the haus kraik expenses. On the way back up the hill she met a man, who was an in-law of the father of the deceased child. He had been at the haus kraik and they talked for a couple of minutes. Seven young men who had bush knives were on the path further up the hill and saw her talking to this man, and as Ambai was going past them on her way back to the haus kraik they stopped her. One of the boys accused her, saying that she and the man had killed the child and were now planning to dig up the body and eat it. She sensed that they wanted to attack the man as they were asking what his name was. She told them that what they were saying was not good, that there are laws, and that they cannot say such things to people. But they persisted with their accusations.

Ambai felt uncomfortable and went back down the hill to her house to tell her husband what had just happened. As she was on her way, she saw that the young men were destroying the garden around the man's house. She told her husband what the young men had said and done. Her husband, who was very tired after not sleeping for two days because of the haus kraik, did not think the incident was very serious and went back to sleep. Her husband was a leader in the community, and Ambai was also an influential person there. As they had good standing in the community they did not feel at serious risk.

Then it was getting dark, and Ambai went to the kitchen in front of her house. Four of her children were there, and as she was telling them what had happened, the seven young men came to the house. They called to her to come out and to go up the hill to the men's meeting house (haus man) to discuss the accusation.

She went with the seven young men, with her eldest son following. While they were walking up the hill, the young men started hitting Ambai on the back and pushing her and making more accusations, saying that she and the man had killed the child and that she had to explain to the community why they did it.

At the haus man there were many male community members waiting, and once inside the seven young men started punching and kicking Ambai around, from one to another. Four other men were supporting them. One of these men was standing at the door and stopped Ambai from running out. As they were beating her she fell down after a strong kick to the lower back, and as she was trying to get up she was cut above the eye with a bush knife, and the skin fell over her eye. Then she was cut again by another person, this time on her cheek, and the cut went deep to the bone and through to the mouth cavity. The son ran back home to tell his father what was happening.

At this point a man in the haus man helped Ambai, pulling her to a corner and stopping the young men from further attacking her. The husband arrived with the son and talked to the seven young men, saying how they had been practically raised by Ambai and had now turned against her, and that they should leave her alone. He said that he would take her to the hospital and come back later to take action. The husband and son carried Ambai out; she could not walk after the blow to her lower back. As they went down the hill the husband's kinsmen were telling him that he should let them kill her, saying that she was a sorcerer. The husband replied that there would be big trouble and fighting if she was killed.

They spent the night at their house, as it was a three-hour walk to the nearest health centre and it was raining heavily. While at the house, a relative, who had not been at the haus man, arrived and helped stop the bleeding. They were trying to find someone who could get a vehicle to take her to the health centre. The son was phoning family members, including the wife of one of Ambai's brothers. They did not know it, but this woman is a community focal point for an HRDN organisation in the province.

In the morning the father and his son, as well as the relative and his son, took Ambai out of the house on a stretcher, intending to carry her to the health centre. The young men were up the hill and again made accusations and threats and started running down the hill to kill her. The four men quickly hid her in the bush and fled in different directions. When the mob arrived they did not find her and destroyed the stretcher, which had been left on the path. Meanwhile, an influential community member, allowed Ambai's son to hide in his nearby house. Some of the young men went further down the hill to block the road while others continued looking for Ambai.

As young men were going around searching houses, Ambai, who had been left alone, heard them coming; she thought she was about to die and prayed what she thought was her last prayer. Just then, six young men from a neighbouring tribe arrived; they were related to Ambai and had heard what had happened the previous evening.

They had set out once the heavy rain had abated, and after walking for several hours they got to the village just in time to confront the young men who were about to kill Ambai. Then the two groups took Ambai back to the haus man for a meeting with some of the men in the community. While the talking was underway, the son set off to Ambai's home village, about five hours walk away, to tell them what was happening. The community members in the haus man said that Ambai should leave the community, and that the husband and children could stay, but should not support her in any way. Ambai's husband refused to let her go alone, and that as community leaders they had had their dignity tarnished, and that he and his children would leave as well.

Thinking the matter had been decided, and tribal conflict avoided, the six young men from the neighbouring tribe left. But the perpetrators still wanted to kill Ambai, and went to block the road again. Ambai's husband saw this and together with one of his daughters carried Ambai along a bush track, a much longer route to the health centre than via the road. The journey took them nine hours and involved crossing two flooded rivers. They finally reached it at around 1am the next morning.

Ambai's injuries were too serious for the small health centre, and the health officer wanted to refer her to the provincial hospital, but the cost for the hospital would have been more than 500 kina (AUD \$219). Ambai was in no condition to move, and they had no funds to hire transport, so they asked the health officer to do what he could, and he patched the wounds. They then stayed at this health officer's house. A week later, the focal point from the HRDN organisation arrived, took the details of their case, and went to the provincial capital to inform the HRDN organisation. A week later, this organisation sent a vehicle to collect Ambai to take her to the provincial hospital. But given her condition and lack of money they instead went to her home village, where she stayed for the next three months.

During this time people from the HRDN organisation came with some reporters to report on the case. They then received support for submitting a case against the mastermind behind the actions of the young men to the police. Ambai and her husband him and that his motivation was jealousy because of Ambai's status in the community as a leader. On three previous occasions he had accused Ambai of being a sorcerer, two times verbally, and the third time by going to the village court. On that occasion, the village court had supported Ambai and told the man to apologise, but he never did. He took his opportunity to harm Ambai when the young child died in the village. There was no history of people in Ambai's family being accused of sorcery.

She and her husband and children stayed with one of her relatives in Ambai's home village. After some time, this relative started having doubts about Ambai, thinking perhaps she was a sorcerer. Ambai wanted to move, so she contacted the HRDN organisation and asked for help to move again. She was moved to a main town, to the house of another focal point from the HRDN organisation. This person is not related to Ambai but was willing to help her.

By this time some donor funding had become available to the HRDN organisation to help with relocations, and the organisation helped Ambai resettle in the town and to go to a hospital for treatment for her injuries.

Ambai started a small informal business activity to get some income, but stopped this after people buying things on credit did not subsequently pay. She and her husband now have a garden on a small plot of land that the focal point has let them use. They have been living with the focal point for eight months and struggle on a day-to-day basis. Ambai is there with her husband and their three youngest children. They are not going to school because they cannot afford it. One of the other two children is living with an aunty and going to school, and the other is at boarding school with support from that aunty.

The HRDN organisation is providing some legal help, with the aim of getting compensation through the courts so the family can buy some land and get settled again. The main perpetrator had been arrested but was subsequently released after six months. The case has not yet been heard in court, as the police have not sent documents to the court. Ambai thinks bribery has been involved. Meanwhile, the family, though safer than before, is still under threat. The perpetrators know where they are, and have made threats against them.

### CASE STUDY 3

Michael, aged in his mid-50s, is from a Highlands province, and the fifth generation in his tribe. In 1990, Michael and his first brother successfully applied on behalf of their clan for a lease of government land. This was done as a business group composed of clan members, of which Michael was secretary and his brother was chair. Michael and his brother registered on behalf of the whole clan. They were earning income from the land from businesses that used it. Michael and his brother did not have any children at that time and adopted two boys. Their sister had married a man from another tribe and this boy was adopted by them and lived with them for more than 20 years, and they also adopted another boy, their mother's brother's son, who lived with them.

When these boys grew up to be young men they wanted to get the income from the land. There were also other people from Michael's clan who were owed money, animals and other things by his brother. They wanted to take the land as payment, so they supported the two young men. The two young men and others began threatening Michael and his brother with words, bush knives and sticks.

In February 2008, the brother, as chair of the business group, wrote a letter to the two young men asking them to stop their threatening behaviour. It was delivered to the two young men, and copies of this letter were given to the police (it was then registered in the police operations book). That night the brother was murdered by these two. Early the next morning the police found the body, but rather than taking it for an autopsy they brought it back to the village.

The mourning process began. After a few days, while people were still mourning, the two young men and some other clan members came to Michael's house and accused him and his pregnant wife of causing the death by sorcery, and also accused them of other sorcery. They hung them near their house, leaving them to die during the night, but Michael managed to get himself and his wife free. They went into the house, and their baby was then born prematurely. This was their third child, and the two other young children were also with them in the house. They then stayed in their own house while his wife recovered; they were able to do this because some people from their clan came and helped them.

After one week, the wife got stronger and could walk again, and it was then that Michael, his wife and three children were able to escape. They went to the main hospital in the province, and the wife and three children stayed there while Michael went to the police and media to tell them what had happened. The police agreed that Michael had not done anything wrong, but they took no action against the perpetrators. After a while, Michael took his wife and children to a different district where there were some people from his clan. No one helped him take his wife and children to this new location.

A company that wanted to build a development on the land gave Michael some money (3,000 kina (AUD \$1,315)). He used some of this money to travel to Port Moresby to get help with his case, and to see the Lands Department and Police Commissioner's Office. He went many times to these offices, but with no progress. Months passed. Then more than a year passed. Michael was living on the street some of this time. At other times, people helped him and he could stay in friends' houses.

In 2009, he heard his youngest child had died of illness, as his wife and children were not getting enough help from Michael's relatives. His wife then took the two remaining children to her home village. Another child died there, from malaria. Only the eldest child was still alive.

Michael got a copy of the lease from the Lands Department in 2009. At this time, one of the directors from the company who gave him the 3,000 kina (AUD \$1,315) wanted it back. They wanted the title to the land, not to have a sub-lease. They reported this to police and they arrested Michael on a charge of using false pretenses to get the 3,000 kina (AUD \$1,315). The UN helped with a letter to the police and the public solicitor saying it was not a criminal case, but Michael was not released from custody. Instead the police transported him to a provincial centre in the Highlands and put him in a cell there. The UN then helped organise legal support from the public solicitor in that province. They went to court and the magistrate allowed bail. The UN organised the bail payment and Michael was released. He subsequently went to court and the case of using false pretenses was dismissed.

The UN also helped with some funds, which enabled Michael's wife and child to join him. They lived with friends in their province. At the end of 2011, Michael went back to Port Moresby because he heard the two young men and others wanted to change the land lease. In 2012, he searched the land title records and found the lease had been changed

from his business group name to another business group name. He was told that people had bribed an officer in the Lands Department to make this change. In 2014, an INGO helped him and sent a letter to the Lands Department. The Lands Department then changed the lease back to the name of Michael's business group. He also received legal aid from the public solicitor to help with taking the people to court for fraud.

In 2014, Michael was living on the street again in Port Moresby and sometimes in friends' houses. He was trying to raise funds to go back to the Highlands for the fraud case. While he was appealing for funds on the street, one of the people from the group (who was involved in trying to get the land) tried to attack Michael, and he ran away and stayed at a friend's house. The next day the same man attacked him, damaging his belongings and breaking his hand. Michael went to a national news reporter to publicise what had happened. While with the reporter, Michael contacted the UN, who contacted an INGO, who then contacted a refuge centre. This centre arranged to pick Michael up and took him to the hospital for treatment and then to the refuge where he stayed for several weeks. But this refuge does not have facilities for men and did not want him to stay long.

Michael said that there was a history of accusations of sorcery in his family. Many years before, community members had accused his grandmother of sorcery and murdered her. Later some had accused his father of sorcery, but they did not murder him because Michael and his brother were there and strong enough to protect him. Michael thinks that, if he had not gone to the media in 2008, the murders would have continued in his community. He has just been helped by an INGO to take a flight back to the Highlands to be with his family and wait for the hearing of the fraud case. It has been over six years since the violence started and he had to leave his community, but he has not given up.

## CONCLUSION

The research has found that a lot of good work is happening to help people relocate when they're at risk of violence. Networks are essential in helping survivors of violence to relocate. The types of violence that force people out of their homes and communities are diverse, complex and challenging to respond to, especially sorcery-related violence. There has been a long history of help to people who have had to move, but only a small number of those needing help could be relocated until funding became available. But there are now some effective local networks in place that can respond rapidly and have saved lives. Overall, relocation support needs to be properly resourced, and existing services need to be expanded and replicated.

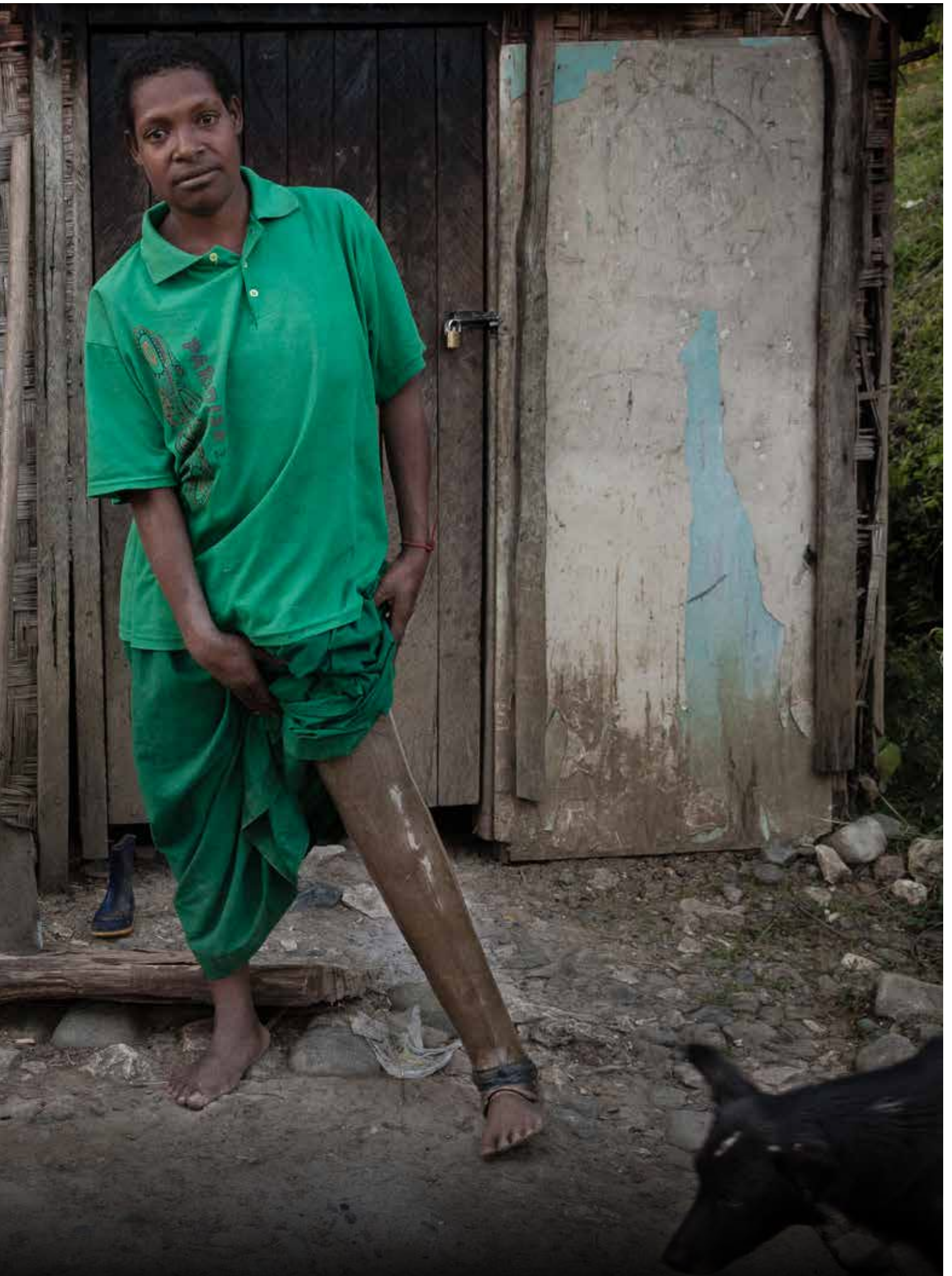
**For more information, take a look at the 'Oxfam in PNG' Facebook page, or for the full report email Oxfam Australia at [enquire@oxfam.org.au](mailto:enquire@oxfam.org.au)**

## ACRONYMS AND ABBREVIATIONS

CBO	Community-based organisation
CSR	Corporate social responsibility
DFAT	Department of Foreign Affairs and Trade
EVAW	Ending Violence Against Women
FSC	Family Support Centre
FSV	Family and sexual violence
FSVAC	Family and Sexual Violence Action Committee
FSVU	Family and Sexual Violence Unit
GBV	Gender-based violence
HRDN	Human Rights Defenders Network
NGO	Non-government organisation
WASH	Water, sanitation and health



Nineteen-year-old Julie shows off her prosthetic leg in front of her house in Kundiawa town, Simbu Province. At the age of nine months, Julie's father attacked her and chopped off her leg. When she went to the city of Lae in 2011 to be fitted for a new prosthetic leg she was raped by members of a local gang and later found out she was pregnant. She now lives with her son James (left) in Kundiawa town.



A woman looks down the valley from Kassam pass, Morobe province. The beautiful landscape of PNG's highlands belies the brutal reality of life in the region, where more than 90% of women report suffering gender-based violence.

All photos: Vlad Sokhin



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