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Disability Support in Papua New Guinea: Current State and Future Strategies for Improvement

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Abstract

Papua New Guinea faces significant challenges in supporting its estimated one million citizens with disabilities, representing 10-15% of the population. Despite progressive policy commitments, including the National Policy on Disability 2015-2025 and ratification of the UN Convention on the Rights of Persons with Disabilities in 2013, substantial gaps persist between policy intentions and lived realities for persons with disabilities (PWDs). This paper examines the current state of disability support in PNG through a comprehensive literature review and policy analysis, identifying key barriers and emerging opportunities for improvement.

The research reveals a striking policy-practice divide characterised by progressive frameworks alongside persistent exclusion. Key findings include only 2% of PWDs currently access formal support services, leaving 98% without adequate assistance; physical infrastructure remains largely inaccessible due to geographic constraints and poor universal design; deep-rooted cultural stigma and supernatural beliefs about disability continue to marginalise PWDs; and weak institutional capacity limits effective policy implementation. Women and children with disabilities face compounded vulnerabilities, while rural communities experience the greatest service gaps.

However, emerging positive trends provide hope for transformation. The government's commitment to fast-track disability legislation in 2025, revitalisation of disabled persons' organisations, successful pilot projects demonstrating inclusive community development, and growing advocacy by PWDs themselves signal potential for significant progress.

The paper proposes a comprehensive strategy organised around five themes: strengthening legal and policy implementation through enacting the long-awaited Disability Act and developing costed implementation plans; improving service access through inclusive education expansion, accessible healthcare and infrastructure development; fostering cultural change through community awareness campaigns and leveraging faith-based institutions; building institutional capacity through professional training and improved data systems; and promoting inclusive communities that address intersectional inequalities.

These recommendations emphasise the interconnected nature of barriers and solutions, requiring coordinated action across government, civil society and development partners. The analysis demonstrates that disability inclusion is not merely a moral imperative but a development necessity that can catalyze broader social and economic improvements. PNG stands at a critical juncture where sustained political will, adequate resources and community engagement can transform the lives of persons with disabilities and strengthen the nation's social fabric. Success in implementing these strategies will determine whether PNG achieves its Vision 2050 goal of becoming a wise, fair and happy society that truly leaves no one behind.

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Executive Summary

Papua New Guinea stands at a critical crossroads in its approach to disability support. With over one million citizens living with disabilities — representing 10-15% of the population — PNG has made significant policy commitments but struggles with implementation gaps that leave most persons with disabilities (PWDs) marginalised and unsupported.

Current Reality

Despite progressive frameworks including the National Policy on Disability 2015-2025 and ratification of the UN Convention on the Rights of Persons with Disabilities, the lived reality for most PWDs remains one of exclusion:

- **Service gap**: Only 2% of PWDs access formal disability services, leaving 98% (approximately 950,000 people) without support.
- **Educational exclusion**: Most children with disabilities are not enrolled in school or drop out early due to lack of accommodations.
- **Infrastructure barriers**: Physical environments remain largely inaccessible, with most public buildings, transport, and pathways lacking universal design features.
- **Cultural stigma**: Deep-rooted beliefs linking disability to supernatural causes perpetuate discrimination and social isolation.
- **Institutional weakness**: Limited government capacity, poor coordination between agencies, and minimal budget allocation hinder effective implementation.

Key Barriers Identified

Geographic and infrastructure challenges: PNG's rugged terrain and limited infrastructure make service delivery extremely difficult, particularly for the 85% of the population living in rural areas. Most facilities lack basic accessibility features.

Cultural and attitudinal barriers: Traditional beliefs associating disability with sorcery or shame lead to hiding PWDs and denying them opportunities. Women with disabilities face compounded discrimination.

Legal and institutional gaps: The absence of comprehensive disability rights legislation limits enforcement mechanisms. Government departments lack trained staff, coordination mechanisms, and dedicated funding for disability programs.

Poverty and exclusion cycle: Disability often leads to poverty through exclusion from education and employment, while poverty increases disability risk through poor healthcare and dangerous conditions.

Emerging Opportunities

Encouraging developments provide a foundation for transformation:

- **Political commitment**. Prime Minister Marape's 2025 pledge to fast-track the Disability Act signals high-level support.
- **Civil society revival**. The PNG Assembly of Disabled Persons held its first strategic planning meeting in seven years, demonstrating renewed advocacy momentum.
- **Successful pilots**. Community-based projects show that inclusive approaches can work when properly designed and implemented.
- **Regional support**. International partnerships, particularly with Australia, provide technical and financial assistance for capacity building

Strategic Recommendations

This analysis proposes a comprehensive five-pillar strategy:

1. Legal and policy strengthening

- Enact the Disability Act with enforcement mechanisms and accessibility standards
- Develop a successor National Disability Strategy 2026-2035 with costed implementation plans
- Establish Provincial Disability Coordination Committees with PWD representation

2. Service access improvement

- Expand inclusive education through school accessibility modifications and teacher training
- Integrate disability services into the health system with rehabilitation units and assistive technology provision
- Implement universal design standards for all new infrastructure projects

3. Cultural transformation

- Launch culturally appropriate awareness campaigns using local languages and respected community figures
- Engage churches and traditional leaders as disability inclusion advocates
- Strengthen disabled persons' organisations as advocates and service monitors

4. Institutional capacity building

- Train professionals across sectors (education, health, social services) in disability inclusion
- Implement the Washington Group disability questions in national surveys for better data
- Establish monitoring systems with disability-disaggregated indicators

5. Inclusive community development

- Integrate disability considerations into disaster preparedness and climate adaptation
- Address intersectional discrimination faced by women and children with disabilities
- Develop social protection measures including targeted cash transfers for PWDs

Implementation Priorities

Immediate Actions (0-2 years):

- Pass the Disability Act and establish enforcement mechanisms
- Launch national awareness campaigns
- Begin teacher aide training and school accessibility modifications
- Strengthen DPO capacity and government coordination mechanisms

Medium-term Goals (2-5 years):

- Scale successful pilot programs nationwide
- Establish rehabilitation services in all provincial hospitals
- Implement accessibility standards for public infrastructure
- Develop comprehensive data systems for monitoring progress

Long-term Vision (5-10 years):

- Achieve universal access to inclusive education
- Establish sustainable social protection systems for PWDs
- Transform cultural attitudes toward disability inclusion
- Position PNG as a regional leader in disability rights

Economic and Social Impact

Investing in disability inclusion will yield significant returns:

- **Human capital development**. Including PWDs in education and employment expands the talent pool and reduces dependency.
- **Universal benefits**. Accessible infrastructure and services benefit everyone, including elderly people and those with temporary impairments.
- **Social cohesion**. Inclusive communities are stronger, more resilient, and better positioned for sustainable development.
- **International standing**. Progress on disability rights enhances PNG's reputation and access to development funding.

Financial Requirements

While comprehensive costing requires detailed analysis, key investments include:

- Legal framework establishment and institutional capacity building. Moderate cost with high impact.
- Infrastructure accessibility modifications. Significant upfront investment but long-term universal benefits.
- Service expansion (education, health, social protection). Substantial ongoing costs requiring government commitment and donor support.
- Awareness and cultural change programs. Relatively low cost with potentially transformative impact.

Call to Action

PNG cannot afford to leave one million citizens behind. The country's Vision 2050 commitment to becoming a "wise, fair, and happy society" demands immediate action on disability inclusion. Success requires:

- **Government leadership**. Sustained political commitment backed by adequate resources.
- **Community engagement**. Active participation of PWDs in decision-making processes.
- **Partnership approach**. Coordinated action across government, civil society, and development partners.
- **Evidence-cased planning**. Improved data collection and monitoring systems.
- **Cultural transformation**. Long-term investment in changing attitudes and behaviors.

Conclusion

The path forward is clear but demanding. PNG has the policy framework, international support, and emerging civil society capacity needed for transformation. What remains is the political will to allocate resources, the institutional commitment to coordinate effectively, and the social determination to change deeply held attitudes.

The recommendations in this paper provide a roadmap for creating an inclusive society where persons with disabilities can participate fully as equal citizens. The cost of action is significant, but the cost of inaction—continued marginalisation of one million Papua New Guineans—is far greater. The time for implementation is now.

Introduction

Papua New Guinea (PNG) faces significant challenges in supporting persons with disabilities, due to a combination of geographic, economic, and socio-cultural factors. With an estimated population of over 9 million in 2025, at least 10–15% (approximately 1 million or more people) are living with some form of disability (Human Rights Watch, 2021; The National, 2025). This proportion is in line with global estimates from the World Health Organization (WHO) that around 15% of any population has a disability (Human Rights Watch, 2021).

Disability in PNG spans physical, sensory, intellectual, and psychosocial conditions, including those arising from disease, injury, or congenital factors. Historically, however, persons with disabilities in PNG have been "invisible" and marginalised in development processes (socialprotection.org, 2015). Many have lacked access to education, employment, and public life due to widespread barriers in the physical environment and in societal attitudes (Human Rights Watch, 2021).

In recent years, PNG's government and civil society have begun to address these gaps through new policies and programs – notably the National Policy on Disability 2015–2025 – and by ratifying the United Nations Convention on the Rights of Persons with Disabilities (CRPD) in 2013 (Human Rights Watch, 2021). Yet, substantial work remains to translate these commitments into reality on the ground.

This research paper provides an in-depth examination of the current state of disability support in Papua New Guinea and proposes future strategies for improvement. It draws on literature from government publications, United Nations (UN) and non-governmental organisation (NGO) reports, academic studies, and local advocacy materials to present a comprehensive, evidence-based analysis. The paper addresses both national and community-level perspectives, exploring how high-level laws and policies are implemented (or not) and how communities perceive and include persons with disabilities.

Key aspects examined include the legal and policy framework for disability inclusion, the availability of infrastructure and services ensuring accessibility, cultural and attitudinal challenges, and the capacity of institutions tasked with supporting persons with disabilities (PWDs). Relevant statistics and case studies are incorporated to illustrate the realities faced by PWDs and to highlight both barriers and emerging good practices. The overall aim is to identify strategic recommendations that can strengthen disability support in PNG, ensuring that no one is left behind in the country's development over the coming years.

Literature Review and Policy Framework

International Commitments and Frameworks

Papua New Guinea's approach to disability is guided in part by its international commitments. PNG ratified the UN Convention on the Rights of Persons with Disabilities (CRPD) in September 2013, binding itself to uphold the rights of PWDs and promote their full inclusion in society (Human Rights Watch, 2021). By ratifying the CRPD, PNG agreed to harmonise its laws and policies with the convention's standards, which emphasise non-discrimination, accessibility, equal opportunities, and active participation of PWDs in all aspects of life.

PNG is also a signatory to the 2030 Agenda for Sustainable Development, which includes goals and targets (such as Sustainable Development Goal 4 on inclusive education and Goal 10 on reducing inequalities) explicitly referencing disability inclusion. At the regional level, PNG has endorsed frameworks like the Incheon Strategy to "Make the Right Real" for Persons with Disabilities in Asia and the Pacific (2013–2022) and the Pacific Framework on the Rights of Persons with Disabilities (2016–2025). These regional strategies set out coordinated actions for Pacific Island countries to improve disability rights, services, and data collection. They reinforce principles of "nothing about us without us" – i.e., involving persons with disabilities in decisions affecting them – and call for stronger laws and institutions to uphold disability rights.

National Legal and Policy Frameworks

PNG's domestic policy landscape for disability has evolved over the past two decades. A cornerstone is the National Policy on Disability 2015–2025 (NPD), which serves as the country's "national strategy and plan of action for the disability sector" (WHO MiNDbank, 2015). This policy, developed through extensive stakeholder consultations, is grounded in a vision of "Remove Barriers, Make Rights Real" (The National, 2025; WHO MiNDbank, 2015).

The vision recognises that persons with disabilities are often prevented from exercising their rights not by their impairments, but by external barriers – physical, social, and attitudinal – imposed by society (WHO MiNDbank, 2015). For example, as the policy notes, a wheelchair user has the right to work, but if workplaces are only accessible by stairs with no ramp or elevator, that right cannot be realised due to environmental barriers (WHO MiNDbank, 2015). The NPD thus shifts focus to society's responsibility to dismantle barriers and promote inclusion, echoing PNG's constitutional principle of equal rights for all citizens (WHO MiNDbank, 2015).

The National Disability Policy 2015–2025 established three primary objectives to achieve its goal of a more inclusive society (The National, 2025):

1. **Rights and advocacy**. Promote and protect the rights of persons with disabilities through organised networking, advocacy, and support for change agents (The National, 2025). This involves empowering disabled persons' organisations (DPOs) and advocates to raise awareness, combat stigma, and influence policy. It aligns with CRPD obligations to involve PWDs in decision-making.

2. **Services and rehabilitation**. Improve delivery of disability services, using community-based rehabilitation (CBR) and inclusive development approaches to reach people across the country (The National, 2025). This objective emphasises expanding access to essential services such as healthcare, assistive devices, rehabilitation therapy, inclusive education, and skills training. The policy endorses CBR as a strategy to leverage communities and local resources (including churches and NGOs) to support PWDs in rural areas where government services are scarce.
3. **Institutional strengthening**. Strengthen the institutional framework, coordination, and financing for implementing disability initiatives (The National, 2025). This includes establishing effective coordination mechanisms (e.g. a National Disability Authority or inter-agency committee), improving data collection and monitoring, building capacity of government agencies, and increasing budget allocations for disability programs.

The NPD 2015–2025 was intended to operationalise these objectives via an Action Plan and to decentralise implementation through Provincial Coordinating Committees on Disability (The National, 2025). It also closely aligns with sectoral strategies – for instance, it references the use of Community-Based Rehabilitation and inclusive education policies in the education sector – to ensure disability inclusion is mainstreamed in health, education, infrastructure, and other domains (Motivation Australia, 2018).

As part of its policy framework, PNG has a National Board for Persons with Disabilities (formerly the National Board for Disabled Persons, established in 1979) which is a coordinating body for disability services and programs. The Board, under the Department for Community Development and Religion, works alongside the PNG Assembly of Disabled Persons (PNGADP), which is the national umbrella DPO representing persons with disabilities. PNGADP and its affiliated provincial DPOs have played a consultative role in policy development and are key partners for implementation.

Despite the comprehensive scope of the National Disability Policy, a notable gap in PNG's framework had been the absence of specific disability rights legislation. PNG inherited a reliance on general social welfare provisions and the traditional "wantok" system of family support, without a strong statutory law to enforce the rights of PWDs. This began to change in the late 2010s. In 2018, the Government – through the National Executive Council (NEC) – directed that a dedicated Disability Act be developed to "domesticate" the CRPD in national law (Post-Courier, 2018).

A Draft Disability Authority Bill 2018 was subsequently prepared and underwent nationwide stakeholder consultations (Post-Courier, 2018). The Bill's intent was to create a new legal framework that would give persons with disabilities enforceable rights to access basic services and require government agencies to accommodate their needs (Post-Courier, 2018). The Department for Community Development worked with the Constitutional and Law Reform Commission and other agencies on this draft, under the same vision of "remove barriers – make rights real" (Post-Courier, 2018).

Anna Solomon, then Secretary of Community Development, highlighted that enacting this law would be a "milestone" for PNG, giving more power to PWDs to demand their rights and ensuring they are included in all aspects of development (Post-Courier, 2018). However, as

of the early 2020s the Disability Authority Bill had not yet been passed by Parliament, leading to growing calls from advocates to expedite it.

By 2025, momentum for legal reform had reached the highest levels of leadership. Prime Minister James Marape publicly reaffirmed the government's commitment to "fast-track" the long-awaited Disability Bill, stressing that as PNG moves beyond 50 years of independence, "no one should be left behind" and persons with disabilities must have a secure and recognised place in society (The National, 2025). Marape noted that current estimates indicate at least 10% of Papua New Guineans – over one million people – live with a disability, and he pledged to "enshrine their rights in a dedicated Act of Parliament" with provisions for budgeted support and resource allocation (The National, 2025). In June 2025, he instructed the Department for Community Development and Religion to expedite the drafting and submission of the Bill (The National, 2025).

This top-level backing suggests that a Persons with Disabilities Act (or Disability Services Act) is likely to be enacted in the near future, filling a critical gap by providing legal protection against discrimination and a mandate for inclusive services across sectors.

In addition to the forthcoming disability law, PNG has other relevant laws and policies. The national Constitution (1975) includes National Goals and Directive Principles that promote equal participation by all citizens and respect for human dignity – ideals that underpin disability inclusion. There are also sector-specific policies that incorporate disability considerations. For example, the Inclusive Education Policy (last updated in 2020 as the Inclusive and Special Education Policy) guides the education sector in integrating children with special needs into schools, and sets minimum standards for accessibility and teacher training on inclusive education (Pacific Data, 2020).

The Department of Education's National Inclusive Education Plan and a network of Inclusive Education Resource Centres (IERCs) support children with disabilities in some provinces. In the health sector, the National Health Plan 2011–2020 acknowledged disability and led to initiatives like the development of assistive device services (Motivation Australia, 2018). The Department for Community Development also adopted a cross-cutting Gender Equality and Social Inclusion (GESI) Policy for the public service, which encourages all government agencies to be inclusive of women, PWDs, and other marginalised groups in their staffing and programs (Motivation Australia, 2018).

Furthermore, PNG's commitment to disability-inclusive development is reflected in partnerships with donors: for instance, the PNG–Australia Partnership has actively promoted disability inclusion in aid programs, supporting the training of government and civil society representatives on disability rights and helping PNG improve its policy framework (PNG Haus Bung, 2022; Post-Courier, 2018).

Role of Civil Society and NGOs

The literature highlights that civil society organisations, especially disabled persons' organisations and faith-based service providers, are crucial in both policy advocacy and service delivery in PNG. The PNG Assembly of Disabled Persons (PNGADP) serves as the national voice of persons with disabilities, advocating for their rights and representing PNG

in regional forums. PNGADP was instrumental in contributing to the National Disability Policy and has continued to push for its implementation.

After a period of limited activity, PNGADP recently revitalised its efforts – in 2025 it held a Strategic Planning and Annual General Meeting, the first in seven years, to chart its direction and strengthen engagement with government (Post-Courier, 2025). At that meeting, PNGADP leaders and representatives from all provinces reflected on challenges and discussed updating the National Advocacy Plan to guide disability advocacy for the next five years (Post-Courier, 2025). The Prime Minister's attendance at the PNGADP forum in 2025, where he voiced support for the Disability Services Bill (Post-Courier, 2025), indicates growing government recognition of the importance of DPOs.

Service NGOs and church-based organisations also form part of the literature on PNG's disability landscape. Callan Services (a Catholic-run network) has for decades provided education and rehabilitation services for children with disabilities, running IERCs and outreach in many provinces. Cheshire Disability Services in Port Moresby and other cities offers residential care, physiotherapy, and community-based programs. Many such NGOs fill the gaps left by limited government services, often with donor funding. A 2023 World Vision-led study on disability inclusion in PNG noted that organisations of persons with disabilities and other civil society groups are key enablers of participation for PWDs, but they require greater support and capacity-building (World Vision, PNGADP & Humanitarian Advisory Group, 2023).

The community-based rehabilitation (CBR) approach, which PNG embraced in its earlier National Disability Policy (2006) and continues to endorse, relies on training community volunteers and family members, with support from itinerant specialists (often NGO workers), to support PWDs in their own communities. CBR has been implemented in areas with the help of NGOs and provincial community development offices (Motivation Australia, 2018), though coverage is uneven.

In summary, PNG's policy framework for disability support is evolving, characterised by strong high-level commitments on paper but gaps in implementation. The National Disability Policy 2015–2025 established a progressive vision and goals aligned with global norms, and the anticipated Disability Act promises to reinforce those goals with legal force. Additionally, sectoral policies in education and health acknowledge disability inclusion, and partnerships with civil society are recognised as vital. The literature underscores that the success of these frameworks depends on effective implementation mechanisms, funding, and changing societal attitudes – issues which are explored in the following sections.

Current Situation and Barriers

Despite the formal frameworks in place, the current situation for persons with disabilities in Papua New Guinea is one of substantial unmet needs and ongoing barriers. Research and reports consistently show a large gap between policy intentions and on-the-ground realities for most PWDs. This section outlines the major barriers in the current system, including lack of access to services and infrastructure, cultural and attitudinal challenges, and institutional capacity constraints. It also highlights statistics and cases that illustrate these challenges.

Prevalence and Lack of Services

PNG lacks comprehensive official data on disability prevalence, as national censuses and surveys have historically not gathered detailed disability information. In lieu of that, estimates are used. The WHO's global estimate (15% of the population) implies that over 1.2 million Papua New Guineans have a disability (based on ~8 million population in late 2010s) (Human Rights Watch, 2021; Global Partnership for Education, 2023). The government often cites a more conservative figure of "at least 10%" of the population (around 1 million people) living with disabilities (The National, 2025).

A Household Income and Expenditure Survey in 2009–2010 found that about 9.8% of the population had some form of mobility difficulty, and experts note that if data had included all types of impairments (visual, hearing, intellectual, etc.), the percentage would likely approach the global figure of ~15% (Human Rights Watch, 2021). In any case, the number of persons with disabilities in PNG is sizable – on the order of one million or more – and is expected to grow further due to population growth (around 3% per year) and factors like aging and health conditions (e.g., diabetes, injuries from accidents or conflict) that can result in disability.

Crucially, only a small fraction of these individuals currently receive adequate support services. According to the National Disability Resource & Advocacy Centre (NDRAC), it was estimated that only about 2% of persons with disabilities in PNG (roughly 19,500 individuals) were accessing any kind of disability-specific services, leaving a staggering 98% (over 950,000 people) with no support at all (NDRAC, n.d.). This statistic highlights a major service delivery gap.

Those few who do get services are mostly concentrated in urban centers or within reach of the limited network of special education/resource centers and NGOs. The vast majority of PWDs, especially in rural areas, lack access to assistive devices (wheelchairs, hearing aids, etc.), therapy or rehabilitation, inclusive education, or economic support. For instance, in the education sector, only a small percentage of children with disabilities are served by the National Department of Education's inclusive education program, with even fewer services available in remote rural areas (Pacific Data, 2020).

Most children with disabilities are not enrolled in school at all or drop out early due to lack of support and accommodations. Similarly, access to healthcare and rehabilitation is very limited: there is no nationwide government rehabilitation service, and assistive technologies are provided mainly by NGOs or ad-hoc donor projects. Specialised services (like sign language interpretation, Braille training, prosthetic workshops, or counseling) exist only in Port Moresby and a few major towns (Pacific Data, 2020), and even there they are insufficient to meet demand.

Geographical and Infrastructure Barriers

PNG's geography and underdeveloped infrastructure pose fundamental challenges to disability support. Approximately 85–87% of Papua New Guineans live in rural areas and small villages, often in remote and hard-to-reach locations with inaccessible terrain, poor road networks, and limited communication infrastructure (NDRAC, n.d.). This makes it extremely difficult for persons with disabilities to reach the services that do exist, which

are typically based in urban centres. Many rural communities are several hours' walk from the nearest road or health facility; someone with a mobility impairment may simply be unable to travel that distance over mountainous terrain.

Public transportation is sparse, and virtually none of it is disability-accessible (e.g. buses are not equipped for wheelchair users). Physical infrastructure across PNG generally does not incorporate universal design – for example, government buildings, schools, and health posts often have stairs and narrow doorways, lacking ramps or accessible toilets. In cities like Port Moresby and Lae, new buildings and facilities are beginning to consider accessibility in design, but the majority of the built environment remains inaccessible to those with mobility or visual impairments.

As a result, persons with disabilities are often literally confined to their homes because of environmental barriers: a Human Rights Watch assessment noted that in many cases PWDs are "prevented from leaving their homes" due to inaccessible infrastructure in their communities (Human Rights Watch, 2021). Basic needs like fetching water, going to the market, or attending church can be daunting if paths are muddy, uneven, or long. For those requiring wheelchairs or crutches, the lack of paved pathways and the presence of hills and rivers become significant obstacles.

Access to transport and roads is a critical issue. A study on road infrastructure in PNG found that while road improvements can benefit communities broadly, the lack of inclusive design (e.g. lack of pedestrian crossings, unsafe high-speed traffic) can actually make roads dangerous for persons with disabilities and limit their independent mobility (Mitchell, 2018). Persons with disabilities often have to rely on family members to carry or accompany them to travel anywhere, which reduces their autonomy. For island or highland communities that require air travel or boats for access, the cost and difficulty are prohibitive – and such transport is rarely accommodating of special needs.

Infrastructure barriers also extend to public services: very few schools, even in urban areas, have the modifications needed for children with disabilities (such as ramps, handrails, or adapted learning materials). According to a country profile, "accessibility in schools" remains limited, and increasing it is listed as a future priority by the education authorities (Pacific Data, 2020). Health centres often lack accessible entrances or examination tables that can accommodate patients with physical disabilities, which discourages PWDs from seeking care. The lack of sign language interpreters or hearing aids means Deaf and hard-of-hearing persons face communication barriers at hospitals and other services – a form of infrastructure/communication barrier.

Collectively, these deficiencies in infrastructure severely limit the ability of PWDs to participate in community life.

Cultural and Attitudinal Challenges

Perhaps the most deeply entrenched barriers are societal attitudes and cultural beliefs about disability. In many PNG communities, disability has traditionally been viewed negatively, sometimes associated with shame, stigma, or even sorcery. Anthropological observations indicate that some Melanesian cultural beliefs attribute disability to supernatural causes – for example, a child's disability might be seen as the result of

sorcery, witchcraft, or punishment by ancestral spirits (CBM Australia, 2018; University of Melbourne, 2019). A CBM Australia study noted "strong cultural beliefs about supernatural causes for disability in Papua New Guinea," leading to suspicion and marginalisation of those affected (CBM Australia, 2018).

In extreme cases, persons with disabilities or their family members could even be accused of sorcery themselves, especially if a disability is accompanied by unusual appearance or behavior (CBM Australia, 2018). This cultural context creates fear and social distance around disability.

Even when not linked to the supernatural, prevailing attitudes pity or underestimate persons with disabilities. Traditionally, PNG's communal societies operate under the wantok system (extended family/clan support), which has positives in terms of family care, but also often sees PWDs as passive dependents. If a person cannot contribute to gardening, hunting, or household chores at the same level as others, they may be viewed as a burden. In some communities, families hide children or adults with disabilities at home due to shame or fear of ridicule (NDRAC, n.d.).

An advocacy piece noted that many PWDs "are not able or not allowed to leave their homes due to shame, as disability is associated with violations of cultural norms" (NDRAC, n.d.). This isolation means they miss out on education, socialisation, and community activities, further entrenching their exclusion.

Disability inclusion has been seen as a taboo topic in parts of PNG, rarely discussed openly (UNSW, 2024). Negative labels and derogatory terms for PWDs persist in local languages, reflecting a lack of awareness about disability rights. As a result, persons with disabilities often have extremely low social status and their "voices [go] unheard" in their communities (NDRAC, n.d.). Decisions about their lives are typically made by family or community leaders without their input.

Attitudinal barriers also manifest in how institutions treat PWDs. Many schools in the past refused to enrol children with disabilities, believing they could not learn or that they would be too hard to manage. A recent case documented by the Global Partnership for Education is telling: a young woman named Isabella, who uses a wheelchair, was initially able to attend a public school only because her mother stayed with her all day to assist, and the school environment was relatively accessible (Global Partnership for Education, 2023). However, "stereotypes surrounding disability proved to be too great," and the public school eventually denied her continued enrollment (Global Partnership for Education, 2023). Isabella's family had to find a private, church-run school that was willing to accommodate her needs (Global Partnership for Education, 2023).

Such experiences are common – teachers and principals may assume that a child with a disability won't benefit from schooling or will require resources the school doesn't have, and thus turn them away. Similarly, employers rarely hire persons with disabilities; there is a stereotype that PWDs cannot perform jobs productively. Women with disabilities face compounded stigma – as women in a patriarchal society and as persons with disabilities – and are at higher risk of gender-based violence and neglect. Indeed, PNG has very high rates of violence against women, and women with disabilities are among the most vulnerable and least able to access support services (Human Rights Watch, 2021).

However, it should be noted that attitudes are not uniformly negative across such a diverse country. In close-knit communities, an individual with a disability may be cared for kindly by relatives, and some traditional cultures have inclusive aspects. But by and large, the attitudinal barrier – the societal tendency to marginalise, pity, or shame PWDs – is identified as a critical issue by virtually all studies and reports (Humanitarian Advisory Group, 2023; NDRAC, n.d.). These attitudes not only harm the self-esteem and mental health of PWDs, but also discourage families from seeking help or bringing PWDs into public, and they make community leaders less likely to prioritise disability needs (such as making communal facilities accessible)univ.

Legal and Institutional Barriers

Until now, the absence of a comprehensive disability rights law in PNG has meant there are limited avenues for PWDs to challenge discrimination or demand accommodations. For example, there are no mandated building codes for accessibility in private buildings, no quotas or incentives for hiring PWDs, and no formal system of disability certification that would grant access to benefits.

The existing institutional capacity is very limited. The Department for Community Development and Religion is the lead agency but has historically been under-resourced. An analysis by the PNG Institute of National Affairs noted that the Department "used to have welfare officers in all the provinces" but over the years its capacity dwindled due to almost no operational funding from the national government (ABC News, 2013). It has been "struggling over many years" and largely reliant on aid donors for project-based support (ABC News, 2013). This means that at the provincial and district levels, there may be nominal "disability desk" officers or focal points, but in practice they have little training, no budget, and thus little impact.

Recent efforts, as mentioned, are being made to set up Provincial Coordinating Committees on Disability to localise implementation of the National Policy (The National, 2025), but these committees are new and also need resourcing and clarity of mandate.

Another institutional challenge is coordination. The disability sector involves multiple ministries (health, education, labor, etc.), but coordination mechanisms have been weak. The National Board for Persons with Disabilities is supposed to coordinate service providers and advise government, but without strong legal authority or funding, its effectiveness has been limited. Poor coordination between government departments and NGOs was cited as a challenge in inclusive education efforts (Pacific Data, 2020), leading to overlaps in some areas and complete gaps in others.

The lack of a central data system means planning is not evidence-based. The National Policy's mid-term review (if any) has not been widely published, so it's unclear how much of the 2015–2025 plan has been implemented. Feedback from stakeholders suggests that progress has been slow on many action items due to these institutional bottlenecks.

Additionally, social protection systems for PWDs are nearly non-existent. Unlike some countries that provide disability pensions or stipends, PNG does not yet have a national disability benefit scheme. The notion of a formal welfare system is relatively new to PNG, which historically relied on the extended family network. In 2013, then-Prime Minister Peter

O'Neill floated a proposal to introduce pensions for elderly and disabled persons, acknowledging that the wantok system was "beginning to fail" as the population grew and social changes eroded traditional support (ABC News, 2013).

Experts cautioned that implementing a nationwide pension would be financially challenging and require identifying those most in need (ABC News, 2013). Indeed, as of 2025, no general disability cash transfer exists (though one province, New Ireland, pioneered a small pension for elderly and reportedly also for severely disabled persons on a limited basis).

The lack of a safety net means that if a family is unable or unwilling to support a member with a disability, there are few alternatives beyond charity. Many PWDs end up in poverty; cases have been documented of disabled elderly people resorting to begging or collecting cans on the streets to survive (ABC News, 2013).

Information and Communication Barriers

Another often overlooked barrier in PNG is the lack of accessible information and communication for PWDs. Disability advocacy groups note that there is "no institution or agency working as an information dissemination centre" on disability issues in the country (NDRAC, n.d.). This means persons with disabilities and their families often do not know what services or rights they might be entitled to.

Public health messages, educational content, and government communications are rarely produced in formats accessible to those with visual or hearing impairments (e.g., Braille, sign language interpretation, easy-read formats). For example, during the COVID-19 pandemic, it became evident that critical information about health measures was not reaching many deaf or blind individuals in PNG because of these accessibility gaps.

Communication barriers also include the basic lack of sign language interpreters – PNG has a recognised PNG Sign Language, but very few trained interpreters – and limited awareness of sign language among the public. Similarly, for persons with intellectual disabilities, simplified and pictorial information is seldom available to help them understand community events or health instructions. These communication gaps further marginalise PWDs by keeping them excluded from knowledge that others get easily.

Barriers in communication also relate to representation: PWDs have had limited presence in media and public discourse, which perpetuates their invisibility. Only recently have there been campaigns (often donor-supported) to feature persons with disabilities in radio or TV programs to raise awareness. The result of years of invisibility is a lack of role models and success stories in the public eye, which feeds a cycle of low expectations.

That said, success stories are emerging – such as Isabella's story where she overcame barriers to become a law graduate and now an advocate (Global Partnership for Education, 2023). Advocates like her demonstrate that, given opportunities and support, persons with disabilities can thrive and contribute significantly. Isabella's achievement even influenced national policy: her advocacy contributed to disability inclusion being highlighted in PNG's National Employment Policy 2020–2030, which now explicitly covers employment of

persons with disabilities (Global Partnership for Education, 2023). Cases like this are slowly chipping away at stereotypes and proving the value of inclusion.

Economic and Poverty Context

Finally, it's important to note the general context of poverty and limited resources in PNG. Many of the barriers above are exacerbated by the country's economic constraints. PNG is classified as a lower-middle-income country but with a very uneven distribution of wealth and services. Rural areas in particular suffer from lack of schools, clinics, and roads for everyone, not only PWDs. Thus, disability support must contend with a generally weak service delivery system.

Where schools struggle to educate children without disabilities (evidenced by low overall literacy and completion rates), they struggle even more to include children with disabilities unless significant support is provided. Health facilities that are short on basic medicines are unlikely to prioritise rehabilitation equipment without external funding. High unemployment and subsistence livelihoods mean families have limited financial means to assist relatives with disabilities (for example, to purchase a wheelchair or to pay transport to a distant clinic).

Disability and poverty are strongly interlinked – disability can lead to poverty due to exclusion and extra costs, and poverty can lead to disability due to poor health care, malnutrition, and dangerous living conditions. In PNG, many persons with disabilities find themselves in a cycle of poverty, with little state assistance to break that cycle.

In summary, the current situation in Papua New Guinea reveals a striking contrast between progressive policy on paper and the persistence of barriers in practice. Persons with disabilities face physical barriers (infrastructure and geography limiting access), social barriers (stigma, negative attitudes, low expectations), and institutional barriers (weak implementation of policies, scant resources, and lack of legal protections). The community-level reality is often that PWDs rely almost entirely on family support and informal networks, which can be loving but are frequently insufficient and sometimes absent or abusive. The national-level reality is that while there is growing recognition of disability rights, actual services and accommodations lag far behind. The next section will outline the methodology by which these findings were gathered, before proceeding to discuss the implications of these findings and potential strategies to address the gaps.

Methodology

This paper employs a qualitative research approach, conducting an in-depth literature review and document analysis to examine disability support in Papua New Guinea. Given the broad, nationwide scope of the research question and the practical constraints, a desk research methodology was most appropriate. The steps involved in this methodology were as follows.

Literature Search and Selection

We systematically gathered publicly available sources from a range of credible outlets. Key sources included PNG government policy documents and statements, reports from international organisations (UN agencies, World Bank, etc.), publications by non-governmental organisations (both international NGOs and local PNG advocacy groups), academic journal articles, and news media coverage. Specific emphasis was placed on sources from the past decade to capture the current state and recent developments (especially sources post-2015, after the launch of the National Disability Policy).

We used online databases and search tools to find relevant documents, using search terms such as "disability Papua New Guinea," "inclusive education PNG," "disability policy PNG," "disability services PNG statistics," and so forth. Selection criteria for literature were credibility (e.g., peer-reviewed studies, official reports, or reputable news outlets) and relevance to the research themes (national policy, community perspectives, barriers, etc.).

Document Analysis

We conducted a close reading of the collected sources, extracting information pertinent to PNG's disability context. Key data points (such as prevalence estimates, service coverage figures, legislative developments) were noted, and qualitative findings (such as descriptions of cultural attitudes or case study anecdotes) were coded according to theme. The analysis paid special attention to recurring themes across different sources, which increases the reliability of the findings.

For instance, if an NGO report, a news article, and an academic study all independently highlight "stigma in communities" as a barrier, it suggests a robust convergence of evidence. We also triangulated quantitative data where possible (comparing, for example, the 15% prevalence estimate with any smaller-scale surveys done in PNG, to ensure consistency).

Use of Case Studies

As part of the methodology, we incorporated case studies and examples to illustrate abstract concepts. These were drawn from narrative sources like news stories or reports that documented personal experiences (such as the story of a student advocate, or the outcome of a community pilot project). Using case studies serves to contextualise the data, giving a human face to the challenges and showing how policies play out in real life. The cases were chosen to reflect a variety of issues – for example, one highlighting education

inclusion (Isabella's story), another perhaps highlighting community initiatives (e.g., a WASH project in Western Province involving PWDs), etc.

Stakeholder Perspectives

Although this research did not involve primary fieldwork or interviews, it endeavored to include the perspectives of various stakeholders as captured in the literature. This means voices of persons with disabilities themselves (often quoted in NGO reports or news), statements from government officials, and viewpoints of community members or leaders (if available). Including these perspectives provided a more nuanced picture. For instance, quotes from the Prime Minister and Community Development Secretary gave insight into government commitment, while quotes from DPO leaders (like PNGADP representatives) reflected the advocacy standpoint.

Policy and Gap Analysis

Part of the methodological approach was to conduct a gap analysis between policy and practice. Using the National Disability Policy's goals as a benchmark, we analysed the extent to which those goals have been met or where shortfalls exist, based on evidence from reports and assessments. This also involved looking at monitoring documents like the Universal Periodic Review submissions and any available progress reports, to identify which recommendations have not been implemented. By structuring the findings against the policy objectives (rights advocacy, service improvement, institutional framework), we were able to systematically identify gaps in each area.

Reliability and Validity Considerations

We recognised potential limitations in the sources. Data on disability in PNG can be patchy and sometimes dated, so we cross-referenced multiple sources for critical facts (e.g., the percentage of PWDs receiving services was corroborated by more than one source where possible). The qualitative nature of many reports (some being advocacy-oriented) means there could be biases or a focus on problems over successes; to counter this, we also sought any documented examples of positive progress or best practices to present a balanced view.

While no new surveys or statistical analysis were conducted by this study, relying on existing data means the accuracy is bound by the quality of those data. A clear gap is the lack of recent comprehensive surveys in PNG – a limitation which we note in our analysis and recommendations (where we suggest improved data collection).

APA Citation and Synthesis

Throughout the research process, meticulous attention was given to citing sources in an academic manner. In-text citations (author or organisation, year) were used to attribute specific facts or quotes to their source, thus maintaining academic integrity. This not only gives credit to original authors but allows readers to verify information. By synthesizing information from diverse sources, we aimed to produce a coherent narrative that is more than just a sum of its parts – connecting dots between policy and practice, and between

different thematic areas (e.g., how cultural attitudes impact education, or how lack of legal frameworks exacerbates service gaps).

In summary, this methodology, centered on a comprehensive literature review, allowed us to gather a wide-ranging understanding of disability support in PNG without on-site research. The approach is appropriate for capturing the "big picture" and for identifying cross-cutting issues, though it is reliant on the availability and quality of secondary data. The findings derived through this method are presented in the next section, followed by a discussion that interprets those findings in context, and finally the recommendations that flow from the analysis.

Findings

Through the above-described research process, several key findings have emerged regarding the state of disability support in Papua New Guinea. These findings span multiple domains – from legislative frameworks to community attitudes – and together they outline where PNG currently stands and what critical issues need addressing. The findings can be summarised in the following six points.

1. Progressive policy commitments vs. implementation gaps

Papua New Guinea has, on paper, made significant commitments to disability inclusion. The adoption of the National Disability Policy 2015–2025 and ratification of the CRPD signaled an official shift towards a rights-based approach. High-level leaders acknowledge the importance of "leaving no one behind," especially as evidenced by recent moves to enact a Disability Act (The National, 2025).

However, the implementation of these commitments has lagged. Key elements of the policy – such as establishing provincial coordination committees, improving data collection, and expanding rehabilitation services – remain largely unrealised or only partially realised. The long delay in passing the Disability Authority Bill exemplifies this gap: although it was drafted in 2018 and touted as a milestone, it is only in 2025 that it appears close to fruition (Post-Courier, 2018; The National, 2025). This indicates that well-intentioned policies have not yet been translated into enforceable actions and tangible changes in most PWDs' lives. In essence, PNG's policy framework is running ahead of actual practice on the ground.

2. Insufficient coverage of services and support

Most persons with disabilities in PNG do not have access to the support they need. This finding is supported by stark statistics: as noted, roughly 98% of PWDs are not receiving formal support services (NDRAC, n.d.). Government programs reach only a very limited number of beneficiaries. For example, only a few hundred children might be enrolled across all the Inclusive Education Resource Centres, whereas tens of thousands of school-aged children with disabilities are estimated to be out of school.

Health and rehabilitation services specifically targeting PWD needs (physical therapy, assistive device provision, etc.) are scarce and predominantly delivered by NGOs in a few locations. There is no routine government outreach to identify and support PWDs at the

community level (such as case management or social work services) outside of NGOs or pilot projects. Families shoulder the burden of care almost entirely.

A 2019 situational analysis by World Vision and partners (cited in Giving Rise to Rights, 2023) found that persons with disabilities often rely on family members to accompany them to access any services or to participate in society, due to lack of independent accommodations. If family support is absent, individuals can be left completely without care. This underscores a critical finding: the informal safety net (wantok system) is no longer sufficient by itself, and formal support systems have not expanded to fill the void, leaving many PWDs effectively unsupported.

3. Physical accessibility is a major obstacle

Physical barriers in infrastructure significantly restrict the mobility and participation of PWDs. The finding is that most public and private spaces in PNG are not accessible. The anecdote from the National Disability Policy about the lack of a ramp barring a qualified worker in a wheelchair from employment rings true across many contexts (WHO MiNDbank, 2015). We found that schools with wheelchair ramps or accessible toilets are exceptions; many buildings lack even basic adaptations.

Transportation infrastructure also largely ignores accessibility – for instance, buses have high steps and crowded seating, and there are no public transit services adapted for wheelchairs or visually impaired riders. A telling example is the absence of any consistent sign language interpretation on national TV broadcasts or at public events, which is a form of communication infrastructure barrier for the Deaf community.

A positive development noted is that some newer infrastructure projects funded by donors are trying to be disability-inclusive (for example, the Australian-funded Economic and Social Infrastructure Program now includes disability-inclusive design in markets, health centers, etc., in consultation with persons with disabilities) (PNG Haus Bung, 2022). However, such examples are still limited. The overall finding remains that physical inaccessibility pervades both urban and rural environments, contributing directly to the exclusion of PWDs from education, healthcare, employment and civic life.

4. Strong cultural stigma and discrimination persist

The research confirms that negative attitudes toward disability are a deep-seated barrier in PNG. Cultural stigma manifests in various forms – from viewing disability as a curse to simply assuming PWDs are incapable. This leads to discrimination at personal and institutional levels. A key finding here is that stigma often results in the social isolation of PWDs. Many are kept out of sight; for example, families might not bring a child with a developmental disability to community gatherings due to embarrassment.

In education, stigma has contributed to bullying and abuse of students with disabilities (as hinted by Isabella's early experience with bullying in school (Global Partnership for Education, 2023), and by reports of children with disabilities facing discrimination and even violence (Human Rights Watch, 2021)). Women with disabilities are particularly marginalised; a UPR stakeholder report in 2021 pointed out that culture and attitudes in

PNG "remain negative towards persons with disability," which when combined with gender issues, leaves disabled women very vulnerable (TLM, 2021).

The finding can be summarised that attitudinal change is slow, and without it, even well-built ramps or good laws may not be utilised if communities do not accept PWDs as equal participants. On a hopeful note, the research did identify nascent shifts – for instance, churches and local leaders, once made aware, can become allies for inclusion. In some communities where disability awareness training has been done (often by NGOs), there have been improvements in how neighbors treat PWDs. Yet, nationwide, such progress is uneven. The prevalent social attitude is still one of charity or neglect rather than rights and inclusion.

5. Low institutional capacity and coordination

From an institutional perspective, the findings highlight that capacity constraints severely limit effective disability support. The Department for Community Development and its provincial counterparts lack trained personnel dedicated to disability. One concrete indication of this is that the National Board for Persons with Disabilities and PNGADP, which should be driving forces, have historically been underfunded and sometimes inactive (PNGADP going 7 years without a major meeting until 2025 is illustrative) (Post-Courier, 2025).

The inter-sectoral coordination that is necessary (for example, between health and education to support a child with multiple needs, or between infrastructure planners and disability experts) is generally weak. A finding from the inclusive education profile was that "poor coordination between government departments and private organisations" hampers service provision (Pacific Data, 2020). This extends to duplication of efforts in some areas and no services in others.

Data systems are virtually absent – the finding is that PNG does not systematically track indicators like school attendance of children with disabilities or employment rates, making it hard to measure progress or plan effectively. Financial resources are a part of this capacity issue: the government budget allocation for disability programs is minimal. The literature suggests that most funding for disability initiatives in PNG comes from donor projects (such as Australia's Development for All initiatives, EU grants, etc.) or church charities, rather than sustainable government funding. This leads to a patchwork of short-term projects rather than a stable system. In sum, institutional capacity remains too low to implement policy goals fully, indicating a need for capacity-building and resource allocation.

6. Nascent improvements and opportunities

While much of the findings identify shortfalls, it is also important to note emerging positive trends which can be built upon. One finding is that awareness and advocacy have grown in the last few years. The fact that disability issues are now being discussed in Parliament, in national media, and within communities is a change from a decade or two ago when the topic was largely absent from public discourse. The Prime Minister's open support and the integration of disability in national strategies (like the National Employment Policy 2020–

2030 including disability employment targets) (Global Partnership for Education, 2023) are signs of increased political will.

Additionally, the role of DPOs is strengthening – PNGADP's strategic planning in 2025 and its engagement with government through the PNG-Australia partnership program (which provides funding and training) demonstrate that organisations of PWDs are becoming more organised and vocal (Post-Courier, 2025).

Another positive finding is that community-level initiatives have shown success where tried: for example, the WASH (water, sanitation, and hygiene) project in Western Province documented by Water for Women showed that involving women and PWDs in community decision-making led to more inclusive facilities and started to challenge gender and disability norms (Water for Women Fund, 2023). Such initiatives, although localised, provide models that could be replicated.

Furthermore, the younger generation of PWDs (like youth advocates such as Isabella, and others trained through inclusive education) are increasingly empowered and using their voices. They represent a potential catalyst for cultural change over time.

In summary, the findings portray a complex picture: commitment without full execution, needs far outpacing current support, pervasive barriers alongside pockets of progress. PNG stands at a crossroads where, with appropriate interventions, it could make significant improvements in disability inclusion. The next section will discuss these findings in a broader context, analysing why these conditions persist and what they imply for PNG's development and social fabric.

Discussion

The findings outlined above highlight a clear reality: while Papua New Guinea has made noteworthy strides in acknowledging disability issues at the policy level, the lived experience of most persons with disabilities remains one of marginalisation. In this discussion, we interpret the significance of these findings, explore the underlying causes of persistent gaps, and examine the implications for PNG's societal development. Additionally, we consider lessons from comparative contexts and how PNG's unique cultural and economic situation influences the approach to disability support. The discussion is organised around several key themes that emerge from the findings: the policy-practice divide, cultural dimensions, capacity and resource constraints, and emerging opportunities for change.

Policy-implementation Divide

One of the most striking aspects of PNG's disability landscape is the disconnect between formal commitments and actual practice. This divide can be attributed to multiple factors. Firstly, resource limitations are a fundamental cause. Implementing inclusive education, accessible infrastructure, or nationwide rehabilitation services requires financial investment, trained personnel, and logistical capacity. PNG, with its constrained budget and many competing development needs (from health crises to infrastructure deficits), has struggled to prioritise disability programs.

For instance, while the National Disability Policy 2015–2025 set out an ambitious multi-sector plan, there was no dedicated funding stream attached to it. Thus, many action items remained unfunded mandates. The lack of a funded rollout plan meant that provincial authorities had little guidance or means to act on the policy, aside from ad-hoc donor-funded activities. This reflects a broader trend in PNG's public sector: policies are often adopted (sometimes under external influence or to align with international norms) but falter in implementation due to limited state capacity and follow-through.

Secondly, administrative and governance challenges play a role. PNG's bureaucracy can be slow-moving and is sometimes affected by instability and corruption. The Disability Authority Bill's delay could be partly due to shifting political priorities, bureaucratic red tape, or low political salience until recently. Other laws took precedence, and disability was not seen as an immediate vote-winner or crisis (unlike, say, law and order issues or major infrastructure projects). It was only when advocates consistently pushed and when leaders like Marape decided to champion it that it gained momentum.

This indicates that sustained political will is crucial for converting policy into action. Countries that have successfully improved disability inclusion (for example, Fiji with its disability legislation, or Solomon Islands with strong community-based rehab programs) did so when leaders lent support and when clear implementation mechanisms were put in place. PNG is just beginning to reach that stage now, potentially.

Another facet of the implementation gap is monitoring and accountability. Without robust data and monitoring, it has been easy for commitments to slip through the cracks. Until the UPR process or donor evaluations bring up the lack of progress, there has been little accountability mechanism domestically. Disability issues, being historically low-profile, did not attract the scrutiny that might drive action.

The discussion here points to the need for integrating disability indicators into mainstream monitoring (like education and health sector reviews) to ensure policies are actually executed. It also underscores that passing a law (anticipated Disability Act) while vital, will not automatically solve problems – it must be followed by regulations, institutional setup (perhaps a Disability Authority or Council with enforcement powers), and budget allocations. Otherwise, PNG could risk having a well-crafted law that is ineffectual in practice, much like the policy has been in many respects.

Cultural and Attitudinal Context

Understanding PNG's cultural context is key to addressing disability inclusion. PNG is a nation of over 800 languages and numerous cultural traditions, which makes generalisations difficult; however, some common threads in attitudes have been identified. The persistence of stigma and supernatural beliefs about disability suggests that any strategy must involve community-level engagement and awareness-raising. Top-down policy alone cannot change minds.

The discussion here considers that deep-seated beliefs (like associating disability with sorcery or shame) require culturally sensitive interventions. Working through respected community figures – such as village chiefs, church pastors, and women's leaders – has proven effective in some settings to dispel myths. For example, church networks in PNG

have massive reach and moral authority; if churches actively preach inclusion as part of their teachings (many already preach about caring for the "least fortunate"), it can reshape norms. In fact, the partnership with faith leaders has been tried: the World Vision "Celebrating Families" training, as noted in the findings, engaged 93 faith leaders to promote positive parenting including for children with disabilities (World Vision, 2023). Engaging such cultural gatekeepers is critical.

Another point of discussion is the role of the wantok system. Traditionally, having a disability would usually mean the family/clan has the duty to look after you. In practice, this has been a double-edged sword. On one hand, it provides a social safety net, but on the other, it can be paternalistic and confining. As PNG modernises and urbanises, extended family support is under strain; moreover, not every family is caring. There are anecdotal reports of neglect or even abuse of PWDs within families that view them as an economic burden.

This raises the question: how to leverage the positive aspects of community while mitigating the negatives? Community-based rehabilitation (CBR) attempts to do that by working within communities to support and educate families. The discussion would assert that changing attitudes must involve demonstrating the potential of PWDs – for example, community awareness programs that show success stories (a farmer who, despite losing a limb, learns new techniques and contributes to the village; a blind person who is a skilled musician or teacher; etc.).

PNG has a rich tradition of storytelling, so positive narratives can be powerful to counteract the traditional negative narratives around disability. The rise of advocates like Isabella Kila is an encouraging sign; she and others can serve as role models that break stereotypes in the public eye (Global Partnership for Education, 2023).

Interplay of Poverty and Disability

The discussion also needs to address how poverty exacerbates disability issues in PNG. Many of the barriers identified – lack of services, infrastructure, education – are also development issues. It can be argued that improving disability support is not a stand-alone endeavor but part of the broader development challenge. For instance, if PNG succeeds in improving its rural healthcare system, PWDs will benefit, but unless specific steps are taken, PWDs might still be left out (since they might need outreach or assistive devices, not just a general clinic).

Therefore, mainstream development programs must integrate disability inclusion to be effective. This is something donors emphasise (e.g., Australia's aid program has a policy of disability-inclusive development). However, on the ground in PNG, disability inclusion in sectors like infrastructure or education often depends on the advocacy of individuals or NGOs. A road-building project might include accessible features if someone knowledgeable insists on it; otherwise, it may ignore those needs.

The link between disability and poverty also suggests that interventions that economically empower PWDs can have multiplicative benefits. If a person with a disability is supported to gain an education or skill and gets a job or starts a business, not only does their personal situation improve, but attitudes can shift as communities see PWDs as contributors.

Currently, few PWDs in PNG are in formal employment. As noted, the National Employment Policy now includes disability, but implementation may require quotas or incentives to hire PWDs.

Perhaps a lesson can be taken from countries that have small business grant programs for PWD entrepreneurs or vocational training specifically adapted for PWDs. The discussion should consider how PNG might adapt such models – for example, utilising its network of Vocational Training Centers to run inclusive skills training, or through microfinance programs that reach caregivers of PWDs to start income activities that benefit the household (which indirectly helps PWDs).

Institutional Reform and Capacity Development

On the institutional side, the discussion would emphasise that the forthcoming Disability Act (once passed) could be a game-changer if implemented well. It could establish a clearer mandate and perhaps an agency (or strengthen the National Board) to coordinate disability issues. This may involve setting up a National Disability Authority with the power to oversee accessibility standards, administer programs (like a disability fund), and ensure compliance across ministries.

However, creating bodies alone is not enough; they need funding and skilled human resources. PNG will likely need capacity-building support – possibly via international partnerships – to train officials on disability inclusive planning and to develop data systems. For instance, a recommendation (discussed further in the next section) would be to incorporate the Washington Group short set of questions on disability into national surveys to improve data. Such technical steps require institutional buy-in and donor technical assistance, which could be mobilised if the government prioritises it.

Coordination can be improved by formal mechanisms – the Policy mentions provincial committees, and a National Steering Committee was presumably in place. Reactivating or strengthening those, and including civil society in them, is important. The presence of PNGADP and other DPOs in the policy process should be institutionalised, meaning regular consultations and perhaps positions for DPO representatives in relevant boards (for example, including a person with a disability in the National Education Board or Health advisory groups, etc.). This kind of inclusion ensures that policies in each sector consider disability from the outset.

Sustainability and Scaling of Pilot Projects

Many positive examples identified (like the inclusive WASH project, or faith leader training, or specific inclusive schools) are essentially pilot or localised projects. The discussion should address how to scale these successes. Often pilots are donor-funded with a limited timeframe. To replicate them, either government must take them up or NGOs have to find more funding to expand.

One strategy could be mainstreaming successful pilots into government programs. For example, if a community WASH project was highly successful in including PWDs, the Department of Health and Department of National Planning could integrate those approaches into its national rural water supply programs. If teacher training modules on

inclusive education were developed with donor support, the National Education Institute and teacher colleges can adopt those modules into their permanent curriculum (there is evidence this is starting – inclusive education is now a required part of teacher training, though currently only 3% of teachers have in-service training on it) (Pacific Data, 2020).

Regional and International Learning

PNG can also learn from neighboring countries. In the Pacific, Fiji passed a Rights of Persons with Disabilities Act in 2018 and has been working on accessibility in urban centers; Samoa has a strong community-based rehabilitation network through its villages and churches; Vanuatu has a Disability Desk in Prime Minister's office showing high-level commitment. While contexts differ, these examples illustrate that smaller or similarly resourced countries have innovated solutions (often with external support but local ownership). For PNG, engaging in regional exchanges through mechanisms like the Pacific Disability Forum (PDF) can be beneficial. PNGADP is a member of PDF and can draw on regional expertise.

Implications for Development and Human Rights

The discussion should tie the improvement of disability support to PNG's broader development goals. PNG's Vision 2050 and Strategic Development Plans emphasise human capital development, social inclusion, and equal participation. Without including the estimated million-plus PWDs, PNG will not truly achieve those goals. From a human rights perspective, continuing the status quo means PNG is not fully meeting its obligations under the CRPD and other treaties – something noted in international reviews (Human Rights Watch, 2021).

Conversely, making progress on disability inclusion will have ripple effects: improved educational outcomes, reduced poverty in some households, and progression towards the Sustainable Development Goals (many of which have disability-specific indicators now). An interesting point for discussion is the intergenerational impact: If children with disabilities today are included and educated, they are less likely to be dependent in adulthood and can contribute economically, breaking a cycle.

Also, disability inclusion often benefits others – for example, a ramp helps not only wheelchair users but also elderly people, pregnant women, anyone with temporary injuries. Closed captions on TV help not only the deaf but also people in noisy environments, etc. These are often called the "universal design" or "twin-track" benefits. Therefore, promoting accessibility is not just for a minority; it improves overall societal resilience and inclusivity.

Challenges Ahead

Despite optimism, the discussion must acknowledge challenges in advancing the disability agenda. One challenge is data and secrecy: in remote areas, families might still hide PWDs, so identifying them for services can be hard. Another challenge is cost: making buildings accessible or providing assistive devices has a cost that cash-strapped agencies may resist unless they see the value. There may also be some cultural resistance – e.g., if a law mandates school inclusion, a school principal might quietly push out a student with

disability if they believe it affects overall performance or requires extra work without extra pay. Enforcement mechanisms need to be thought through. For example, should there be penalties or incentives to comply with accessibility standards?

In conclusion, the discussion highlights that improving disability support in PNG is a multifaceted endeavor requiring cultural change, institutional strengthening, and resource investment. The pieces of the puzzle – policy, community engagement, partnerships – are starting to come together, but sustained effort is needed. PNG stands to gain socially and economically by empowering a significant segment of its population that has long been marginalised. The final section of this paper will propose concrete recommendations for moving forward, building on the insights from the findings and discussion.

Recommendations

Building on the analysis above, this section lays out a set of actionable recommendations for improving disability support in Papua New Guinea. These recommendations are directed at the PNG government (national and sub-national levels), civil society including DPOs, and development partners, recognizing that a collaborative effort is required. The strategies are aimed at addressing the identified gaps in policy implementation, service provision, cultural attitudes, and institutional capacity. They are organised into thematic groups for clarity.

1. Strengthen Legal and Policy Implementation

Enact and enforce the Disability Act

Fast-track the passage of the proposed Persons with Disabilities Act (Disability Authority/Services Act) and ensure it is comprehensive in scope. The law should explicitly prohibit discrimination on the basis of disability in education, employment, healthcare, and other services, and mandate reasonable accommodations. Once enacted, an enforcement mechanism is crucial: for instance, establish an independent Disability Rights Authority or Commission empowered to receive complaints, carry out investigations, and sanction non-compliance.

Regulations under the Act should set accessibility standards (for buildings, transport, information) in line with universal design principles. It is also recommended to include provisions for mandatory disability inclusion plans for every government department (mainstreaming disability in sectoral strategies) and for large private organisations. Enforcing the law may require training magistrates and officials on handling disability rights cases. The Act should operationalise CRPD commitments domestically (Post-Courier, 2018), effectively "making rights real" through legal means.

Develop a successor National Disability Strategy

As the National Policy on Disability 2015–2025 approaches its end, PNG should undertake a thorough review of its outcomes and formulate a new National Disability Strategy for 2026–2035. This strategy must be accompanied by a costed implementation plan. It should identify clear targets (e.g., percentage increase in PWDs enrolled in schools or employed in public service by 2030) and assign responsibilities to specific agencies.

Given the gaps in the current policy, the new strategy should incorporate lessons learned – for example, addressing coordination issues by establishing an inter-ministerial committee chaired at a high level (such as the Department of Prime Minister or Planning) to oversee disability inclusion across sectors. The strategy should also integrate with other national plans (education, health, gender) to ensure alignment. Importantly, adequate budget allocation needs to be earmarked: a dedicated disability inclusion fund could be set up to finance priority programs (like purchasing assistive devices, making schools accessible, etc.), with contributions from both government and donors.

Provincial and local action plans

Encourage and support each province (and ideally each district) to develop its own Disability Inclusion Action Plan in line with the national strategy. This would localize efforts and respond to context-specific needs. For instance, a maritime province might prioritize accessible boats and jetties, whereas a highlands province might focus on inclusive agricultural training for PWDs.

Provide technical guidance for provincial Community Development offices to establish the Provincial Coordinating Committees on Disability as envisaged (The National, 2025), and ensure PWDs/DPOs are members of those committees. Through these, create a feedback loop where local challenges are reported up to the national level for resolution (for example, if a province lacks sign language interpreters, that gets fed into national training initiatives).

2. Improve Access to Services and Infrastructure

Inclusive education expansion

Take concrete steps to ensure children with disabilities can attend school. This includes making physical modifications to schools (ramps, accessible toilets, lighting for low-vision, etc.) in a phased manner – for example, set a target that within 5 years, all district-level schools have basic accessibility features. Provide resources for schools to procure assistive learning devices (braille kits, hearing aids, large print materials).

Critically, fund the training and deployment of teacher aides or special needs assistants: as noted, teacher aides are currently unpaid or absent (Pacific Data, 2020) – formalizing and paying these positions would enable children with higher support needs to participate in regular classes. Strengthen teacher training on inclusive pedagogy by increasing the coverage of special/inclusive education in preservice training (beyond the current one course to more practical modules) and offering regular in-service workshops for current teachers.

Additionally, invest in scaling successful models like Inclusive Education Resource Centers (IERCs): open new IERCs in underserved provinces and mobilize mobile outreach from these centers to support children in outlying communities. Education authorities should also implement a policy that no child may be refused enrollment solely due to disability; any necessary accommodations should be arranged in collaboration with provincial education divisions. To monitor progress, collect data on school enrollment and retention of students with disabilities (potentially using EMIS – Education Management Information System – enhancements to mark disability status, consistent with privacy norms). Donor partners can support these efforts through grants for school infrastructure and teacher training.

Accessible healthcare and rehabilitation

Integrate disability services into the health system by establishing rehabilitation units gradually at major hospitals and provincial hospitals. Each provincial hospital should ideally have at least one physical therapist, one occupational therapist, and one community-based rehab worker, over the next 5–10 years. Training programs for rehabilitation professionals (possibly sending candidates to international institutions until local programs are developed) will be needed to staff these units.

Simultaneously, expand community-based rehabilitation (CBR) by training community health workers and volunteers on basic rehab exercises, disability identification, and referral. The Health Department can incorporate disability into its primary care outreach – e.g., when doing rural patrols or immunization drives, also screen for disabilities and connect families to services.

Assistive devices provision should be systematized: set up a national assistive technology scheme to supply mobility aids, white canes, hearing aids, prosthetics, etc. at low or no cost to those in need. This could be done in partnership with NGOs and faith-based hospitals that already do some of this work. For example, re-open or support orthopedic workshops (like those run by the PNG Red Cross in the past) for prosthetic and orthotic fabrication, and ensure their products reach rural clinics for distribution.

It is also important to improve mental health services as part of disability support – given that psychosocial disabilities are often addressed only by traditional healers now (Human Rights Watch, 2021). Train health workers in basic counseling and invest in one psychiatric unit per region, plus community-based psychosocial support groups (could be linked with churches). All public health programs (HIV, TB, maternal health, etc.) should adopt disability inclusion guidelines to ensure PWDs can access these services (for instance, providing sign language interpreters at HIV clinics, or ensuring vaccination teams reach children with disabilities who might be kept at home).

Accessible infrastructure development

Implement and enforce accessibility standards for infrastructure. As a priority, government buildings (offices, hospitals, schools, courts, etc.) in urban centers should undergo accessibility audits and retrofitting. Simple modifications like installing ramps, guardrails, and accessible toilets can make a big difference and are relatively low-cost. The Department of Works should update the PNG Building Code to include mandatory accessibility standards for new construction – requiring features such as ramps, reserved parking spaces, braille signage in public buildings, and auditory signals in elevators.

Municipal authorities (like the National Capital District Commission for Port Moresby) can be pioneers by ensuring markets, bus stops, sidewalks, and recreational spaces are upgraded for accessibility. For example, the design of new markets under the Australian infrastructure program includes disability-friendly layouts (PNG Haus Bung, 2022); this should become the norm for all such projects.

Transportation is another critical area: encourage public transport operators to make modifications (like having a designated space for wheelchair users on buses or boats).

While it may not be feasible to revamp the entire fleet in short order, government could provide incentives or subsidies for operators who invest in accessible vehicles. Additionally, explore community-driven transport solutions, such as organizing local transport co-operatives that offer low-cost or free transport for PWDs on certain days (some communities globally have "disability vans" run by NGOs – PNG could trial something similar in towns). Ensure that all new road and footpath projects include features for persons with mobility or visual impairments (e.g., curb cuts, tactile paving). Development partners funding infrastructure (China, Australia, Japan, multilateral banks) should be asked to include accessibility in project criteria.

Social protection and economic empowerment

Introduce targeted social protection measures for persons with disabilities, especially for those in extreme poverty or with high support needs. One recommendation is to pilot a disability allowance or cash transfer for PWDs (or caregivers) in one or two provinces, learning from the New Ireland Social Pension scheme. This could be modest (for example, a monthly stipend of 50–100 Kina) but would help families with extra costs like medication or transport. If successful and affordable, such a benefit could be scaled nationally for certain categories (perhaps starting with those with profound disabilities who cannot work, and gradually expanding).

In parallel, focus on economic empowerment programs: reserve places for PWDs in mainstream employment programs and vocational training. The government and private sector could adopt an affirmative action of aiming for at least a certain percentage of employees with disabilities. Providing seed grants or microfinance to PWD entrepreneurs is another strategy – NGOs like Motivation Australia have supported small business training for PWDs in the Pacific. PNG could incorporate a disability window in its SME support programs.

Additionally, expand community-level livelihood projects that include PWDs: for instance, if there's an agricultural cooperative or a sewing group in a village, ensure PWDs are invited and perhaps given a starter kit (tools, seeds, etc.) to participate. Over time, increasing the visibility of PWDs as productive contributors will help shift attitudes (a concept often referred to as "economic inclusion begets social inclusion").

3. Cultural Change and Advocacy

Community awareness and engagement

Launch nationwide and local awareness campaigns to address stigma and inform communities about disability. These should be delivered in culturally appropriate ways and local languages. Tactics include radio programs featuring persons with disabilities telling their stories; church sermons or Sunday school lessons that emphasise inclusion as a Christian value (PNG being predominantly Christian); and village drama groups performing skits that debunk myths about disability.

Engage respected figures – for example, if a provincial governor or famous sports player has a disability or a family member with disability, their advocacy can influence public

opinion. The aim is to shift perceptions from seeing PWDs as objects of charity to seeing them as rights-holders and contributing members of society.

Community dialogue sessions can be effective: organizing forums where village leaders, PWDs, and families discuss challenges openly, facilitated by trained advocates or social workers, can demystify disabilities that might have been taboo to talk about. Include messaging that counters supernatural explanations by providing basic health info (e.g., explaining that conditions like epilepsy or cerebral palsy have medical causes, not because someone broke a taboo or was cursed). Also highlight that disability can happen to anyone – fostering empathy that PWDs are just "us with some differences."

Leverage faith and customary institutions

As noted, churches and customary leaders wield significant influence in PNG's communities. Work with the PNG Council of Churches and individual denominations to incorporate disability inclusion into their programs. For instance, encourage churches to make their facilities accessible (some already do, but it could be a widespread movement – a "Campaign for Accessible Churches" where congregations build ramps and invite PWDs to services). Pastors and priests can be equipped with theological resources that affirm the dignity and potential of PWDs, helping to combat notions that disability is a punishment or caused by evil.

Meanwhile, involve local chiefs and councillors: provide orientation sessions to village court magistrates, land mediators, etc., on disability rights so they can intervene against any discrimination or violence towards PWDs in communities (for example, a village court ensuring a child with disability is allowed to attend school rather than kept at home). Initiatives like the Water, Sanitation and Hygiene (WASH) project's GEDSI (Gender Equality, Disability & Social Inclusion) training for staff and communities in Western Province have shown promising results in changing staff attitudes and community dynamics (Water for Women Fund, 2023). Similar transformation trainings could be scaled up in other sectors and areas – e.g., training for teachers, health workers, police, and public servants on unconscious biases and inclusive practices.

Empower Disabled Persons' Organizations (DPOs)

Strengthening PNG's disability movement is key to sustained advocacy and accountability. The government and donors should provide institutional support to DPOs like PNGADP and its provincial affiliates. This can include core funding for secretariat functions, capacity-building in organizational management, and leadership development for emerging advocates (particularly women and youth with disabilities, to ensure diverse representation). A stronger DPO network can engage continuously with government – for instance, participating in drafting legislation, monitoring services, and representing PWDs in policy dialogues.

PNGADP's recent strategic planning after a long gap (Post-Courier, 2025) is an opportunity; resources should be invested to implement their National Advocacy Plan and to maintain regular provincial consultations. Encouraging the formation of specific groups (like Women with Disabilities associations, Deaf associations, etc.) under the umbrella and ensuring they have a voice will help address intersectional issues. Donor-funded programs

such as the AusAID-funded Building Community Engagement in PNG (BCEP) that supported PNGADP (Post-Courier, 2025) should be continued and expanded.

Additionally, establish formal channels for DPO input: for example, an Advisory Council of Persons with Disabilities that meets semi-annually with the Minister or Prime Minister to give feedback on government performance regarding disability. This would institutionalize the "nothing about us without us" principle.

Media and representation

Work with media outlets to improve the portrayal of disability. Right now, disability stories in the media are few, and when present, often pitying or framed as human interest oddities. Training journalists on inclusive reporting (using respectful language, focusing on capabilities and rights rather than just charity cases) will help. The national broadcaster NBC, and popular newspapers like Post-Courier and The National, could have regular segments or articles on disability issues – turning up the visibility of PWDs in public discourse.

Even including sign language interpretation in a corner of the TV screen during news broadcasts (as many countries do) would both provide access and normalize the presence of Deaf community needs. Another idea is to collaborate with PNG's growing film and arts industry to produce documentaries or dramas that include characters with disabilities in a positive light. Over time, as people see more PWDs in public life (whether in media, politics, or community leadership), attitudes should shift.

4. Build Institutional Capacity and Data Systems

Capacity building for service providers

Invest in training programs for professionals and frontline workers on disability inclusion. This spans many sectors: teachers, as mentioned, need special education training; health workers need training on disability etiquette, basic rehabilitation, and inclusive communication (for example, how to interact with a patient with intellectual disability or how to guide a blind patient). Social protection officers (or community development officers) should be trained on case management for persons with disabilities – this could involve partnership with international social work programs or UN agencies like UNICEF or UNDP to develop toolkits.

Given limited expertise within PNG, consider twinning arrangements: e.g., bring experienced disability support practitioners from nearby countries (Australia, Fiji, Philippines, etc.) to conduct workshops or mentorship for PNG counterparts. The public service GESI office can incorporate disability modules in their gender/social inclusion training across departments (Motivation Australia, 2018). Within the Department for Community Development and Religion, establish a dedicated Disability Services Unit with trained staff; provide them with ongoing professional development opportunities (such as attending regional conferences, online courses on disability policy, etc.).

Improve data collection and research

A recurring limitation is the paucity of reliable data on disability in PNG. Therefore, implement measures to gather data systematically. One immediate recommendation is to include the Washington Group Short Set of Questions on Disability in the next national census or Demographic and Health Survey. These questions are a globally tested tool to identify functional difficulties and would give a clearer picture of the prevalence and types of disabilities across PNG.

Additionally, conduct targeted surveys or mapping – for example, an education survey to find out how many children with disabilities are out of school (perhaps done via school census and community follow-ups), or an accessibility audit of public infrastructure in major cities. The National Statistical Office can be supported by technical experts to ensure disability disaggregation in all relevant statistics (e.g., disaggregate labour force data by disability status to see employment gaps, as HRW noted there is limited data now) (Human Rights Watch, 2021).

Partner with academic institutions (like the University of PNG, Divine Word University, or UNSW which has shown interest) (UNSW, 2024) to encourage research on disability – for instance, qualitative research on cultural beliefs, or evaluations of pilot programs. Having local evidence of "what works" in PNG context (and what doesn't) will inform better programming. Establish a public database or repository (perhaps under NDoH or Community Development or the National Research Institute) where all disability-related studies and reports are collected and accessible, to avoid fragmentation of knowledge.

Monitoring and accountability mechanisms

Strengthen monitoring of disability inclusion by embedding it into broader accountability frameworks. For instance, require that annual reports of departments (Education, Health, etc.) include a section on disability inclusion progress. Create indicators for district and provincial performance (like number of PWDs benefiting from programs, or budget spent on disability initiatives) and incorporate those into the appraisal of local government performance.

Civil society can be empowered to play a watchdog role: DPOs and human rights groups should continue reporting to international mechanisms (such as the CRPD Committee or the Universal Periodic Review) to keep pressure on the government to fulfill commitments (Human Rights Watch, 2021). Domestically, consider an ombudsman or assigning the existing Ombudsman Commission a role in addressing grievances of PWDs if rights are denied (until the Disability Commission is set up). The National Assembly (Parliament) could establish a Select Committee on Disability and Social Inclusion to oversee implementation of laws and policies, calling ministers to answer on progress periodically. These accountability measures will ensure that once plans and policies are in place, they are not forgotten.

5. Fostering Inclusive Communities and Reducing Inequalities

Inclusive disaster management and climate adaptation

PNG is prone to natural disasters (earthquakes, floods, etc.) and is facing climate change impacts. It's vital to integrate disability considerations into disaster preparedness and response. Identify PWDs in communities in disaster databases so that, for example, evacuation plans include those who might need assistance. Train emergency responders on assisting persons with mobility or sensory impairments. Ensure relief centres are accessible and that information about emergencies (like early warning signals) reaches everyone (for instance, using visual alarms for deaf individuals or radio announcements for blind individuals). This recommendation aligns with "Leave No One Behind" in humanitarian action and will save lives while reinforcing the value placed on PWDs as equal citizens.

Address gender and disability intersection

Initiatives targeting women's empowerment in PNG should explicitly include women with disabilities. This means ensuring that programs for addressing gender-based violence (GBV) reach women with disabilities, who experience extremely high rates of violence and often have even less access to support (Human Rights Watch, 2021). GBV services (police Family and Sexual Violence Units, safe houses, counseling) must be made accessible – e.g., train counselors to communicate with women who have hearing or speech impairments, make physical safe houses accessible, and educate service providers to recognize that women with disabilities may be targeted for abuse (including sorcery-related violence) and need proactive outreach.

Encourage disability representation in women's groups and vice versa. Also pay attention to the needs of children with disabilities, who are vulnerable to neglect and abuse. Strengthen inclusive child protection measures under laws like the Lukautim Pikinini Act – child welfare officers should include disability in their case monitoring, and communities should be sensitized that children with disabilities have the same rights to protection and development.

By implementing these recommendations, PNG can make significant progress in building a society that upholds the rights and potential of all its members, including persons with disabilities. The strategies cover a broad spectrum – legal reform, service delivery, cultural change, capacity-building – reflecting the multifaceted nature of the challenge. It will require commitment and cooperation across government agencies, communities, and development partners. Many of the recommendations are mutually reinforcing: for example, better data will improve planning, improved inclusion in schools will change attitudes for the next generation, empowering DPOs will help keep the momentum, and so on.

In terms of prioritisation, some actions can yield early wins (such as launching awareness campaigns, passing the Disability Act, starting teacher aide hiring), while others are longer-term investments (like training enough therapists or achieving full accessibility in infrastructure). It is crucial that momentum is maintained and monitored. The final section concludes the paper by reinforcing the imperative of acting on these recommendations and the vision of an inclusive future for PNG.

Conclusion

Disability support in Papua New Guinea today stands at a critical juncture. The analysis in this paper has shown that, despite progressive policies and growing awareness, persons with disabilities in PNG continue to encounter formidable barriers that prevent them from participating fully in society. These barriers – inadequate services, inaccessible environments, deep-rooted stigma, and weak institutional capacity – are not insurmountable. Indeed, PNG has demonstrated the will to change from ratifying the CRPD to formulating a comprehensive National Disability Policy and now moving towards dedicated disability legislation, the foundation for progress has been laid. What remains is to bridge the gap between intention and reality.

At the national level, the government's commitments must translate into tangible improvements in daily life for persons with disabilities. Laws and policies have to be backed by resources, political will, and accountability. As Prime Minister Marape emphasised, "going forward, life after 50 [years of independence] must include our persons with special needs" (The National, 2025). This is both a moral imperative and a development necessity. No country can afford to marginalize a significant portion of its citizens if it aims for inclusive growth and social cohesion. PNG's Vision 2050 envisions a wise, fair, and happy society – those goals implicitly require that men, women, and children with disabilities are granted the same opportunities and respect as others.

From the community perspective, change is beginning to stir. We have seen encouraging signs: a young woman in a wheelchair graduating with a law degree and advocating nationally (Global Partnership for Education, 2023); disabled persons' organizations rejuvenating their networks and engaging with government (Post-Courier, 2025); and pilot projects demonstrating that when given the chance, persons with disabilities can lead and contribute to solving community problems (Water for Women Fund, 2023). These stories need to become the norm rather than the exception. That will require sustained efforts to educate and transform attitudes in every village and settlement, so that disability is understood not as a curse or cause for shame, but as a natural part of human diversity.

Traditional support systems in PNG, like the wantok system, must evolve in tandem with formal support structures – moving from purely charitable care to empowerment and inclusion.

A recurring theme in this research is that improving disability supports yields broad societal benefits. When schools become inclusive, all children benefit from more supportive teaching methods. When workplaces adapt for employees with disabilities, they often become safer and more flexible for everyone. When communities become accessible, it helps not just those with permanent disabilities but also elderly people, pregnant women, and those with temporary injuries. In other words, an inclusive PNG is a stronger PNG. The barriers that hold back people with disabilities are, in many respects, the same barriers that hinder the country's progress as a whole: poor infrastructure, limited services, discriminatory practices, and gaps in governance. Tackling these with a focus on disability can act as a catalyst for wider improvements.

It is also clear that the path forward will require partnership. The Government of Papua New Guinea cannot achieve these changes in isolation. Collaboration with civil society is

crucial – organizations of persons with disabilities must be at the heart of planning and decision-making. International partners, who have supported much of the progress to date (for example, Australia's support in policy development and accessible infrastructure) (PNG Haus Bung, 2022; Post-Courier, 2018), should continue to align their aid with PNG's disability inclusion priorities. PNG can leverage regional networks and learn from neighboring Pacific nations that have implemented successful inclusive initiatives. Additionally, the private sector in PNG should be engaged as an ally – businesses can adopt inclusive hiring practices and innovate products and services accessible to PWDs, expanding their customer base and workforce talent.

In conclusion, the current state of disability support in Papua New Guinea is one of unrealised potential. The country has within its reach the knowledge and tools to create a more inclusive society – one where a child with a disability can go to school in her village, a young man who is blind can find gainful employment, a mother with a mobility impairment can access maternal healthcare without barriers, and an elder with a disability can live in dignity within the community. Achieving this vision will take time, dedication, and the strategies outlined in this paper, from legal reforms to grassroots advocacy. Yet, the trajectory is set in the right direction.

As PNG implements the recommendations and strategies for improvement, it will not only be upholding the rights of persons with disabilities but also enriching the social fabric and development prospects of the nation as a whole. The motto of the National Disability Policy – "Remove Barriers, Make Rights Real" – encapsulates the task ahead. Removing barriers is a collective responsibility, and making rights real is the collective reward. With concerted action now, the coming decade can witness a transformation in the lives of Papua New Guineans with disabilities, fulfilling the promise that no one is left behind in PNG's journey forward.

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