

Reconfiguring human security relations between the state and society: The Papua New Guinea experience

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The novel coronavirus (COVID-19) has profoundly reconfigured human security relations between state and society in Papua New Guinea (PNG). In implementing its COVID-19 response, PNG opted for an authoritarian structure with an emphasis on law enforcement where transparency, accountability, and democracy were legally qualified to protect human health in the interest of national security.

In taking this approach, the perceived human security threat posed by COVID-19 led to a significant change in relations between state and society. The state has requested that citizens momentarily forgo democratic rights, liberties, and freedoms in the interest of national security, but sustaining society's long-term participation, cooperation and compliance has been a challenge on a number of fronts.

PNG society in the context of the COVID-19 pandemic is considered strong in the sense that most citizens do not comply or readily cooperate with the COVID-19 measures and regulations issued by the state. This non-cooperative behavior exposes the weaknesses in the capability of state agencies to enforce COVID-19 measures and regulations. Inadequate funding of COVID-19 initiatives as well as an under-resourced public health infrastructure considered inadequate in handling the pandemic also played on relations between the state and society.

COVID-19: Reconfiguration of state and society relations

On March 11, when the World Health Organization (WHO) declared COVID-19 a health pandemic PNG's response to protect its society comprised five key measures rolled out over four months from March to June 2020.

1. The first was the declaration on 14 March of COVID-19 as a quarantinable epidemic and infectious disease. The action taken was to restrict international flights to Port Moresby, and restrict international arrival of ships to three ports in the country; Port Moresby, Kokopo and Madang. A total ban was placed on travelers arriving or transiting through virus infected countries.
2. The second measure was the declaration by the National Security Council on 16 March of COVID-19 as a national security threat. A ban on international all travel was imposed on 20 March. PNG closed its borders, except for health workers, persons assisting with COVID-19 response, diplomats, military personnel, and flight crew and crews of international ships. Throughout the country, social clubs, sporting events and gatherings of over 100 persons were also banned.
3. The third measure was the declaration of a nation-wide state of emergency (SoE) on 23 March by the National Executive Council under section 239 of the Constitution. The SoE lasted for 14 days. At this point, PNG had one case of COVID-19. Initially, an inter-agency National Operations Centre¹ was established to oversee and coordinate the SoE. Subsequently, a National COVID-19 Control Centre (NCCC) assumed daily operational and implementation matters. A Ministerial Committee headed by the Minister for Health had political oversight. Its members included the Ministers for Foreign Affairs, Communications and Technology, Civil Aviation, Citizenship and Border Security, State Enterprises, and Transport.

Under the SoE, the military was called-out to protect the liquified natural gas project sites; maintain law and order in Hela, Southern Highlands, Morobe, Central provinces and the National Capital District. They also patrolled the main corridors of the Highlands Highway and the border provinces of West Sepik and the Western provinces, aside from helping civilian authorities in humanitarian relief exercises (PNG National Gazette No. G185 2020).

Overseeing their operations and implementing COVID-19 measures was the new police commissioner, David Manning. He was appointed on 26 March. Manning had been on the post for five months when he was entrusted with containing the spread of COVID-19. As Emergency Controller he had control over police, army and correctional services who were assigned to support his operations. He also had responsibility over a budget of PGK45 million plus additional funding that was allocated to dealing with COVID-19. In the 22 provinces of PNG, the Emergency Controller was supported by his provincial police commanders, provincial administrators and chief executives of provincial health authorities. With this coordinating structure, power was entrusted in an individual with authority and control over human behavior, movement, and freedoms of the people in PNG.

4. The fourth measure was to extend the nation-wide SOE for two months from 2 April to 2 June. It came into effect after the 14-day nation-wide SoE ended on 2 April. In obtaining parliament's unanimous approval to extend the SoE, Prime Minister James Marape said this measure was necessary 'to protect all citizens' (Marape 2000). Four extraordinary emergency laws were also unanimously passed to support the implementation of SoE. These laws were:

- the *Quarantine (Amendment) Act 2020*;
- the *Emergency (Defence Force) (COVID-19) Act 2020*;
- the *Public Health (Amendment) Act 2020*; and,
- the *Emergency (General Provisions) (COVID-19) Act 2020*.

In passing these laws, society, through its representatives in parliament, agreed to temporarily forfeit a number of democratic rights, freedoms and liberties in the interest of national security. COVID-19 more or less had reconfigured state and society relations. The public became aware of these limitations as security personnel enforced regulations and restricted movement of people.

5. The final and fifth measure was the enactment of the *Public Health Emergency Act 2020* also known as the pandemic law in June 2020. When the 2-months nation-wide SoE ended on 2 June, parliament purposely extended the SoE for an additional 14-days for this law to be prepared and tabled in parliament. This law provides the legal framework for 'a practical and effective legislative mechanism for the implementation of all necessary measures to detect, prevent the entry of, and eradicate[the]... pandemic, outbreak or serious public health threats' (Ivarature, 2020a). It covers COVID-19 as well as other future pandemics. Other changes include the establishment of the National Control Centre (NCC) which replaced the COVID-19 NCCC. An operational blue print forms the framework of the NCC, aligning it with the pandemic law and *Niupela Pasin* or the new normal. The changes are expected to streamline coordination between provincial coordination centres and relevant agencies to implement the COVID-19 response. At this point in time, there were eight COVID-19 cases in five provinces, including the capital.

The absence of a vaccine to deal with COVID-19 dramatically reshaped global economics and challenged the medical capabilities of many countries. In PNG, the

staggering surge in global cases and its spread around the world was used to reinforce and justify anxiety and fear in view of the country's inadequate health infrastructure. The underlying measures taken between March and June 2020 were, and continue to be, underpinned by a defensive strategy of contact tracing, communication and awareness, and infection containment, until vaccines are rolled out.

PNG's poor financial and economic outlook posed a serious challenge for government in protecting its people (Ling-Stucky 2020a). In April 2020 when the two-month nation-wide SoE was agreed to by parliament, the country had a budget deficit of PGK4.6 billion which was forecast to grow to PGK6.6 billion (Ling-Stucky 2020a). The cause of the debt was attributed to a PGK2 billion decline in external and domestic revenues, forcing the government to closely manage its implementation of COVID-19 programs and other public expenditures. PNG's GDP was also projected to fall in 2020 'by 3.7 per cent, a drop from a positive 2 per cent to a negative 1.7 per cent' (Ling-Stucky 2020b).

Despite the poor financial position, the Prime Minister promised to release PGK45 million for the COVID-19 response allocated in the 2020 national budget. He also promised an additional PGK150 million; an economic stimulus plan of PGK5.6 billion which was later increased to PGK5.7 billion to minimise the economic impact of COVID-19; and a supplementary budget that reflected the evolving economic environment.

Altogether, a total of PGK715 million in different lots was committed to COVID-19, excluding other international assistance. This amount comprised the PGK45 million committed in the 2020 national budget, PGK70 million from the World Bank and PGK600 million by the government under the stimulus package.

The allocation of PGK600 million was split between health and security (PGK280 million) and economic stimulation programs (PGK320 million). Of the PGK280 million for the health and security sector, 45 per cent was allocated to health, 48 per cent went to security, and five per cent went to fund a citizen repatriation exercise. The remainder went to churches for an urban food assistance program. Under health, funding went to preventative actions, pay frontline provincial health workers, and purchase personal protection equipment. This budget commitment excludes the substantial financial and resource assistance from international organisations and donors. Security sector funding was for surveillance and monitoring borders and the construction of ten border posts along the PNG-Indonesia border where the threat from the virus is considered a high risk (Ivarature 2020b).

Society checks on state COVID-19 response

The danger of investing extraordinary emergency powers in a single individual is the potential for abuse of those powers. Fortunately, the Emergency Controller has acted responsibly.

Oversight on behalf of society requires strong parliamentary opposition to keep government in check; truly

bipartisan parliamentary activities; and a fearlessly inquisitive media to ensure transparency and accountability on the expenditure of public funds, use of state resources, and quality of implementation of regulations. Through social media, the public sought and obtained public accountability of the COVID-19 budget allocation. The government also responded positively to these demands. It was kept accountable by the small vocal opposition which at that time numbered only five parliamentarians.

Resource limitations shape State efforts to protect society

Private sector businesses and employees have been the most affected by COVID-19. Many businesses have scaled-down operations and laid off employees. On the other hand, state agency employees had guaranteed security in income and employment – a point of contention for the PNG Trade Union Congress (PNGTUC) that accused the government of unfair treatment and discrimination.

The PNGTUC claimed that some 10,000 private sector employees have had to fend for themselves after being laid off. In April, the Prime Minister assured the public that business super funds agreed to provide relief by allowing withdrawals of between 30–50 per cent of their contributions. In the May economic stimulus plan of PGK5.6 billion, a total of PGK500 million was allocated to help people who had lost their jobs as a direct result of COVID-19. But withdrawal of contributions could not proceed without amending the *General Superannuation Fund Act*. As the Act only allows withdrawals after a waiting period of three months, section 90 needed to be amended for immediate withdrawals. Government did not keep its promise to amend the Act in June. The Act was amended in September and certified in November. By then, most people who were made redundant because of COVID-19 satisfied the minimum 3 months.

Employees affected by COVID-19 were assured that commercial banks would provide relief on loan repayments, such as a three-month grace period. Small and medium enterprises were forced to wait for the economic stimulus plan. The initial amount promised in April was PGK250 million but in September, only PGK200 million was released for SMEs.

Testing trust between state and society over COVID-19

Appealing to society to cooperate and comply with COVID-19 preventative measures in the national interest necessitates reciprocal behaviour from the state and its agents. Trust is central in this relationship, but a number of actions by the state undermine society's trust.

The first is corruption. Society expected the state to financially account for the use of public funds and demanded an audit of the PGK45 million when allegations of misuse surfaced in the media. With the history of corruption in the health sector over procurement of medicine and medical supplies still fresh in the public's mind, society led by civil society and the media held government

accountable. Although legal exemption of COVID-19 funds from the public finance management and procurement laws raised suspicion and distrust, the government is committed to accountability. Even the requirement for the Emergency Controller to only provide an expenditure report to the Cabinet added to society's distrust.

The second is the dissemination of concise, accurate information to keep society informed. Convening daily media conferences to update on the progress of COVID-19 management became a standard operating practice for the Emergency Controller and the Prime Minister. However, the majority of the rural population was kept in the dark as the updates were received by a small section of society with access to modern media platforms. Locals also distrusted the integrity of tests in light of the high incidence of cases being reported positive and subsequently found to be negative.

The third is the occasional strong-handed tactics of law enforcement by some security personnel when regulating public behaviour. Citizens were unhappy as mistreatment and abuses escalated, and food, including betel-nut, was seized and destroyed. As society's complaints intensified, the Opposition began to question government's approach in managing COVID-19. In its view, COVID-19 was a public health issue, and not a law and order problem. The appointment of a policeman as Emergency Controller and the hurriedly enacted pandemic law reinforced the belief that the pandemic had been securitised. By enacting this law, rights and liberties, including democracy, have been debased. It is not surprising that the constitutionality of this law which was rushed through without wide public consultation is now before the courts to determine. An appropriate framework would be public health-based, led by medical professionals where political leadership is directly accountable and responsible.

Finally, society expects equal treatment and application in laws, rules and regulations. Everyone, regardless of office, is expected to comply with COVID-19 laws and regulation. No one should be exempted given the serious public health risk COVID-19 poses to society. The government's decision to allow a private jet carrying a wealthy Chinese businessman to enter and depart PNG in June against pandemic law and COVID-19 protocols, greatly disappointed society. That disappointment was expressed in a letter published in the *Post-Courier* on 18 August 2020.

Our only hope through this challenging time is that our leaders should set the example for our people to follow ... If we are being asked to stay at home, why would our Prime Minister and other Ministers choose to travel out of the COVID-19 hotspot in PNG that is supposed to be in lockdown and drive the length of the country taking selfies and posting on Facebook ... If people need to wear masks, and they do, then why are Ministers openly interacting without masks. The Mining Minister walking into shopping centres without a mask despite being asked to wear one ... Our people will follow the lead set by our leaders.

Conclusion

The key lesson for PNG is to undertake a long-term investment in a sustainable public health infrastructure if it is to

guarantee adequate protection against health security threats. Such an approach would complement the defensive strategies taken to prevent the outbreak and spread of highly contagious and infectious disease.

PNG must develop and invest in a pragmatic pandemic management strategy that addresses all health needs, not just those of the pandemic. This strategy must be based on public health management practices and be led by qualified medical professionals. Law enforcement, while important in maintaining public order, should not handle a public health problem.

Society does not necessarily need to give up their rights, freedoms and liberties. The risks for abuse of powers are high. Society may be more willing to cooperate in preventing the spread of the COVID-19 virus if their rights, freedoms and liberties are not abused. People may be more compliant with COVID-19 regulations if public funds are subjected to public finance and public procurement laws. Society may participate if agents of state also practice and apply the same rules and regulations they make. In this difficult economic climate, investments in human security, particularly in health and economic recovery, are two priority areas for building relations between state and society.

Notes

- ¹ It comprised of the Departments of Health, Treasury, Finance, Citizen and Immigration Authority, Transport and Infrastructure, Information and Technology, National Airport Corporation, Air Niugini, PNG Ports, National Agriculture and Quarantine Authority, PNG Customs Services, PNG Tourism Promotion Authority, PNG Defence Force, Royal Papua New Guinea Constabulary and the Institute of Medical Research.

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