STRATEGIC FOCUS

CDC has provided technical assistance (TA) to Papua New Guinea (PNG) since 2007 through cooperative agreements with the World Health Organization (WHO) and HEALTHQUAL to collaborate with the National Department of Health (NDOH), Provincial Health Authorities, and other partners. The CDC PNG Office was established in 2012 to build capacity and support health system strengthening to impact the PNG HIV/tuberculosis (TB) epidemics. CDC PNG receives annual funding of about two million dollars under the U.S. President's Emergency Program for AIDS Relief (PEPFAR).

Enhancing Surveillance and Health Information Systems: CDC builds in-country capacity to design, implement and evaluate HIV/AIDS surveillance systems and improve national health information systems to collect, store, analyze and use high-quality data essential to HIV prevention, care and treatment.

Strengthening Health Systems: CDC partners with the NDOH and WHO for laboratory International Organization for Standardization (ISO) accreditation to improve HIV-related testing, the roll out of clinical quality improvement to improve HIV care and treatment, the adoption and roll out of national HIV guidelines, and strengthening of organizational governance and management systems.

Strengthening Laboratory Systems: CDC provides TA to the Central Public Health Laboratory (CPHL) of the NDOH to increase HIV-related testing capacity and improve test quality, timeliness and reporting. Laboratory priorities include quality assurance for rapid HIV testing and other related HIV testing, ensuring accurate results are provided to clients, and strategizing for scale-up of viral load testing.

Building Sustainable, Country-owned Programs - HIV Care and Treatment Quality Improvement (QI): CDC, in partnership with WHO PNG and HEALTHQUAL International, has assisted the NDOH to formulate the national HIVQUAL framework to improve the quality of HIV care and treatment through monitoring of quality indicators and implementing quality improvement projects. Endorsement of HIVQUAL as a NDOH policy of HIV program paves the way for all stakeholders involved in HIV Care and Treatment to improve the quality of care of treatment.

KEY ACTIVITIES AND ACCOMPLISHMENTS

- Field Epidemiology Training (FET): In collaboration with CDC, WHO, and Australia's Department of Foreign Affairs and Trade, the NDOH provides the annual, four-course FETPNG, which uses intensive mentoring and includes intervention projects that have already saved hundreds of lives. The NDOH considers the FETPNG its best program. It has trained over 80 field epidemiologists working in the NDOH, provinces, and districts, providing new leadership in HIV and other disease surveillance, program monitoring, evaluation, reporting, and disease control activities. About one-third of research projects and interventions of the FET fellows are associated with HIV, TB, and sexually transmitted infections (STI) disease surveillance and control in their provinces and PNG.
- CDC PNG supported the completion of an HIV drug resistance study, which revealed high levels of drug resistance prompting change to HIV care and treatment guidelines.
- CDC PNG supported national scale-up of viral load testing using dried blood spots, increasing viral testing by 400% and making nationwide viral load testing possible.
- HIV Quality Improvement (HIVQUAL): Improved viral load testing uptake and management of high viral load patients. CDC PNG is also working to increase Tuberculosis Preventive Treatment uptake.
- HIV Patient Database (HPDB): HPDB is one of the only clinic-level patient management systems in PNG. CDC continues to support the expansion and rollout of the system by improving functionality, training users, and analyzing and evaluating the data it generates. In 2018, CDC will be leading efforts to develop a national level HPDB data hub for real time reporting and improved data use for decision-making.
- TB (Non-PEPFAR): In collaboration with WHO and the PNG National TB Program, CDC Headquarters is conducting a TB Patient Cost Survey to evaluate the costs associated with TB diagnostics and treatment in PNG. The findings will allow the identification and prioritization of future research required to develop and scale-up policies and interventions to mitigate against these costs, as the burden of TB can have a devastating financial impact on patients and their families. This study is in line with one of the three core targets of the new WHO End TB Strategy no catastrophic costs for TB patients and their families due to TB diagnosis and treatment.

Our success is built on the backbone of science and strong partnerships.

Key Country Leadership

Prime Minister: Peter O'Neill

Minister of Health: Elias Kepavore

U.S. Ambassador: Catherine Ebert-Gray

CDC/DGHT Director: Thierry Roels

Country Quick Facts
(worldbank.org/en/where-we-work)

Per Capita GNI: \$2,530 (2018)

Population (million): 8.61 (2018)

Under 5 Mortality: 53/1,000 live births (2017)

Life Expectancy: 66 years (2017)

Global HIV/AIDS Epidemic (aidsinfo.unaids.org)

Estimated HIV Prevalence (Ages 15-49): 0.8% (2018)

Estimated AIDS Deaths (Age ≥15): N/A (2018)

Estimated Orphans Due to AIDS: N/A (2018)

Reported Number Receiving Antiretroviral Therapy (ART) (Age ≥15): 27,975 (2018)

Global Tuberculosis
(TB) Epidemic
(who.int/tb/country/data/profiles/en)

Estimated TB Incidence: 432/100.000 population (2017)

TB Patients With Known HIV-Status Who Are HIV-Positive: 7% (2017)

TB Treatment Success Rate: 62% (2016)

TB Mortality: 53/100,000 population (2017)

DGHT Country Staff: 4

Locally Employed Staff: 4 Direct Hires: 0 Fellows & Contactors: 0



