Papua New Guinea

Papua New Guinea, the largest nation in the Pacific, is classified as a low middle-income country with 2,084 US$ GDP per capita (PPP/2009 Human Development Report). The country and its 600 associated islands, is the largest in the South Pacific, both in land area and population. It has a total land area of 462,840 square kilometers. The country's geographical features are dominated by extensive mountain ranges, rainforests, coral atolls and river systems. About 50 per cent of the total land area is mountainous, and as a result many areas of the country are still inaccessible by road. The country has a population of approximately 6.5 million people (2007). Close to 87% of the population lives in rural areas. Access to widely scattered rural communities is often difficult, slow and expensive. Administratively, the country has 22 provinces and 89 districts. There are large socio cultural differences between and within provinces. Around 800 languages are spoken in Papua New Guinea and each language group has a distinct culture. The official languages are English, Pidgin and Motu.

PNG's relative level of poverty in relation to neighbouring countries is increasing and it now ranks 148th out of 182 countries on the United Nations Human Development Index (2009). Although Adult literacy rate has improved to 57.8 (Human Development Report 2009), still 39.6% of the population has no education (Demographic Health Survey 2006). Subsistence farmers, fisher men and hunters constitute the poorest segments of the population. However, an increasing number of people living in settlements around the cities are disadvantaged with low income and poor living conditions. Violence against women and achieving gender equality remain major challenges in Papua New Guinea. The country is a signatory to the Millennium Development Declaration. The first MDG progress report was published in 2005 and the second report early in 2010. The reports show the progress being made by the country towards the attainment of the MDGs, but there is considerable work to be done if PNG is to come anywhere near attaining the goals.

In recent years, PNG's economic growth has improved, mainly due to high commodity prices, rising to 6.5% in 2007 and 6.6% in 2008. The Government's budgetary and management performance has also experienced improvements. The Government is focusing on a new national development strategy that would take into account the future windfall from the planned Liquefied Natural Gas project (PNG LNG). Nevertheless, after over 30 years of political independence and some early economic and social progress, most of people of PNG remain poor by both regional and international standards.

HEALTH & DEVELOPMENT

The major health problems have remained largely unchanged in the past fifteen years, although there are recent indications of an epidemiologic transition beginning to take effect among some populations. The leading health problems continue to be communicable diseases, with malaria, tuberculosis, diarrhoeal diseases, and acute respiratory disease as major causes of morbidity and mortality. PNG has a generalized HIV epidemic, driven predominantly by heterosexual transmission. Care and treatment for people living with HIV have improved significantly since 2006. Although there has been a downward trend in infant and child mortality, the rates are high compared to other countries in the Asia Pacific region. Maternal mortality remains very high and the Demographic Health Survey 2006 suggests that it has increased over the last decade. Addressing effectively MDG 4 & 5 are therefore key priorities for Papua New Guinea.

Health services are provided by the Government and non-state providers, mainly the Churches and to lesser degree economic operators and primarily financed by public funds. To date, a high level of fragmentation in the institutional and fiscal relationships between national, provincial and lower levels of government has contributed to the poor health outcomes. There is an unclear allocation of responsibilities for service delivery which creates significant barriers to improving access to services. Improving of rural health services is perceived as a key to improve health outcomes and attaining the health related MDGs.

The new National Health Plan 2011-2020, is developed in accordance with the Government’s development strategy, along with a redesign of the sector-wide approach and pledges for a stronger involvement of Central Government Agencies in the health sector. These changes are being enacted within the context of increased emphasis on aid effectiveness, harmonization among development partners and the United Nations reform process. Together, these both compound the challenges and create new opportunities for the WHO country office.

OPPORTUNITIES

- Improved economic growth and prospects for PNG
- New National Health Plan 2011-2020 focusing on “back to basics” and improved service delivery for the rural majority and the urban disadvantaged population
- Government reforms at sub-national level with better clarification of roles and responsibilities of the different administrative levels in the public sector
- Recognition of partnerships in health and non-state providers’ role to improve service delivery and for extension of public services
- Increasing funding for rural health services

CHALLENGES

- High maternal mortality
- Gender based violence and gender inequality
- Increased health security risks from emerging diseases, MDR TB and other communicable diseases eg, cholera
- Generalized HIV epidemic affecting about 1% of the population.
- Inadequate access to safe water and sanitation for large part of the population
- High level of fragmentation in the institutional and fiscal relationships between national, provincial and lower levels of government
- Inadequate human resources in particular midwives and medical doctors in rural areas and an ageing work force
- Dysfunctional medical supply system

<table>
<thead>
<tr>
<th>Total population (2007)</th>
<th>6 400 000</th>
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<tbody>
<tr>
<td>% under 15 (2006)</td>
<td>43.2</td>
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<tr>
<td>Population distribution % rural</td>
<td>87</td>
</tr>
<tr>
<td>Life expectancy at birth (2007)</td>
<td>60.7</td>
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<tr>
<td>Under-5 mortality rate per 1000 (2006)</td>
<td>74.7</td>
</tr>
<tr>
<td>Infant mortality rate (infant deaths per 1,000 live births) (2006)</td>
<td>57</td>
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<tr>
<td>Total fertility rate (2006)</td>
<td>4.4</td>
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<tr>
<td>Maternal mortality ratio per 100 000 live births (2006)</td>
<td>733</td>
</tr>
<tr>
<td>Total expenditure on health as % of GDP (2004)</td>
<td>3.2</td>
</tr>
<tr>
<td>General government expenditure on health as % of general government expenditure (2006)</td>
<td>7.3</td>
</tr>
<tr>
<td>Human Development Index Rank, out of 182 countries (2009)</td>
<td>148</td>
</tr>
<tr>
<td>Adult (15+) literacy rate (2007)</td>
<td>57.3</td>
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<tr>
<td>% of men with no education (2006)</td>
<td>34.9</td>
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<tr>
<td>% of women with no education (2006)</td>
<td>39.6</td>
</tr>
<tr>
<td>% population with access to improved drinking water source (2006)</td>
<td>40</td>
</tr>
</tbody>
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Sources:  
1 Human Development Report 2009  
2 Demographic Health Survey 2006  
3 National Health Plan 2011-2020
WHO STRATEGIC AGENDA (2010-2015)

WHO traditionally has focused on vertical communicable disease programmes, such as tuberculosis, malaria, immunization and HIV. However, since the early 2000s there has been recognition of the need to focus on health system strengthening initiatives. This represents a realization of the disparity between the promise of new health interventions and their actual impact; given the inability of the health systems to deliver those interventions, especially to those who most need them which, in PNG, is the rural majority and the urban disadvantaged. Based on a review of the past and current areas of concentration and ways of working, and on extensive consultation with National Department of Health, government agencies, key stakeholders and UN system, the strategic agenda for WHO in PNG 2010-2015 features four important strategic priorities as follows:

1. Technical excellence for sustainable health outcomes
2. Technical support for health systems strengthening
3. Universal access to primary health care supporting National Department of Health engagement with provinces and districts
4. Sector overview, partnerships and aid effectiveness.

Importantly, this agenda will bring technical programmes under one umbrella. Also, reproductive health, which previously received insufficient attention, now is featured more prominently, in particular to address maternal mortality and MDG 4 & 5. The emphasis on universal access means support to the NDOH in guiding and supporting provinces and districts to manage and deliver improved health services.

WHO will also help the Government to provide constructive oversight of non-state health providers to foster their positive contribution to achieving universal access to quality health services. WHO will work with the government to monitor progress on human resource development (HRD) reforms and encourage the government to maintain a long-term focus aimed at meeting its HRD needs. In doing so, this will decrease the need for capacity substitution by external partners. WHO will also work to reform the medical supply chain and to develop a coherent national laboratory policy.

The focus on partnerships and aid effectiveness is the first time this important programme of work is given strategic attention and adequate resources. It places WHO in the role of broker and facilitator of policy dialogue and performance monitoring, involving government, development partners and civil society. As part of renewed efforts to achieve a genuine sector-wide approach, WHO will support the development of a coherent health policy with a realistic resource envelope and expenditure plan. This will include global health initiatives and ensure an equitable allocation of resources to reach all segments of the population.

OPPORTUNITIES

- The new National Health Plan 2011-2020 is being enacted within the context of increased emphasis on aid effectiveness, along with and pledges for a stronger involvement of Central Government Agencies in the health sector.
- The redesign of the sector-wide approach for health
- The PNG Commitment on aid effectiveness emphasizes the importance of joint monitoring and oversight by government and development partners.
- UN reform with focus on “Delivering as One”

CHALLENGES

- Coordinating many players to improve policy coherence and technical cooperation.
- Weak governance and leadership capacity at national, provincial and district levels.
- Ensure that funds from global health initiatives are managed to contribute to the strengthening of health systems and a broader set of priorities in the health sector.

ADDITIONAL INFORMATION

WHO country page: http://www.who.int/countries/png/en/
Western Pacific Country Health Information Profile: http://www.wpro.who.int/countries/2009/png

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