



Papua New Guinea, 2015

Global Vaccine Action Plan (GVAP) and Regional framework indicators

Polio-free status sustained	Yes	At least one dose of IPV introduced by end of 2015	Yes
Country achieved MNT elimination	No	Increasing trend in domestic expenditure since 2010	No
Country verified for measles elimination	No	NITAG established (with administrative/legal basis only)	No
Seroprevalence of chronic hepatitis B infection (HBsAg) reduced to < 1% in 5 year olds by 2017	2.3%	Functional NITAG (legal basis, TORs, ≥ 5 areas of expertise, ≥ 1 meeting per year, agenda and background docs, disclosure of conflict of interest)	No
At least one new or underutilized vaccine introduced since 2010*	Yes	JE vaccine introduced in JE risk areas	No
DTP3 national immunization coverage ≥ 95% by 2020	62%	Primary series JE vaccine ≥ 90% coverage among children under 15 years old	Not applicable
DTP3 coverage ≥ 90% in at least 90% of districts (proportion of districts with ≥ 90% coverage)	No (12.4%)	Case-based surveillance for invasive bacterial vaccine-preventable disease	Yes
Sustained DTP3 coverage ≥ 95% for three or more years	No	Case-based surveillance for rotavirus disease	Yes
DTP dropout rate < 5%	25.3%	Rubella and CRS case-based data submitted to WPRO	No

* New or underutilized vaccines include Hib, HPV, PCV and RV. IPV and JE are not counted. Otherwise, "Yes (specified)" is indicated to account for other vaccines.

Population		
	JRF	UN*
Total	8 235 782	7 619 321
Births	263 545	214 684
NIP target < 1 year (surviving infants)	248 576	204 819
Source of data for NIP target	Census data	

* United Nations World Population Prospects: The 2015 Revision

Finance	
Gross national income per capita* (US \$)	\$ 2240
Line item in budget for vaccines	Yes
% of vaccines in routine immunization funded by government	47%
% of routine immunization - funded by government	12%
Eligible for GAVI support	Yes (transitioning)

* World Bank Open Data

Reported cases of selected vaccine preventable diseases

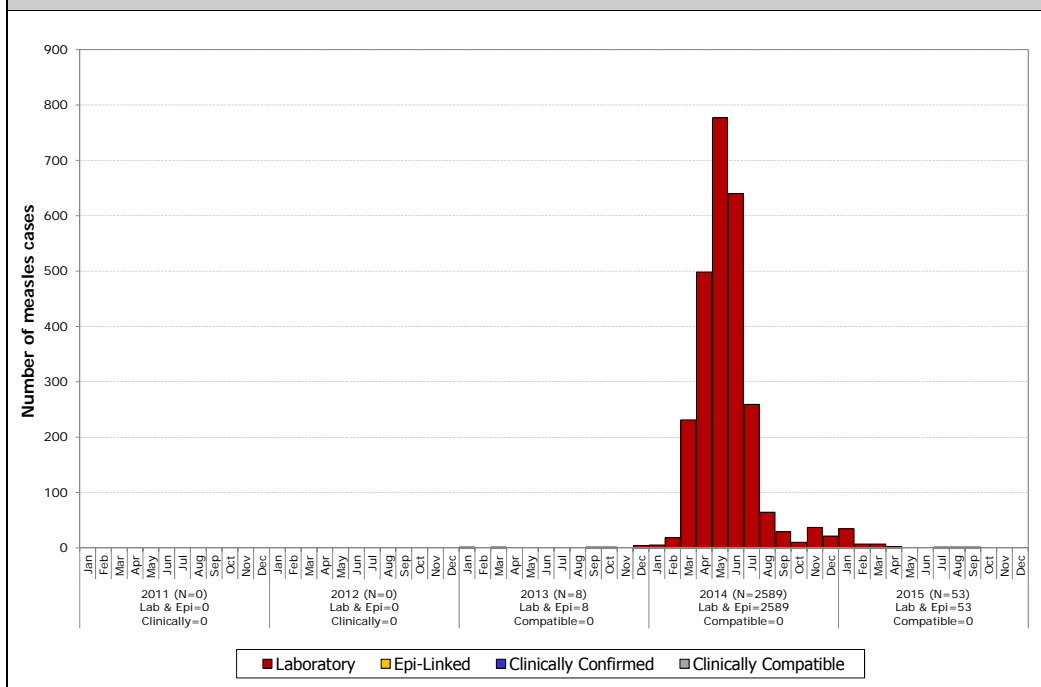
Year	Acute flaccid paralysis (AFP)		Measles		Rubella		Congenital rubella syndrome (CRS)		Neonatal tetanus		Total tetanus		Diphtheria		Pertussis	
	Non-polio AFP rate	% adequate specimens	Cases	IR	Cases	IR	Cases	IR	Cases	IR	Cases	IR	Cases	IR	Cases	IR
2011	0.4	50%	0	0.0	19	2.7			56	0.3	56	0.8	0	0.0	4625	65.9
2012	0.3	30%	0	0.0	33	4.6			32	0.2	32	0.4	0	0.0	6472	90.3
2013	0.6	28%	12	1.6	5	0.7			27	0.1	27	0.4			3188	43.5
2014	0.4	33%	2299	307.5	84	11.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
2015	0.8	30%	38	5.0	4	0.5	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

Non-polio AFP rate = incidence per 100 000 under 15 years; % adequate specimens = % of AFP cases with 2 specimens within 14 days of paralysis onset
 IR = incidence rate: for measles and rubella, per 1 000 000 population; for CRS and neonatal tetanus, per 1000 live births; for all others, per 100 000 population. Total tetanus includes neonatal tetanus cases.
 Population source: United Nations World Population Prospects

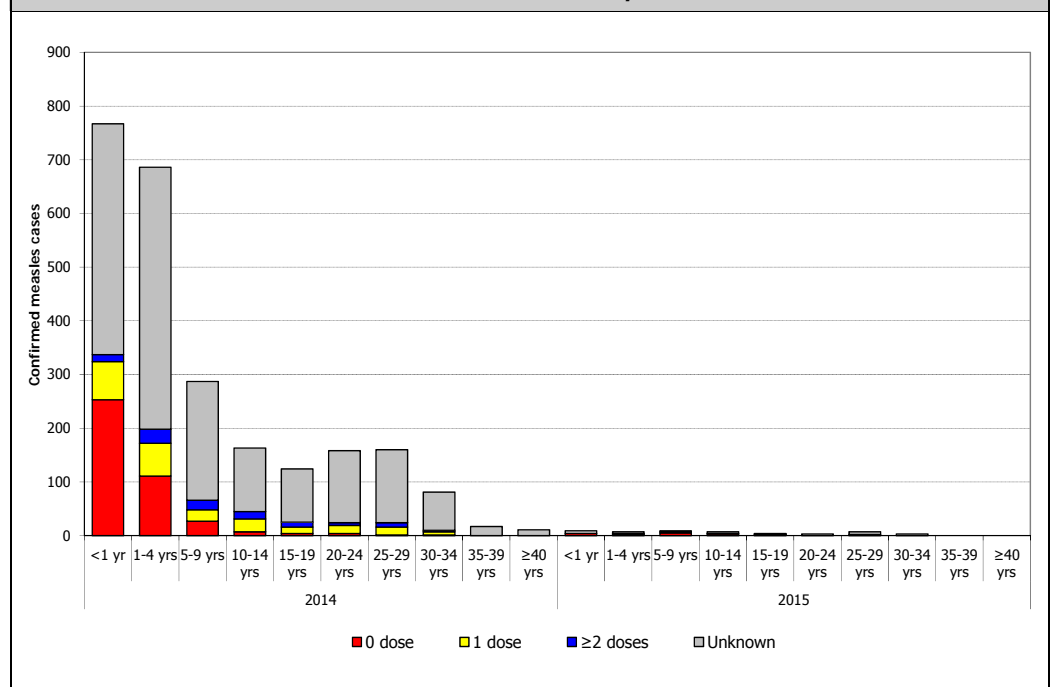
Invasive bacterial disease, rotavirus and japanese encephalitis

Year	Rotavirus diarrhea		Japanese encephalitis		Bacterial meningitis		Bacterial pneumonia	
	Surveillance system type	Confirmed cases	Surveillance system type	Confirmed cases	Surveillance system type	Confirmed cases	Surveillance system type	Confirmed cases
2013	Sentinel (2 sites)	21	Sentinel (2 sites)	0	Sentinel (8 sites)		None	
2014	Sentinel (2 sites)	39	Sentinel (1 site)	1	Sentinel (1 site)	Hib - 4 Pneumo - 15 Meningo - 2	None	
2015	Sentinel (2 sites)	15	Sentinel (1 site)	4	Sentinel (1 site)	Hib - 1 Pneumo - 2 Meningo - 1	None	

Confirmed measles cases by month of onset 2011–2015



Confirmed measles cases by age group and vaccination status, 2014–2015





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Immunization schedule					
BCG	B	DTP-Hib-HepB	M1, M2, M3	TT	Y7, Y13
HepB	B	OPV	M1, M2, M3	MR	M6, M9, M18
IPV	M3	Pneumo_conj	M1, M2, M3	VitA	M6, M9, M18

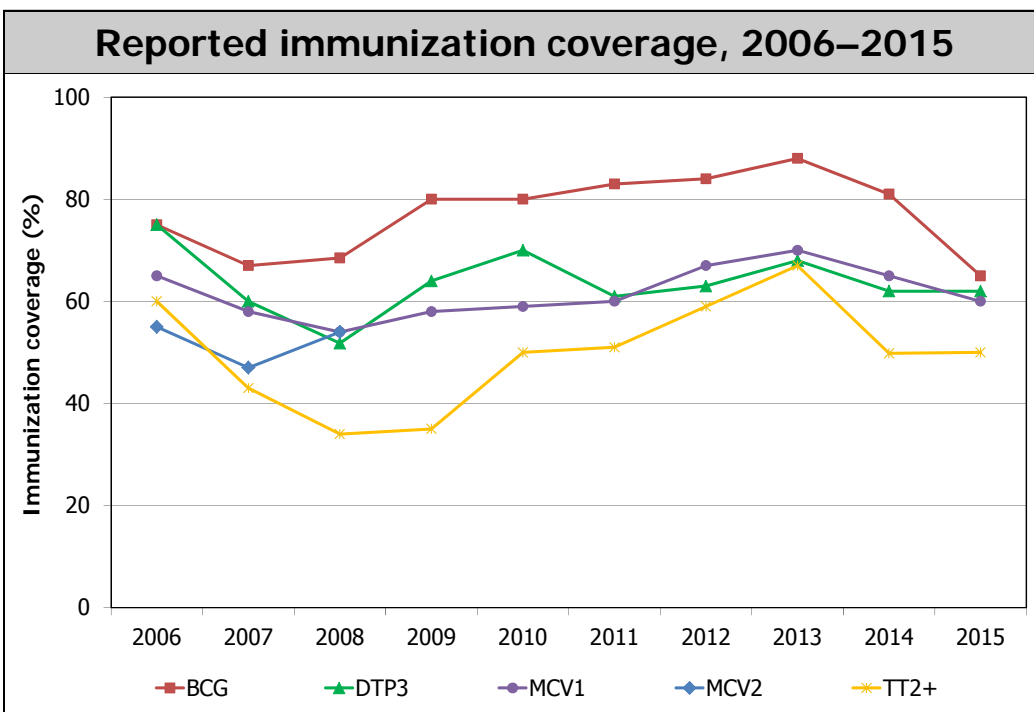
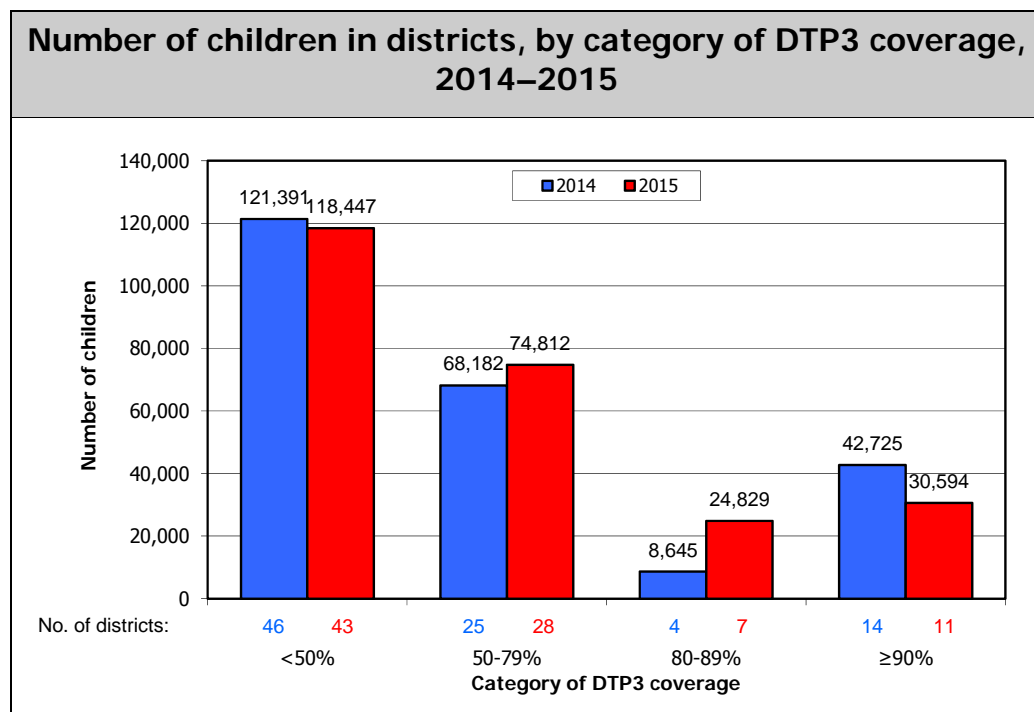
B=birth, W=week, M=month, Y=year

Planning	
Multi-year plan (MYP)	Yes (2011-2015)
Annual workplan for immunization activities	Yes
Updated wild poliovirus importation and cVDPV response plan	Yes

NIP priority needs	
1. Assessment survey on vaccine hesitancy	
2. Development of social mobilization policy and strategy	

Safe immunization	
% districts using auto-disable syringes	100%
System to monitor AEFI	Yes
Number of AEFI	0
Injection safety policy implemented	Yes
Disposal methods	Incineration, Open burning, Burial
Injection safety review	No

Delivery of immunization services	
% of population served by outreach	20%
No. (%) of districts with DTP3 coverage < 80%	71 (80%)
No. (%) of districts with DTP3 coverage ≥ 90%	11 (12%)
No. (%) of districts with MCV1 coverage < 80%	67 (75%)
No. (%) of districts with MCV1 coverage ≥ 90%	13 (15%)
No. (%) of districts with DTP drop-out > 10%	73 (82%)
No. (%) of districts with DTP1–MCV1 drop-out > 10%	60 (67%)



School-based immunization	
Is there a school entry requirement?	No
If no, do schools check immunization status at enrolment?	No
What vaccines are required/checked?	
At what school level/year?	
Is routine vaccination given at school?	Yes
Which vaccination?	TT
If yes, is this part of a comprehensive school-health program that delivers other health interventions?	No

Surveys		
	Coverage survey	Serosurvey
Most recent (year)		2013
Type		Hepatitis B surface antigen
Geographical representativeness		National
Result		HepB seroprevalence is 2.28%

Measles and rubella elimination			
Confirmed measles case rate* (per 1 million population)	6.9	Year of MCV1 introduction	1982
Confirmed rubella case rate* (per 1 million population)	0.5	Year of MCV2 introduction	1999
Discarded as non-measles rate* (Target: ≥ 2 per 100 000 population)	1.4	Year of RCV introduction	1982
% suspected cases with adequate specimens* (Target: ≥ 80%)	91.1%	Surveillance conducted for CRS	Yes (Sentinel)
Imported measles cases*	0	Antigens, year and target population of last SIA	M - 2015 (6 mos-15 yrs)
Measles cases with unknown source of infection*	53	Number vaccinated (SIA coverage)	347 685 (99%)

* Data from measles monthly country reports to WHO

Hepatitis B control			
Year HepB3 vaccine introduced nationwide	1989	Systems to deliver HepB vaccine birth dose	Hospitals, health centers
Year HepB birth dose introduced	~2003	HBsAg results assessed for blood donors	Yes
HepB birth dose (within 24 hours) coverage	32%	Policy for screening of pregnant women	Yes
HepB birth dose (within and after 24 hours) coverage	45%	Policy to vaccinate health care workers	Yes