Public-Private Partnership Approach to Addressing Development Issue: A Business Case of PNGIMR's iHDSS

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Presentation outline

- Country's need of data for development:
  - Millennium Development Goals 2015
  - Sustainable Development Goals 2030
  - Papua New Guinea Vision 2050
- PNG IMR's integrated Health and Demographic Surveillance System (iHDSS):
  - Objective and Design
  - Major Findings from PNG IMR's iHDSS data
  - Way forward to Comprehensive Health and Epidemiological Surveillance System (CHESS)
- Conclusion

Country's need of data for development and challenges

Millennium Development Goals

- Launched by the United Nations in 2000 as part of the Millennium Declaration
- Eight Goals and 60 Indicators to achieve by 2015
- The MDG 8 called for **Public – Private Partnership** to address development issues
- PNG Government submitted two Country Reports to the UN in 2005 and in 2010

The Papua New Guinea Vision 2050

- Developed by the National Planning Committee the PNG Vision 2050 in 2008
- Set out the long-term strategic vision on development of PNG
- Stressed on **monitoring and review** of the country's performance against the set targets
- Instructed a **major review in 2019** to measure its efficacy and set new targets for 2020-2030

Sustainable Development Goals 2030

- Launched by the United Nations in 2015
- Set out 17 Goals with 100 indicators to be achieved by 2030
- Calls for a data revolution at the global, regional and country levels
- As a country members of the UNs, PNG are expected to review and submit country's progress report every 5 years

Country's need of data for development

- Longitudinal and up-to-date data for tracking the country's progress towards achieving international and national developments goals and targets
- Better quality and greater quantity of data for planning, M&E of the implementation of public policies and socioeconomic development programmes at the national and sub-national levels
- More comprehensive, integrated and sustainable approaches to better facilitate data collection and coordination to further improve the availability, access and utilisation of data sources

Main Challenges

Three main challenges in collecting and reporting data for development:

- Lacks data collection systems, which provide reliable data for planning and programming interventions at the national and sub-national levels
- Lacks M&E systems for tracking and reporting the country's progress toward achieving of development targets and indicators at the national and sub-national levels
- Lacks adequate human resources and technical expertise to make use of data available from existing data sources to report upon the country's progress

- For that reasons, PNG Government has called for development partners, international and national stakeholders and research institutions to provide further assistance to the Government in collecting and reporting data, to inform policy decision-making and guide the country responses to emerging development issues.

PNG IMR's integrated Health and Demographic Surveillance System (iHDSS)

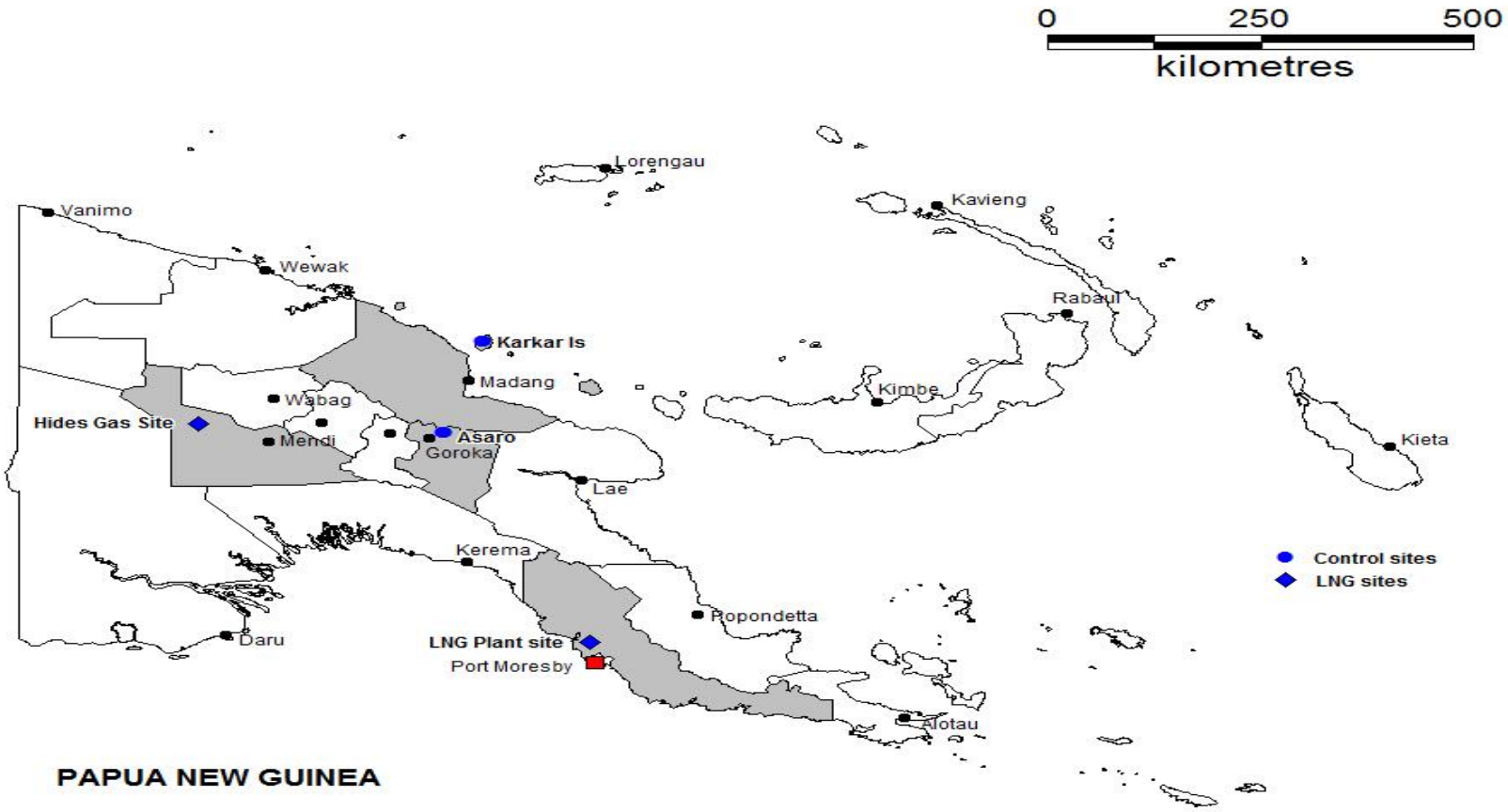
Partnership in Health Programme (PiHP)

- Approved by PNG Government and PHA in 2011
- Public-Private Partnership - unique feature of PiHP:
  - Financial support from the ExxonMobil
  - Technical assistance from the UQ and recently James Cook University (Australia)
  - Quality Control/Quality Assurance by the NewFields
  - Consultative and political advices from the Independent Scientific Advisory Board (ISAB)
  - Membership of the INDEPTH Global Network (including 49 surveillance centres in 20 countries)

Overall objective of the iHDSS

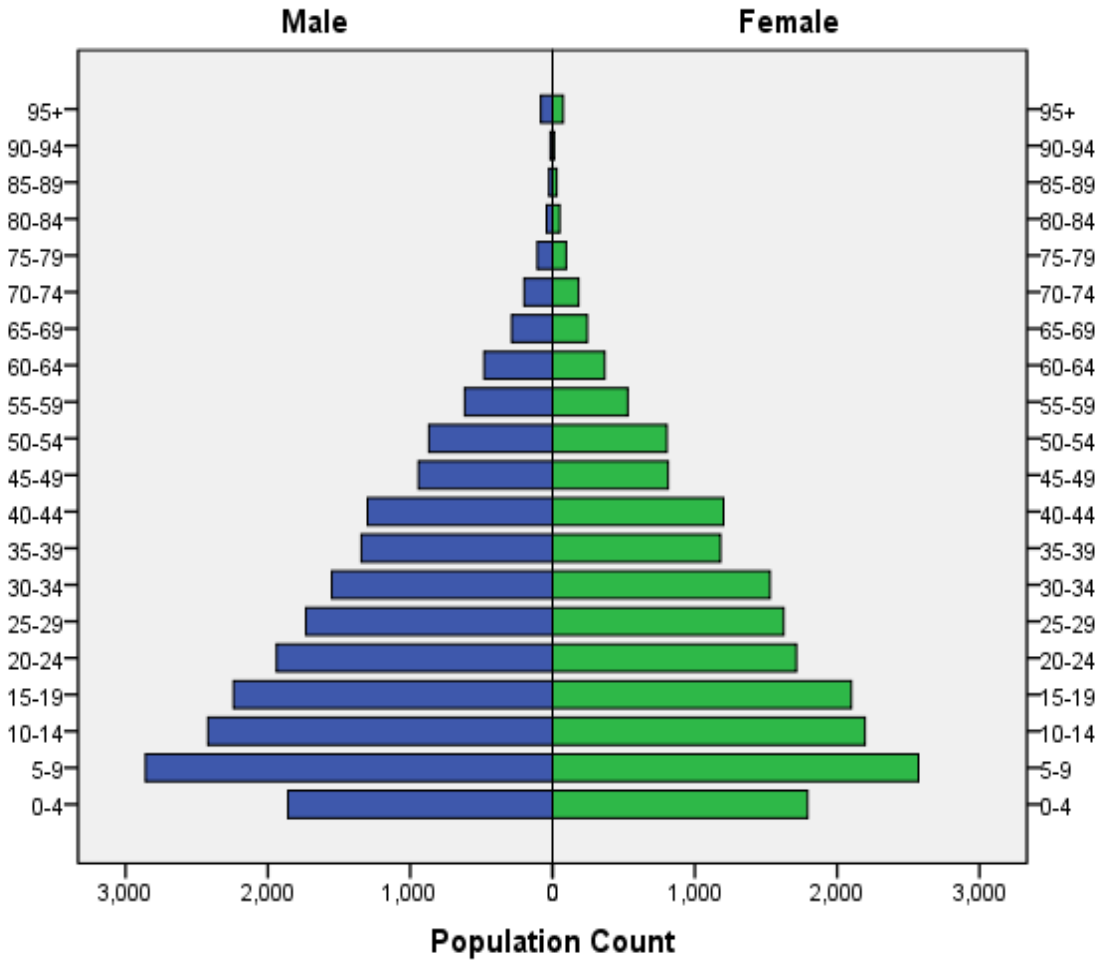
- To provide longitudinal data for monitor the impacts of the PNG LNG Project on the socio-economic development and population health status of the locality, upon collecting and reporting a broad set of health, demographic, socio-economic development indicators at the local level.

Design of the iHDSS: 'Intervention – Comparison' Cohort Follow-up Study



Key development indicators, using data available from the iHDSS

Overall age and sex population structure



Population health indicators

	iHDSS data	National Census data
Life expectancy at birth (in years)	64	62.8
Population sex ratio (Male: Female)	108.0	107.9
Sex ratio at birth (Male: Female)	105.0	NA
Net natural population growth rate (per 1,000 population)	11.8	NA
Crude net migration rate (per 1,000 population)	-6.9	NA
Total fertility rate (No. of children per woman of reproductive age, 15-49)	3.8	4.3

Child health indicators

Exclusive breastfeeding rate among children aged 0-5 months	61.0%
Proportion of children aged 6–23 months fed with semi-solid, soft foods	29.9%
Continued breastfeeding rates at 2 year	96.6%
Proportion of children Under 5 years has immunisation / health record card	54.0%
Proportion of 1 year-old children immunised all vaccines	36%
Proportion of 1 year-old children immunised against measles	48.4%
Vitamin A supplementation among children aged 0-11 months	42.9%
Proportion of children Under 5 years of age have birth certificate	27.0%
Infant mortality rate (per 1,000 live births)	61
Children under-5 mortality rate (per 1,000 live births)	92

Women's Health Indicators

Antenatal care services coverage (at least four visits)	49.0%
Proportion of birth deliveries at public health facilities	64.4%
Proportion of birth deliveries assisted by skilled birth attendants/ trained health workers	31.9%
Contraceptive prevalence rate among women aged 15-49	30.9%
Unmet need for contraception among women aged 15-49	34.2%
Adolescent birth rate	10.3%
Condom use in the last sex among women aged 15-49	8.1%
Maternal mortality rate (per 100,000 live births)	N/A

Education and Gender Equality Indicators

Indicators	Male	Female	Both sexes
Net enrolment rate in primary education among children 7 years of age (%)	35.61	35.68	35.64
Proportion of children aged 15 years attending primary education (%)	84.63	85.49	85.01
Proportion of children aged 15 years reaching final grade of primary education (grade 8 in PNG) (%)	6.28	8.35	7.22
Primary education attendance rate among young adult population, aged 15-24 years (%)	84.61	82.09	83.42
Ability to read among young adult population (%)	NA	63	NA
Ratios of boys to girls in primary, secondary and tertiary education among population of school age, 5-24 years			108/100 122/100 181/100
Share of men and women in wage employment in the non-agricultural sector (%)	26.6	7.9	17.3

Household Socioeconomic Indicators

Proportion of children under 5 sleeping under insecticide-treated bed-nets	85%
Incidence rate associated with malaria among infectious diseases	2.5%
Proportion of children under 5 with fever treated with anti-malarial drugs	27.4%
Proportion of households having access to improved drinking water source	50.0%
Proportion of household using an improved sanitation facility	10%
Proportion of households with access to basic healthcare services	80%
Proportion of households having landline telephones	0.78%
Proportion of households having mobile phones	74.5%
Proportion of households having private computers	5.4%

Other results of the iHDSS

- Provided research platform and infrastructure for conducting population-based studies including: TB, Diarrhea, STI, Pregnancy, NCD, Mortality, Morbidity
- Provided healthcare services on daily-basis for the population living in surveillance sites and surrounding areas
- Provide research training opportunities for national capacity building via refresh training courses (twice a year) and overseas higher education (02 PhD, 01 Master, 01 Bachelor)

Way Forward of the iHDSS

- Piloting phase of the iHDSS approaches to completion
- Unique opportunity for PNG IMR to nationally scale up and upgrade the system to better serve the country's need of data for development.
- Comprehensive Health and Epidemiological Surveillance System (CHESS) - a new generation of population health surveillance discussed on the Lancet in 2015**

** Sankoh O. CHESS: an innovative concept for a new generation of population surveillance. The Lancet. 2015;Published Online October 26, 2015 http://dx.doi.org/10.1016/S2214-109X(15)00180-1

Advantages of CHESS to the iHDSS (1)

	iHDSS	CHESS
Phase	Piloting: 2011-2016	Scaling up: 2017-2020
Objective	To monitor the impacts of the PNG LNG project upon a broad set of core health, demographic, socio-economic development indicators of the locality.	To provide longitudinal and up-to-date data series for monitoring and evaluation of development programmes and healthcare interventions, and reporting country progress toward the Sustainable Development Goals, contributing to the sustainable development of PNG.

Conclusion

- Data for development is great interest of PNG Government and development partners, especially in the context of SDG 2030 and PNG Vision 2050
- PNG IMR's iHDSS is a valuable data source for planning, M&E of the implementation of development programmes, policies and interventions.
- It is now an unique opportunity for PNG to increase its national ownership to scale up and upgrade the system to better serve the country's need of data for sustainable development.

Links to PiHP Technical Reports

- March 2014 Report: http://www.pngimr.org.pg/research%20publications/PiH%20Report.pdf
- September 2014 Report: http://www.pngimr.org.pg/research%20publications/PNG%20IMR%202014%20Sept%20Scientific%20Report_FINAL%20Approved.pdf
- March 2015 Report: http://www.pngimr.org.pg/research%20publications/March%202015%20Report_30072015.docx.pdf
- September 2015 Report: http://www.pngimr.org.pg/research%20publications/PNG%20IMR%20PiHP%20September%202015%20Report_FINAL_1%20December%202015.pdf
- March 2016 Report: http://www.pngimr.org.pg/research%20publications/PNG%20IMR%20PiHP%20March%202016%20Report_%20Women%20Health_FINAL%20approval.pdf

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Thank you for your attention!