The Centers for Disease Control and Prevention (CDC) has provided technical assistance to the government of Papua New Guinea to help strengthen health systems, to build workforce capacity, and impact the local HIV/tuberculosis (TB) epidemic since 2007. Under the U.S. President’s Emergency Program for AIDS Relief (PEPFAR), CDC works with the National Department of Health (NDoH), provincial health authorities and other in-country, international and U.S. government partners in the fight against HIV/TB.

CDC in Papua New Guinea

The Centers for Disease Control and Prevention (CDC) has provided technical assistance to the government of Papua New Guinea to help strengthen health systems, to build workforce capacity, and impact the local HIV/tuberculosis (TB) epidemic since 2007. Under the U.S. President’s Emergency Program for AIDS Relief (PEPFAR), CDC works with the National Department of Health (NDoH), provincial health authorities and other in-country, international and U.S. government partners in the fight against HIV/TB.

CDC STAFF
4 Locally Employed

AT A GLANCE
Population: 8,251,162 (2017)
Per capita income: $4,040
Life expectancy at birth: F 68/M 63 years
Infant mortality rate: 46/1,000 live births

Sources:
World Bank 2018, Papua New Guinea
Population Reference Bureau 2018, Papua New Guinea

TOP 10 CAUSES OF DEATH
1. Ischemic heart disease
2. Stroke
3. COPD
4. Lower respiratory infections
5. Neonatal disorders
6. Asthma
7. Diarrheal diseases
8. Diabetes
9. Road injuries
10. Self-harm

Sources:
GBD Compare 2018, Papua New Guinea

HIV Care and Treatment Quality Improvement

CDC supports sustainable, country-owned programs in HIV care and treatment quality improvement (QI). In partnership with WHO and HEALTHQUAL International University of San Francisco, California, CDC assisted the NDOH in developing a national HIVQUAL framework that will monitor quality indicators and implement QI projects to improve the quality of HIV care and treatment. 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 their services.

Key activities and accomplishments supported by CDC and PEPFAR:

- The completion of an HIV drug resistance study. The results showed high levels of drug resistance prompting change to HIV care and treatment guidelines.
- National scale up of viral load testing using dried blood spot, 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 is also working to increase Tuberculosis Preventive Treatment uptake.
- HIV Patient Database (HPDB): HPDB is the only clinic-level patient management system in Papua New Guinea. CDC continues to support HPDB expansion by improving functionality, training users and analyzing and evaluating the data it generates. In 2018, CDC lead efforts to develop a national level HPDB data hub for real-time data reporting that will serve decision-making leaders.
Surveillance and Health Information Systems
CDC builds in-country capacity to design, implement and evaluate HIV/AIDS surveillance systems. Strong surveillance and health information systems can collect, store, analyze and use high-quality data essential to design effective HIV prevention, care, and treatment programs. CDC partners with the NDOH and WHO to help the country achieve laboratory International Organization for Standardization (ISO) accreditation and be able to improve:

- HIV testing
- HIV care and treatment
- National HIV guidelines
- Organizational governance and management systems.

Strengthening Laboratory Systems
CDC provides technical assistance to the Central Public Health Laboratory (CPHL) of the NDOH to increase HIV testing capacity and improve test quality, timeliness and reporting. Laboratory priorities include:

- Improve quality assurance for rapid HIV testing
- Ensure accurate results are provided to clients
- Plan strategic scale-up of viral load testing

Field Epidemiology Training Program
CDC supports strengthening the capacity of Papua New Guinea’s public health workforce through the establishment of a Field Epidemiology Training program. This program trains field epidemiologists—or disease detectives—to identify and contain outbreaks before they become epidemics. Participants “learn by doing” to develop skills to investigate and respond to disease outbreaks, gather critical data and turn it into evidence-based action.

In collaboration with CDC, WHO and the Australia’s Department of Foreign Affairs and Trade (DFAT), NDOH launched the eight-month long Field Epidemiology Training Papua New Guinea (FETPNG). The intensive mentoring curriculum includes intervention projects that have saved hundreds of lives. The NDOH considers the FETPNG as one of its most successful programs. It has trained 83 field epidemiologists who work in NDOH, provinces, and districts providing leadership and technical expertise in surveillance of HIV and other diseases, monitoring and evaluating programs, and disease control activities. About one-third of field projects and interventions of the FETPNG fellows are associated with HIV, tuberculosis, and sexually transmitted infections disease surveillance and control. The FETPNG continues to recruit and train staff from the NDOH and from the Solomon Islands. The NDOH, with the support from Australia DFAT, will start a second FET program called Accelerating the Development of Policy and Practice in Papua New Guinea (ADEPPT,) designed to strengthen field epidemiology and operational research capacity across the country and generate evidence to strengthen public health programs, systems and policies.

Tuberculosis
The burden of TB can have a devastating financial impact on patients and their families. In collaboration with WHO and the Papua New Guinea National TB Program, CDC-Headquarters is conducting a TB Patient Cost Survey to evaluate the costs associated with TB diagnostics and treatment in the country. The findings will help identify and prioritize research to develop policies and cost-related interventions. This study aligns with the third core target of the WHO End TB Strategy, which is “zero TB-affected families facing catastrophic costs due to TB by 2035.”

CDC IMPACT IN PAPUA NEW GUINEA

- Increased HIV viral load testing by 400%
- Trained over 80 field epidemiologists in HIV and other disease surveillance, program monitoring, evaluation, reporting, and disease control activities.
- In 2018, CDC lead efforts to develop a national level HIV Patient Database data hub for real time data reporting that will serve decision-making leaders.

For more country information, visit:
www.cdc.gov/globalhealth/countries/ppapuanewguinea

For more information, please contact:
Centers for Disease Control and Prevention
1600 Clifton Road NE, Atlanta, GA 30329-4018
www.cdc.gov/global
Email: cdcglobal@cdc.gov

Publication date July 2019