AUSTRALIA’S SUPPORT FOR TUBERCULOSIS CONTROL INITIATIVES IN PAPUA NEW guinea

Caption: The sea ambulance used for outreach services in the Middle and South-Fly districts.
OVERVIEW

Australia is supporting the Government of Papua New Guinea (GoPNG) to reduce the health and economic impacts of tuberculosis (TB). The immediate goal is to support an effective and coordinated response to the multi-drug resistant TB (MDR-TB). There are three recognised MDR-TB hotspots: Western Province, National Capital District (NCD) and Gulf Province. Australia is the lead donor addressing TB in Western Province and the NCD (with Médecins Sans Frontières leading the response in Gulf Province). The longer-term goal is to build the capacity of PNG’s health system to sustainably manage the disease. These goals acknowledge the threat MDR-TB poses to PNG’s social and economic development, and to regional health security.

Australia’s Response

Australia has allocated $60 million from 2011 – 2017 to a package of support to assist PNG address its TB burden of disease including:

- $44.7 million allocated for Western Province, with $26.7 million spent to date; and
- $15.3 million allocated to the NCD and the National Response, with approximately $3.8 million invested up to September 2016
  - The NCD response will scale up from October 2016 following the recent completion of the 5 year NCD TB Plan.

The Australian assistance is targeted at key systems issues including: increasing the number of health workers; improving diagnosis, clinical management and treatment; restoring and building infrastructure particularly in Western Province; and building community awareness. Australia’s support is implemented by partners including the National Department of Health, the World Health Organization (WHO), World Vision and the Burnet Institute, in coordination with the GoPNG, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and Médecins Sans Frontières. The WHO panel of international TB experts (the regional Green Light Committee) provides internationally recognised technical and policy oversight to the TB interventions of all partners in PNG. Australia also provides core funding to multilateral partners who support the broader TB response. This includes AUD50 million to the WHO over 2016 and 2017 and AUD220 million to the Global Fund over 2017 to 2019.
Western Province

Controlling the spread of TB relies on early detection and effective treatment. Australia’s support to Western Province continues to:

- improve TB services at Daru General Hospital;
- expand TB services to the community and improve TB awareness; and
- strengthen the performance and governance of the underlying health system.

Improving TB services at Daru General Hospital

Daru General Hospital is the hub for TB services in Western Province. To ensure that people can access appropriate TB treatment, Australian support includes:

- construction of a purpose-built 22-bed TB ward in 2013;
- providing a digital X-ray unit, a GeneXpert diagnostic machine to detect drug-resistant TB, and other essential equipment;
- two internationally recruited TB medical officers and 22 PNG nationals in TB clinical and coordination roles;
- expert technical and clinical support (including a further two TB medical officers) from the Burnet Institute to improve MDR-TB clinical management, including optimising treatment for Western Province TB strains, such as the introduction of a new TB drug (Bedaquiline) for extensively drug resistant TB (XDR-TB); and
- support to fielding a Provincial TB Physician to lead government intervention and coordination in Western Province.

Australia’s support to improve the TB clinical services at Daru General Hospital is producing results. Since 2014, the proportion of MDR-TB patients retained on treatment increased from 65 per cent to more than 95 per cent.

Expanding TB Services to the Community and Improving TB Awareness

To expand TB services from Daru General Hospital to the community, Australia is funding World Vision $5.9 million to implement the ‘Stop TB in Western Province’ initiative, which has:

- established five community treatment sites on Daru Island;
- trained 56 health workers and 123 community treatment supporters to supervise the WHO’s Directly Observed Treatment Short Course (DOTS) standard;
• reached over 68,000 people with TB Advocacy, Communication and Social Mobilisation activities; and
• provided nutrition support to more than 200 people.

Australia also procured and funds the operational costs of a sea ambulance (Medics Queen) and two banana boats to expand the reach of medical services to remote communities in the South and Middle Fly districts. At a total cost of $1.4 million since 2012, over 179 outreach visits have been conducted.

**National Capital District**
Port Moresby is PNG’s largest city, central transport hub and the largest TB hotspot. Given this context, Australia supported PNG in 2016 to design a custom five year strategy for the NCD worth $27 million. The program will focus on reducing the impact of TB in NCD in terms of infections, suffering, deaths and discrimination.

Australia funded the Port Moresby General Hospital to pilot a new TB medication for children in 2016. The flavoured pills dissolve easily in water and are expected to increase the number of children completing treatment. A total of 120 children are now being treated with the new drugs, including 29 new cases since August.

Australia is also working with PNG’s business community to address TB in the workplace. Australia has provided $350,000 of seed funding for the Business Engaged Against TB (BEAT) project to promote healthier and productive workforce in PNG. World Vision is the implementing partner of this project.

**National Response**

Australia supports PNG’s national level TB functions to complement the subnational programs in Western Province and the NCD. This support has included:

• funding for an external review of PNG’s National TB Program in 2014 that identified the three hotspots for TB transmission: NCD, Gulf and Western Province;
• funding for a technical advisor to the national reference laboratory to build capacity and to support the development of an integrated disease surveillance and response system;
• funding to the Queensland Mycobacterium Reference Laboratory to conduct over 945 TB drug-resistance tests whilst PNG’s laboratory capacity was upgraded;
• procurement of $3.2 million of emergency TB and MDR-TB drugs to prevent stock-outs; and
• a costing analysis of PNG’s TB response over the next five years and support to attract new third party funding.
Amongst a suite of support under the WHO partnership, Australia is also supporting an international MDR-TB specialist to provide technical support and advice to the National Department of Health and TB partners.

Caption: Doctors working at Daru General Hospital’s TB Ward.