



The Pacific Health Journey 1995-2015

Challenges, Achievements, and a way
forward

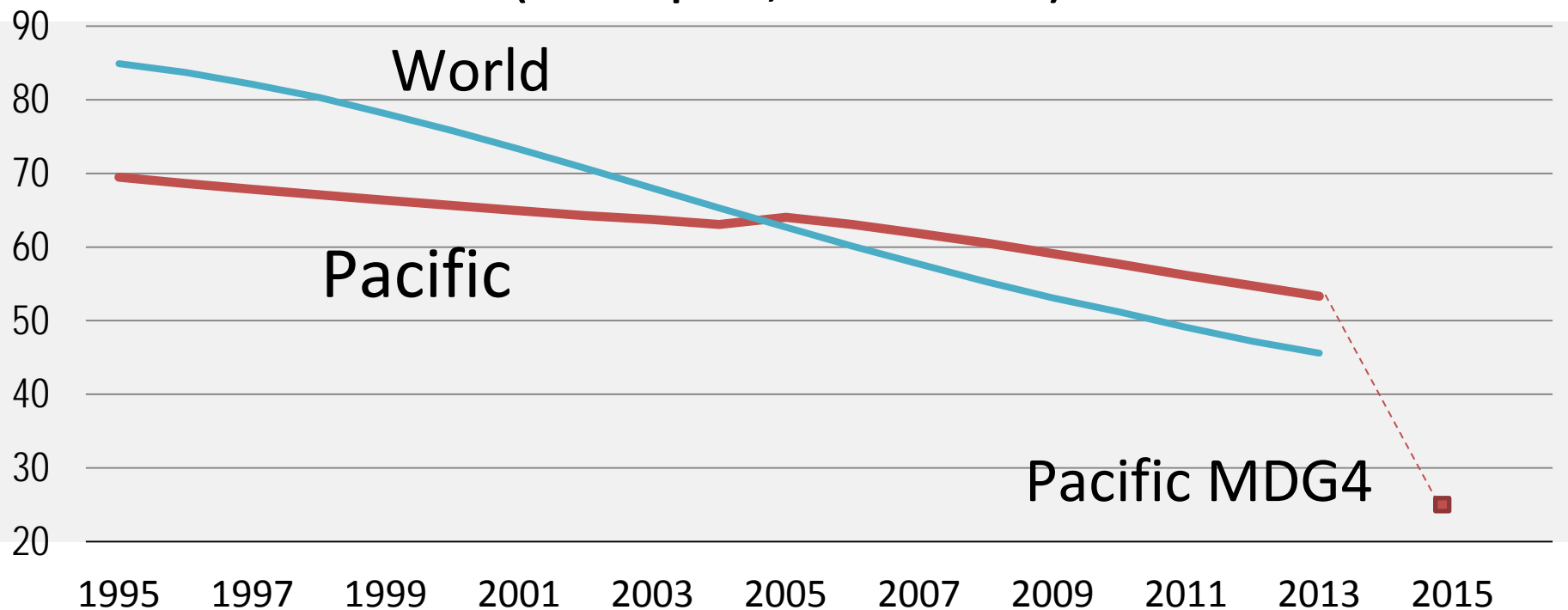
Part one: The journey so far

Pacific peoples' health is slipping behind the rest of the world



Children aged <5 years mortality

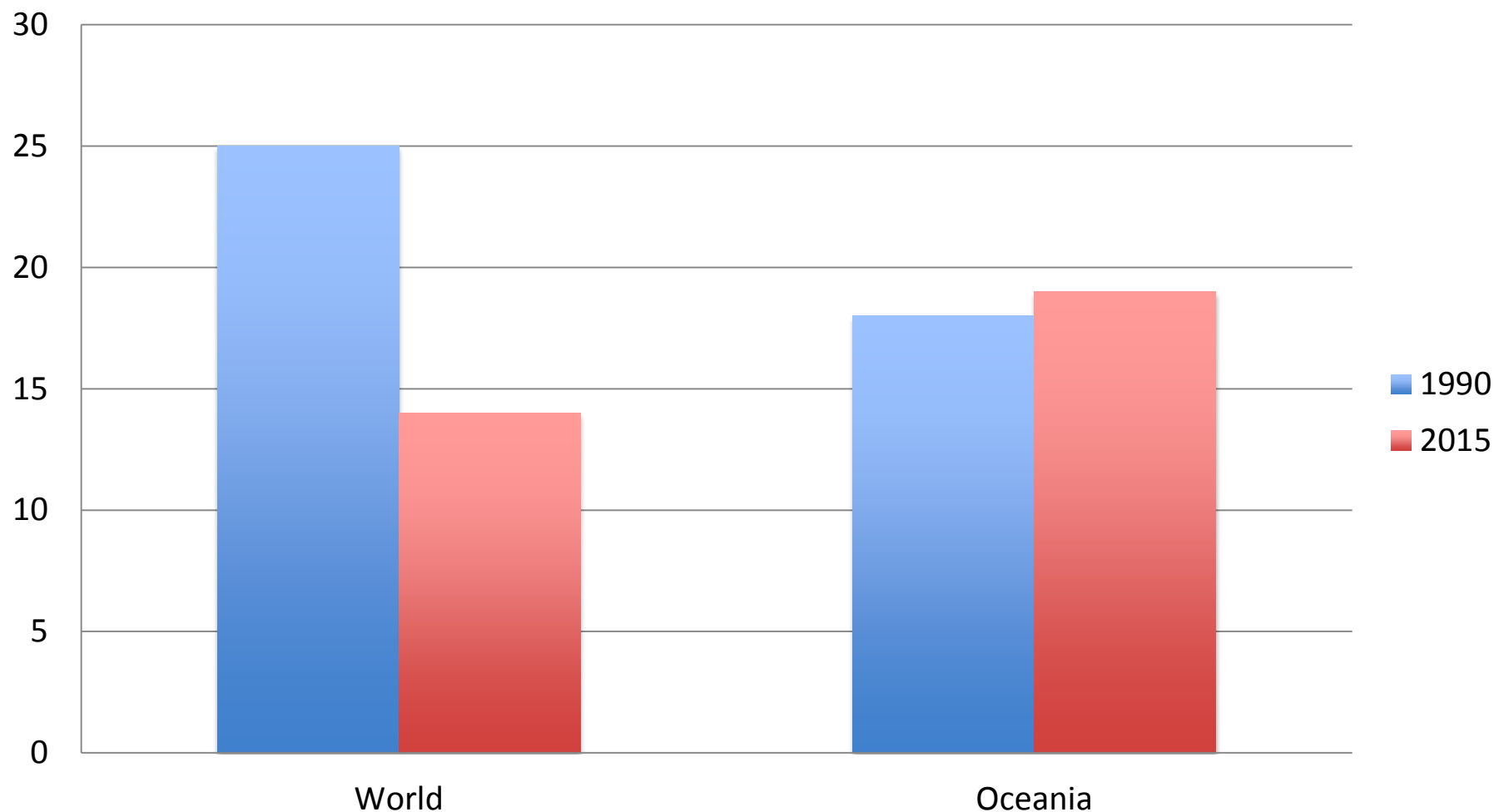
(Deaths per 1,000 live births)





Increasing percentage of children underweight in Oceania 1990 - 2015

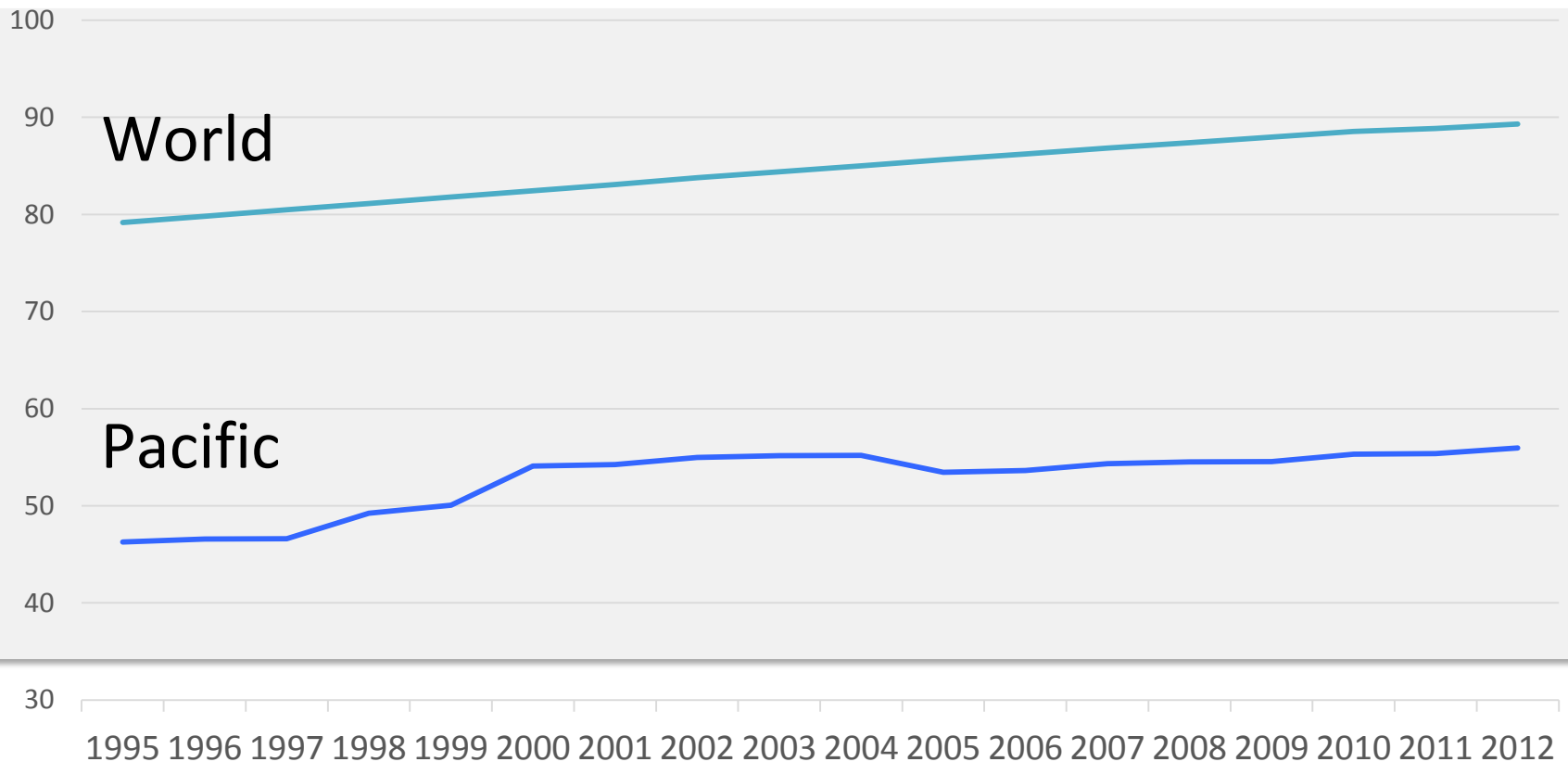
Percent Children Underweight 1990-2015





Access to safe water very slow to improve

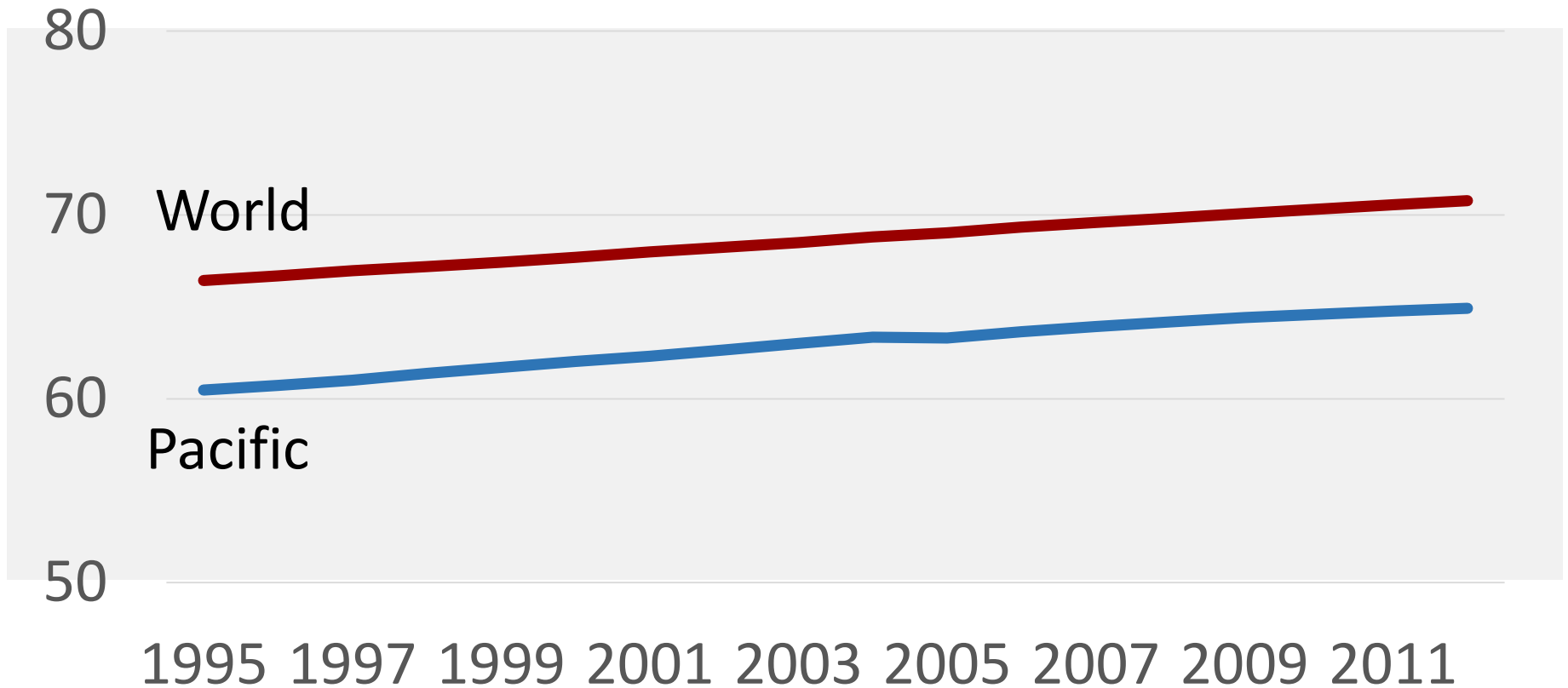
Proportion of the population using improved drinking water sources
1995-2012 (%)





The adult life expectancy gap is not closing

Life expectancy at birth 1995-2012
(years)

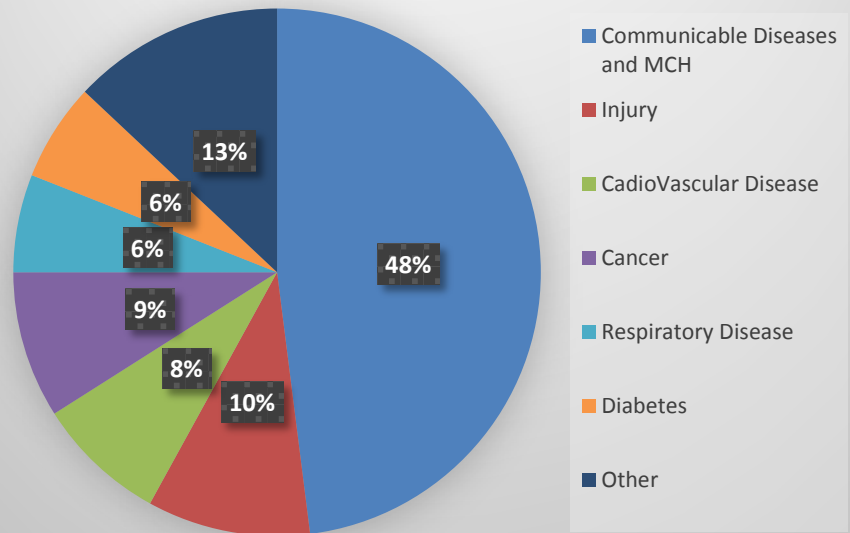




Three “grizzly specters”

- Unfinished agenda for Maternal and Child Health and Communicable Diseases

Disease Burden Papua New Guinea - All Deaths

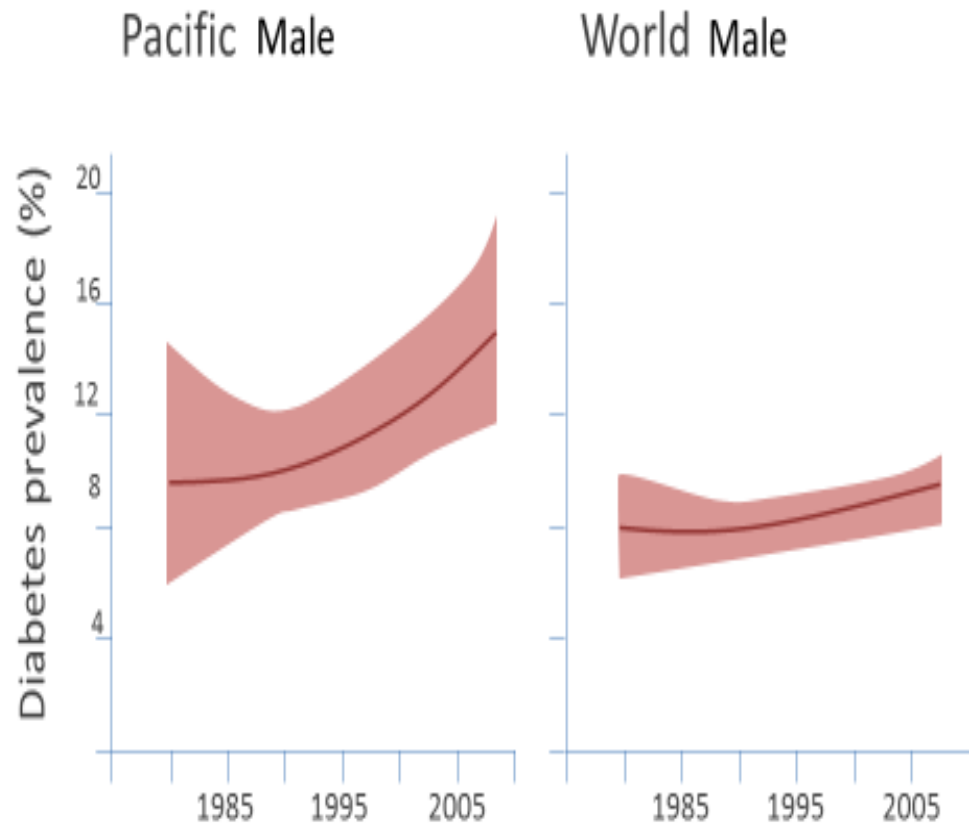




The rise of NCDs

- The continuing advance of noncommunicable diseases

Diabetes levels unprecedented in human history and still rising





Climate change

- Climate change and climate instability on top of the Pacific Ring of Fire



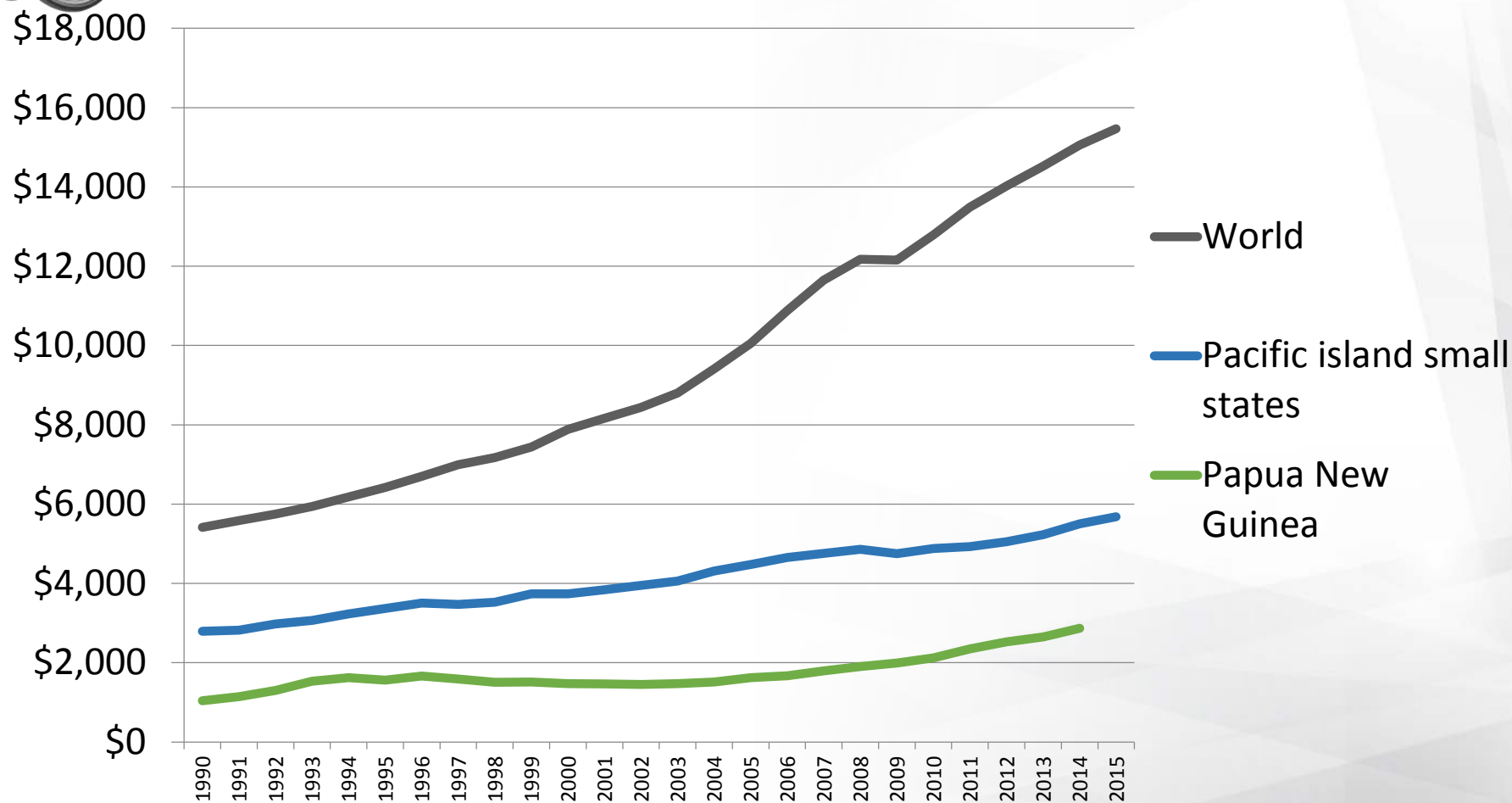


What is restraining health gain for Pacific People

- Globalisation of the Pacific Food Supply with increased availability of poor quality food (high in fat, salt, sugar).
- Economic Growth slow and lack of historical and current investment in infrastructure
- Lack of resources for health – human and financial
- Failure to deliver basic health services: Immunisation, Family Planning

GDP per capita, PPP (current intl \$) 1990 to 2015

World Bank Data, accessed 21/07/16

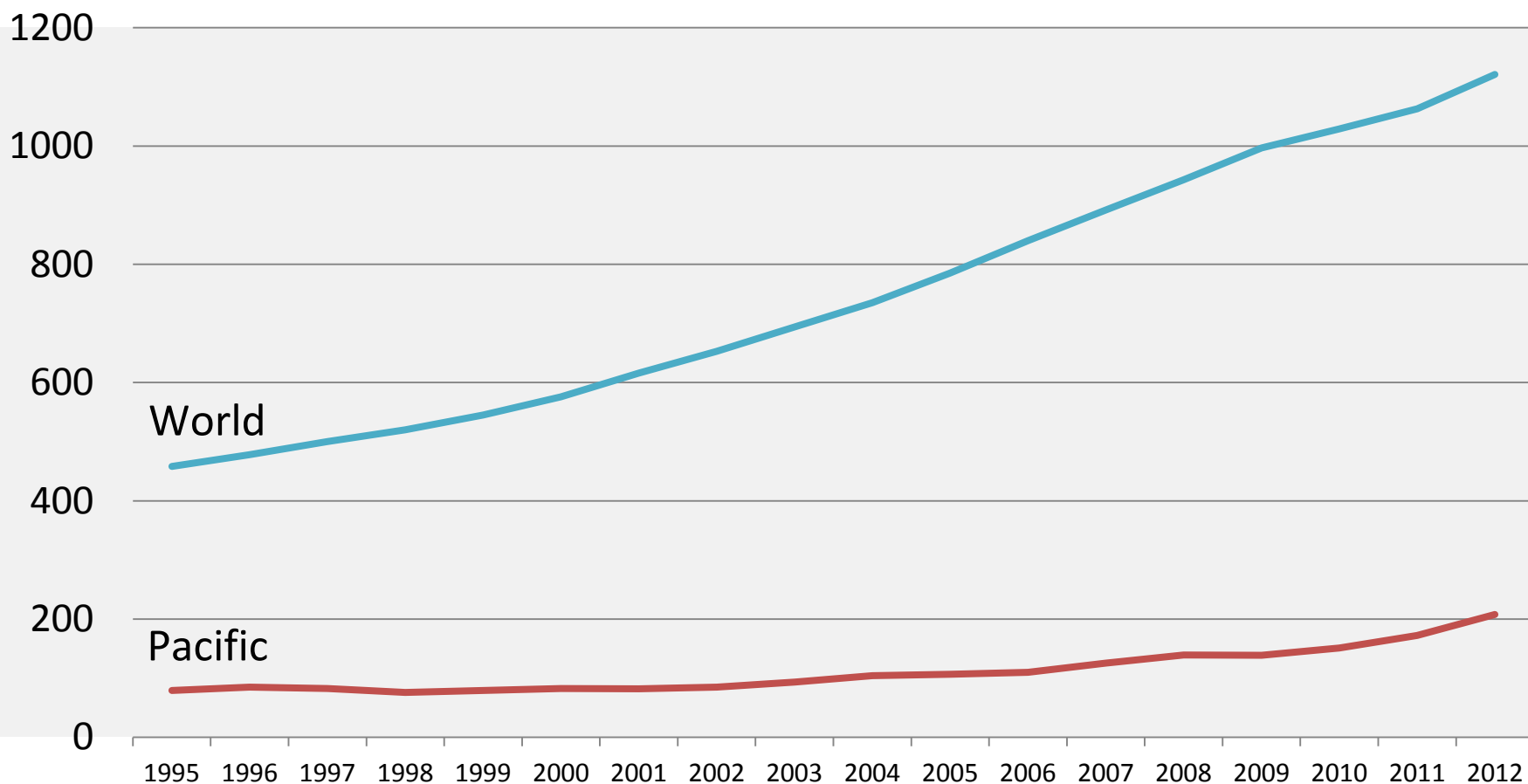




Health Expenditure

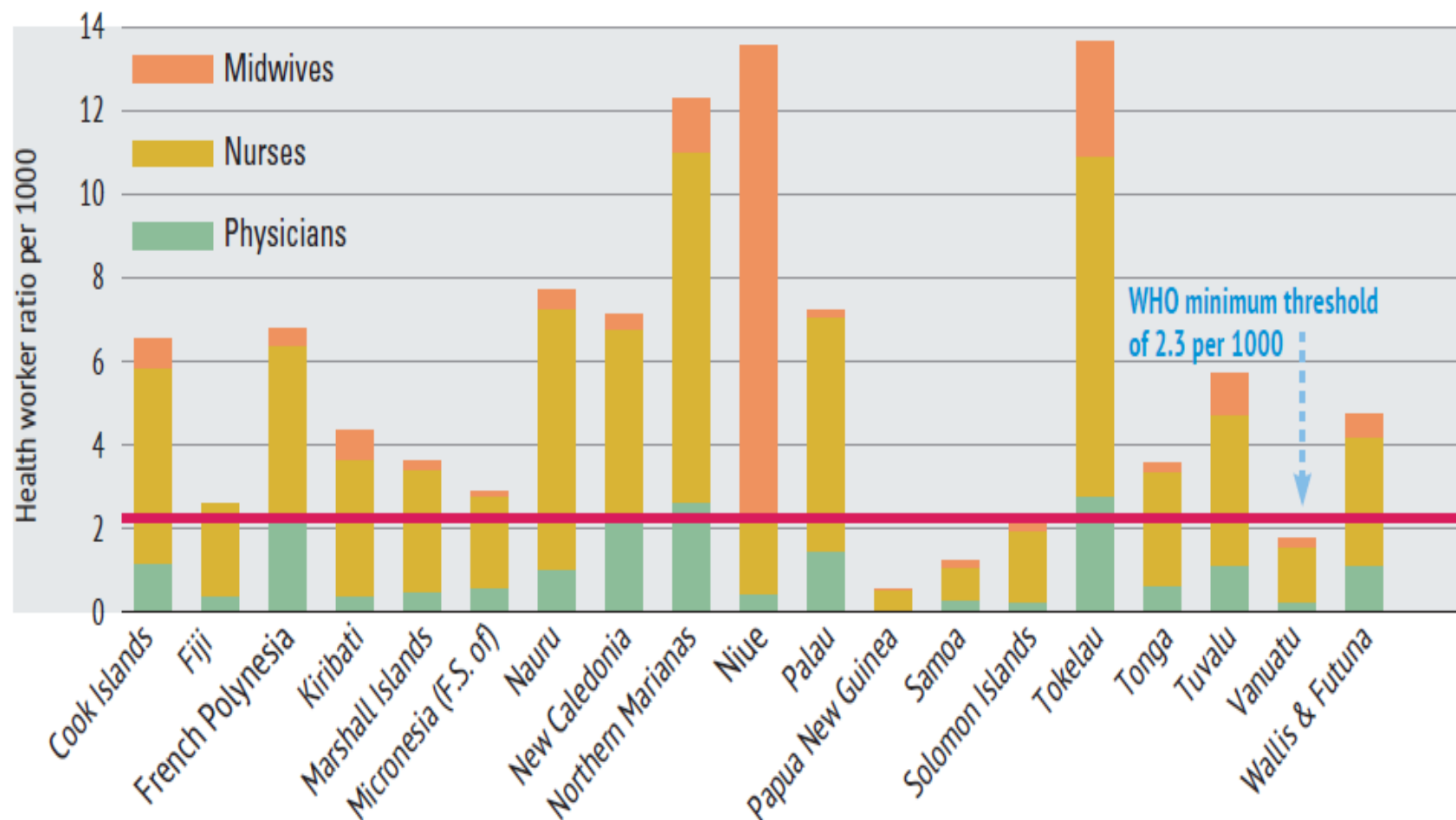
Total Health Expenditure per head of population

(Current US\$)



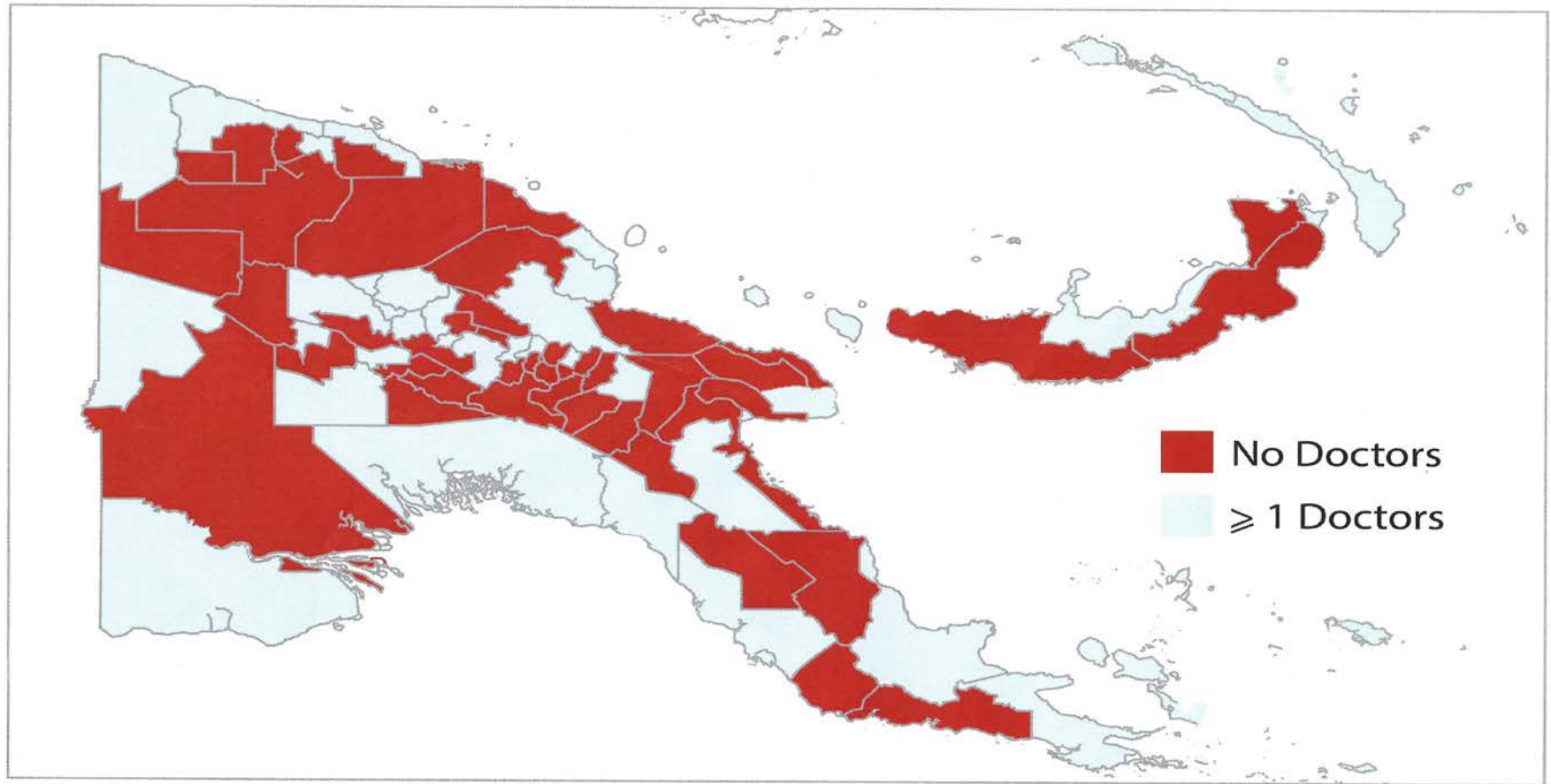


Health Workers (2012)



HEALTH WORKFORCE (DOCTORS, NURSES AND MIDWIVES) PER 1000 POPULATION IN PACIFIC COUNTRIES

3.5 Million People in PNG don't have access to a doctor





The weaknesses in Pacific health systems put the health of the region and the globe at risk.

- Weak health systems have global consequences
 - Drug resistance, MDR TB
 - Ebola like events



What will business as usual bring?

- Negative impacts of globalisation on Pacific peoples' health
- Increasing health gap between Pacific peoples and the rest of the world
- Failure to reach the MDGs and the SDGs
- Region exposed to the risks of weak health systems
 - Ebola like events
 - Drug resistance

The Pacific Health Journey
1995-2015
Challenges, Achievements, and a way
forward
Part two: The way forward

DON MATHESON | Griffith University | Massey University



What should a fresh approach to Pacific health entail?

An approach that

- Maintains the “Healthy Islands” strategy as the strategic approach
 - Stable long term partnerships
 - Intersectoral in nature
 - Maintain the joie de vie not cold indicators and sharp targets.
- Reset the expectations for Pacific health development
- Addresses inter and intra island equity issues, particularly in health resourcing
- Remodels the approach to health development by development partners
- Builds on Pacific success stories
- Ensures that basic service levels are achieved through focusing on districts and provinces.



Healthy Islands





Healthy Islands are places where:

Children are nurtured in body and mind

Environments invite learning and leisure

People work and age with dignity

Ecological balance is a source of pride

The ocean which sustains us is protected



*Children are nurtured in
body and mind*

*Environments invite
learning and leisure*

*People work and age with
dignity*

*Ecological balance is a
source of pride*

*The ocean which sustains
us is protected*



Resetting Pacific Health Expectations

Alma Ata: Primary Health Care:

“at a cost the community and the country can afford”?

Why should local affordability be the ceiling for Pacific resourcing, when their health is being eroded by the fall-out of global economic success?

No country's health services should expose the wider world to health risks.

“at a cost the community, the country and the world can afford”



The way forward

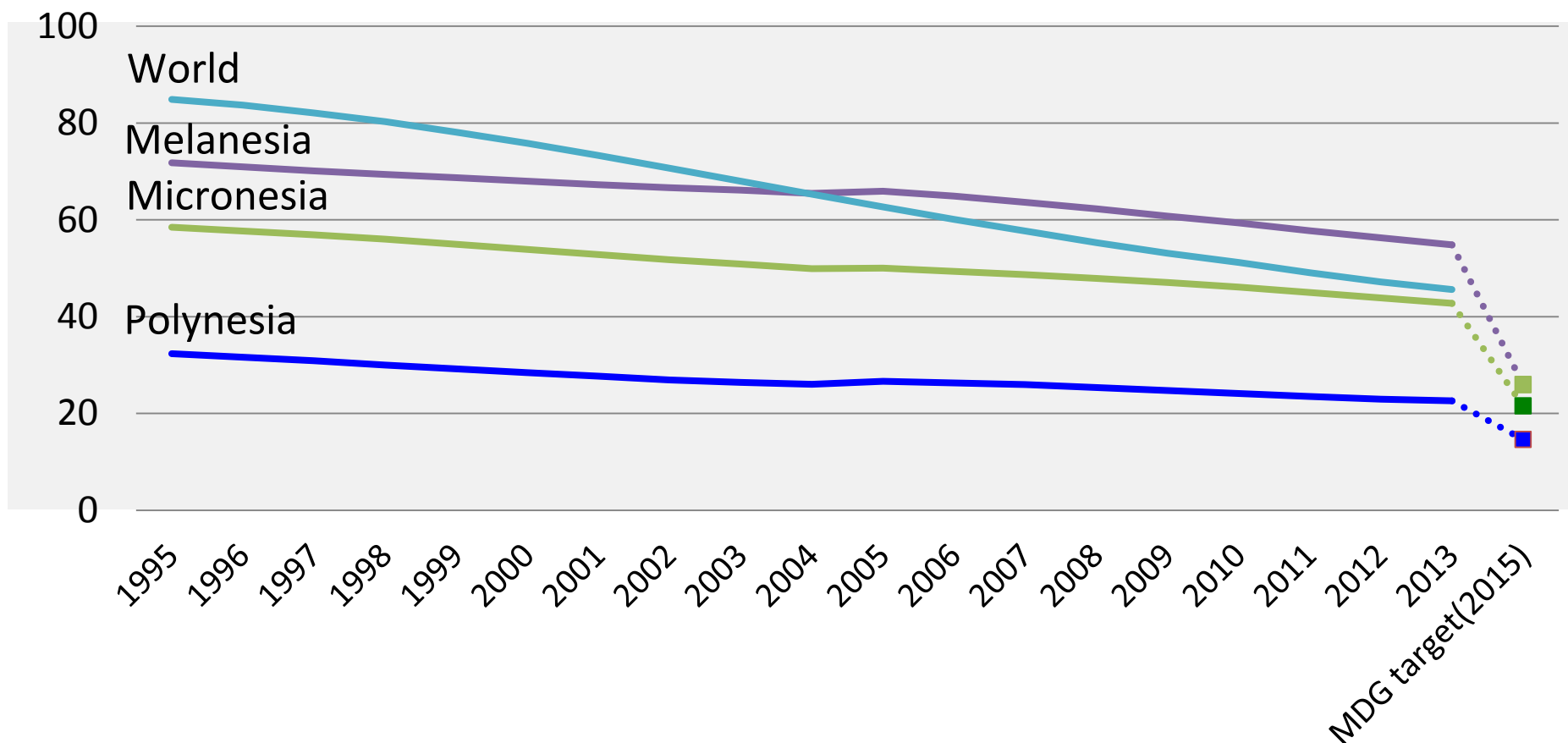
Appreciate Pacific
Diversity

	High	Low
Urban	100%	13%
Population Size	8 M	1,200
Population growth / decline (per yr.)	+2.5%	-0.4
Population Density (per sq. m)	504	6
Flight of the tertiary educated	81%	8%
CD Disease Burden	48%	12%
GDP growth (2007-12)	+5%	-0.8%



Health differences within the Pacific

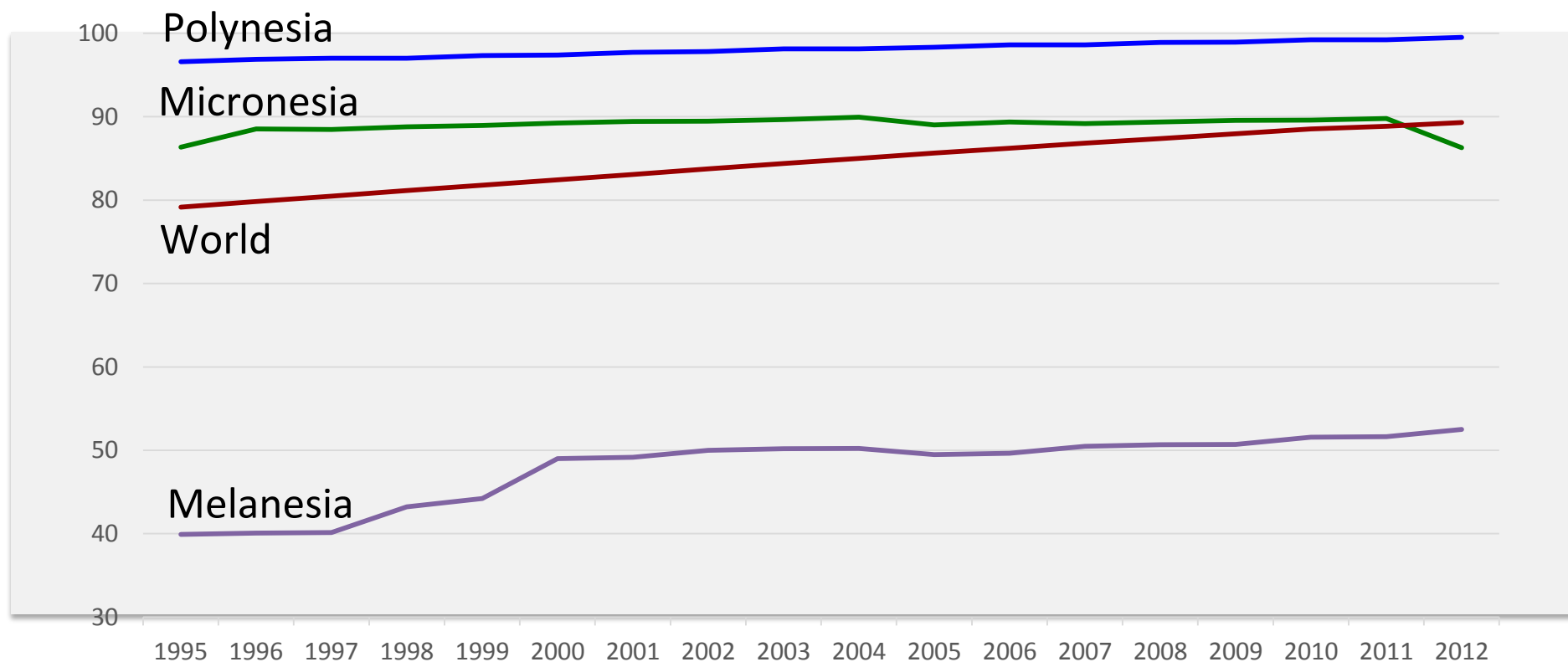
Children aged <5 years mortality (Death per 1,000 live births)



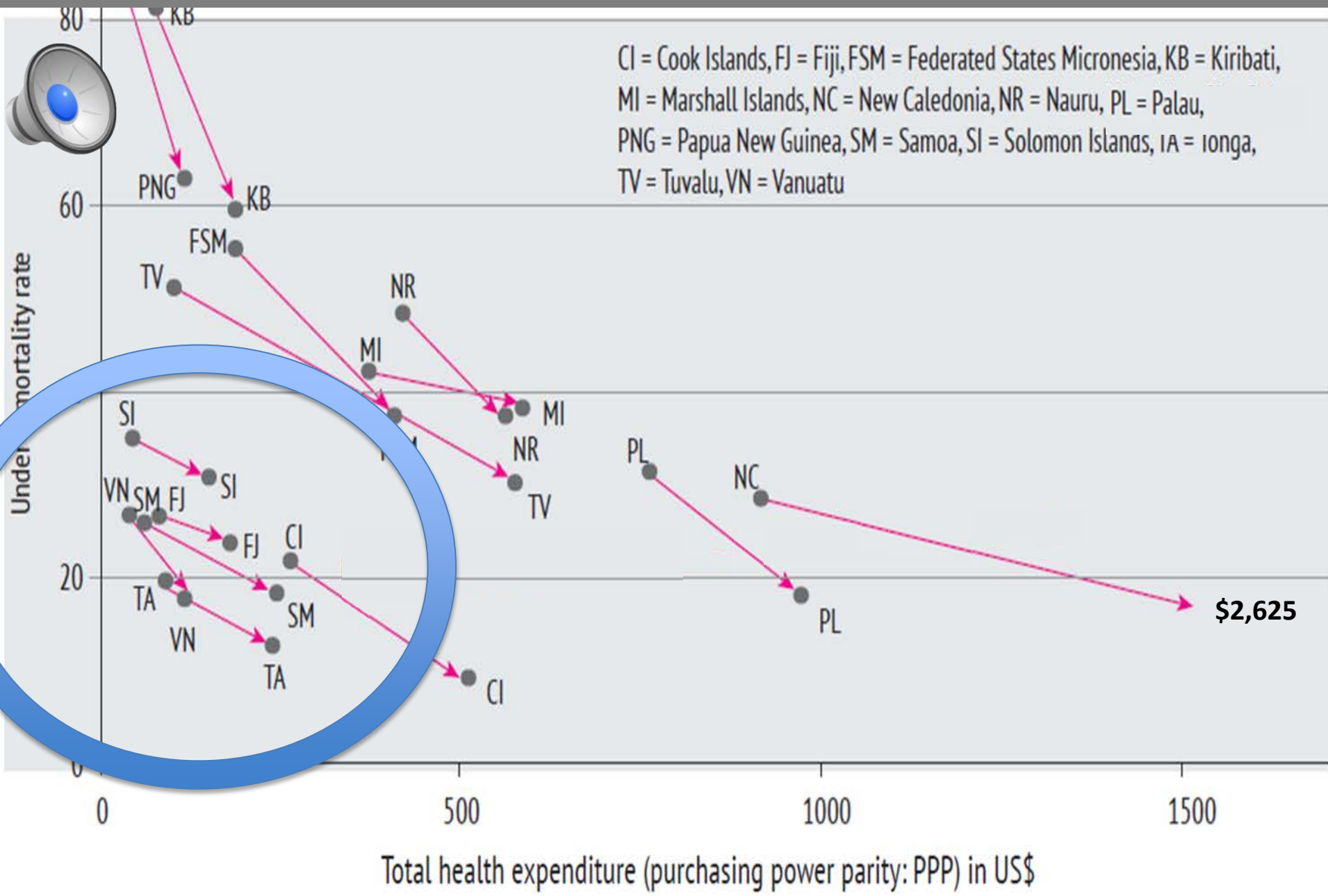


Health Differences within the pacific - Water

Proportion of the population using improved drinking water sources
1995-2012 (%)



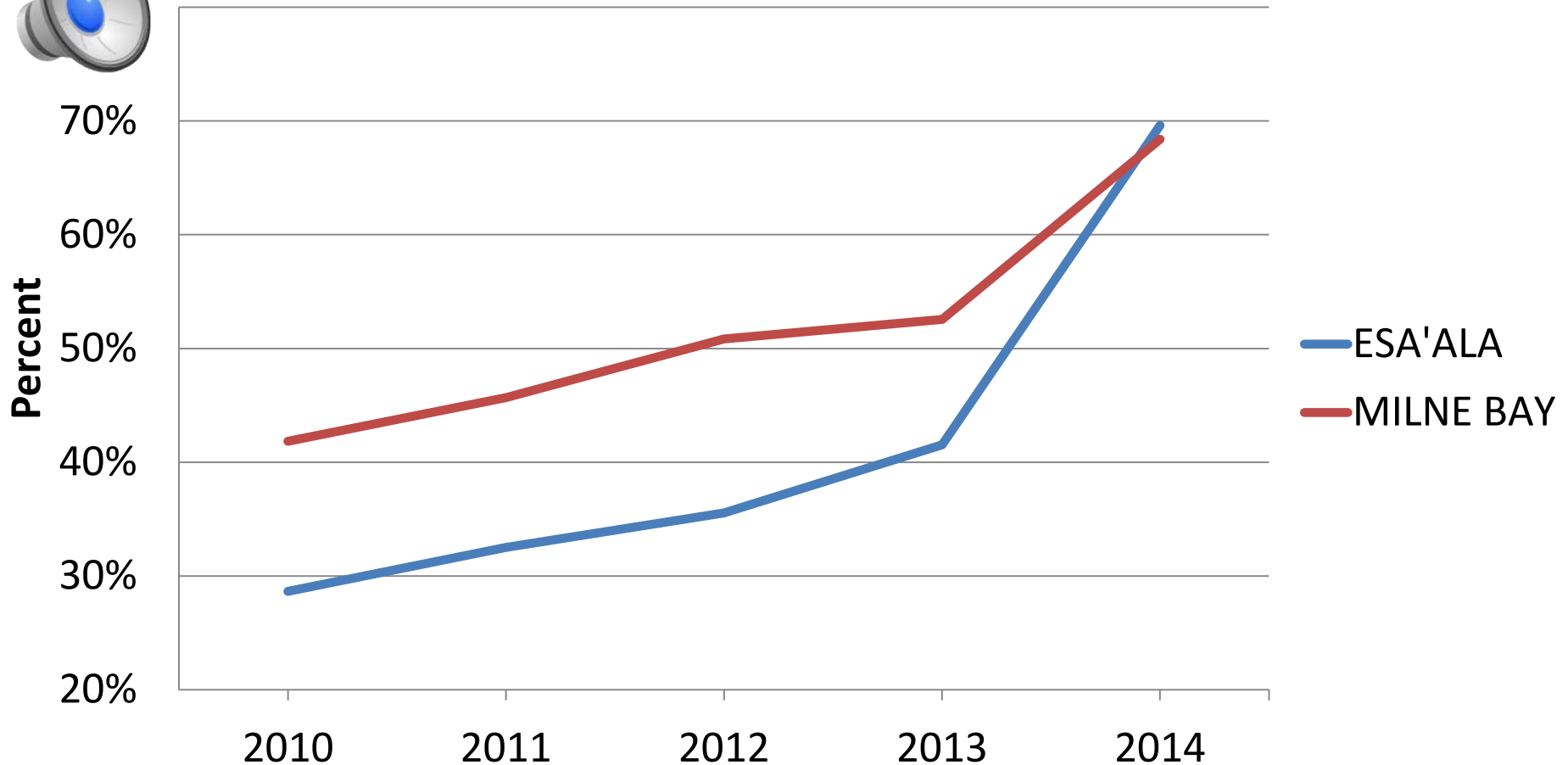
Build on existing Pacific models of efficient, effective service delivery

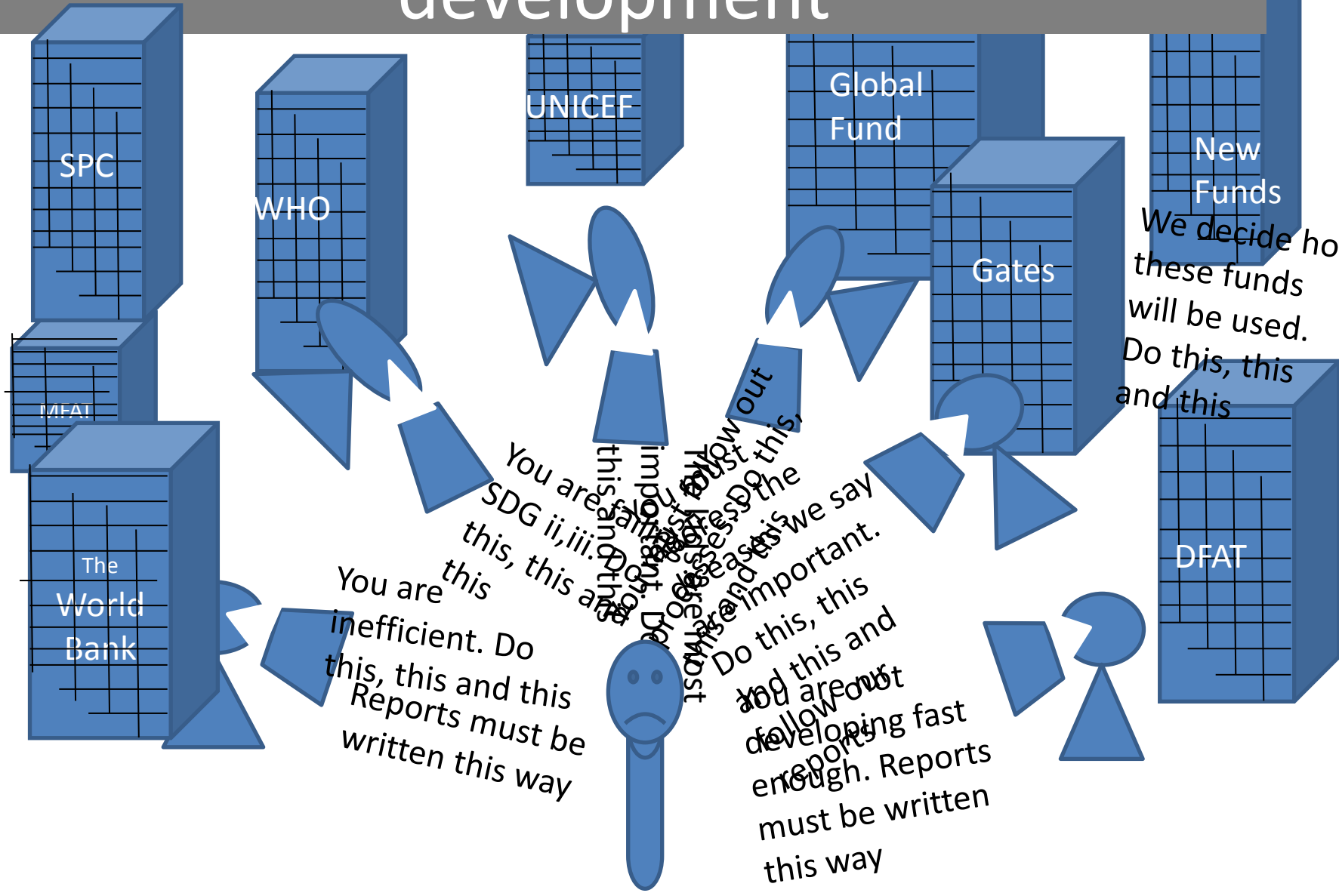


SOME DISTRICTS AND PROVINCES ARE DOING

Dramatic improvement in deliveries by a skilled health worker

Esa'ala, Milne Bay, Papua New Guinea. Health Facilities







Aid Effectiveness





Bridging the Resource Gap

How big is the health infrastructure gap?

PNG: \$2.4b

Solomon Island: \$300m

Compared to the cost of one new hospital in Brisbane or Perth: \$2b



The annual funding deficit

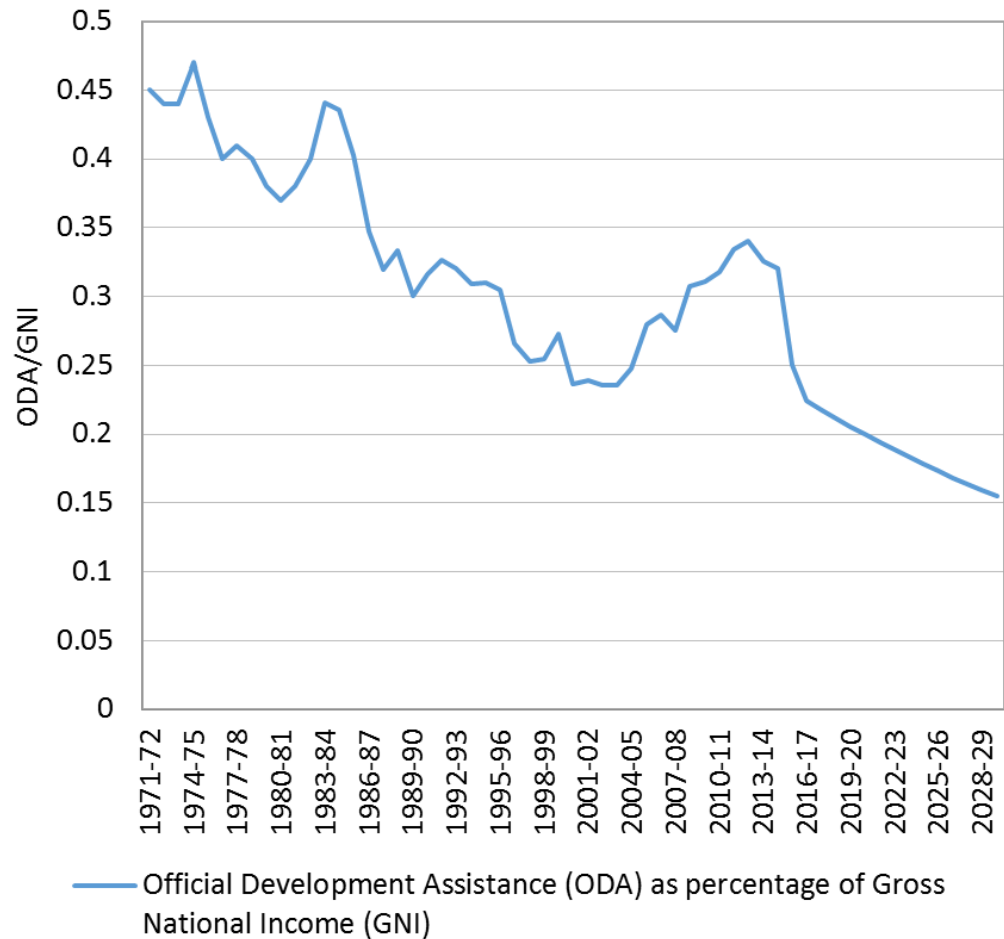
- To bring all countries in the Pacific to a minimum level of \$200 per person per year: \$800m

	PNG	Kiribati	Vanuatu	Solomon
2015 HE per capita (ppp) \$US	109	184	150	108
Gap	91	16	50	92
Popn	8,000,000	100,000	300,000	600,000
Additional funds \$US	728,000,000	1,600,000	15,000,000	55,200,000



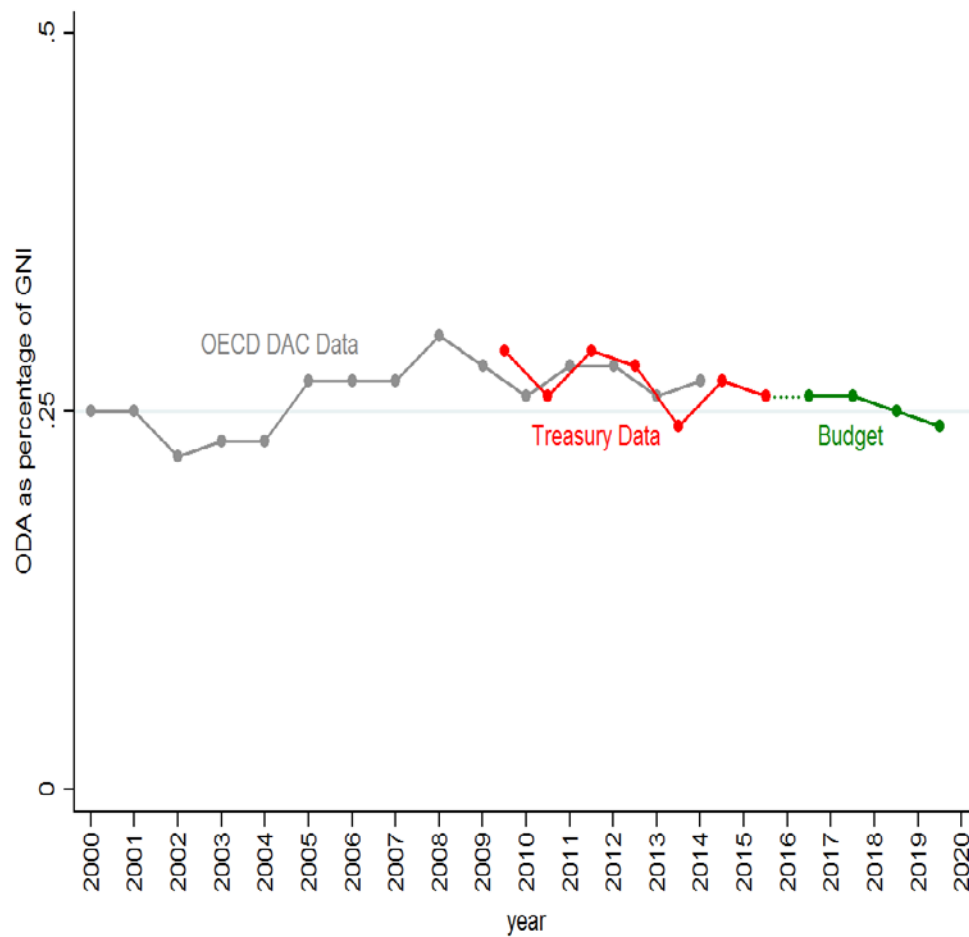
Address donor compassion/ self interest fatigue

- Australia

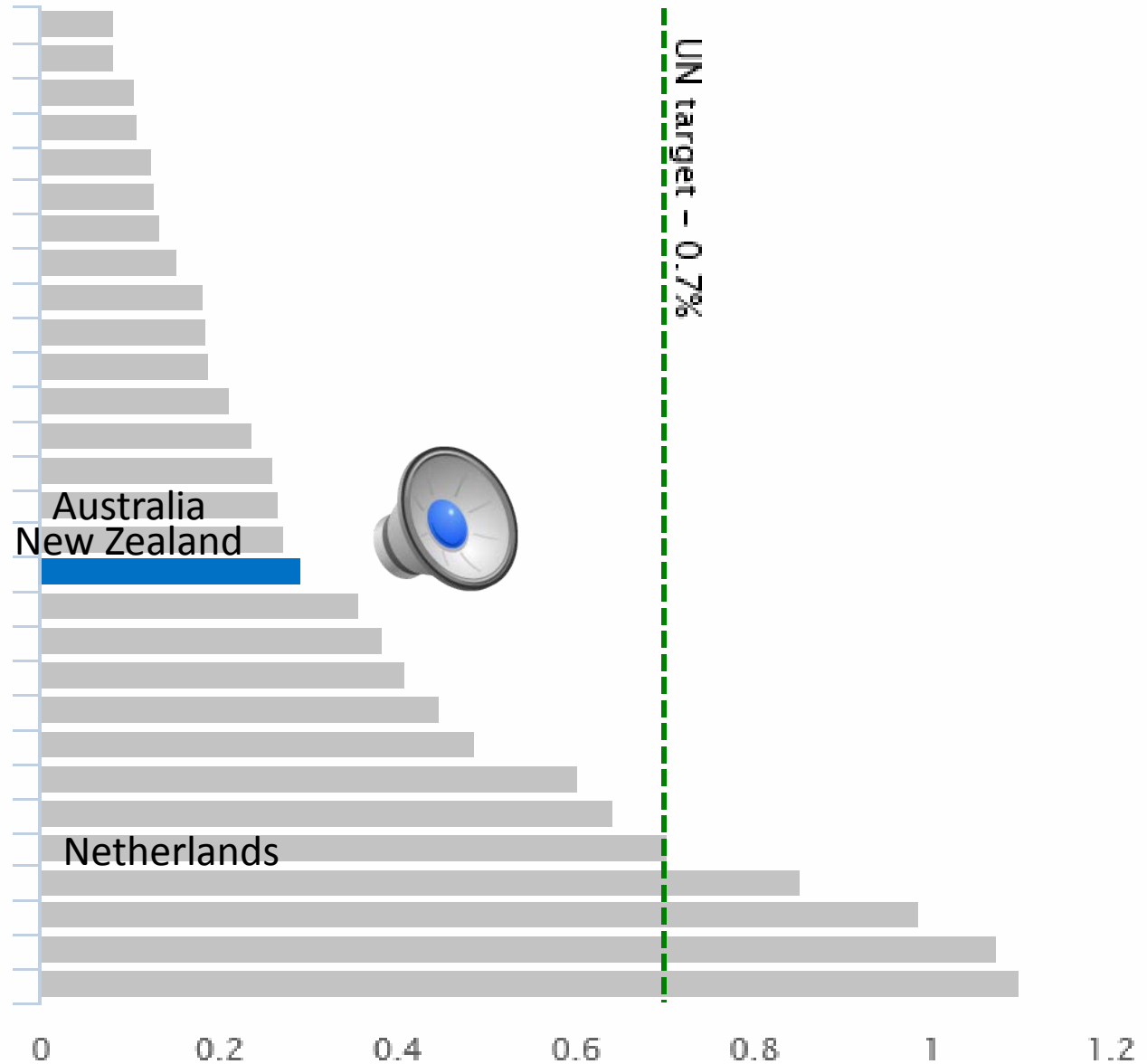




- New Zealand



OECD ODA as percent GNI 2014





Additional funds available for ODA if New Zealand and Australia were to contribute 0.7 % of GNI: \$6bn

The annual gap to bring all countries to minimum of \$200: \$800M

Conclusion



http://iris.wpro.who.int/bitstream/10665.1/10928/3/9789290617150_eng.pdf