

# Country Office Annual Report 2019

## Papua New Guinea

### Update on the context and situation of children

2019, a year of complex challenges and exciting opportunities for Papua New Guinea witnessing change in Government, two budgets, cabinet reshuffle and new infrastructure such as the Coral Sea Cable communications system. Between November 23 and December 7, aligned with the 2001 Bougainville Peace Agreement, a non-binding independence referendum was held in the Autonomous Region of Bougainville. Given a choice between greater autonomy within PNG or full independence an overwhelming majority voted for independence (97.7%). The United Nations support to the Bougainville and national Governments in advance of the referendum resulted in an inclusive, transparent, credible and peaceful process.

Development work was constrained by the political situation. The previous O'Neil administration faced a proposed vote of no confidence followed by a change in Prime Minister in late May. New Prime Minister James Marape's full cabinet was sworn in on June 7 and reshuffle occurred in mid-November. Political uncertainty contributed to delayed planning and implementation in the first two quarters.

PNG is classified as a lower middle-income country is ranked 155 in the 2019 Human Development Index. This illustrates challenges in translating economic growth into inclusive sustainable human development, particularly in a country with a youth bulge (52% of the population is below 24 years), chronic youth un- and underemployment, and low absorption of school leaver into the formal employment sector.

PNG's economy recovered from slow growth (< 2.5%) for the first half of the year with GDP growth forecasted to be 4 per cent for 2019 (UNDP). The World Bank's "PNG Economic Update 2019" reports the economic surge will likely stabilise in subsequent years "primarily due to the return to full production in the extractive sector". PNG's trade balance is projected to improve due to higher exports with economic diversification critical as resource projects do not create high levels of employment and PNG's 2014 National Human Development Report highlighted that "extractive-based development has not been inclusive or reached as many Papua New Guineans as it could and should have". Significant investment in increasing the economic and political opportunities available to young people is essential to offering them a stake in society.

The 2019 budget focused on restructuring debt, revenue collection, economic diversification through support to small and medium enterprises and maintaining expenditure discipline with continued emphasis on priority sectors (health, education, law and order, infrastructure). Key Government expenditure prioritised free primary health care, infrastructure projects and Provincial and District Services Improvement Program which benefited women and children in terms of access to services, however, sustainability and quality of services must follow.

Adjusted for inflation, health sector funding was cut by two per cent with education receiving a one per cent increase. From 2015 to 2019 education has seen a 30 per cent cut in real terms, health 17 per cent and law and justice 17 per cent. Funding to provinces and the administrative sector increased in support of the Government's decentralisation agenda. A supplementary budget introduced in October addressed the budget deficit with Minister for the Treasury stating, "tough decisions are a must now, to take a major step towards living within our means." The impact on the status of children in PNG needs further analysis along with a critical focus on investment analysis.

PNG's health and education systems faced challenges in delivering quality services to meet the population's needs. The National Health Plan 2010-20, National Education Plan 2015-2019, National Nutrition Policy 2016-2026, National WASH Policy 2015-2030 and Lukautim Pikinini (Child Welfare) Act (LPA) provide clear frameworks for improving health, education, nutrition, water, sanitation, hygiene and child protection services. However, budgetary constraints and shortage of critical human resources severely constrained progress in implementation of the plans. Health status progress in PNG has been mixed with instability impacting overall performance of the health sector. Despite challenges, UNICEF, in collaboration with Government and non-government stakeholders delivered programmes with significant impact for women and children. Polio transmission was successfully stopped, a nationwide Saving Life Spreading Smiles (SLSS) programme of innovative Early Essential New Born Care was launched.

There was no major emergency affected PNG in 2019, however, approximately 2,000 children affected by the volcanic eruption in WNB Province, who received health care and nutrition support facilitated by UNICEF. In Western province, there was a sudden influx of migrants from West Papua province of Indonesia, where UNICEF health and nutrition team assisted the National Disaster Management Team (DMT) to assess readiness and for the preparedness plan. Essential nutrition commodities were pre-positioned according to the preparedness plan with support from UNICEF in Western province. Although systematic Violence Against Children data are not available, recent estimates show that 75% of children in PNG experience violence during childhood (*Unseen, Unsafe Report*, 2019). In rural areas, where traditional justice systems prevail, compensation/ mediation is still the most common solution. Similarly, while access to comprehensive services for survivors of violence has increased in recent years, there remains a significant gap between the scale of need and

availability/accessibility of support services. UNICEF in partnership with other UN agencies, Government, civil society and development partners secured funding through the EU Spotlight Initiative to support concrete measures to end domestic and gender-based violence and provide protection and quality services to survivors.

The WASH sector continues to depend on external funding to improve WASH services. Development partners are funding WASH projects with Government yet to allocate specific budgets. WHO-UNICEF's Joint Monitoring Programme 2019 reports PNG is one of the four countries where the population has least access to improved water sources with 43 per cent accessing improved water and 15 per cent improved sanitation facilities. The Demographic and Health Survey (DHS) 2016-18 (November 2019) confirms 46.3 per cent accessing improved water sources with huge disparities between urban (83%) and rural (41.6%) populations. WASH services in schools and health centres remain inadequate.

The EU-UNICEF WASH programme implemented in close collaboration with District Development authorities and CSOs, established the first ever national WASH Management Information System and WASH facilities became available in schools benefitting 20,883 students (including 9,097 girls).

Malnutrition is widespread, deep and chronic and has a direct impact on child survival and healthy development. Almost half of PNG's children between 6-59 months are 'stunted', (short for their age) due to chronic under-nutrition. Approximately 16 per cent of under-fives are 'wasted', (underweight for height) due to acute malnutrition. UNICEF continued to directly support the nutrition programme with a total of 1,486 children aged 6-59 months receiving treatment for malnutrition and 1,006 children discharged. 1.03 million children from 6-59 months received vitamin-A supplementation with a national coverage of 88 per cent.

### Major contributions and drivers of results

UNICEF PNG utilized a number of change strategies in 2019 to contribute to the achievement of national development goals, progress towards the Sustainable Development Goals and fulfilment of the UNICEF Country Programme 2018-2022 and UN Development Assistance Framework 2018-2022 commitments.

In 2019, generation of compelling evidence was a top priority to drive change for children. The Knowledge, Attitudes and Practices Study in WASH programme districts informed the design of behaviour change communication strategies and persuasive messages and communication products for increased demand for WASH services and elimination of open defecation. The US Centre for Disease Control evaluation of the innovative hypothermia alert device informed national scale-up aimed particularly at the most vulnerable.

Addressing the unique challenges faced by women and girls in PNG, UNICEF further strengthened gender responsive programming in providing quality maternal, antenatal and postnatal care, improving nutrition, education, child protection and menstrual hygiene management.

Continued close collaboration with the Government and critical partnerships for children involving the Global Partnership for Education (GPE), Vaccine Alliance (GAVI) and the Scaling Up Nutrition Movement (SUN), the private sector, academia and the media, rallied to secure vital funding to stop polio transmission, strengthen health and education systems, introduced innovative health devices and evidence generation tools.

UNICEF worked within the UN's "Delivering as One" programme coordination approach chairing the UNDAF's People Priority Working Group to harmonise collective strategy and enhance collaborative planning, implementation, monitoring and reporting. The Priority Working Groups are comprised of individual agency programme staff contributing to each of the four UNDAF outcomes. The Groups extrapolate from the overall five-year planned results in the UNDAF 2018-2022 into yearly Joint Annual Work Plans and monitor progress through the Joint Annual Progress Report. The Joint Annual Work Plans translate outcomes into concrete, measurable and time-bound outputs. These enable the UN and partners to identify the UN's contribution to national priorities.

Main drivers of results for the Health Programme include the SLSS initiative with unprecedented political leadership commitment at national and provincial levels. The introduction of non-pneumatic anti-shock garments to prevent post-partum haemorrhage in pregnant mothers with full collaboration of academia in the country. UNICEF partnered with the School of Medicine and Health Sciences of University of PNG (UPNG) and the Royal Australia and New Zealand College of Ophthalmologists to prevent childhood blindness, a devastating irreversible disability among new-borns. Establishment of Emergency Operation Centres for polio and measles-rubella (MR) campaign management at NDOH and all provincial health offices, with technical support from UNICEF, WHO and other partners, successfully reached 1.2 million children (> 95% coverage). Deployment of 14 international consultants at provincial level was instrumental in providing capacity development of health managers and > 4,000 health workers and volunteers for polio response and routine immunization. Technical assistance provided to train Village Health Volunteers in 7 districts in 7 provinces ensured lifesaving Early

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Essential New-born Care (EENC) services for 154,678 mothers and new born children.

2019 saw a staggering 3.4 million children <15 years received Polio vaccine, 1.18 million children <5 years received MR vaccine, 1.1 million children 6-59 months received Vitamin A supplementation, 1,486 children 6-59 months received SAM treatment, 154,678 mothers and new born received EENC services, 298 new-borns and 59 mother's lives were saved, and 1,038 new-borns with birth asphyxia were resuscitated and saved. As part of the coverage and equity improvement in immunization, in two remote Local Level Governments (LLGs), and two (2) urban settlements with approximately 174 communities targeted 9,100 children were reached, 50% below 2 years old vaccinated for the first time.

Support continued to be provided to the Government of Papua New Guinea to strengthen the child protection system, as defined in the Lukautim Pikini Act (LPA) 2015 and its Policy 2017-2027.

Particularly, UNICEF provided support to the Office of Child and Family Services (OCFS) to review its human resources structure, approved by Department of Personnel Management at the end of 2019. This comprises of 63 new positions at the national level, which will be recruited over the next few years. In line with the efforts to boost the social welfare sector, the first 28 Child Protection Officers (CPOs) were officially appointed and endorsed by the National Council for Child and Family Services in 2019, out of over 415 required by the Child Protection Policy. As per LPA provisions, the CPOs are responsible to handle cases of children in need of care and protection. Their appointment is an important step towards building a solid child protection system and a sign of the commitment of the Government to prioritize children's rights.

UNICEF supported OCFS to finalize all legal documentations required for the Primero system on child protection case management to go live. Once operational, the system will provide an important source of administrative data on child protection issues and will potentially cover the current gap on data on violence, abuse and exploitation of children in the country supporting improved programme planning, implementation, monitoring and evaluation.

In the area of response to violence, UNICEF supported 7 provincial and district health facilities with trainings on the Guidelines for Health Sector Response to Gender Based Violence targeting 77 health workers and bringing the total number of health workers with enhanced capacity to handle cases of violence to 176 across 59 facilities in the country. As result, 260 children (48 boys, 212 girls) received child friendly medical and referral services.

To strengthen the protective environment for children, UNICEF PNG provided technical and financial support for the implementation of the Juvenile Justice Act 2014, particularly with the establishment of the Provincial Juvenile Justice Committees, and the development of provincial level plans aligned to the National Juvenile Justice Plan. These provincial level plans are being costed to influence budgetary allocations at the District Administration and Local Government levels. Given that diversion of children in contact with the law remains a challenge in PNG, with very few children diverted, UNICEF technically supported the process of drafting a National Rehabilitation and Reintegration Policy for children in contact with the law. Once approved in 2020, the policy will contribute to ensuring that children are not only diverted but also have access to adequate support to break the cycle of crime and violence.

UNICEF's technical assistance in the area of birth registration, contributed to the development and finalization of a national action plan to accelerate civil registration in the country, informed by findings of an assessment of the barriers to civil registration commissioned by the PNG Civil and Identify Registry in early 2019. The plan provides the basis for UNICEF's engagement in 2020 in piloting a birth registration point in the main general hospital in Port Moresby.

Building on promising results from the Parenting for Child Development programme (P4CD) pilot phase 2017 -2018, UNICEF PNG supported the Faith Based Organizations' expansion of the P4CD in five provinces. The programme addresses social, cultural and gender norms that perpetuate violence against children by providing parents with positive parenting skills and techniques and giving them a safe space to practice their new skills. This partnership with the FBOs involved an estimated 1,980 parents (with approximately 60% female caregivers) benefiting approximately 7,500 children from the positive parenting practices.

UNICEF PNG's continued support to capacity development, inter-sectoral coordination as well as new availability of tools and methodologies for collection and reporting of data on children strengthened the National WASH Programme Management Unit in leading and coordinating the WASH sector. The successful partnerships with the EU, DFAT Australia, Water Aid and in close collaboration with key Government partners resulted in the establishment of the first ever WASH MIS for PNG to gather data on household and institutional WASH services and track progress on SDG 6. The system has accumulated WASH data for 1,249 communities, 518 schools and 104 healthcare facilities covering 12 districts across seven provinces. UNICEF, with WaterAid technical assistance, trained 24 Government and CSO functionaries as master trainers on mWater – the open source web-based platform used for the PNG National WASH MIS.

UNICEF facilitated the drafting of the 'School Learning Improvement Plan' (SLIP) policy for National Department of Education. Once approved, the SLIP policy will guide the budgeting for augmentation and operation and maintenance of

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### WASH services in schools.

During the year, UNICEF continued to leverage Government and CSO partnerships, strengthening the capacity of the District Development Authorities, standardizing inclusive and accessible WASH facility designs for schools and health centres and establishing prototypes for scale up under the future School Infrastructure Policy. WASH services improvements initiated in four project districts through partnership with three international CSOs have strengthened District Development Authority (DDA) capacity to deliver equitable, adequate, sustainable WASH services at households, schools and health facilities. 20,883 students, including 9,097 girls, have benefitted from the WASH services provided in 67 schools. Construction is under progress in 24 more schools, which will benefit 4,243 additional children. Community mobilisation capacity of the project districts was strengthened through Community Led Total Sanitation (CLTS).

UNICEF leveraged the capacity of international Civil Society Organizations - Care International, Oxfam and World Vision - to support the DDAs to implement WASH plans in Hagen Central, Goroka, Nawaeb and Central Bougainville in improving WASH services in 200 schools and 36 health centres and hygiene promotion in surrounding 800 communities in these districts ensuring access of more than 40,000 school children to age appropriate, inclusive, accessible and gender segregated WASH facilities, including menstrual hygiene management (MHM) room, for schools and health centres. The WASH facility designs for health centres include solar panel to serve the dual purpose of energy supply for water pumping into overhead tanks and the cold chain equipment. The designs are being reviewed by the NDOE and NDOH for adoption as national standards.

UNICEF strengthened the community mobilisation capacity of the DDAs by training 435 motivators from within the hamlets on CLTS. 140 district and LLG leaders and functionaries were oriented on the importance of hygiene and sanitation. Consequently, motivators and the leaders are actively mobilizing communities to eliminate the practice of open defecation. Community members at household level have built 1,260 individual latrines in three districts as part of the ODF campaign.

To ensure that mothers, fathers, caregivers and children in UNICEF focus districts have increased knowledge and skill to improve sanitation and hygiene behaviour and demand quality services, the first WASH baseline and Knowledge, Attitude and Practice study was completed covering the four focus districts. About 435 CLTS trained community motivators have triggered 253 communities resulting in 6,900 additional people gaining access to basic sanitation and 30,047 school children reached with knowledge and awareness on improved hygiene and MHM. Also, 'Klinpela News App' was developed to share the stories of change from the WASH sector. The combined impact is a total of 253 communities triggered in three districts resulting in 21 communities self-declaring ODF status.

UNICEF supported hygiene awareness through active media engagement and commemoration of global advocacy days - Menstrual Hygiene Day (MH Day), World Water Day (WWD), Global Handwashing Day (GHD) and World Toilet Day (WTD). Leoshina Kariha - Miss Pacific Islands and UNICEF PNG Youth Advocate, reached out to the youth and public to highlight the importance of MHM. 30,047 children were reached with information on the importance of handwashing with soap at critical times, ending open defecation and safe storage and handling of drinking water.

UNICEF developed and successfully piloted a mobile news application 'Klinpela News' to document the stories of change and champions in the WASH sector from the field, and on real time. Once rolled out in 2020, the curated news will be available on the Android mobile platform through 'Klinpela News' App. WASH field officers at community level directly contribute news stories. The Klinpela News App, expected to reach at least 1,500 decision makers and stakeholders, will contribute to cross learning from success stories between communities and implementing agencies.

UNICEF worked with the Government in partnership with Save the Children, the World Bank and development partners in successfully launching the multi-sectoral National Nutrition Policy (2016-2026) and its costed Strategic Action Plan (2018-2022). The national Government has seen nutrition as a top priority in line with the Medium-Term Development Plan 2018-2022 goals- committing to scale up nutrition generating increasing interest from other partners such as the World Bank and New Zealand Government and CSOs in supporting the Government to scale up nutrition.

For sustained protection of breastfeeding, UNICEF technically supported the NDOH review of the draft Infant and Young Child Feeding Act that seeks to correct the current poor nutritional situation of children and to overhaul the Baby Feeds and Supplies Act of 1977.

UNICEF's collaboration with NDOH and other Global Polio Eradication Initiative partners resulted in the integration of vitamin-A supplementation with nationwide MR-polio vaccination campaign in 2019 that reached 1.03 million 6-59 months old children with a dose of high potency vitamin-A capsule for the second time in a period of 12 months. This year, UNICEF funded 70 health workers and training of trainers trained in both Integrated Management of Acute Malnutrition and Infant and Young Child Feeding from Autonomous Region of Bougainville, Western Highlands Province, Kokopo and West New Britain Province. Following the trainings, mentorship and on-job coaching continue to ensure sustainability of capacity development and utilisation of acquired knowledge and skills.

UNICEF's advocacy efforts resulted in the inclusion of the nutrition supplies in the new Medical and Dental Catalogue (10th edition). The temporary codes created has enabled the Government to place its first procurement order for nutrition supplies from UNICEF Supply Division Copenhagen with UNICEF PNG support in November 2019. Finally, the national Government is able to allocate funds for nutrition supplies and needs to continue to ensure sustainability as the demand for nutrition supplies by health facilities has sharply increased.

UNICEF's effective advocacy and technical support enabled Government initiatives aimed at strengthening early childhood education (ECE) and improved Inclusive Education Policy with the goal of mainstreaming children with disabilities. The Education Act is under revision to include ECE in the education structure for four and five-year old children's school readiness. To establish a quality ECE workforce, UNICEF in partnership with the PNG Education Institute, initiated an ECE diploma course recognized by the Government of Papua New Guinea. Under this initiative 21 students/teachers (8 female) have completed Bachelor's in Education (ECE) and 60 (32 female) newly enrolled (2019) have received Government grant.

UNICEF-PNG in its capacity as the coordinating agency of the global partnership for education (GPE), supported the Government in securing a GPE grant of USD 7.4 million for science, technology, engineering and mathematics pre- and in-service interventions. As the coordinating agency, UNICEF supported the quality assurance review, provided technical inputs and organized inputs from development partners and endorsement of the Education Sector Plan (addendum 2015-20) by the Local Education Group (LEG).

With financial contributions from Education Cannot Wait Fund, UNICEF ensured continued learning of 30,726 children (13,226 girls) and supported 442 teachers (297 female) with provision of teaching and learning materials, in Hela and Southern Highland provinces areas affected by the 2018 earthquake. UNICEF supported the Government in mainstreaming 2,720 out of school children (1,422 girls) in formal basic education through early learning and non-formal bridging classes. More than 2,694 children (Girls: 1,422) were enrolled in these IECD centres, elementary and primary schools catering for 56 children with disabilities (Girls: 29). The demand for access to quality education was further enhanced for 20,650 children (9,912 girls) through capacity building of 70 inclusive early childhood development centre staff as well as 29 elementary and 29 primary school boards of management.

To mark the occasion of the thirtieth anniversary of the Convention on the Rights of the Child, and in conjunction with World Children's Day, UNICEF partnered with the Government of PNG through the Office of the Child and Family Services – custodian of the Child Protection Act, as well as the Scouts Association of PNG, National Broadcasting Corporation (NBC) and two National Capital District schools to hold a high level event promoting child rights. An advocacy leaflet was shared with the Government and civil society on child rights and over 300 children, including out-of-school children, participated in the event, explaining their vision for the future. Public service announcements were made promoting child rights on NBC and, on 20 November, five students carried out a children's media takeover through a live discussion on what child rights means to them. UNICEF has successfully advocated with the Government of PNG to ensure its commitment to drafting and submitting the overdue state party report to the Committee on the Rights of the Child, with the process starting in 2020.

### Lessons Learned and Innovations

**Leveraging Partnerships and Advocacy:** PNG's WASH sector is in the foundational stage in-terms of establishing institutional arrangements, service provision and building a WASH technical workforce. Government and external partners' have experience limited to their respective operational locations. Although PNG's National WASH Policy catalysed collaborative efforts to provide direction to the sector, public investment for WASH services improvements is lacking. UNICEF's partnerships strategy was key to progressing the WASH sector agenda. UNICEF partnered with international CSOs and key Government institutions to deliver results for women and children. Through this modality, some local Governments financially contributed to improve WASH services as a demonstration of their commitment towards programme sustainability.

Recognizing that a qualified social service workforce is the first line of response for children and families and the most important element of a well-functioning child protection system, UNICEF has been supporting OCFS to lay the foundations for LPA-mandated child protection workforce. With UNICEF's technical assistance, OCFS established a Working Committee on Child Protection Case Management overseeing the completion of the Child Protection Case Management Minimum Standards and the Case Management Handbook, to ensure that case workers (including CPOs) met minimum qualification standards. This ensured Government ownership and buy-in providing an advocacy tool. In building a social services workforce, Government-led working committees are an invaluable tool to provide strategic advocacy and coordination and advance the child protection agenda.



Evidence-based advocacy is key to spearheading the child protection programme and achieving results for children. Based on UNICEF's assessment, the Working Committee members recognized the critical knowledge and skills gaps of CPOs. This led to advocacy with OCFS management to institutionalize the Standards and Handbook and the partnership with PILAG.

High level advocacy with politicians and decision makers at national and provincial level is the driving tool to improve the ownership and resource allocation for health service delivery and achieve of Universal Health Coverage.

**Innovation:** Traditionally school WASH infrastructure lacked comprehensive planning and implementation. In most schools, latrines and water taps are discretely located and handwashing facilities are rare, with no clear link to a whole school learning environment. Under the EU-UNICEF WASH project innovative WASH facility designs were developed and aligned with national standards for WASH in Schools. These designs are inclusive, gender segregated to ensure privacy/security and age appropriate. WASH facilities are planned as integrated blocks combining latrines with handwashing facilities, MHM room and incinerators. For health centres, WASH facilities design integrated solar panels to power a water pump and vaccine cold chain equipment. All designs come with a bill of quantities and costing based on current market rates analysis. Thus, the approach to institutional WASH services is resulting in standardized designs and market costs that are nationally acceptable by Government.

Despite progress, nutrition reporting is a challenge with inconsistent nutrition care services in most provinces. A new online data collection platform, developed by UNICEF, is tracking monthly nutrition reporting to support NDoH in capturing all required indicators. This online data collection platform uses Kobo Toolbox to digitize formerly manual data collection feeding into Power B.I. for automated data generation and analysis. The data collection system is being integrated into the National Health Information System.

The SLSS programme delivered an innovative package of services promoting hypothermia management in preterm low birth weight babies and preventing post-partum haemorrhage for mothers who encounter prolonged second stage of birth, including use of hypothermia alert device and non-pneumatic anti-shock garment.

**Positive social norms, community mobilization and ownerships:** The CLTS approach proved a strong entry point for mobilizing community members for positive hygiene behaviour change. Throughout project districts, communities welcomed and readily shifted to the new normal of improved sanitation and hygiene practices. Community members utilized local materials in building household VIP latrines and tippy taps. Communities formed vigilance committees to monitor 'ODF' status. Their cooperative efforts are channelled to rapidly transition to healthy communities by incorporating various aspects such as solid liquid resource management and environment beautification.

UNICEF used U-Report, a platform for the public to express their concerns, for various programmes including promotion of immunization. Having implemented the Polio-MR campaign, provinces now better understand the role of health promotion in creating demand for immunization and other health services.

**Capacity Development:** Maintaining nutrition-specific services at sub-national levels is still a struggle as health workers are not actively integrating nutrition services in their daily routine care. Therefore, thoroughly explaining during mentorship and on-job coaching visits the importance of nutrition services alongside other health care services improves their understanding greatly. Leadership and capacity of PHAs during mentorship and monitoring visits are critical. Approaches of capacity development embedded in the National Nutrition Policy and integration of nutrition service delivery into routine health services was found to be effective.

**Integrated approaches:** To design service delivery arrangements for WASH a common agent/agency proved beneficial. The consultative process resulted in Government departments and WASH stakeholders working to identify existing service delivery mechanisms and barriers then define mechanisms for progressing WASH service delivery from national to local Government level and vice versa, creating a feedback loop integral to results-based management.

At the district level, the use of village cluster approach and local motivators in delivering WASH services proved successful. CSOs field functionaries deliver WASH services in a cluster consisting of a school, health facility and surrounding communities with help from a local motivator. The consistent approach promoted quicker local ownership of WASH interventions and behaviour change.

Due to frequent demand from certain provinces requesting for nutrition supplies, it was agreed by NDoH that provinces implementing nutrition interventions should be prioritized in supply provision, including provincial hospitals that are contributing to the annual paediatric report. This avoids wastage of supplies in provinces/health facilities that are not implementing nutrition interventions. Integration of nutrition services (e.g. Vitamin A Supplementation) with routine immunization outreach and mobile sessions was critical in 2019 and can be strengthened with the Accelerated Immunization and Health System Strengthening programme currently rolled out in 12 provinces in PNG.

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Establishment of Emergency Operations Centres and other coordination mechanisms at national/subnational levels is an opportunity to ensure strengthened Supplementary and Routine Immunization planning, implementation and monitoring.