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Health System and Pandemic Preparedness in Asia

Preliminary results from the *AsiaFluCap* Project
in 6 countries



Piya Hanvoravongchai, MD MSc SD
Communicable Diseases Policy Research Group
London School of Hygiene & Tropical Medicine

The AsiaFluCap Project



*Health system analysis
to support
capacity development
in response to the threat of
pandemic influenza
in Asia*



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the European Commission and
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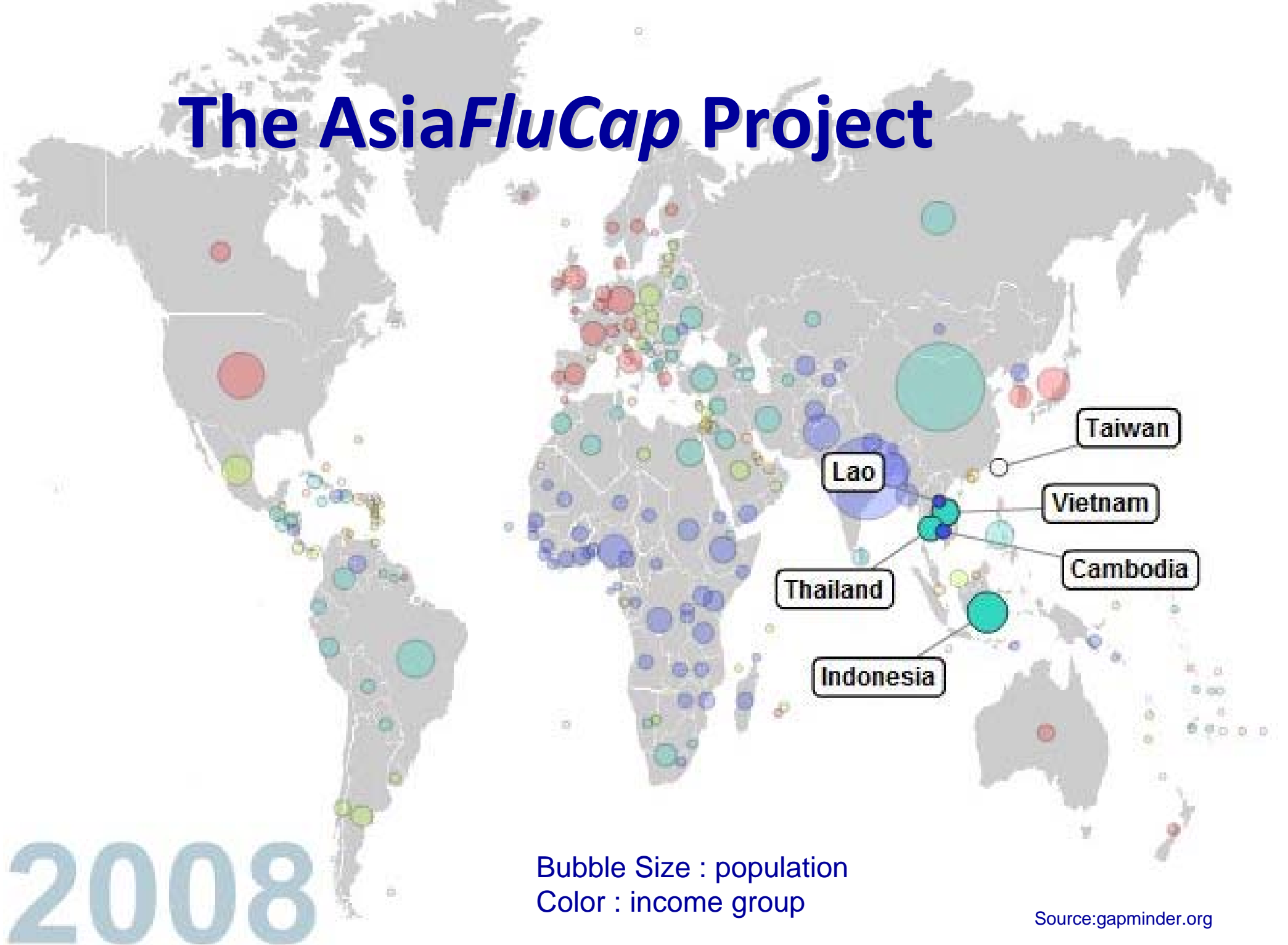


The AsiaFluCap Project

2008

Bubble Size : population
Color : income group

Source:gapminder.org



Project collaborators:



Vietnam
Ministry of
Science &
Technology



iHPP
Thailand



rivm



Lao PDR
NAEICO



Lao PDR
University of
Health
Sciences



Health System and Pandemic Influenza Preparedness in Asia: Results from Rapid Analyses in 6 Asian Countries

Piya Hanvoravongchai, Wiku Adisasmito, Pham Ngoc Chau, Alexandra Conseil, Joia de Sa, Ralf Krumkamp, Sandra Mounier-Jack, Bounlay Phommasack, Weerasak Putthasri, Chin-Shui Shih, Sok Touch, and Richard Coker
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Rapid Situation Analyses



- To understand the pandemic preparedness programmes, the health systems context, and **challenges** and **constraints** specific to the six Asian countries
- Used “**Systemic Rapid Assessment (SYSRA) toolkit**”, which evaluates disease programmes by taking into account the programmes, the general health system, and the wider socio-cultural and political context.

Conceptual Frame



Health System Components (Horizontal Level)

External
Context

Stewardship &
Organization
Arrangement

Financing,
Resource Gen
Allocation

Health Care
Provision

Information
System

Pandemic Preparedness Components (Vertical Level)

External
Context

Political
Economic
Epidemiologic
Legislative
Demographic
Socio-cultural

Stewardship &
Organization
Arrangement

Organizational system
and laboratory, and drug
networks

Financing,
Resource Gen
Allocation

Finances and resources

Health Care
Provision

Disease control,
Service delivery, Care
Patterns of provision
utilization, Human
resources

Information
System

Infrastructure; Information
Use of information for
decision making, Routine
data sets, disease
surveillance

* Demographic, Legal, Economic, Socio-demographic, Technological

Methodology



- Phase 1: Data collection
- Phase 2: Synthesis



Late 2008 to early 2009

Key findings









Pandemic Preparedness



- Strategic pandemic planning in place
 - strongly influenced by **Avian & Human Influenza (AHI) model** of responses
 - focused on **early detection** and **containment** e.g. surveillance system and rapid response teams (except Taiwan)
 - limited preparation on **pandemic mitigation** (except Taiwan)
- Operational plan still lacking. Inadequate knowledge/skills for pandemic responses at **local level**

Preparedness and Health System



- Investment in pandemic preparedness activities in the region has contributed to the strengthening of selected components of health system functions in most countries i.e.
 - surveillance,
 - laboratory capacity,
 - monitoring and evaluation, and
 - public communication.

Health System vs Preparedness



- **Health system context** has very strong influence on the **approach** adopted towards pandemic preparedness within a country
- The **interfaces and linkages** between health system contexts and pandemic preparedness programmes are particularly strong in three areas:
 - **Governance and Stewardship,**
 - **Resources, and**
 - **Service provision**

Governance & Stewardship



- **Integrated versus specialized**
 - Newly created agency or using existing disaster preparedness structure
- **Decentralization** led to variations in how pandemic preparation is done:
 - Priority Setting / Political Commitment;
 - Available Resource / Financial Allocation;
 - Communication and Information sharing
- **Monitoring & evaluation and information system:**
 - information on stockpiles of antiviral medicines or other key health system resource not readily available



Resources: Financing

- **Low level of health financing** in some countries
 - Inadequate money for pandemic preparedness
 - High reliance on donor financing
 - Local priority? Opportunity cost?
- Questions on **financial sustainability** of pandemic preparedness spending in some countries



Country	% of Budget from External Sources	Source of Local Financing
Cambodia	>90%	Central
Indonesia	24%	Central & Local
Lao PDR	>90%	Central
Taiwan	0%	Central
Thailand	3%	Mainly Central
Viet Nam	N/A	Central & Local



Resource: Health workers

- Several health workforce issues already in these countries will influence the effectiveness of preparedness plans:
 - Quantity,
 - Distribution,
 - Knowledge & skills
 - Motivation & absenteeism

Service Provision



- Level of **public sector development** and availability of public infrastructure
- **Public - Private nature of health care provision** affects the nature of pandemic response:
 - collaboration in surveillance/investigation;
 - questionable private sector roles in time of pandemic
 - Late presentation at health facilities a challenge to rapid containment and early treatment

Conclusion

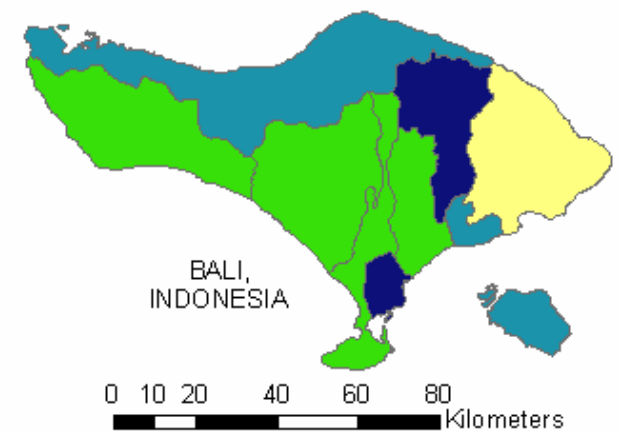
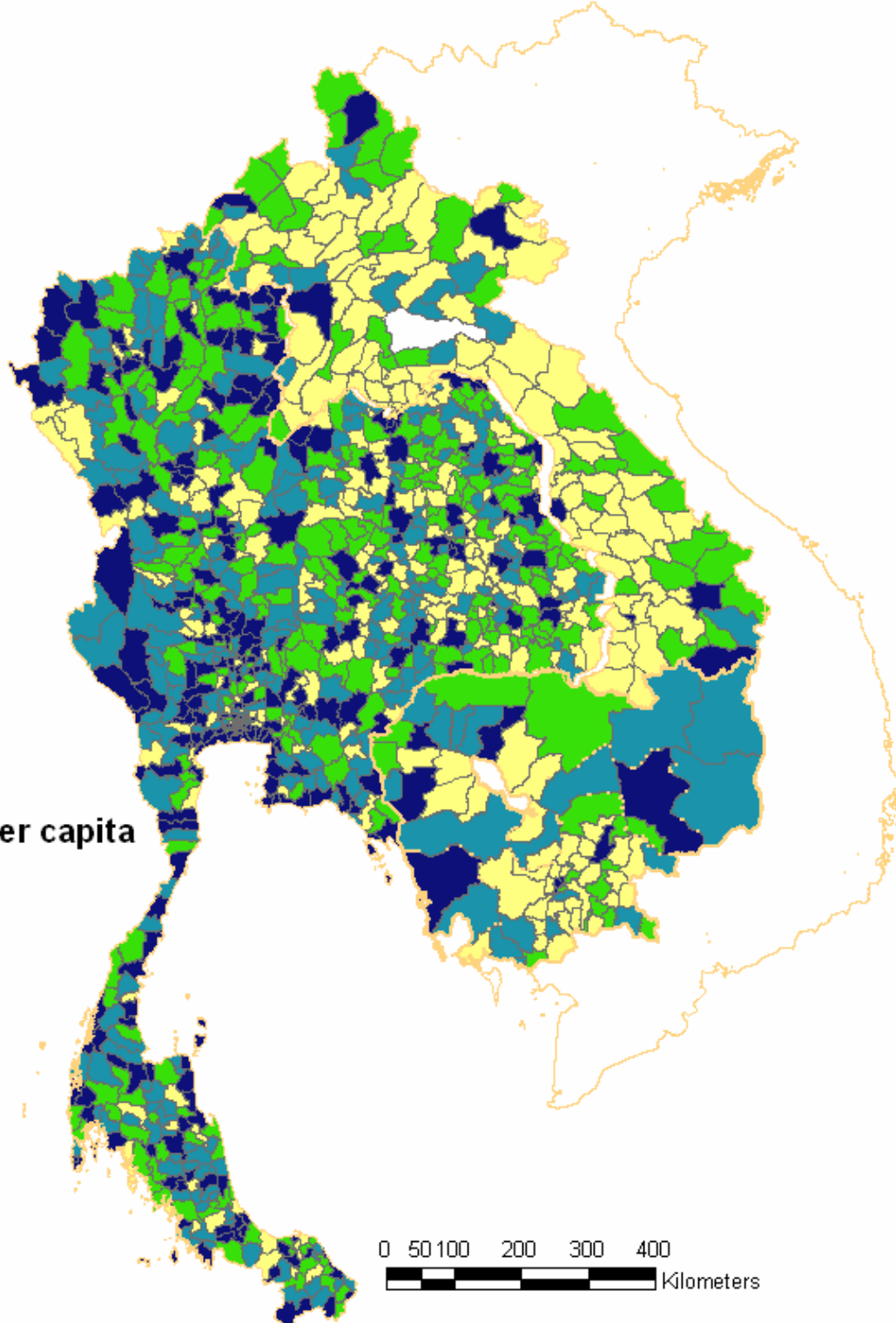


- Health system context strongly influences how the six countries have been preparing themselves for a pandemic
- Health system resource is still a big concern in many countries
- Challenges in shaping pandemic preparation in the context of overall health system strengthening
- Could heightened public interest and awareness on the H1N1/2009 be mobilized towards more investment in health systems?

Ongoing *AsiaFluCap* research



- Resource mapping
- Scenario development
- Resource gaps analyses





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Thank you!

Piya Hanvoravongchai
piya@cdprg.org