



# Improving Health in Asia and the Pacific

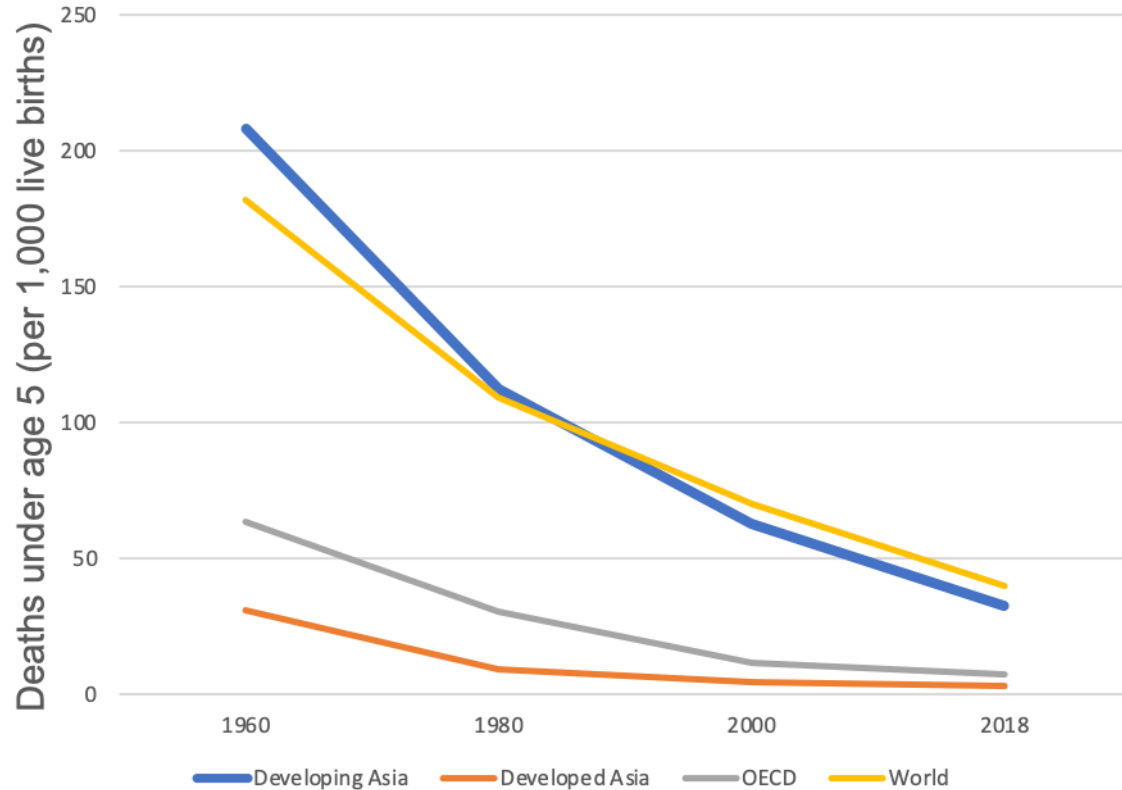
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# Health in Asia and the Pacific over the Last 50 Years

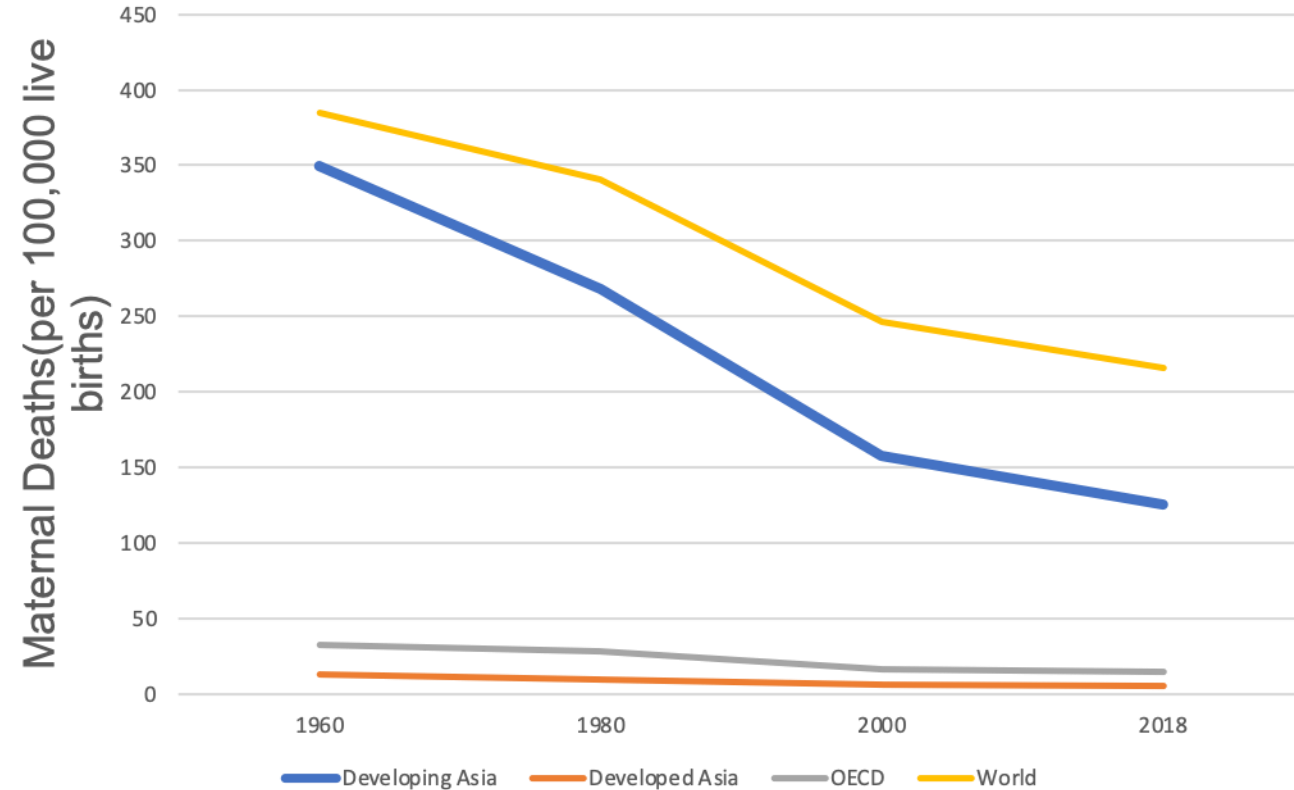
- In the last 50 years, the region's average life expectancy at birth has risen from 46 years to 71 years.
- Disease-specific programs have drastically reduced deaths from infectious disease and childbirth.
  - Smallpox has been eliminated globally (caused 300-500 million deaths)
  - Polio has been eradicated in all but 3 countries (Afghanistan, Pakistan, and Nigeria)
- Focus on achieving Universal Health Coverage (UHC)

# Improved Health Outcomes

## Reductions in Under-Five Mortality

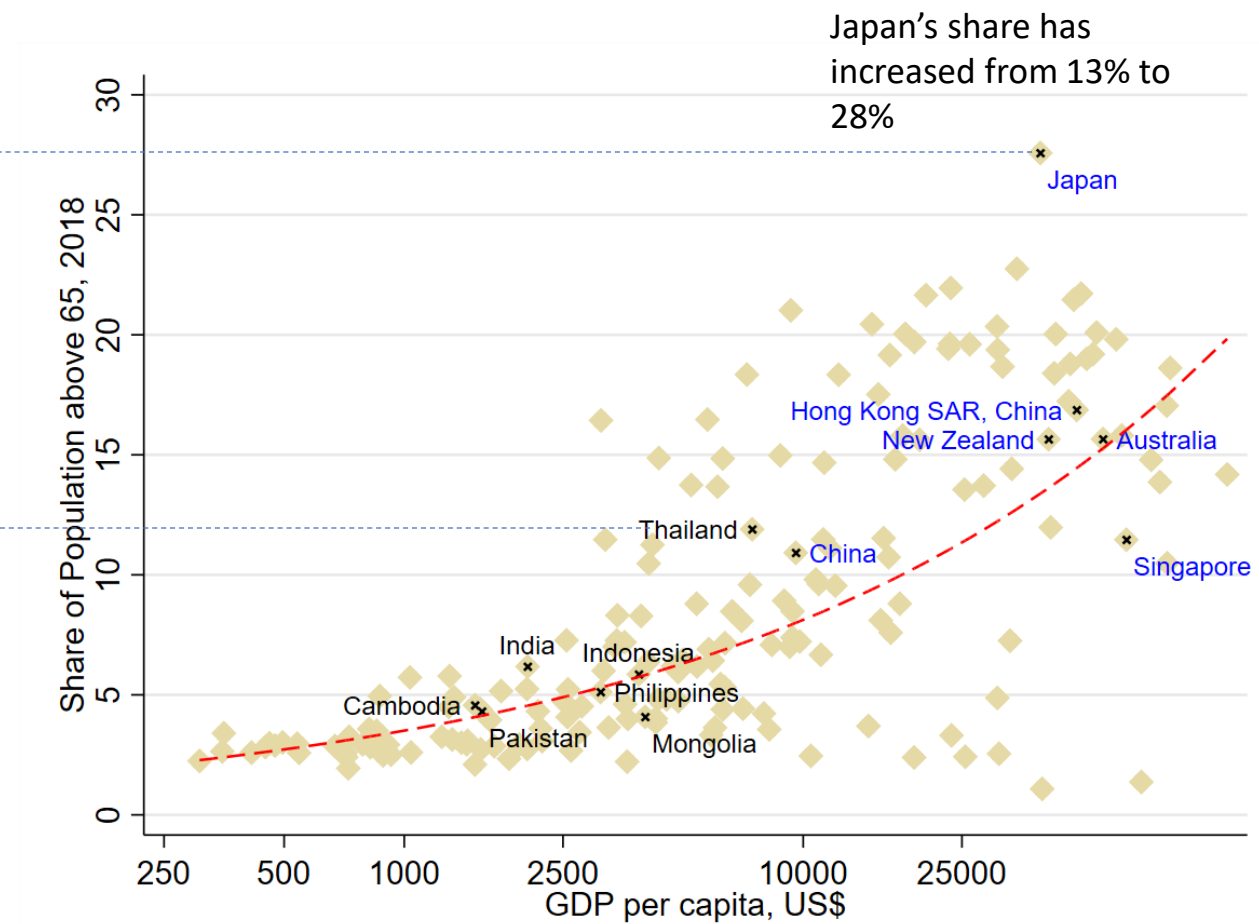
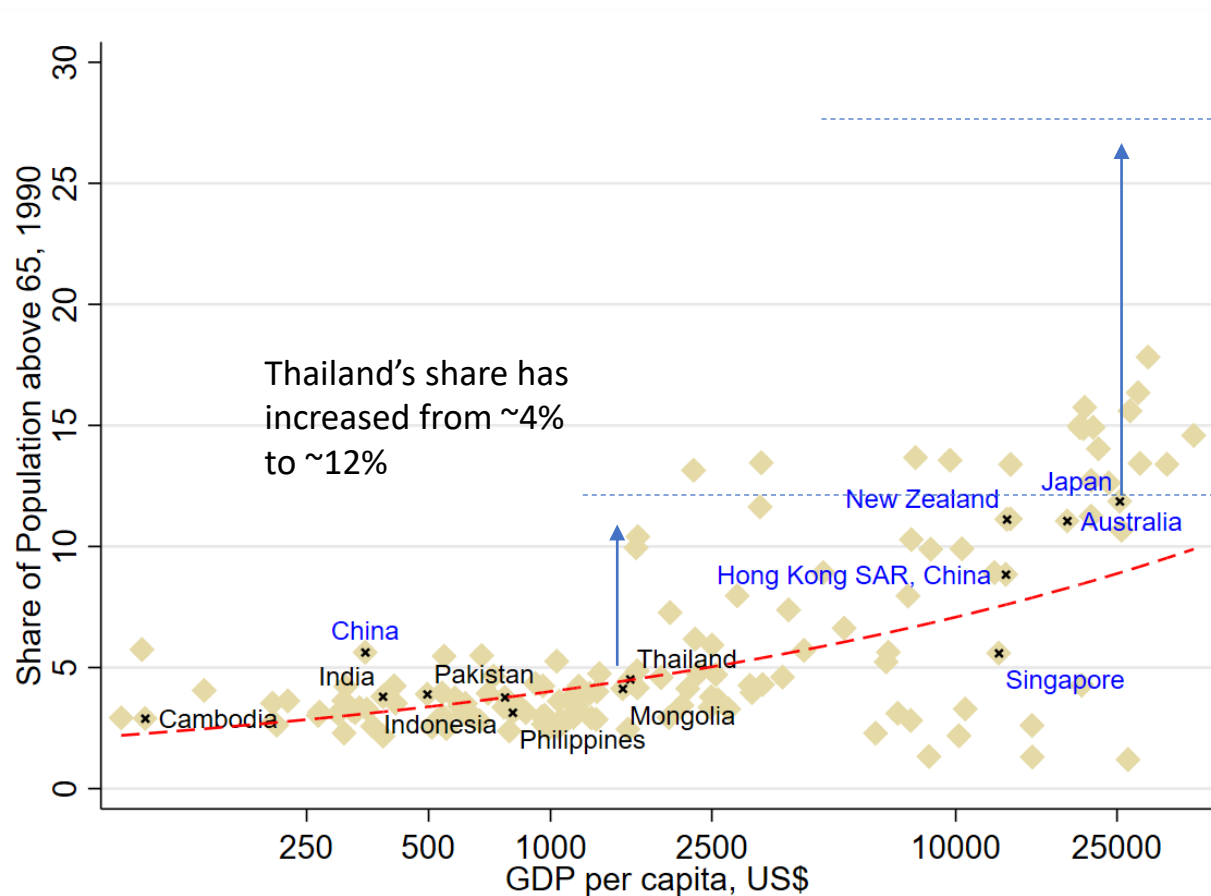


## Reductions in Maternal Mortality



Developing Asia has made great progress in reducing maternal and child mortality **but some countries still face major challenges**

# Aging Population 1990-2018





There has been a chronic **underinvestment** in the prevention, early diagnosis, screening, treatment and rehabilitation for NCDs.

In 2019, health systems were **unable to fully respond** in the majority of countries to the health-care needs of people living with or affected by NCDs.

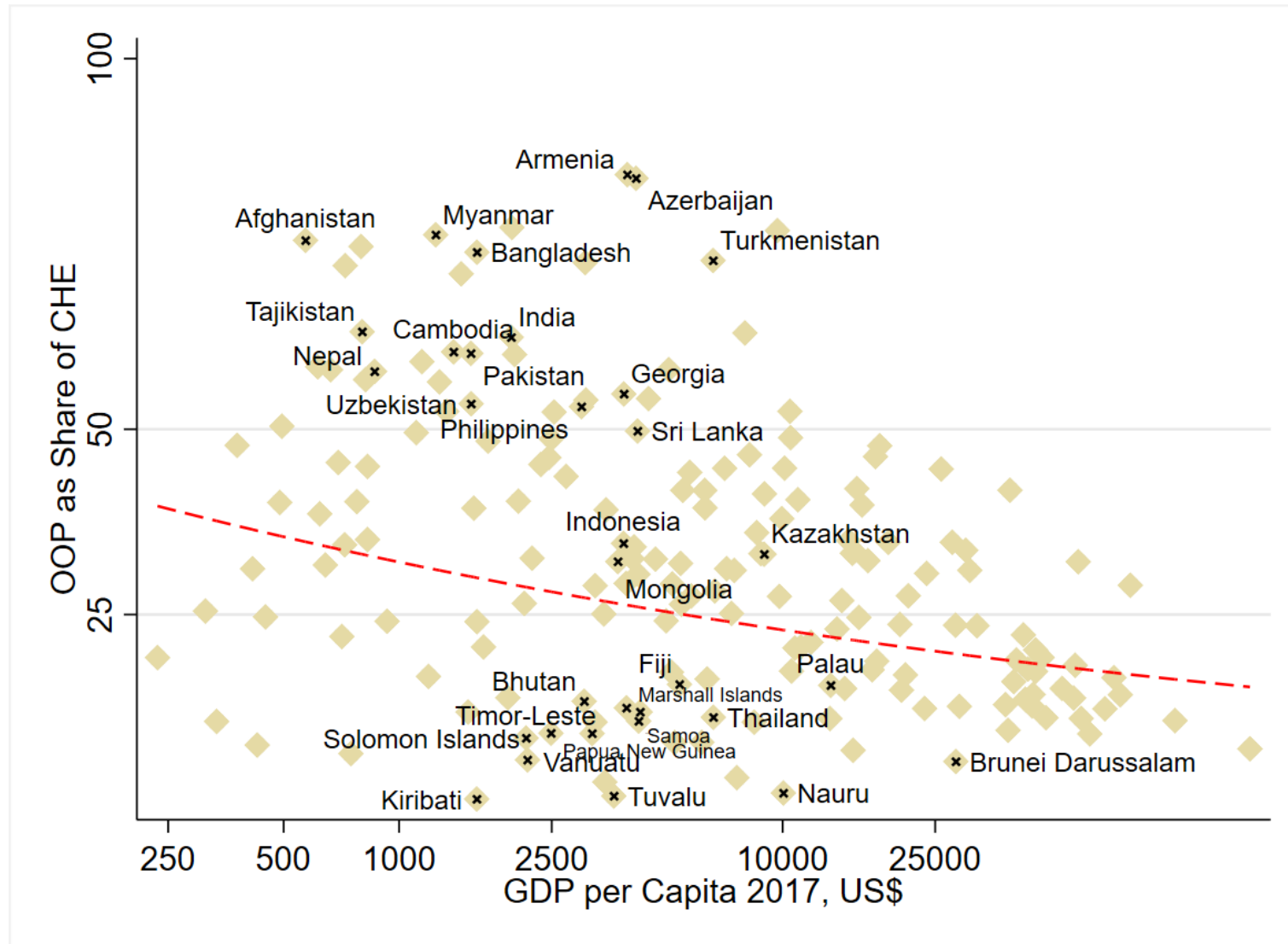
**Low  
Investment  
despite  
increasing  
prevalence  
of NCDs**

- Only 34% of countries provide drug therapy and counseling services to prevent and treat **heart attacks and strokes**
- Only 40% of countries have **palliative care** generally available
- Only 48% of countries have **guidelines** for the four major NCDs
- Only 62% of countries have early detection programmes for **cervical cancer**
- Only 62% of countries have **radiotherapy** services for cancer treatment

# Increased Domestic Resource Mobilization for UHC

Share of Public Health Expenditure versus Other Sectors (2010 – 17), Average Share of Total Government Expenditure			Fiscal Space 2010-17 (as share of GDP)
	Health (%)	Education (%)	Fiscal Balance (%)
Laos	2.97	9.77	-3.25
India	3.32	13.36	-7.49
Pakistan	3.50	12.43	-6.25
Indonesia	6.03	18.09	-1.94
Armenia	6.21	11.14	-3.52
Cambodia	6.26	8.05	-2.63
Mongolia	6.60	12.91	-7.53
Fiji	7.43	14.34	-2.54
Vietnam	8.81	17.50	-4.93

# DMCs have high Out of Pocket Health Spending



# Key Health Sector Challenges

1. Current levels of investment are insufficient to achieve Universal Health Coverage (UHC)
2. Non-communicable diseases cause 76% of all deaths yet receive, 2% of financing globally: health systems are not prepared for aging populations with chronic diseases
3. **Disease outbreaks is to be a major threat to economic stability in the region.**
4. **ADB's Strategy 2030** requires collaboration across sectors to addresses these challenges but, people still work in silos. ADB needs to develop incentives for multisectoral collaboration

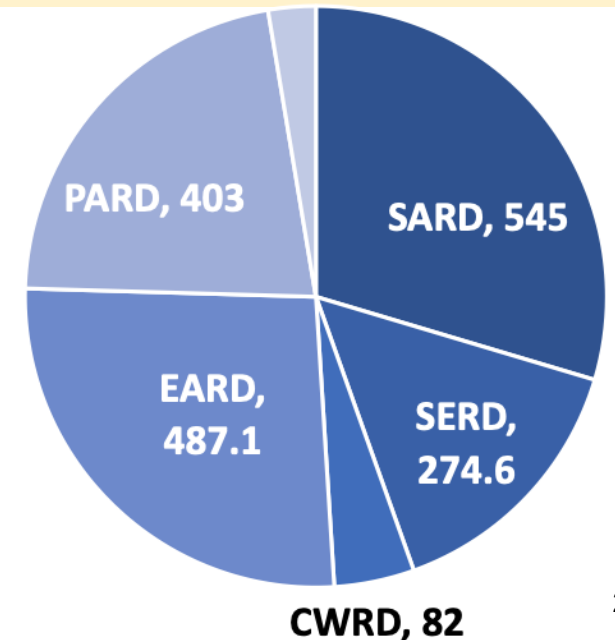


# Health Sector Operations at a Glance (2019)

- 36 ongoing loan and grant projects in 19 DMCs with total value of \$2 billion.
- 14 new committed projects for health in 2019 are in Armenia, Georgia, Mongolia, Pakistan, PRC, PNG, Samoa, Tonga, Tuvalu, Vanuatu and Viet Nam with total value \$636 million.
- 9 new projects in 6 DMCs with total value \$1.11 billion are expected to be approved in 2020
- 22 pipeline loan and grant projects in 18 DMCs with total value of \$2.06 billion in 2020 – 2022.

PSOD, 48.6

Current portfolio  
(Million USD)



- 
- DMCs with both ongoing projects and pipeline projects
  - DMCs with ongoing projects
  - DMCs with pipeline projects

# SARD - SAHS Health Sector Operations Highlights

## Focus areas

Urban health; Primary health care; Regional health security; Cross-sector collaboration (with urban, transport, finance, skills development, and climate change)

BAN

### **Urban Primary Health Care Services Delivery Project (\$70M in 2012; \$112M in 2018)**

- PPP contracting for primary health care
- Low-carbon health infrastructure since 2012

IND

### **Supporting National Urban Health Mission (\$300M in 2015)**

- First health sector RBL supports focus on results and fosters innovations and partnerships
- Digital solutions for improved delivery (disease risk screening, data standards, interoperability, M&E)
- PPP contracting (radiology/diagnostics, primary health care centers)

## Pipeline projects

- India: State Road Safety Incentive Program (\$125M of \$500M in 2020)
- India: Strengthening Comprehensive Primary Health Care in Urban Areas (\$200M in 2020)
- Bangladesh: Health Care Improvement Project (\$150M in 2022)

# SERD- SEHS Innovative Health Sector Pipeline

## Supporting Innovative Approaches in the following areas

Prevalence of Non-Communicable Diseases (NCD); Strengthening cross-border regional public health ; and helping implementation of Universal Health Care Law (Philippines)

MYA

- **Improving NCD Prevention and Treatment (\$100M 2020, 2nd phase 2022)**
- ADB's first project to focus on NCD response.

REG

- **GMS: Healthy Special Economic Zones (\$72M 2021)**
- Health access for mobile / migrant populations in Lao, Cambodia, Myanmar and possibly Thailand.

PHI

- **Dialogue for a new Result-Based Loan program (\$300M 2021)**
- Health financing, service delivery and governance reforms to support UHC goals

Mainstreaming innovative technologies (i.e. low-carbon health facilities, health information technology) in project designs

# CWRD – CWSS Health Sector Operations Highlights

TAJ

## **Maternal and Child Health Integrated Care Project (\$32M in 2018)**

- Innovative use of artificial intelligence to improve health service delivery

UZB

## **Primary Health Care Improvement Project (\$45M in 2018)**

- Established modern rural polyclinics to expand service delivery

## **Integrated Perinatal Care Project (\$100M 2021)**

- Integration of services to improved health outcomes

ARM

## **Human Development Enhancement Program (\$10M in 2019)**

- Comprehensive policy reforms in education and health sectors

Diverse region characterized by:

- Former soviet union health systems (8 out of 10)
- Variable demographic evolution (aging vs young populations)
- Epidemiological transitions (non-communicable diseases vs infectious diseases)

CWSS projects typically involve:

- Rigorous analysis
- Integration of care
- Use of innovative technology

Pipeline

- PAK Khyber Pakhtunkhwa (KP) Health Services Improvement Program, 2020
- ARM RBL, 2021
- TAJ project, 2022

# PARD – Growing Health Sector Operations



**Reaching the last mile** by supporting health systems, policies, and institutions towards achieving universal health coverage

REG: Systems Strengthening for Effective Coverage of New Vaccines in the Pacific Project



**Improving primary and secondary health infrastructure**

PNG: Rural Primary Health Services Delivery Project

PNG: Health Services Sector Development Program



**Informed decision makers** through eHealth and capacity building

TON: Introducing eGovernment through Digital Health

REG: TA support for Pacific Digital Health Strategies



**Leveraging** partnerships to increase efficiency and knowledge transfer

Collaboration with UNICEF, World Bank, WHO, Australia's Department of Foreign Affairs and Trade (DFAT), New Zealand's Ministry of Foreign Affairs and Trade (MFAT) and The Pacific Community (SPC).

## Partners

Financing – DFAT  
Implementation – UNICEF  
Collaboration/Coordination –  
World Bank, WHO, JICA,  
regional organizations

## Portfolio

4 projects/programs  
\$403.4 million  
PNG, SAM, TON, TUV,  
VAN

## Pipeline

2021 SOL: Urban Health  
Services Project.

2023 VAN: TBD

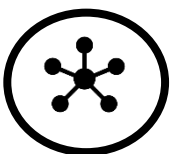
# EARD: ADB as a reliable partner in Health



Portfolio



Issues



Areas of Engagement

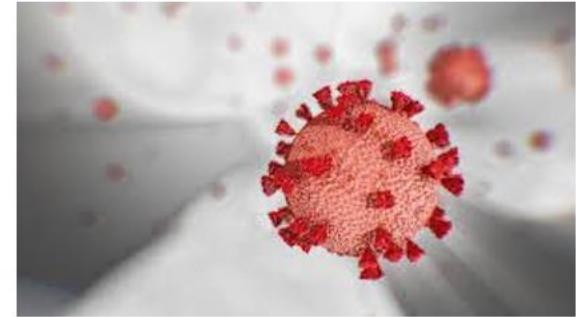


ADB's Value addition

Mongolia	People's Republic of China
<ul style="list-style-type: none"> <li>• 26-year engagement in health sector</li> <li>• Most important partner in health</li> <li>• 6 loans (\$165 m); 7 grants (\$37 m) and 17 TAs (\$12 m)</li> <li>• <b>Total: \$214 million</b></li> </ul>	<ul style="list-style-type: none"> <li>• Support elderly care programs</li> <li>• 1 loan for processing \$150 million</li> <li>• 4 approved loans total \$400 million. --</li> <li>• <b>Total: \$551 million</b></li> </ul>
<ul style="list-style-type: none"> <li>• Non-communicable diseases and <b>air pollution</b></li> <li>• <b>Inadequate health facilities</b> and health workers</li> <li>• Increasing <b>out-of-pocket expenditure</b> services</li> <li>• Weak <b>governance</b> contributing to inappropriate health care practices</li> </ul>	<ul style="list-style-type: none"> <li>• Addressing the long-term care of <b>aging population</b></li> <li>• Reducing the burden of <b>non-communicable diseases</b></li> <li>• Hospital-centric and <b>poor-quality healthcare</b></li> <li>• Persistent threats of <b>pandemics</b></li> </ul>
<p><u>Health reforms</u>: Development of <b>health sector master plan</b>, hospital accreditation, governance, pharmaceutical <b>regulation</b>; health workforce, <b>health financing</b></p>	<ul style="list-style-type: none"> <li>• <b>Healthy China 2030 Plan</b></li> <li>• Elderly care <b>infrastructure</b></li> <li>• Development of <b>three-tiered elderly care</b> system: home, community, and institutional care)</li> <li>• <b>Healthy and Age friendly cities</b></li> </ul>
<ul style="list-style-type: none"> <li>✓ <u>Long term strategic engagement</u> in health: Health 6 MFF project</li> <li>✓ <u>Innovations</u> to improve service delivery efficiency and quality</li> </ul>	<ul style="list-style-type: none"> <li>✓ Demonstration projects</li> <li>✓ Best practice</li> <li>✓ Public-private partnerships in elderly care</li> </ul>



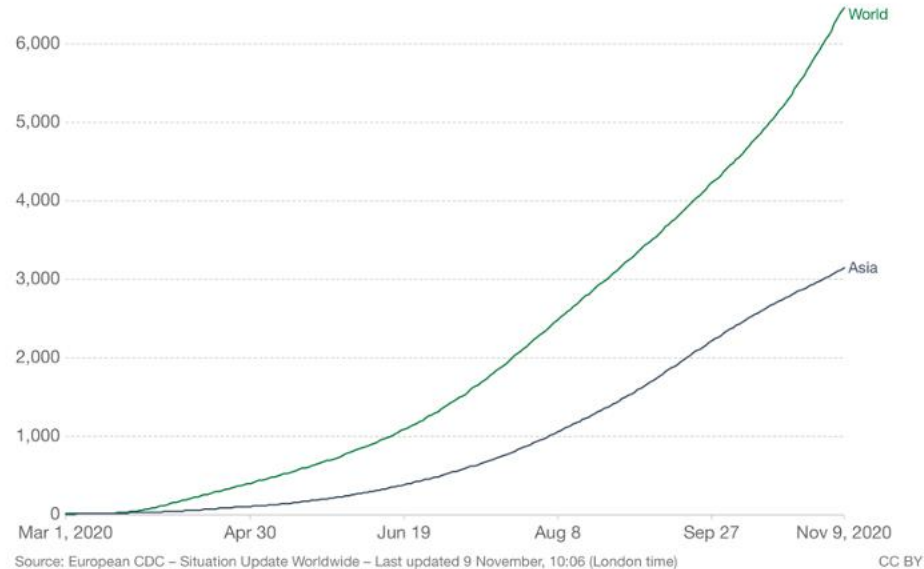
# COVID 19 (as of 9 November 2020)



## Cumulative confirmed COVID-19 cases per million people

The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.

Our World  
in Data

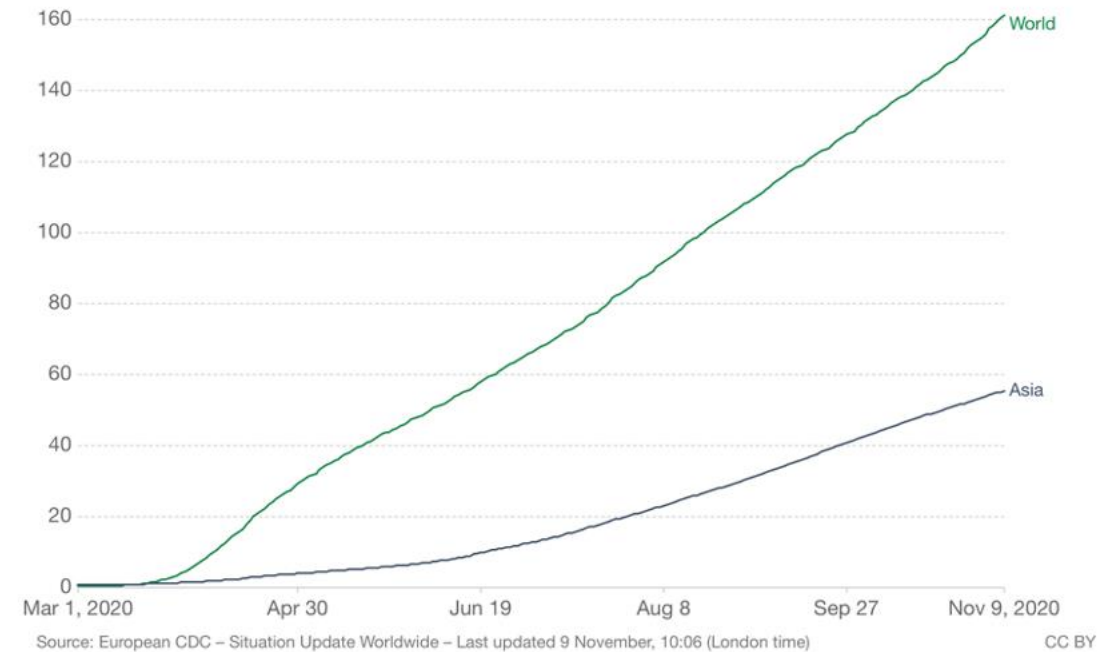


Countries Affected: **215**

## Cumulative confirmed COVID-19 deaths per million people

Limited testing and challenges in the attribution of the cause of death means that the number of confirmed deaths may not be an accurate count of the true number of deaths from COVID-19.

Our World  
in Data



# ADB's health-related COVID19 projects

- **Asia Pacific Disaster Response Fund (APDRF) grants and Technical Assistance (TAs)** are providing immediate technical and financing response
  - APDRF are Developing Member Country (DMC)-implemented but can be delegated to ADB by DMCs
  - TAs are implemented by ADB
- **Emergency Assistance Loans/Grants (EALs)** are usually financing DMCs' short-term needed health sector measures
  - Improving Testing, Tracing, Isolation and Treatment Capacities of DMCs
  - Developing Member Country (DMC)-implemented
- **Countercyclical Policy Response Options (CPRO) Loans** are financing comprehensive DMC strategies that include investments in:
  - Immediate health sector measures against COVID19
  - Health system enhancements that will help sustain both the suppression of COVID19 and the efforts to achieve UHC. These include:
    - Improvements in Health Infrastructure and Equipment (service delivery)
    - Increased Incentives for Human Resources for Health (HRH)
    - Harnessing National Health Insurance Systems (health financing)
    - Adoption of Quality of Care interventions including improved infection control measures (governance)
    - Utilization of e-Health tools



# CPRO

- CWRD
  - Georgia, Kazakhstan, Kyrgyz Republic, Pakistan, Tajikistan, Uzbekistan
- EARD
  - Mongolia
- PARD
  - Palau, Tonga, Samoa, Solomon Islands
- SARD
  - Bangladesh, Bhutan, India, Maldives, Nepal
- SERD
  - Cambodia, Indonesia, Myanmar, Philippines, Thailand



# **EALs or EA Grants and other Health Sector projects**

- **Re-purposing of projects in Bangladesh, Mongolia, Uzbekistan, Tajikistan and Sri Lanka**
- **New loans/grants and additional financing (AF)**
  - **EARD**
    - Mongolia (AF of Fifth Health sector Development Project)
  - **CWRD**
    - Afghanistan (Emergency Assistance for COVID19 Pandemic response)
    - Pakistan (Emergency Assistance for Fighting Against COVID10 Pandemic)
    - Kyrgyz Republic (COVID10 Emergency Response Project)
    - Uzbekistan (COVID-19 Emergency Response Project)
  - **SARD**
    - Bangladesh: COVID-19 Response Emergency Assistance Project
  - **SERD**
    - Lao PDR and Myanmar– Additional Financing of Greater Mekong Regional Health Security Project
    - Philippines - Health System Enhancement to Address and Limit COVID-19

# Technical Assistance (TAs)

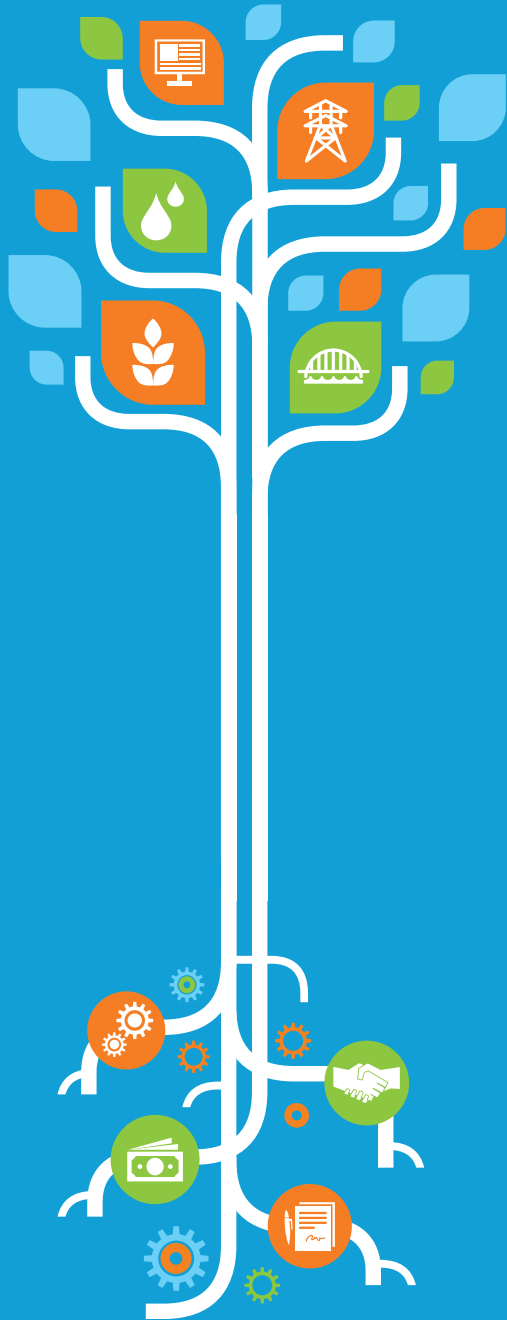
<b>South East Asia and China</b>	<b>Strengthening Regional Health Cooperation in the Greater Mekong Subregion (Additional Financing)</b>
<b>Regional</b>	<b>Regional Support to Address the Outbreak of COVID-19 and Potential Outbreaks of Other Communicable Diseases</b>
<b>Pacific</b>	<b>Developing the Pacific Health Sector</b>
<b>South Asia</b>	<b>Support to address Outbreak of Coronavirus Disease 2019 and Strengthen Health Systems Preparedness for Communicable Diseases in South Asia</b>
<b>Central and East Asia</b>	<b>Addressing Health Threats in the Central, West and East Asia Region</b>



# Regional Support to Address the Outbreak of COVID-19 and Potential Outbreaks of Other Communicable Diseases



- Vaccine Readiness Assessment
- Allocation and Delivery Strategies
- Cold Chain
- Vaccine Information Systems
- Capacity Building
- Vaccine Communications



# THANK YOU!

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