## PHG Needs Assessment Calculator Palau Congenital Syphilis

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# Palau Shared Data Demographic, maternal health and socio-economic indicators

Please read first! If you have already completed a needs assessment for a different topic in this country, you will be able to copy the Demography information from that Calculator into here. The information should be the same.

By default, the Toolkit contains information at the national level.

If you would like to use a different population, then replace country information with that of your specific population of interest.

Number of persons by age-group and sex		Estimates		Yo	our estimat	es	Cho	sen estima	ates
Age group	Male	Female	Total	Male	Female	Total	Male	Female	Total
0-4 years	685	678	1363			0			0
5-9 years	805	716	1521			0			0
10-14 years	964	950	1914			0			0
15-19 years	715	747	1462			0			0
20-24 years	712	554	1266			0			0
25-29 years	942	641	1583			0			0
30-34 years	1072	784	1856			0			0
35-39 years	1132	833	1965			0			0
40-44 years	1096	791	1887			0			0
45-49 years	842	692	1534			0			0
50-54 years	624	558	1182			0			0
55-59 years	393	339	732			0			0
60-64 years	254	252	506			0			0
65+ years	463	673	1136			0			0
Total	0	0	19907	0	0	0	0	0	0
Female population aged 15-44 years		0			-			-	
Data year									
Source, Year									

Ethnicity. Please enter data for the main ethnic groups if you are working with a population that is different from that of the country.

Ethnic group	Number	% population

# Demography

Fertility and mortality	Estimate	Source, Year	Your estimate	Source, Year	Chosen estimate	Source, Year
Crude birth rate: live births (LB) / year / 1000 population						
Still birth rate: still births (SB) / year / 1000 total births	12	WHO, 2009				
Total births in 1000s (LB+SB) per year	0	Unicef, 2007				
Infant mortality rate: infant deaths / 1000 LB / year	15	UNICEF				
Under-5 mortality rate: U5 deaths / 1000 LB / year	19	(23011日度月2010				
Percentage births in women >35 years		(2011), 2010				
Life expectancy at birth (yrs)	72	WHO, 2009				
% of marriages consanguineous						

	Estimate	Source, Year	Your	Source,	Chosen	Source,
Maternal health			estimate	Year	estimate	Year
Prenatal visits – at least 1 visit (%)	100	WHO, 2004				
Prenatal visits – at least 4 visits (%)						
Births attended by skilled health personnel (%)	100	WHO, 2007				
Contraception prevalence rate (%)	32.8	WHO, 2003				
Unmet need for family planning (%)						
Total fertility rate	1.8	WHO, 2009				
% home births						
% births at health care services						
	Estimate	Source, Year	Your	Source,	Chosen	Source,
Newborn health			estimate	Year	estimate	Year
Number of neonatal examinations by SBA / trained staff						
% neonatal examinations by SBA/ trained staff						

Socio-economic indicators	Estimate	Source, Year	 	Chosen estimate	
Gross national income per capita (PPP int. \$)					
% population living on < US\$1 per day					
Birth registration coverage (%)	>90	WHO, 2006			
Death registration coverage (%)					

LB = live births

PPP = purchasing power parity SBA = skilled birth attendant

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Palau Shared Data Health Services Data

Please read first! If you have already completed a needs assessment for a different topic in this country, you will be able to copy the Health Services information from that Calculator into here. The information should be the same.

This section provides health-service-related information for your country.

By default, the Toolkit contains information at the national level.

If you would like to use a different population, then replace country information with that of your specific population of interest.

Health Expenditure	Estimate	Source, Year	Your estimate	Source, Year	Chosen estimate	Source, Year
Per capita total expenditure on health (PPP int. \$)	1012	WHO, 2009				
Total expenditure on health as percentage of GDP	11.2	WHO, 2009				
Per capita government expenditure on health (PPP int. \$)	799	WHO, 2009				
External resources for health as percentage of total expenditure on health	46.0	WHO, 2009				
General government expenditure on health as percentage of total expenditure on health	79.0	WHO, 2009				
Out-of-pocket expenditure as percentage of private expenditure on health	42.0	WHO, 2009				
Private expenditure on health as percentage of total expenditure on health	21.0	WHO, 2009				
General government expenditure on health as percentage of total government expenditure	16.7	WHO, 2009				

Health Workforce	Estimate	Source, Year	Your estimate	Source, Year	Chosen estimate	Source, Year
Number of nursing and midwifery personnel	118	WHO, 2006				
Nursing and midwifery personnel density (per 10,000 population)	59	WHO, 2006				
Number of physicians	26	WHO, 2006				
Physician density (per 10,000 population)	13	WHO, 2006				
Number of obstetricians						
Number of paediatricians						
Number of paediatric surgeons						
Number of paediatric cardiac surgeons						
Number of paediatric neurosurgeons						
Number of clinical geneticists						
Number of genetic counsellors						
Number of community health workers						
Number of skilled birth attendants (SBA)						
Density of SBA						
Number of lab staff providing cytogenetic testing						

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Number of lab staff providing molecular genetics			
Number of lab staff providing biochemical tests for genetics			
Number of skilled health attendants			

		Source,	Your	Source,	Chosen	Source,
Infrastructure	Estimate	Year	estimate	Year	estimate	Year
Number of maternity units						
Number of services providing specialised care for people with CD						
Number of family planning services						
Number of preconception services						
Number of services providing prenatal care						
Number of services providing newborn care						
Number of facilities providing genetic services						
Number of laboratories providing cytogenetics						
Number of laboratories providing molecular genetics						
Number of laboratories providing biochemical tests for genetics						
Number of facillities for safe terminations of pregnancies for fetal defects						

PPP = purchasing power parity

GDP = gross domestic product SBA = skilled birth attendant

CD = congenital disorders

## Palau Congenital Syphilis SYPH Epidemiology 1.1: Country epidemiology

Epidemiological indicator	Your estimates	Range	PHGDB minimum estimates	Chosen estimates	Range	Source
Year of estimate						
Prevalence at birth and by age-group (/1000	)					
Live birth prevalence (LB)						
Stillbirth prevalence (SB)						
Total birth prevalence (LB+SB)						
All age groups						
<1 year olds						
1-4 year olds						
5-14 year olds						
15-44 year olds						
45+ year olds						
Number of cases by age group						
Annual live births						
All age groups						
<1 year olds						
1-4 year olds						
5-14 year olds						
15-44 year olds						
45+ year olds						
% cases by level of impairment						
No or minor disability						
Moderate disability						
Severe disability						
Mortality and morbidity						
Mean life expectancy (yrs)						
No. deaths < 1yr						
No. deaths 1-4 yrs						
No. deaths < 5 yrs						
Infant mortality / 1000 LB						
Under-5 mortality / 1000 LB						
Years of life lost						

Congenital Syphilis

SYPH Epidemiology 1.2: International comparison

	Your chosen		Comparison		
Epidemiological indicator	estimates	Country	Region	World	
Prevalence at birth and by age-group (/1000 p	eople)		(Oceania)		
Live birth prevalence (LB)					
Stillbirth prevalence (SB)					
Total birth prevalence (LB+SB)					
All age groups					
<1 year olds					
1-4 year olds					
5-14 year olds					
15-44 year olds					
45+ year olds					
Number of cases by age-group					
Annual live births					
All age groups					
<1 year olds					
1-4 year olds					
5-14 year olds					
15-44 year olds					
45+ year olds					
% cases by level of impairment					
No or minor disability					
Moderate disability					
Severe disability					
Mortality and morbidity					
Mean life expectancy (yrs)					
No. deaths < 1yr					
No. deaths 1-4 yrs					
No. deaths < 5 yrs					
Infant mortality / 1000 LB					
Under-5 mortality / 1000 LB					
Years of life lost					

# **Congenital Syphilis**

# SYPH Epidemiology 1.3: Epidemiology of syphilis in pregnancy

Epidemiological indicator	Your estimates	Range	Regionmparison			
			Country	(Oceania)	Region	World
% of women attending prenatal care						
Data year						
% of women attending prenatal care tested for syphilis at the first visit						
Data year						
% of women attending prenatal care seropositive for syphilis						
Data year						

### **Congenital Syphilis**

SYPH Epidemiology 2.1: Data on affected pregnancies: Research studies

Study author, year, site	Sample size	Study quality and representativeness	Main findings

Based on the studies listed above (or in section SYPH-E2.1 of the Tool), enter the best estimates for the prevalence of affected births and stillbirths in the country, and a range of values to reflect uncertainty or within-country variation.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

	Number of affected live births	LB prevalence / 1000 TB	Comments
Best estimate			
Lower estimate			
Higher estimate			
	Number of affected stillbirths	SB prevalence / 1000 TB	Comments
Best estimate			
Lower estimate			
Higher estimate			

### Palau Congenital Syphilis SYPH Epidemiology 2.2: Data on affected pregnancies: Surveillance

Based on surveillance data, enter the best estimates for the prevalence of the condition in live births and stillbirths Give a range of values to reflect uncertainty and within-country variation, and use comments for information on data quality, uncertainty and representativeness.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

Estimates for the total country/territory	Number of affected live births	Birth prevalence / 1000 TB	Comments
Best estimate			
Lower estimate			
Higher estimate			

	Number of affected stillbirths	Stillbirth prevalence / 1000 TB	Comments
Best estimate			
Lower estimate			
Higher estimate			

# **Congenital Syphilis**

## SYPH Epidemiology 2.3: Data on affected pregnancies: Other sources

	Source 1:	Source 2:	Notes
Enter year and source of data – use last year with information available.			
Basic Numbers			
Number of affected live births / year, from data source			]
Total number of live births / year, from data source			
Number of affected still births / year, from data source			]
Total number of stillbirths / year, from data source			]
Total number of affected births / year (live and still)	0	0	Number of affected live births + Number of affected still births
Total number of births / year, from data source	0	0	Total number of live births + Total number of still births
Total number of women aged 15-44			]
Live birth prevalence: recorded and estimated			]
Recorded live birth prevalence (affected recorded live births / 1000 recorded total births)	#DIV/0!	#DIV/0!	
Estimated completeness of recording: what proportion of true affected live births in your data source were recorded?			Range: 0 to 1
Estimated coverage of recorded live births (number of recorded live births / total live births in country or territory)			Range: 0 to 1
Estimated live birth prevalence (recorded prevalence / completeness)	#DIV/0!	#DIV/0!	
Estimated true number of affected live births in data source (number of recorded affected live births / completeness)	#DIV/0!	#DIV/0!	
Estimated number of affected live births in total population (number of affected live births from data source / (coverage x completeness))	#DIV/0!	#DIV/0!	
Stillbirth prevalence: recorded and estimated			1
Recorded stillbirth prevalence (affected recorded still births / 1000 recorded total births)	#DIV/0!	#DIV/0!	
Estimated completeness of recording: what proportion of true affected stillbirths in your data source were recorded?			Range: 0 to 1
Estimated coverage of recorded stillbirths (number of recorded still births / total still births in country or territory)			Range: 0 to 1
Estimated stillbirth prevalence (recorded prevalence / completeness)	#DIV/0!	#DIV/0!	
Estimated true number of affected stillbirths in data source (number of recorded affected still births / completeness)	#DIV/0!	#DIV/0!	
Estimated number of affected stillbirths in total population (number of affected still births from data source / (coverage x completeness))	#DIV/0!	#DIV/0!	

Based on the sources above, enter the best prevalence estimates for your population, and a range of values to reflect uncertainty of estimates and within country variation.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

Estimates for the whole country/territory	Number of affected live births	LB prevalence / 1000 TB
Best estimate		
Lower estimate		
Higher estimate		
Estimates for the whole country/territory	Number of affected still births	SB prevalence / 1000 TB
Best estimate		
Lower estimate		
Higher estimate		

# Palau Congenital Syphilis SYPH Epidemiology 2.4: Summary of affected pregnancies

Indicator	Your estimates	Range	PHGDB minimum estimates	Chosen estimates	Range	Source
Number of annual affected live births						
Annual birth prevalence / 1000 TB						
Number of annual affected still births						
Annual Stillbirth prevalence / 1000 TB						

If there are specific sub-types of condition, you can repeat this exercise below. However, you should consider (a) whether subtypes would have different implications for advocacy, and (b) whether a sub-type might require a full, specific needs assessment.

### Palau Congenital Syphilis SYPH Epidemiology 2.5: Sub-population variation in affected pregnancies

If the birth prevalence rates vary by population sub-group (e.g. geographically or by another factor), indicate any population groups with different prevalence estimates from the whole population and describe reasons for variation. If a group is substantially different from the general population, you may wish to conduct a needs assessment for that group alone.

Population sub-group	Number of affected live births	LB prevalence / 1000 TB	Reason for variation

Population sub-group	Number of affected stillbirths	SB prevalence / 1000 TB	Reason for variation

## Palau Congenital Syphilis SYPH Epidemiology 3.1: Mortality data: Research studies

Source, year, site	Sample size	Study quality and representativeness	Main findings

Based on the studies above, enter the best estimates for the specific mortality by age-group e.g. infant, under-5s, etc., as appropriate, and a range of values to reflect uncertainty of estimates and within-country variation.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

Mortality estimates	Number of deaths	Ratio (deaths / 1000 LB)	Comments
Neonatal group (<28 days)			
Best estimate			
Lower estimate			
Higher estimate			
Infant group (<1 year)			
Best estimate			
Lower estimate			
Higher estimate			
Under-5 group (<5 years)			
Best estimate			
Lower estimate			
Higher estimate			
Other age group:			
Best estimate			
Lower estimate			
Higher estimate			

LB = live births

**Congenital Syphilis** 

SYPH Epidemiology 3.2: Mortality data: Vital registration data

Fill in the blank cells based on your vital registration data.	
Enter year and source of data	
Registered data	
Total registered live births	
Registered condition-specific neonatal deaths (first 28 days of life)	
Registered condition-specific infant deaths (first year of life)	
Registered condition-specific under-5 deaths (first 5 years of life)	
Registered condition-specific neonatal mortality ratio (condition-specific neonatal deaths /(Total registered live births/ 1000))	#DIV/0!
Registered condition-specific infant mortality ((condition-specific infant deaths /(Total registered live births/ 1000))	#DIV/0!
Registered condition-specific under-5 mortality (condition-specific under-5 deaths / (Total registered live births/ 1000))	#DIV/0!

Adjustment for under-ascertainment of cause of death and sub-registration of deaths: Enter estimates in the highlighted cells. It is not always possible to adjust the estimates, in which case you may give the value '1', accepting that the estimates in these cases will usually be biased towards low values. (Or you may move to the next section.) It is assumed that under-ascertainment is stable across age-groups; if ascertainment varies by age-group, you could use separate estimates for each age group.

Estimated completeness of recording: what proportion of deaths in affected persons were registered as such?		Range: 0 to 1
Population coverage: what proportion of the total country/territory population is covered by the vital registration?		Range: 0 to 1
Death ascertainment (population coverage x completeness)	0	
Estimated values for the total country/ territory population		
Estimated number of live births in total population (Total registered live births/population coverage)	#DIV/0!	
Estimated number of neonatal deaths in total population (number of deaths registered in neonatal period / ascertainment)	#DIV/0!	
Estimated number of infant deaths in total population (number of deaths registered in first year of life / ascertainment)	#DIV/0!	
Estimated number of under-5 deaths in total population (number of deaths registered in under-5s / ascertainment)	#DIV/0!	
Estimated neonatal mortality ratio (estimated neonatal deaths / 1000 live births)	#DIV/0!	
Estimated infant mortality ratio (estimated infant deaths / 1000 live births)	#DIV/0!	
Estimated under-5 mortality ratio (estimated under-5 deaths / 1000 live births)	#DIV/0!	

## Palau Congenital Syphilis SYPH Epidemiology 3.3: Mortality data: Other sources

Source, year, site	Sample size	 Data quality and representativeness	Main findings

Based on data from the sources above, enter estimates for the disease-specific deaths and mortality rates in your population.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

	Neonatal mortality		Infant mortality		Under-5 mortality	
Estimates for the total country/territory	Value	Ratio/1000 LB	Value	Ratio/1000 LB	Value	Ratio/1000 LB
Best estimate						
Lower estimate						
Higher estimate						

# Palau Congenital Syphilis

# SYPH Epidemiology 3.4: Summary mortality estimates

Indicator	Your estimates	Range	PHGDB minimum estimates	Chosen estimates	Range	Source
Year of data collection						
Number of annual deaths in affected persons						
Number of annual live births (in 1000s)						]
Number of annual affected neonatal deaths						]
Number of affected neonatal deaths / 1000 LB						]
Number of annual affected infant deaths						]
Number of affected infant deaths / 1000 LB						
Number of annual affected under-5 deaths						]
Number of affected under-5 deaths / 1000 LB						]
Mean life expectancy at birth in affected people						]
Other indicators (e.g. survival following surgical procedure, etc)						

# Palau Congenital Syphilis SYPH Epidemiology 3.5: Sub-population variation in mortality

Age group: neonatal Population sub-group	Number of deaths in affected persons	Cause-specific, group-specific neonatal mortality ratio / 1000 LB	Reason for variation

Age group: infant Population sub-group	Cause-specific, group-specific infant mortality ratio / 1000 LB	Reason for variation

Age group: under 5 Population sub-group	Cause-specific, group-specific under-5 mortality ratio / 1000 LB	Reason for variation

Age group: Population sub-group	Number of deaths in affected persons	Cause-specific, group-specific mortality ratio / 1000 population	Reason for variation

## Palau Congenital Syphilis SYPH Epidemiology 4.1: Population prevalence: Research studies

S	Study, year, site	Study quality and representativeness	Main findings
Γ			
Γ			

Based on the studies above, enter the best estimates for population prevalence, and a range of values to reflect uncertainty of estimates and within-country variation.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

	Prevalence / 1000 persons	Range	Comments
Best estimate			
Lower estimate			
Higher estimate			

# Palau Congenital Syphilis SYPH Epidemiology 4.2: Population prevalence: Other sources

Source, year, site	Sample size	Data quality and representativeness	Main findings

Based on data from the sources above, enter estimates for the disease-specific deaths and mortality rates in your population.

If studies are not representative of the national population you may need to weight your data (see the Guide for explanation on weighting and help with the calculations).

	Prevalence / 1000 persons	Range	Comments
Best estimate			
Lower estimate			
Higher estimate			

# Palau Congenital Syphilis SYPH Epidemiology 4.3: Summary of population prevalence

Source of estimates	Estimated total population number of affected persons	Estimated total population prevalence / 1000 persons	Range
1			
2			
3			
4			
5			
PHGDB			
Chosen estimates			

## Palau Congenital Syphilis SYPH Epidemiology 4.4: Sub-population prevalence variation

Population sub-group	Number of affected people	Total number of people in population sub-group	Population prevalence per 1000 people	Reason for variation
			#DIV/0!	

If there are specific sub-types of condition, you can repeat this exercise (copy table and paste below). However, you should consider (a) whether sub-types would have different implications for advocacy, and (b) whether a sub-type might require a full, specific needs assessment.

Formula in column D: Number of affected people/ (Total number of people in population subgroup/1000)

### Congenital Syphilis

SYPH Intervention 1:Effect of preconception screening and treatment on birth incidence of congenital syphilis

Baseline prevalence of syphilis in pregnancy per 1000 TB		
Variables		
Coverage of preconception screening		Range: 0 to 1
		Range: 0 to 1
Proportion of diagnosed cases receiving timely treatment		
Effectiveness of treatment (proportion of cases prevented among	those treat	Range: 0 to 1
Results		
% prevalence reduction due to PCCS & treatment <sup>1</sup>	0%	
Prevalence reduction due to PCCS & treatment, per 1000 TB <sup>2</sup>	0.000	
Final prevalence of syphilis in pregnancy after PCCS &		
treatment, per 1000 TB <sup>3</sup>	0.000	

PCCS = preconception care and screening

TB = total births (live births + still births)

<sup>1</sup>(Coverage of screening X Proportion of women receiving treatment) X Effectiveness of treatment

<sup>2</sup>% prevalence reduction due to PCCS and treatment X Baseline prevalence of syphilis in pregnancy

<sup>3</sup>Baseline prevalence of syphilis in pregnancy – Prevalence reduction due to PCCS and treatment

## Congenital Syphilis SYPH Intervention 2: Effect of PNS and treatment on birth prevalence of syphilis

	Range: 0 to 1
	Range: 0 to 1
1	Range: 0 to 1
0%	
0.000	
0.000	
	0% 0.000

PNS = prenatal screening

TB = total births (live births + still births)

<sup>1</sup>(Coverage of maternal screening X Proportion of diagnosed women receiving treatment) X Effectiveness of treatment <sup>2</sup>% prevalence reduction due to PNS and treatment X Baseline prevalence of syphilis in pregnancy <sup>3</sup>Baseline prevalence of syphilis in pregnancy – Prevalence reduction due to PNS and treatment

## Palau Congenital Syphilis SYPH Needs Assessment 1: Quantitative baseline

# Table SYPH-NA1a Burden of Congenital Syphilis in pregnancy, at birth and at population level

	Chosen estimates		Notes	
Indicator	Number (n)		Range of prevalence (/1000 TB)	
Annual affected live births (LB)	0	0	0	Drawn from sheet E2.4
Annual affected stillbirths (SB)	0	0	0	Drawn from sheet E2.4
Annual affected births (LB+SB)	0	0		Drawn from sheet E2.4
Annual affected persons (all age groups)	0	0	0	Drawn from sheet E1.1

# Table SYPH-NA1b Congenital Syphilis mortality indicators

	Chosen estimates		Notes	
Indicator	Number (n)		Range of prevalence (/1000 TB)	
Annual overall mortality	0			Drawn from sheet E3.4
Annual neonatal mortality	0	0	0	Drawn from sheet E3.4
Annual infant mortality	0	0	0	Drawn from sheet E3.4
Annual under-5 mortality	0	0	0	Drawn from sheet E3.4
Mean life expectancy at birth among affected people	0		0	Drawn from sheet E3.4

## **Congenital Syphilis**

## SYPH Needs Assessment 3: Quantitative assessment of interventions

Table SYPH-NA3a	Estimated prevalence in the absence of interventions for Congenital Syphilis		
Indicator	Number (n)	Prevalence (n/1000)	
Potential live births			
Potential still births			

Table SYPH-NA3b	Current situation in relation to interventions before birth				
Intervention	Coverage (%)	Cases averted (n)	Cases averted/1000 LB		
Effect of family planning, education					
Effect of preconception case detection and treatment					
Effect of prenatal diagnosis and treatme	nt				
Overall effect					

Table SYPH-NA3c	Target situation in relation to interventions before birth			
Intervention	Coverage (%)	Cases averted (n)	Cases averted/1000 LB	
Effect of family planning, education				
Effect of preconception case detection and treatment				
Effect of prenatal diagnosis and treatme	nt			
Overall effect				
Intervention				

Table SYPH-NA3d	Current situation in	Current situation in relation to interventions after birth			
Intervention	Coverage (%)	Cases managed (n)	Cases managed/1000 LB		
Effect of newborn diagnosis					
Effect of treatment					
Effect of social care and support					
Effect of rehabilitation					
Overall effect					

Table SYPH-NA3e	Target situation in	Target situation in relation to interventions after birth			
Intervention	Coverage (%)	Cases managed (n)	Cases managed/1000 LB		
Effect of newborn diagnosis					
Effect of surgical treatment					
Effect of social care and support					
Effect of rehabilitation					
Overall effect					

Table SYPH-NA3f	Current and desired outcomes			
	Current situation		Target situation	
Indicator	Annual number (n)	Incidence (n/1000)	Annual number (n)	Incidence (n/1000)
Estimated affected pregnancies				
Live births (LB)		0	0	
Still births (SB)		0	0	
All births (LB+SB)		0	0	
Estimated population prevalence		-		
All age groups				
Estimated mortality				
Neonatal deaths		0	0	
Infant deaths		0	0	
Under-5 deaths		0	0	