Executive Summary

- The HIV epidemic in Papua New Guinea (PNG) presents major challenges, including significant human resources challenges.

- A review of international literature identified some human resource challenges including the lack of trained staff, the large attrition rate of health workers due to poor working conditions and the uneven distribution of HIV health workers between private and public sectors. These challenges are also relevant to PNG.

- Some evidence is found that the focus on HIV workforce development in PNG has occurred at the expense of other health workforce areas.

- A research publication from the National Research Institute, PNG, surveying health workers in rural economic enclaves, noted that few staff had received the HIV related in-service training they needed. Human resource issues identified included inadequate staffing and absenteeism; isolation from the rest of the health workforce; lack of supervision, and irregular salary payments.

- Gathering information on the extent of training and the deployment and roles of graduates is essential to evaluating workforce effectiveness and for the development of human resources for health policy responsive to the HIV epidemic in PNG.

Human Resources for Health in PNG


The Draft World Bank Report [2011] documents the human resources for health (HRH) crisis in PNG. The report argues that the PNG government (GoPNG) must develop a fully-costed plan to expand training capacity, particularly of nurses and community health workers. This needs to include short-term training options, and the significant refurbishment of existing training facilities.

The report identified the need for government to explore options to retain medical officers, to encourage redeployment of existing staff to rural areas, and for new graduates to be deployed to rural areas with known staff shortages.

The report also identified that the ageing of staff in PNG will soon be a problem, and that a shortage of midwives has a particular impact on the capacity to prevent parent-to-child transmission of HIV.

National Health Plan 2011–2020

PNG’s most recent National Health Plan [GoPNG 2010] recognises an emerging crisis in HRH and makes specific recommendations on the way forward. It recognises that the health sector’s most important resource is its workforce and argues that human resources need to be strategically and efficiently placed:

Increasing population growth, impacts of new and emerging diseases, and changing patterns of behaviour leading to more lifestyle-related illness, continue to outpace the human resource capacity of the health sector to respond effectively to the needs of the people….. Combined with the declining state of health facilities and the inability of health services to meet the needs of the population, these factors have had a significant negative effect on the morale of health workers. [2010, p.15]

HIV and Human Resources in PNG

AusAID review of HIV training programs in PNG 2009

The review identified that the majority of training was provided by the National HIV and AIDS Training Unit, with in-service
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Clinical training by the National Department of Health (NDoH), in partnership with other implementing agencies such as the World Health Organization (WHO), non-government organisations (NGOs), community-based organisations and faith-based organisations.

International NGOs also provided a significant amount of training, using their own curricula, manuals and trainers in a range of HIV workforce related areas. The review demonstrates a wide range of agencies are involved at many different levels in the human resource response to HIV.

The most significant recommendation was that training programs needed to be re-oriented, based on a strategic assessment of needs which would reflect national and provincial priorities and new developments in the epidemic [AusAID 2009].

Implementation of the recommendations from the review has been impacted by the limited capacity within the NDoH and National AIDS Council to undertake such strategic assessment.

PNG Independent Review Group’s report 2011

The Independent Review Group’s (IRG) report [2011] indicated that health service staff in several provinces had maintained service levels in 2010 relative to 2008 and 2009, but there were common concerns emerging.

These included increasing STI and HIV patient loads with static or diminished staffing levels; insufficient space with occupational health risks for staff and patients alike; stock-outs of some drugs and repeated stock-outs of HIV test kits.

The IRG report noted that there is insufficient supervision at several levels (national to regional, regional to provincial and provincial to district) and that training, supervision and external quality assurance need to be expedited.

Issues of skew in HRH for HIV response in PNG

There are problems in meeting recurrent costs and absorbing staff positions introduced by Global Fund-supported activities and it has been argued that scaling-up in disease specific services in PNG has occurred at the expense of maintaining a focus on other health workforce areas, such as primary health care services [Duke 2008, Rudge et al 2010].

Other human resources issues

Health care workers in PNG’s rural areas are often isolated from professional peers and many have high levels of responsibility and leadership within the community. Some health staff struggle with reconciling their moral beliefs [Hammer 2008], socio-cultural pressures from the community, and their professional health promotion and public health obligations when addressing issues related to STIs and HIV.

Problems identified in HIV training

- Re-orientation of programs on a needs basis
- Limited capacity for strategic assessment
- No follow-up of those who have been trained
- Examination of effectiveness of HIV workforce not possible
- Evaluation and systematic planning not possible
- Inability to plan for HIV workforce development

Workforce issues

- Increasing patient load – static or low staffing levels
- Lack of space and occupational health risks
- Stock-outs of drugs and HIV test kits
- Skewing of health workforce
- Tensions between professional roles, belief systems and community expectations
- Formal training for managers lacking
- Understanding of PPTCT is limited

HIV Prevention in Rural Economic Enclaves: A Health Workers Baseline Survey

Research by Buchanan-Aruwafa & Amos [2010] provides important information and recent evidence about health workers and the human resources challenges in responding to HIV in PNG. The survey collected information in 2008 in five rural economic enclave areas across eight provinces in PNG, 141 health workers completed self-administered surveys.

The survey aimed to monitor and evaluate issues that impact on the delivery of rural primary health care, to assess the effectiveness of the health workers support system, and report on the response to HIV in rural Papua New Guinea.¹

¹This baseline report by the National Research Institute was carried out in collaboration with the National Department of Health, the Asian Development Bank, Barrick Kainantu Limited, Higaturu Oil Palm, Oil Search Limited, Ramu Agri-Industries, WR Carpenters, and selected rural health facilities including Hospitals, Rural clinics, District Health Centres, Sub-Health Centres and Aid Posts. Those interviewed included Community Health Workers, Registered nurses, Nurse Aids, Health Extension Officers and Aid Post Orderlies
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Context specific policy options need to be developed in relation to the following:

Workforce planning and deployment
• That the NDOH and National Aids Council investigate the potential for the central collation of information relating to national, provincial and district level HIV training programs and outputs.
• That the NDOH and National Aids Council plan for the expansion of HIV infrastructure and services proposed under the PNG Global Fund grants in a manner that prevents further stress on an already fragile health system.

Workforce management
• That the NDOH strengthen management systems to support health workers in the field by ensuring appropriate levels of payment and supervision.
• That a relevant research body initiates a study on the feasibility of task-shifting in PNG for addressing the problems of inadequate health staffing in HIV facilities in rural areas.

Training of personnel
• That NDOH develop a HIV workforce training plan which accommodates competencies needed for the prevention of HIV transmission and the provision of treatment and care in varied and complex cultural contexts found throughout PNG.
• That the NDOH and the National Aids Council ensure the coordination of HIV training inputs with the aim of producing an integrated workforce that achieves the HIV goals as stated in the current National Health Plan.

References


Further information
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