

HIV AND HUMAN RESOURCES CHALLENGES IN PAPUA NEW GUINEA: AN OVERVIEW



Technical summary

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The HIV epidemic in Papua New Guinea (PNG) presents major challenges, including significant human resources challenges. This report presents an overview of the available global literature on HIV and human resources, collates information on the workforce responses to HIV in PNG and highlights human resource issues specific to HIV in PNG.

The review of international literature identified some major issues 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 in both the private and public sectors.

Information available in PNG shows that the majority of human resource training was provided by the National HIV and AIDS Training Unit (NHATU) and the National Department of Health (NDoH) in partnership with other implementing agencies. Yet there is not enough information to plan for effective HIV workforce development; follow-up of those who have been trained has not occurred, and hence the contribution to services cannot be assessed.

The overview report concludes with a series of questions that relate to workforce planning and deployment, workforce management and training of personnel.

The international literature review demonstrates the value of gathering empirical data on the human resource challenges associated with HIV. 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.

THE INTERNATIONAL LITERATURE ON HIV AND HRH CHALLENGES

The deficiency of human resources for HIV has been described as a 'triple threat' [Chen et al. 2004] as it increases the workload of already burdened health workers, requires health workers to deal with patients in palliative care (and their families) and it can expose health workers to HIV infection. There are numerous other related issues: severe shortages of HIV health workers in many countries, lack of skills required to deal with an evolving epidemic

Public sector health workforce management processes create a number of difficulties, including a **limited capacity to respond effectively to changing epidemics and workforce needs**.

[UNAIDS 2010] and changes in epidemic responses [Chen et al. 2004; Dolvo 2005; WHO 2006a].

Summary of international literature

A number of issues arise from this review of the international literature on HIV and human resources including:

- insufficient training for staff in resource-limited settings;
- poor working conditions sometimes leading to attrition;
- uneven distribution of staff geographically and between public, NGO and private sectors, often as a result of salary differentials;
- the knowledge level of health workers in relation to HIV infection; and
- negative attitude of health workers towards PLHIV.

Internationally, with the imperative to continue and extend the provision of services, specific tasks have been delegated to less trained staff, and sometimes to community members; the response of 'task-shifting' has been adopted in various forms, either formally delegated by policy and supported by task specific training, or informally by community members taking on new roles.

HUMAN RESOURCES FOR HEALTH IN PNG

A draft World Bank Report [2011] documents the existence of a HRH crisis in PNG. Public sector health workforce management processes create a number of difficulties, including a limited capacity to respond effectively to changing epidemics and workforce needs.

In comparison, health services run by faith-based organisations (FBOs) have a greater degree of autonomy in managing their staffing. The FBOs operate 45% of all health facilities in rural areas and employ 23% of all health workers in the country [Churches Medical Council 2003].

The report notes that while the number of doctors trained per year in PNG is adequate to replace those due to retire in the next 10 years, the annual output of 135 trained nursing staff falls well short of the 191 needed. The gap is wider for community health workers (CHWs) as the present annual output of 149 is less than the 245 needed.

It argues that the Government of Papua New Guinea (GoPNG) must develop a fully-costed plan to expand training capacity, particularly of nurses and CHWs. This needs to include short-term options, and the significant refurbishment of existing training facilities.

It also 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.

HIV AND HUMAN RESOURCES IN PNG

Review of HIV training programs in PNG 2009

Findings of the AusAID funded, *Review of HIV Training Programs in Papua New Guinea* (2009) included:

- There had been no assessment of the quality and effectiveness of HIV training programs, nor had there been any documentation of numbers trained and their distribution.
- The majority of training was provided by the National HIV and Aids Training Unit (NHATU), with in-service clinical training by the National Department of Health (NDoH), in partnership with other implementing agencies.
- A wide range of agencies are involved at many different levels in the human resource response to HIV.
- 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

Independent Review Group's report 2011

Concerns noted by the Independent Review Group (IRG) report [2011] 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;
- insufficient supervision at several levels (national to regional, regional to provincial and provincial to district) and that training, supervision and external quality assurance should be expedited;
- both NDoH and National AIDS Council Secretariat (NACS) were undergoing restructuring with adverse impacts on human resources management and the morale of staff.

CONCLUSIONS

In identifying the HRH policy issues arising from this review, a number of general questions are posed that suggest areas for context specific policy options. These include:

Workforce planning and deployment

- What potential is there for the central collation of HIV training outputs and for the coordination of HRH for HIV workforce through national, provincial and district level planning?
- Given the expansion of infrastructure and services proposed by the Global Fund to Fight Aids, Tuberculosis and Malaria (GFATM) and others: How can PNG respond in a way that prevents further stress on the already fragile health system? Can agency coordination reduce new training infrastructure capital and recurrent staff costs?

Workforce management

- What management systems require strengthening to support health workers in the field by ensuring their supervision, payments and supplies?
- Is task-shifting a feasible strategy in PNG for addressing the problems of inadequate health staffing in rural areas?

Training of personnel

- How can the many training inputs be coordinated towards the production of an integrated workforce directed towards achieving the HIV goals of the National Health Plan? What coordination is needed for the many agencies involved in human resource inputs in the response to HIV?
- What sets of competencies are needed for the prevention of HIV transmission and the provision of treatment and care in the cultural contexts of PNG? How will these competencies be packaged into courses that maximise the use of resources and allow for deployment based on competency sets?
- Is there a need to develop a HRH for HIV workforce training plan?

ABOUT: The HRH Knowledge Hub

The Human Resources for Health Knowledge Hub was funded by AusAID in 2008 and forms part of the School of Public Health and Community Medicine at the University of New South Wales.

Our publications report on a number of significant issues in human resources for health, covering leadership and management, maternal, newborn and child health, migration and mobility, and public health emergencies.

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