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## **Media Release**

### **HIV Prevention in Rural Economic Enclaves: A Health Workers Baseline Survey NRI Special Publication 60**

Analysis of a new NRI report released today identifies how health workers in rural areas of Papua New Guinea are supported in carrying out their work and how they feel about the support they receive in government and church run facilities.

The findings of this report are essential for monitoring and identifying the issues that impact on the delivery of primary health care, the effectiveness of the health workers' support system, and how these relate to the response to HIV in rural PNG.

The data highlights challenges faced by rural health facilities including a lack of drugs and supplies, equipment, infrastructure, training and supervision to support them in the delivery of primary health care, universal precautions and STI and HIV related services. In 2008, most (81.2%) had run out of drugs in the previous year and most orders were not on time or complete. The system of supply and management of drug and equipment requires close scrutiny, as most is not getting to or maintained at the rural facility level.

While both men and women presented as victims of sexual assault, there has been the lack of anti-retroviral drugs - (PEP) for rape victims and for treatment of those living with HIV. Despite numbers coming for treatment, at the time of data collection, most health workers did not have access to the treatment for patients with sexually transmitted infections.

Causes of supply shortages and stock outs were identified from the level of medical stores, lack of transport, and how supply systems are managed. New options for drug, condoms and supply ordering and improved transport and delivery systems and release of funds, were suggested by health staff to improve the flow of supplies to rural area facilities.

Most health workers in the sample identified neglect, stigma and discrimination for people living with HIV in surrounded communities at the end of 2008, and highlighted the main areas for referral and needs for PLHIV. At the same time, some attitudes and the use of gloves unnecessarily indicates stigma and discrimination within health service deliver.

In 2008, most health staff at the time of data collection were frustrated with their work and did not feel satisfied and supported in their work. This report provides vital knowledge for those interested and involved in making improvements to the delivery of health services in rural communities and in the response to HIV in PNG.

The issues identified by this data highlighted how infrastructure and supplies impact on availability of broader public health and hygiene, and response to HIV in PNG with HIV testing and treatment, privacy of patients, access to drugs, condoms and universal precaution supplies critical factors when considering the response to HIV.

The baseline data also identified the potential for increasing health care delivery and the response to HIV in rural areas, when infrastructure, training, supervision, and support to health workers increased is increased. The NDoH and ADB HIV Prevention in Rural Enclaves Project works with provincial and church run health staff and facilities and the private sector within public private partnerships to improve rural health delivery. It would appear from the data that the benefits of project inputs were being seen early in project implementation in 2008 and upcoming evaluation will identify more sustained change.

The report argues that it is crucial to gather monitoring data around the delivery of primary services to monitor changes in access, training and service delivery and have evidence-based responses to HIV prevention with particular populations across Papua New Guinea.

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