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ROLES OF CHURCHES IN THE DELIVERY OF HEALTH SERVICES

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MEDICAL COUNCIL

Presentation Outline

- Brief Back ground Churches
- Where Church Health Services are now
- State/Church Partnership Arrangements
- Roles of Churches
- Way Forward/Recommendation

Brief Back Ground

- Churches arrived prior to the arrival and formation of the colonial era
- Churches have always been for the people and with the people
- High level of TRUST developed between the people and the Church
- Churches are here to stay

Where is CHS

- Today Churches provide for up to 50% of total health services
- 80% in rural –that's were our population is
- 100% of Community health Worker Training schools
 - the back bone of the health sector work force
- 70% of General Nurse Training Schools the 2nd in line from CHW

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- 526 Health Facilities supported by government grants
- 261 Health Facilities not supported through government grants
- 2921 Cadres of health professionals supported by government grants
- 432 Cadres of health professionals not supported through government grants
- 17 mission hospitals are not classified as hospital but as health centre.

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- Churches are a major partner in the delivery of health services for the people of this country, the same will be true for education
- Health and education are basic fundamental social services for any country and the churches have taken that on seriously
- Where the government cannot be, the churches are there

State/Church Partnership

- Agreement signed in 2008
- It was formal, today many churches are utilizing this avenue
- The MDG and MTDS as agreed by government is also a responsibility of the churches as
- The vision 2050 we believe by addressing the MDG and MTDS will eventually lead to a healthier, happier society for all citizens of PNG

The roles of Churches

- Apart from presenting the gospel of Jesus Christ: the churches can do the following:
- Advocate on behalf of the government on matters of great importance that will affect the livelihood of the people
- Implement key government planned program priorities and policy directives [health and education]
- Provide feedback where necessary to responsible government authorities for decision making
- Maintain a harmonious environment where communities can live and work

Current Challenges for Health Services

The problems are systemic and need systemic changes.

- HR management Issues Accountability & Work Ethics -Health Sector
- Finance (Salary/operational discrepancies), facility funding –no equating to functions. CHS 261 facilities not funded bulk from rural areas.
 - ✓ Operational Gov: grants 20-25%
 - \checkmark Salary NO Gov: 8.1 CHS 7.2
 - ✓ Allowances Gov much higher then CHS
 - Training institutions –salary issues, capacity & infrastructure concerns
- Population increasing at 2.7 or more %, we have aging work force. Nursing ,Medical Training Institutions not producing enough to cater this imminent crisis.

 Institutions are struggling to keep their operations forward due to; discrepancies salaries and operational grants, infrastructures and its capacity is on the decline.
- Health facilities standards needs to be applied. 17 CHS hospital
- Lack support from all relevant agencies (Edu; Law & order, Works)
- Need more staff to meet the demands (aging workforce, population increase, Imminent Health issues-HIV
- Corruption is impediment to quality life

Way Forward/Recommendation - Improve Quality Health Service

- 1. The policy frameworks that guides the state/church partnership needs to be widely circulated for maximum utilization
- 2. Christian Health Services is the legal entity that oversees all church health activities, therefore NPD and the Government needs to recognize this legal entity
- 3. Due consideration be given to all unfunded positions and facilities within church health services that is also their numerations be compatible with government workers

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- 4. Real change would need to address complete development in many areas. These would include: cultural changes in attitudes making it more desirable for citizens to have quality care and increased availability medical care, especially in rural areas,
- 5. Accountability in the health care system so that every health facility has health professionals available at all times. (PHA is a way forward).
- 6. Better training of rural staff to recognize problems early, better road and communication systems for easy and faster referrals,
- 7. Building more health facilities in rural areas, emphasis on training doctors for Rural and Remote medicine. CHP in the NPH is a way forward.
- 8. The government should treat the Christian Health Services as equal partners for salaries and operational budgets (half the health care in PNG is done by the churches).
- 9. Increasing nursing school programs upgrade its capacity and medical school numbers
- 10. Increase CMC staff ceiling- struggling to meet demands with current situation
- 11. Reclassify 17 CMC hospital to higher level and fund the accordingly.

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A CALL to Serve is CHS's Mission

