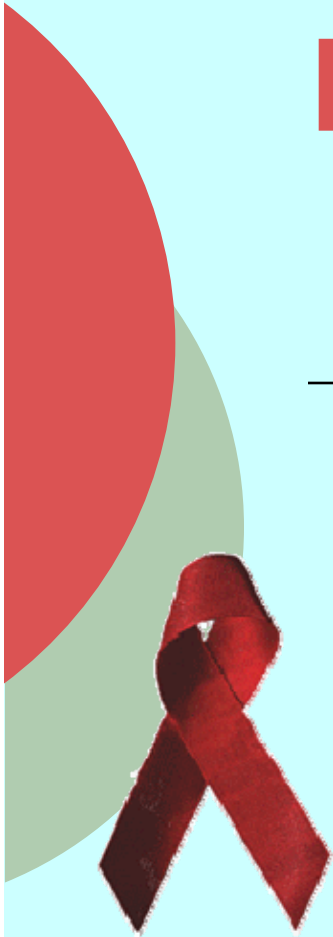


Human Resources and the NSP

Laetitia Rispel, Helen Schneider and
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*Presented to SANAC research
sector satellite session*

31 March 2009



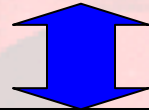
Outline of presentation

- **Background and context:**
 - **Structure of Research sector**
 - **Health systems (HS) sub-committee**
- **Brief overview of activities of the HS sub-committee**
- **Conclusion**

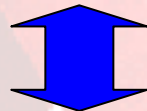
Structure of research sector

SANAC reps

Consisting of Overall chair and coordinator (Dr Shisana)
2 other reps (Prof Gary Maartens, Prof Helen Schneider)



Five technical committees, consisting of overall coordinator and representatives from different organisations/ interests (shown below)



Prevention

**Treatment, care
and support**

**Surveillance,
Monitoring,
Evaluation and
Impact
Assessment
Research**

**Human Rights,
Policy and
anti-stigma**

**Health
Systems
Research
(cross-cutter**

Other members of the research community

Main activities of the health systems sub-committee

- Initial consultation at June 2008 public health association conference to expand network of health systems researchers and to discuss possible focus areas
- After deliberation, decision to focus on Human Resources for Health
- Subsequent workshop on 19 August 2008

Why focus on HRH?

- **HRH= all people engaged in actions whose primary intent is to enhance health**
- Global recognition that Human Resources for Health (HRH) critical to health systems development and functioning:
 - Achieving the millennium development goals (MDGs)
 - Scaling up health interventions, notably access to HIV& AIDS programmes
- Global shortage of health workforce, but recognised crisis in low- and middle-income countries.
- Mexico 2008: HRH one of the most important issues in terms of the AIDS response, esp. achieving universal access to HIV treatment, care and support.
- Lack of human resources a major threat to the implementation of the NSP

The NSP and Human resource targets (1)

- Expand the human resource pool through increase production, retention strategies and partnership with providers
- Train primary health care providers, in particular nurses, to provide comprehensive care, including initiation of anti-retroviral treatment and strengthen support, mentoring and supervision of health care providers
- Recruit and train community care-givers with emphasis on men
- Ensure all community care givers receive nationally determined stipends

The NSP and Human resource targets (2)

- Remove regulatory barriers to HIV testing by lay counselors
- Develop standards and career pathways for counselors and community care-givers as mid-level workers according to the national qualifications framework
- Strengthen the support, mentoring and supervision of community caregivers
- Implement policies on occupational exposure to TB

Focus of August 2008 workshop

HRH, NSP and research

Lay
health
workers

Multi-
skilling/
Task
shifting

HIV, TB
and
health
workers

Monitoring and evaluation

Main outputs of workshop

Immediate: Collating evidence on:

- Effective and efficient allocation of roles in the health care team for the delivery of an integrated package of HIV prevention and care through the health system
- CHWs in the delivery of HIV interventions
- Modelling needs at a sub-district level

Immediate: Mapping CHWs in the South African health system

Medium term: Evaluating existing models of:

- CHWs
 - Interventions that address the needs of health workers
 - Health worker training on HIV
- Need to look at impacts, costing, factors enabling and constraining success

Specific studies: Medium to long term

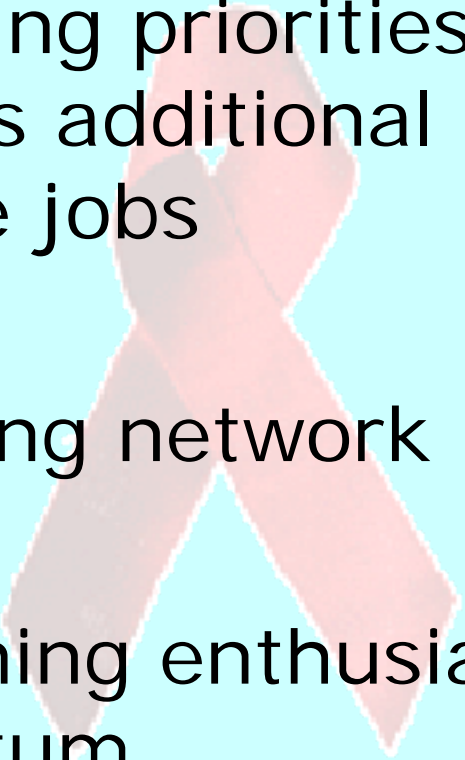
- National survey of management and supervision practices (as key to the sustainability of programmes)
- National survey of HIV and TB in health workers
- Intervention studies: Extending the involvement of CHWs in HIV activities (including HIV testing)

Progress with activities since workshop

- **Mapping** of community care giver programme practices in provincial health departments
- **Literature review** on: Primary Health Care Teams for HIV: A Review of the Literature on Task Shifting with Reference to Health System Implementation of South Africa's National Strategic Plan for HIV and AIDS (2007-11)
- **Annotated bibliography** on task shifting
- **Planning** of empirical studies on 'task-shifting/ appropriate utilisation of health care workers



Challenges

- Competing priorities, as HS activities additional to members' full-time jobs
 - Expanding network
 - Maintaining enthusiasm and momentum
- 

Conclusion

- Good progress has been made on an under-researched and relatively neglected area of HRH
- Committee keen to expand membership and to contribute to:
 - NSP and its goals
 - Work of SANAC and its sectors
- Feedback needed on next steps e.g. ? another broader workshop