

Conclusion

Moving Forward

The Government and nearly all its development partners are actively engaged in a process to define and implement a Papua New Guinea specific SWAp in the health sector. Special attention is devoted to ensuring that NDOH and other government officials retain the essential leadership role in moving forward. Efforts are made to ensure a broad participation of central government agencies including DNPM, DOF, DPALLG, and DPM in the process. The SWAp framework and principles presented above provide guidance accepted by all parties and allow for steady progress.

In laying the foundation to develop a SWAp in the health sector, HSDP undertook initiatives in key support areas, which contributed to the success of the overall program. Continued attention to these important support functions should remain an essential feature of the developing SWAp and HSIP. Some of these areas are covered below.

Governance Issues

The program of external audits has contributed much to broadening public sector recognition that governance issues are at the heart of poor performance levels in the health sector. This process, and the debate it fuels, should be maintained and supported.

The reform process underway in NDOH with the assistance of an international accounting firm also needs to be sustained. The progress to date is substantial, but a change in public service culture will require continued

assistance and the progressive and active involvement of the relevant government support agencies including DOF, DPM, AGO, Department of Intergovernment Relations, and others. A change in public service culture cannot occur, in a sustainable manner, in one government department alone.

There are growing influences which hinder and may oppose initiatives to improve upon governance and management. Opposing pressures include the rising consumer price index and weakening purchasing power of public servants' salaries, coupled with the poor management established by weak government leadership over the years. Cultural parameters such as clan affiliation and extended family are also, in the face of harsher economic times, creating greater and often conflicting demands on public servants, in health as in other sectors. For these reasons, it is important for NDOH and DOF managerial staff to travel to the provinces and provide a strong show of support for those PHAs and managers who are struggling to build up and sustain health systems based on sound planning and budgeting procedures.

Supervision and Continuous Support in the Provinces

Supervision and support by the HSDP/HSIP Secretariat of the PHOs and the PHAs have been very beneficial in most cases. However, there is a need to take this process further down the public health infrastructure pyramid to the districts and health facilities. Indeed, experience has revealed that the basic principles upon which functioning organizations and management are grounded are frequently lacking. These principles and their practical applications are best taught in an on-the-job, hands-on environment. While the HSDP/HSIP Secretariat endeavors to provide this type of support, a staffing level of six limits the coverage and time spent in each province. NDOH, which has a vested interest in improving performance at the decentralized level, should itself devote greater human resources and time to this function. The institutionalization of the Secretariat's function within NDOH is a prerequisite for moving toward a SWAp.

Transparency

HSDP established early on a policy of producing and disseminating information on as broad a basis as possible. This went counter to the not uncommon practice of producing information of limited scope for use in selective situations for purposes that might not entirely qualify as beneficial to the public health sector. In fact, HSDP helped place information in a new light, one where the discomfort of having one's performance rated and revealed began to be replaced by the understanding that this was a necessary step in identifying weaknesses in order to address them to improve performance. The information produced was standardized with regular periodic updates, and maximum exposure was given to guarantee HSDP was viewed as impartial and non-partisan.

With few exceptions, monitoring and information dissemination under HSDP served to create an environment of trust. The attention given to transparency and to resolving issues raised through the monitoring process also served to underscore the importance of the monitoring and information process. The useful application of information in the management process is acquired through practice. Only when managers have acquired this skill is the costly exercise of producing information justified.

Equilibrium, Unity, and Active Reform

HSDP has provided opportunities, which, during an unstable period of Papua New Guinea's history, contributed not only to the public health sector's steadiness but also to the ability to undertake a reform agenda. The challenges of the New Organic Law and decentralization were matched by the dynamic and consistent leadership of the Secretary for Health. Bringing together the provinces under NDOH leadership, HSDP provided not only much needed resources, but also management tools and supervision and monitoring and information sharing.

Both NDOH and the PHOs have improved their stature within their respective governments. The constructive dialogue undertaken with DOF, DNPM, DPMALLG, and AGO, among others at the national level, and with provincial governments at the decentralized level, has extended the list of stakeholders in public health.