

## How Feasible is the Integration of Test and Treat Program Into the Primary Care Setting in Bali, Indonesia? Human Resource for Health Perspective

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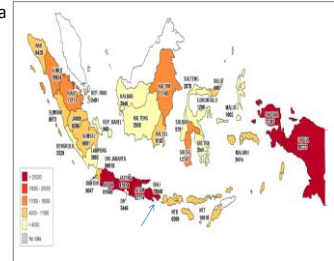
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## Background

HIV Epidemiy in Indonesia

- In 2012: 591.823 PLWHA
- Only 8% of PLWHA had access to ART

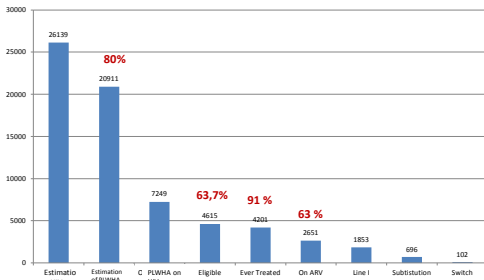


Source: Ministry of Health (2012)

HIV Epidemiy in Bali

- Until July 2013: 8003 PLWHA
- 3773 HIV, 4230 AIDS

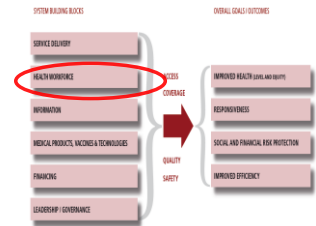
## Cascade of HIV Treatment Bali Province Until June 2013



Source: Bali Provincial Health Office (2013)

## Background

- In 2013, Indonesian Ministry of Health recommended the implementation of Test & Treat or SUFA
- Community Health Center ("Puskesmas") as ART satellites
- Implementation of Test & Treat in Puskesmas → ↑ demand of HIV services
- Vertical or disease specific intervention without adequate capacity of health system → weaken the health system (Atun 2008)
- Is Puskesmas ready?



Source: World Health Organization. Essential Services: Strengthening health systems to improve health outcomes—WHO framework for action. Geneva 2010: WHO; page 1.

## WISN Methods

- Descriptive study with quantitative and qualitative data collection approaches
  - > Study – Quantitative method:
    - The WHO's tool of Workload Indicators of Staffing Need (WISN) was used to assess workload of general practitioners
  - > Build up – Qualitative method: In depth interviews
    - Head of Puskesmas and District Health Officers.

WHO home page Help About



### Workload of GPs in 9 Community Health Care Centers in Denpasar, Badung dan Buleleng Districts

Institution	General practitioners			
	Existing (a)	Required (b)	WISN Difference (a-b)	WISN Ratio (a/b)
PKM 2 Denpasar Barat	1	2	-1	0,66
PKM 2 Denpasar Utara	1	2	-1	0,75
PKM 2 Denpasar Selatan	1	2	-1	0,49
<b>Mean of Denpasar</b>				<b>0,63</b>
PKM Kuta Selatan	1	1	0	1,11
PKM 1 Kuta	1	1	0	1,02
<b>Mean of Badung</b>				<b>1,07</b>
PKM 1 Buleleng	1	1	0	1,32
PKM 1 Sawan	1	2	-1	0,78
PKM 1 Seririt	1	1	0	1,27
PKM 2 Gerokgak	1	3	-2	0,45
<b>Mean of Buleleng</b>				<b>0,96</b>
<b>Mean of Denpasar, Badung &amp; Buleleng Districts</b>				<b>0,87</b>

## Results

- Limited human resources in Puskesmas → unoptimal service delivery → jeopardise the quality of health services in Puskesmas
  - Health workers in Puskesmas could not provide support and supervision for patients who are on ART
- Additional health workers was required but the supply of health workers did not necessarily match the Puskesmas' needs

## Results

- A quite high turnover rate of trained human resources, leaving the Puskesmas with limited capacity of human resources
- No mechanism to ensure that the new health workers have capacity on HIV management

## Results

- There was lack of human resources to deal with double burden of responsibilities, to carry out prevention and treatment responsibilities in Puskesmas:
  - GPs service activities including: general & HIV related medical services, managerial tasks (head of Puskesmas, program manager, quality control manager, out of the building activities (mobile VCT service, mobile health services)

## Results

- Almost all of the GPs admitted the lack of knowledge and skills in managing Anti Retroviral Treatment
  - All physicians felt unconfident of their ability to communicate with key populations
- ↓
- Perceived need for training to improve knowledge, skill on ART management & communication skill amongst physicians

### The Potential Impacts of Test & Treat Implementation in Human Resources for Health Constraint Setting

- Less optimum Test & Treat implementation could lead to:
  - ART failure
  - ART drop out
    - Pilot project of Test & Treat in YKP (9/11/2013-14/4/2014):
      - 59 FSWs had early initiation of ART
      - 23.5% drop out
- Potential impact to health services
  - Treatment focus → promotive and preventive efforts could be neglected
  - Low health care quality

## Conclusion

- Insufficiency of human resources for health in relation to HIV program in Bali is of a great concern, which might substantially hinder the feasibility of Test & Treat implementation

## Current Situation

- Pilot project of Test & Treat has been implemented in Denpasar & Badung Districts since mid 2014
- GPs in some Puskesmas have received training on CST
- Limited recruitment of health workers including GPs → insufficiency still exist
- Low utilization of ART services on ART satellites
  - Recently implemented
  - Stigma
- High drop out rate of ART despite of intensive supervision and support from NGO's outreach workers
- Donor funding stop → threaten the existence of NGOs & outreach workers → no ART supervisors → effectiveness of Test & Treat???

## Acknowledgements

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- Health Workers on Nine Puskesmas in Denpasar, Badung & Buleleng participating in this study

