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ABSTRACT (Track E) - ICASA 2013

The perceptions and experiences of Medical Technicians of decentralization of the ART programme in Mozambique.

Background

In response to the increasing burden of HIV/AIDS in Mozambique the Ministry of Health developed a national HIV/AIDS strategic plan which included broader access to Antiretroviral Therapy (ART) through the decentralization and integration of ART services into the essential health package at primary care level. A national ART programme was introduced in Mozambique in 2003 and was implemented in parallel to other health services offered at primary care level in Beira in 2006. In line with this initiative Medical Technicians assumed responsibility for first line ART prescription and management at these primary health care (PHC) centers across the country.

Aim & Methods

This study, conducted in late 2011, aimed to explore the experiences and perceptions of Medical Technicians of the process of decentralization and integration of ART services into primary level health centers in Beira. An explorative qualitative study, using a combination of key informant interviews, two focus group discussions with 15 Medical Technicians – with follow up interviews being conducted with 4 of the participants, was conducted. Data was analysed using content analysis.

Results

The study revealed that the decentralization process was viewed by many of the medical technicians as a very positive initiative in the country. However a number of operational and managerial issues need to still be addressed to ensure the effectiveness of the

comprehensive approach that was institutionalized and adopted by all PHC centres. Key amongst the issues that need to be addressed, from the perspective of the Medical Technicians interviewed, was that the workload of the health team at the PHC centres, and specifically that of the Medical Technicians, had increased without there being a corresponding increase in the health workforce to manage this patient load. This was perceived to have adversely affected the quality of care that the Medical Technicians were able to provide to patients, and specifically those requiring ART medication. Along with the logistical challenges (such as an interrupted supplies of ART medication and an inadequate infrastructure for private consultations) the medical technicians also received limited follow-up training and supervision. As a result of such factors, and the limited career options available to them, the medical technicians felt under pressure, and were at times were despondent and demotivated.

Conclusion and Recommendations

Putting in place appropriate human resource management and training systems is an essential responsibility of the Ministry of Health: the Ministry needs to ensure that their health workforce is adequately supported and motivated in the workplace. Providing medical technicians with ongoing support and supervision – given that they are one of the critical primary health care providers responsible for implementing the ART programme in Mozambique – is a priority for the future.

Recommendations emerging from the study included support for on-going training, regular supervision and addressing some of the Medical Technician's concerns regarding workloads and working conditions.