

Funding delays lead to stop work action by church health services



(left - right): Sr. Jadwiga Faliszek (CCHS), Japalis Kaiok, Chairman CHS, Rev. James Koi, Deputy CHS Chair, Bishop Francis Meli, (CCHS) and Ulch Tapia CEO CHS during the media conference

A FIFTEEN working days ultimatum has been given to the government of Papua New Guinea to pay all outstanding salary and operational grants as per the 2020 budget appropriations for Church Health Services nationwide or there will be an indefinite stop work by church health workers.

The delay in funding are from the months of February to June 2020 for Christian Health Services (PNG) and the National Catholic Church Health Services (CCHS) making up Church Health Services in the country.

A formal notice as of 10th June 2020 from CHS PNG and the National CCHS was served to the government of Papua New Guinea through the National Department of Health detailing the actions leading up to the possible stop work.

Funding delays has impacted negatively on health service delivery throughout the country forcing many health facilities to scale down operations only attending to emergency cases and laying off workers who could not be paid. The notice stated:

1. Immediate release of all outstanding salary and operational grants for Church Health Services for the months of February – June 2020 as per 2020 budget appropriation.
2. Immediate release of all outstanding operational grants for all church run health worker training schools from 2017 – 2020
3. Stop Work Notice:

a) As of Wednesday 10th June, 2020, 15 working days are given for the government to release all outstanding salary and operational grants for Church Health Services in PNG as per 2020 budget appropriation

b) All outstanding operational grants for Church run Health Worker training schools in PNG from 2017 -2020

c) Indefinite STOP WORK to commence as of 8:00am on July 3, 2020 until all outstanding operational and salary grants are paid in full and cleared by banks

d) Government to consider fast tracking of Allesco Payroll roll out to minimize such actions from Church Health Services.

In a joint media statement, CHS (PNG) and Catholic Church Health Services (CCHS) agreed to hold a proposed stop work of all 508 CHS health agencies and facilities including Catholic Health facilities and all church training schools.

"This is a very sad state that we are in and we cannot force our health workers to continue working like this. As church health services in the country, we have values and we have norms that we drive in supporting the government in health service delivery," said CHS Chairman Japalis Kaiok.

"It is not easy for us to do this but with regards to our values and beliefs we need to release this statement to the government so they know where we stand," Kaiok said.

Catholic Health Board Chair Bishop Francis Meli reiterated his supported saying it had come to the stage where church health workers could no longer continue working in this manner and their patience had slowly run out.

Bishop Meli said: "Church run health facilities have ethics, values and morals. A stop work action shows that our patience is exhausted and we have been forced to do this."

The media statement highlighted the reality of funding constraints to respective line agencies describing it as "extreme injustice in nature and is not in the true spirit of cooperation and partnership"

The statement said CHS in the country could not continue to provide lip service to its employees in relation to unpaid salaries and they faced a severe challenge as never experienced before.

The issue has been raised with NDoH and also the political level but the situation continues to worsen at the service level of the agencies. Health workers had not been paid their dues for over four months and had been living on borrowed money (credits) and garden food. The continuous downplaying of the church health service situation is seen as unethical thus resulting in the proposed stop work action.

(continued on page 6)



Japelis Kaiok
Chairman, Christian Health Services PNG

From The Chairmans Desk...

Hello everyone, from the Chairperson's desk and the Executive Board members, we greet you all and continue to thank you for your serving attitude despite all the trying times faced in the midst of Covid 19 and the major effect on the GoPNG Church Health Grant cash flow irregularities.

Let me take my cap off and humbly on behalf make special mention of our doctors.

I am at all times in admiration of the hearts of our doctors, both missionaries and nationals who refuse and deny their rights to almost everything any other doctors can enjoy and sacrifice their hearts and time to the course of God's calling of their work in CHS (PNG).

I understand they are our minority of health professionals yet I am sure you will agree with me to give them due respect amongst many of you committed HEOs, Nurses, CHWs, administration and management officers, missionaries, drivers, carpenters – all of you out there who continue to serve our people.

Many, many blessings from God to your needs at this time and throughout your work and family.

Secondly, let me come back to the unfortunate issues we all have faced this year and unpredictable in the coming months to next year.

The Executive Board after the second meeting came to halt with the restrictions of Covid-19. Some of the decisions passed were effected by the secretariat through the office of the CEO while those that involved agencies came to a stand still.

The next wave of Covid 19 was/is unpredictable and has further caused other additional decisions at the level of the Executive Board all through to now.

Then came the major effect on the slow and irregular funding flow of GoPNG Church Health Grants.

This was a huge blow to most of the agencies and the impact of service delivery, thus the Executive Board took

the stand to voice our concerns through various mediums of media, both written and press to express our dissatisfaction and ensure government respond to the demands of basic health services by CHS PNG amidst the Covid-19 concentration. All that has transpired are not news within the CHS network as you all are very much aware.

Of those two very important yet disturbing agendas that came our way this year 2020, the Executive Board would like to take this time to express high gratitude towards each agency for taking the bold stand also against those odds in opening doors of services to that. I have been very well informed of the survey report that indicates your heart to the people of PNG with your responses of about 70% stating to allow services to continue while you wait for your pays of which the Board and I are very proud of you. I

It reminds me again of the moral obligations of which our conscience was kept morally right and free despite then strangling issues that we have survived by God's great mercy and love, for He sees the desires of our heart. The Executive Board salutes you all.

Upcoming national events have been cancelled through Board decision especially on the 50th CHS Anniversary celebrations and general meeting of which you have noted on the internal circulars sent.

The Executive Board is working closely with our CEO and his secretariat on what events and situations will evolve out of the current Covid 19 situation and its impact of health and economy that will further affect the GoPNG Church Health Grants for the remaining months of 2020, therefore the Executive Board supports the call from our secretariat office in the appropriate use and sound management of the funding you received so far.

The onus is on you to ensure your monthly reports are being sent in order to provide adequate statistics as and when we need them to fight for funding needs.

It is also our agency obligation to report all government funding as stipulated in the CHS PNG Act and CHS Constitution. Currently the Covid-19 situation is still unpredictable with warning increases in case detection in Port Moresby of which our CHS PNG secretariat are also affected

for general business.

It is an appeal that all agencies are aware of and the expectations of response and other work related matters that you might expect of the CEO at his team at the secretariat level. Please take heed of instructions sent to you all via various circulars.

It is a challenge to all managers at all our training schools of which CHWTs are severely affected along with General Nursing training schools.

The Executive Board do extend appreciation to your Board of managements and School Administrations in carefully managing the affairs and continuing the school year. Continue dialogue with the CEO - CHS (PNG) and NDoH, office of Higher Education.

The welfare and health aspect of the general workforce of CHS (PNG) is and will be a great deal of challenges given the Covid-19 situation.

It is also an appeal to CHS agency managers to take serious management of your workforce and ensure personal, public and workplace safe health practices a must especially in their work place and work place residential areas guided by all the information of Covid 19. I support the call by the National SOE Controller, National Health Secretary and other like minded responsible officers that have been appointed to address the Covid-19 pandemic and our Prime Minister Hon. James Marape to take those simple healthy message (NUPELA PASIN) and be obedient.

The Chairman's Desk at the Executive Board also call against and forbid any conspiracy theories within the CHS (PNG) alliance that will aggravate the level of negative influences on best health practices that will save lives by encouraging obedience rather than increasing ignorance putting everyone's life at risk.

We continue to stand together as one body... CHS (PNG) in these trying times and our undivided spirit in Christ's healing Ministry to serve until his own timing where peace will once again be restored in the current challenging situations.

Blessings to you all.

Japelis Kaiok
Chairman, Executive Board, CHS PNG

Ward Member keen to adopt EDEN concept



EDEN Community Training participants at Manubada

A WARD member has expressed that he wants to see the lifestyle of his people changed so they can live healthier and happier lives as part of integral development.

Manubada Ward member, Alotau District of Milne Bay, Clifford Taumomoa said this during the launch of the Christian Health Services Health Promotion EDEN concept program on Sunday 23 February 2020 at Manubada village.

"We are way back in health. I want to adopt the EDEN Concept so that change can happen and at the end of the day we as a community will all benefit from it. We wanted change and now we will make it happen" Taumomoa said.

The Church run Effective Development Empowering the Nation (EDEN) program is also known as the Healthy Island Concept by the government, the only difference being the holistic or biblical approach, which CHS has captured in its training.

The EDEN concept aims to change the mindset of health workers and community to be more preventive focused instead of curative focused, empower individuals and community to realize their full potential by using the available resources to bring development and strengthening the ward development & planning

process linking the EDEN concept to a legitimate system.

Manubada Ward is a catchment area of the Anglican Health Services Milne Bay and in partnership with the Church Partnership Program had identified the need for the EDEN concept to be implemented in the Anglican Health Services catchment communities in partnership with CHS (PNG).

Health Program Coordinator for Anglican Health Services Milne Bay Newton Orowari said he had been keen for this concept to be brought to the people as he had seen the struggles of lifestyles especially health wise.

"We will not sit around and wait for things to happen. We will not wait for government or district to help us. It starts with us. We have to go out and make that change. And we have to sweat in order to receive," he said.

The Church Partnership Program in partnership with Anglican Health Services and CHS enabled the week long EDEN Training for health workers of the AHS and community awareness at Manubada and other surrounding villages in the same ward.

Anglican CPP Coordinator Michael Ambo said CPP was looking at supporting self sustained projects in the community

under CPPs five main thematic areas which are Health, Education (adult literacy), Gender Equality, (GBV) Disaster Risk Reduction (DRR) and Peace & Prosperity in which the EDEN concept came under the health thematic area.

"You cannot change a community unless you as an individual change," Mr Ambo said during the official program launch. "EDEN is a simple but very powerful concept that will help you to realize your potential. Change and development starts with you first."

Also at the launching Alotau District Administrator Lindsay Alesana, who acknowledged the work of the churches in the Wards and Province of Milne Bay as a whole and said his office would support the EDEN concept in the communities in the Alotau LLG.

"The current mindset of the people is that the government will provide everything, you know the handout mentality, waiting and expecting things but I know that through the EDEN concept, this will change."

Anglican Health Services Milne Bay in partnership with CHS and CPP facilitated the week long training at Manubada where the community was empowered to change and develop themselves individually and as a community.

CHS Secretariat

Health Checks to become "new normal"

ROUTINE Health checks will now be part of the "new normal" way of operating at the CHS Secretariat.

The Human Resource (HR) team at the Secretariat office embarked on doing the preliminary basic health checks (height, weight, blood sugar level, blood pressure reading) and Body Mass Index (BMI) of all staff at the national office after resuming work after the Covid-19 shut down.

The health check included the CHS Security guards as well.

Executive Director Ulch Tapia commended the HR team for coming up with the initiative saying it would become a routine activity at the Secretariat.

"From the outside you may look healthy but inside you never know. Its always good to check your vitals not to alarm or scare you but for you to know if you need to improve your lifestyle," Tapia said.

Amongst the CHS staff are a few with health backgrounds including Mr Lengi Derring, who was formerly at Gaubin CHW Training School in Madang as Principal and also on the CHS Executive Board.

Mr Derring who is now the CHS Training School Coordinator also has a health background and with the HR team took charge of conducting the health checks for all CHS staff and security guards.

"These are routine health checks and its always good to start somewhere. Dont wait untill you have high blood pressure or collapse to change your lifestyle. Start now because prevention is better than cure," Derring said. The Covid-19 pandemic and the "new normal" way of doing things has also challenged the secretariat staff to take ownership of their own health in small ways individually and as a team.

The Secretariat office has also come up with safety measures in line with Covid-19 safety requirements including hand washing facilities, temperature guns and thermometers issued for taking temperature readings for visitors and staff and basic personal protective equipment (PPE) of hand gloves and face masks



Blood Pressure check



Blood Sugar Check



Height and BMI



Members of the HR team preparing to do health checks

Diverse yet one in unity

Christian Health Services (PNG) was privileged to have Ps. Dulie Asi of United Church Port Moresby come to the office to dedicate the new office vehicle in April this year.

Ps Dulie said CHS (PNG) was blessed in the work it did in the health ministry throughout the nation where ownership is a challenge.

"We are so diverse yet one in unity and work together for the cause of the gospel. We must have the spirit of compassion and humility.

He encouraged secretariat staff that amidst the confusion and uncertainties happening in the world around everyone today including the Corona virus pandemic, they needed to remain focused and have one mind, one purpose and one cause in the work each one was called to do.

He said: "Do not be out there for for your own selfish ambitions rather be humble in spirit. Do not look at your own interest but look out for the interest of others."

Ps. Dulie said helping and serving others went a long way but could go down with selfish ambition if individuals were not careful and got carried away with their own selfish ambitions.

"It is my prayer that the mind of Christ will lead you all. You have a purpose to serve the people of this nation and work together with one heart and one mind," he added.

He said staff in their own little ways and in their individual roles in the organisation were fulfilling Gods calling for them in the health ministry and they could work with compassion and humility knowing they had been called for a greater purpose

Ps Dulie dedicated the new office vehicle and the eight new staff who recently joined the national CHS Secretariat with words of encouragement and blessings.



Anglican Health Service health staff doing a role play of the paralytic patient

Using available resources to bring positive change

"Mindset is a very big problem today. We cannot see development unless we change our way of thinking and doing things."

Nickson Samblap, Health Promotion Officer for CHS (PNG) said this during a week long EDEN training in February this year organized by the Anglican Health Services at Manubada village, Milne Bay Province.

Development is change and improvement to the lifestyle setting that you are in, he told the participants who consisted mainly of the community and health workers from Anglican facilities.

Capturing the story of the Paralytic Patient (Luke 5: 7-26) in a role play, health workers from the Anglican Health Service facilities enacted the story to really bring the mindset of participants to understand the concept of understanding their potential, taking ownership and looking for creative solutions.

The paralytic patient identifies a problem or issue in the community, the four friends represent the community and Jesus speaking to a crowd. The four friends saw their friend was very sick and heard that

Jesus was teaching and thought if they took their friend to see Jesus he would get better.

Realizing there was a huge crowd, they could not make their way in to bring their friend to see Jesus. After trying all means and ways to get in, they broke the roof and lowered their sick friend down at the feet of Jesus. Upon seeing this, Jesus saw their faith and told the paralytic person that his sins had been forgiven and he had been healed.

Relating back to the story, Mr Samblap explained that in the communities, there would be problems, issues and difficulties but together as a community they could overcome these challenges by using their available resources to help each other and the community to bring positive change.

He said that community awareness was important when trying to break barriers and change mindsets.

This has enabled people to identify the issues in their communities that are affecting them and the consequences they currently faced with the motivation to change.

Partial 'Stop Work' marks history in 100 years of CHS existence

By Nidra Kewere

Friday 3rd July marked a sad day in the history of Christian Health Services (PNG) as notice of a 'Partial Stop Work' was circulated through all church health Agencies and facilities in the country.

This is the first of its kind to happen in the 100 years of uninterrupted health service to the people of Papua New Guinea in light of the delay in church health operational, salary and training school grants from the government for the last five months.

The government was given a fifteen-day ultimatum on June 10th by CHS (PNG) to pay all outstanding money owed to CHS (PNG) or health service would be disrupted by a stop work.

This would have catastrophic consequences for the majority of the population in rural and remote areas as church health services provides more than sixty percent of health services in the country and the partial stop work has already received mixed feelings for the health workers.

The CHS Executive Board authorized the Partial Stop Work by 4:06pm on Friday 3rd July relaying the announcement to the CHS network.

Conditions of the partial stop work include skeletal staff to be rostered to provide:

- ❑ New attendances at OPD 8:00am – 4:06pm
- ❑ Accidents and Emergencies including lifesaving surgery
- ❑ Deliveries of mothers in labor
- ❑ Admission and inpatient care of acute medical and surgical cases
- ❑ All surgical emergency anesthetic and operation theater services
- ❑ All emergency and acute case related laboratory tests
- ❑ All emergency and acute case related imaging services
- ❑ All emergency referrals
- ❑ All CHS hospital hygiene and sanitation on a rostered scale down to three (3) days a week
- ❑ All CHS health facility security

personnel must be maintained at all times

- ❑ Ambulance to be on standby for obstetric, medical and surgical and A & E only

The 508 CHS health facilities throughout the country in adherence to the notice given will STOP in providing following services:

All OPD reattendance, all MCH services, all consultation services, all elective surgeries, all dental services, all laboratory service except for emergencies, all pharmaceutical services except for emergencies, all inpatients except for emergencies and acute patients, all imaging services except for emergency and acute patients and all public health services.

Training Institutions will stop all tutorials and the supervision of students on placement and issue self-learning work to substitute tutorials.

The 'Partial Stop Work' will be lifted when the PNG Government through the NDoH immediate, release of salary grants for March, April, May and June 2020, immediate release of operational grants for May and June, 2020, immediate release of Training School operational grants for 1st and 2nd quarter of 2020.

Should this not eventuate, an indefinite full 'STOP WORK' will commence as of 8:00am on August 3rd 2020.

In light of the funding situation, the CHS Executive board has called on the government to fast track the implementation of NEC decision # 375 of 2013 for CHS agencies and health workers to be managed on centralized government payroll.

This action has received mixed feelings from church health workers who, whilst committed to serving the people, also have to manage their basic daily needs without any income support.

Chairman of CHS Mr Japalis Kaiok said this was the first of its kind to happen in the history of church health services -and CHS had been a committed partner to the government in terms of Health Service

Delivery to date thus the consequences of the non-receipt of grants for long periods had forced such actions from CHS.

The decision to seek the attention of the government was well thought about and actions following were based on an actual survey carried out in all CHS agencies.

More than half of the CHS health workforce has agreed to a full stop work due to the delay in government funding.

The other half have agreed to a partial shutdown of services mainly OPD.

Other than that, less than half of the work force have indicated that accident & emergency services and deliveries should continue as normal.

As the funding situation still remains unclear, staff morale's are low and their livelihoods have also been compromised as a result of no pay. It is quite clear that a "stop work" action is supported by agency health managers and church leaders and while it leaves Christian Health Services no option, the government must realise that health services cannot be given **cont** without being compensated for.

Christian Health Services is saddened that such circumstances are beyond their control.

Whilst only so much can be done, their only hope is that the government realises the vital services CHS provides especially in health and that the majority of the population mostly in rural areas rely on this important service.

To deny them the right to basic health services would be seen as unjust and unfair treatment for where the government is not able to provide such service, the church is there. And as such, CHS is an equal partner with the government in health service provision.

CHS (PNG) training institutions - 15 CHW schools and 4 General Nursing schools will also scale down services in the same regards.

The training institutions have been receiving funding cuts since 2017 and this has badly affected not only their training programs but quality of training offered

under such constraints.

Few schools have lapsed their programs into the next academic year causing clashes with the new academic year programs.

Four years of inconsistent and reduced funding has placed much burden on the training schools to efficiently run their programs.

As part of the Partial Stop Work, All CHS Training Institutions will stop all tutorials and training supervision of students on work placements and issue self-learning work to students.

This is quite a sad situation as training of the health work force is a primary factor in producing qualified and trained health professionals.

The impacts of the Partial Stop Work action can be felt out in the provinces where the bulk of health services are delivered. While health workers cannot continue to work without being compensated, they have the heart to serve the people as it is what they have been called to do and will do so with compassion and humility.

As health facilities scaled down services, the news of the church health services partial stop work was received and relayed various forms of media.

There were mixed reactions from the people but most agreed that churches did play an important part in health service delivery and was seen as a major partner to the government in this regard. and called on the Health Department to address the issue.

Health Manager of ECPNG (Hela) Keith Kedekai said the partial shut down would cause chaos in Hela where tribal fights are a constant issue and enemy tribes would not go to each others villagers to seek medical attention at the health facilities.

Mr Kedekai said church health workers in the province were sad and frustrated to have to scale down operations but they also understood the rationale behind it.

"it is sad however that the people in need of medical attention will be greatly affected and I urge the government to rightly fix this issue by paying all outstanding funding for CHS."

Meanwhile, media reports have stated that K20 million had been released in the week following the partial shut down with K12 million going to CCHS and almost K8 million for CHS. It is understood that almost K60 million is what is owed to CHS.

Embracing technology to improve service delivery

THE INTERNET and evolving technology is globally changing everyday.

And while the more developed countries have the opportunities of exploring different ideas because they have the resources and financial support to do so, third world or developing nations may be limited in this sense.

Kacific, an international broadband satellite group is committed to providing affordable internet in the country and has a goal of providing internet service to CHS (PNG) health facilities in the country.

Kacific PNG Regional Director Josephine Makeso Baig in a recent meeting with the project team at the Christian Health Services National Office said Kacific aimed to empower local SMEs or local ISP providers by providing affordable internet services. "Kacific wants to empower the rural marginalised in the Asia-Pacific region and in key areas of health and education. And we want to be able to provide this service to health facilities of CHS in the provinces," she said.

Kacific has engaged local internet service provider (ISP) "Em Stret" to facilitate setting up of twenty terminals (or VSAT) dishes at identified CHS facilities throughout the country.

Currently, the CHS Secretariat is identifying which facilities that would be the recipients of this service.

This internet service operates on power and such can be able to work at a health facility with electricity, solar power or generator.

Josephine said: "This is our time to make it or break it. We have this opportunity to make use of such

service. With health, you can do many things, if you have proper communication services where health professionals can tap into. There are opportunities to do e-health and telemedicine and provide internet through Wi-fi if you tap into such avenues."

She further said reporting systems were not really working and that as such lots of good work had been done at the facility level but there was no proper tool to capture and report feedback of health activities.

"Coordination is an issue. There is lots of good work done but reports are not streamlined so the government and other stakeholders do not know what health is doing. Yes they may appear to be complacent, but on our part... we must not give up."

Kacific is offering three months free wifi to the facilities that will host the terminals and after that there will be an affordable monthly fee to be paid. Again facility OICs that would be in charge of this service would be responsible for generating income through the sales of wifi cards.

The broadband satellite service can cover a 500 mile radius and is feasible for community wifi or internet. Wifi cards will be provided and sold at the health facility and the onus would go back to the health facility person in charge to manage the takings.

Josephine added that this was just the start of a good partnership with Kacific and CHS.

The CHS Secretariat is exploring options that will benefit the health service as a whole and is liaising with different potential partners to support its activities.

Health Promotion

Change, development and the power to influence



United Health Services team from Central province

A PERSON has the power to influence another when change is imminent. And being agents of change in the community starts with being a role model individually, followed by the family setting and community.

This was the key message delivered to health professionals at the CHS Effective Development Empowering the Nation (EDEN) TOT training organized by United Health Services Central province and CHS (PNG) for its health workers at the end of May, 2020.

The training, which was held at Kwikila in the Rigo District of Central Province saw health workers, volunteers and community representatives from United Health Service facilities as far as Mailu, Abau and Hula attend.

“Change starts with you. You cannot be a role model in your community if you do not change yourself. Otherwise how can you convince someone to change if

you are doing the total opposite of what you preach,” said CHS Health Promotion training coordinator Mr. Nickson Samblap. The training which comes in two parts targets wholistic mindset change and the planning process and legitimate systems. Participants could really see the importance of being role models and their mindsets were changed, many admitting that they had many lifestyle habits that they had to give up.

Mr Samblap encouraged participants that in order for change to happen, they had to sacrifice some things in life to allow for that.

United Health Services East Papua Circuit Health Manager Rev. Kila Gere had been convinced after attending the annual EDEN conference in November 2019, in Goroka that the EDEN approach was the way forward in preventative health more so in his catchment area where many communicable but preventable disease

are on the rise.

“This training is the first of its kind here in the East Papua Circuit. I have been convinced that there is no other way for health but through this concept. Prevention is better than cure.”

Participants also agreed that many had gone for trainings from donor partners working in the area but the EDEN training was different and unique because of the wholistic aspect.

Their mindsets had been changed and they could now see the areas in their lives that needed changing including chewing betel nut and smoking.

The health workers were empowered to start the EDEN approach in their respective catchment areas and see change and development individually, in their families, in their catchment areas and health facilities.

This is the first CHS training to be held for United Health Services, Central Province.

Linking the EDEN approach through legitimate systems

USING existing legitimate systems to link the EDEN (Healthy Island) approach in the communities is what is making this concept work in communities.

Christian Health Services Health Promotion Training Coordinator Nickson Samblap told health workers from the United Health Services, Central Province in a recent training that the EDEN approach did not work outside but was linked through the systems that were already in place.

The second part of the EDEN TOT training looks at the planning process linking this approach through the Ward Development Communities, Local Level Government (LLG), Provincial level Government and upwards.

The training explores the difference between Top Down and Bottom up planning and why the systems work for some and don't work for the most part.

"EDEN empowers people to take ownership of their projects and what they want to see in their communities. When they use the legitimate systems and their own available resources, they have a sense of ownership of what they do in their communities," Samblap said.

Participants could see that while the existing systems were good and there were some services delivered, the bulk of the people did not see or experience change and development in their communities and they had been waiting and waiting and continued to wait for services.

The CHS Health Promotion EDEN approach empowers people to recognize their strengths and use their available resources to help themselves instead of waiting for money, from their local members or the government and having the "expectation mentality".

Those who attended the training were greatly interested in the Planning process and function of the Ward Development Community (WDC) at the village and community level and how the EDEN approach addressed community issues using the existing system.

United Health Manager, Central Province Rev. Kila Gere said: "EDEN is a powerful approach. For most of us here in this training, we can now see the missing links in our catchment areas. We have all been empowered to go back and do the right thing."

Bad, corrupt and selfish leaders was one of the issues identified during the training and there were sessions on Good and Bad Leaders, which participants were taken through to understand the characters and qualities of good leaders and bad leaders when electing people to manage community affairs.

Voicing opinions of the EDEN approach....

Victor (Volunteer AHS Milne Bay) said: "The expectation mentality is big here. The community and the leaders want to receive only. I think through the CHS EDEN program, they have now seen that they have potential and can use their available resources to help themselves.

Christopher Mitau: Cape Vogel (Wabubu LLG), Volunteer Tarakwaruru HC and community

Christopher worked seven years at the Milne Bay Provincial government before resigning and going home to his village to work full time as a volunteer.

"I saw the need especially with the youths to help them in little community sustainable activities because they seemed to have no direction in their lives. I gave up my circular life in the circular world because I saw my people and felt I had to help them somehow try my best to support them where I can. EDEN is a new concept and I know that it will work for us. I will take it the extra mile and make sure it

works and I can change people's mindsets. There is no other way except through this concept."

Rachael (Manubada village): I came as an observer and got convicted. Some things in my life I have to change because once I change, I will be an example to others. I really like this training and see that it will address not only health but all areas of our life.

Koivi Kave (United Health Services, Central Province/ Hula Health Centre: "I have been to many trainings from NGOs and other stakeholders but this is the first of its kind training run by the churches that I have attended and it is really very good. I feel that it has touched me and I have to change some behaviours before I can be a role model.

James Kala: (United Health Services, Central Province/Kalo Health Centre: "I am thankful for receiving this training. I will now be a role model in my catchment area because if I don't change, I will not

be able to influence others. This training helped me realise that it is not just the physical aspect of our well being but spiritual as well and that being in the forefront of health service delivery, we are seen as leaders in the community. But I now know that I have to be a role model myself before I want to influence others to change."

Sonia Nitua - United Health Services, Central Province/KAK Health Centre: "I see the areas where I need to pick up on and improve. This training addresses everything from spiritual to physical health and individuals, family and community. I am privileged to have come and learnt something."

Rachael Vali: Kaparoko AidPost, United Health Services Central: "This training has really made me think hard about areas in my life that I need to change because if I have the power to influence, I must be a role model in what I say and do."

Regional conference celebrations coincide with CHS big “50”

Story By Lengi Derring

Christian Health Service (CHS) Madang Province hosted the week-long Momase Regional Conference hosted between 17th to 21st, 2020 which coincided with the CHS 50th Golden Jubilee Celebrations.

Hosting two (2) different events at the same time was very challenging particularly in planning and actually managing the events.

It was a time to remember and commemorate the existence of CHS for the past fifty years. We celebrated with pride and honor for our service to our people and the government from pre-independence to current. We had the opportunity to remember our for-fathers and early missionaries from different churches across Momase Region who concurred our land in the name of the Gospel establishing schools and health facilities.

Many have passed on as we take on to continue this important Ministry of Preaching the Gospel, Healing the sick, teaching & and education.

Over 150 participants attended a weeklong conference and participated in the Jubilee Celebration. The event was hosted at the Berths Oval in the heart of Madang township attracting over 20,00 public and business communities to witness the celebration events.

We enjoyed a colorful festival with some representations from CHS National Secretariat Management Team, Partners, Church Leaders and Community Leaders. Unfortunately, no government representatives attended the event but none the less, participants enjoyed some exciting moments during the course of the celebrations.

Nursing and Midwifery students from Lutheran School of Nursing added some

flavor to the occasion showcasing the courses offered at the institution.

Respective Provincial CHS Regions had an opportunity to showcase programs and service provided in the Region which was open to public exhibitions.

A three men comedian from Gaubin CHW Training School entertained the crowds at the beginning and brought the excitements to its momentum.

One of the highlights of the day were Madang local music icons Demas Saul and Shydeez who performed their country sentimental that put the public to standstill.

The favorite theme song composed by the CHS Madang Working Committee ‘*Long taim blong Tumbuna*’ (*in the time of our grandfathers*) was the hit song frequently requested by participants and guests. The song is up for auctioned in the coming General assembly.

The event ended at 3pm, followed by the normal conference sessions the following day and continuing on for the remaining of the week. After close of the conference week, we had a surprise harbor cruise tour on the famous Kalibobo Spirit of the Madang Resort Hotel.

The entire conference team had a two hours cruise ship tour around the bay enjoying the ride site seeing the fascinating islands of Madang.

By 6pm, the ferry berthed on an island and participants were received by two yachts equiped with refreshments.

A cocktail dinner on the ocean was organised as a close up function for the week-long conference. There were all fun and laughter excitement and the participants felt being valued in their stay in Madang.

All these entertainments were offered for free under the discretion of Sir Peter Barter, man who has and is always supportive of CHS.

On top of that he offered all the hotel services with a massive 50% discount to the participants.

The participants returned to hotel conference room around 7pm for the official hand over of the CHS Momase Token from Madang to Morobe Province. The token was unveiled by the out- going Regional Chairman Mr. Lengi Derring before a ceremonial hand over of the token plate to the next hosting province (Team Morobe).

Team Momase thanked all those who had contributed to making the event a memorable one including Sir Peter Barter who has always supported the work of CHS in Madang and throughout the rest of the country.





Health Awareness in Hela goes ahead despite tribal tensions

DESPITE regular occurrences of tribal clashes in the upper highlands region of Hela province, health awareness must continue as it is beneficial to the vast majority of the people in this region.

United Health Services (Hela) continues to advocate and run awareness programs on health and lifestyle through its EDEN program. Recently EDEN Health Promotion Officer for United Health Services (Hela) Thomaspole Minape and church minister Luke Kewa carried out an EDEN awareness program in the Tigipi area and also did general awareness of the Corona Virus and African Swine Flu which is affecting poultry in mainly the highlands provinces.

Mr Minape said: "There are many challenges in the highlands and especially Hela there is always clash of the tribal clans. I only wish people's mindsets could change. I know the rest of PNG say bad things about Hela Province and its people. That's the common perception. It's true that our people here are often

described as outlaws but that's only some. There are good people and Hela is a beautiful place. That is why I always advocate the EDEN program because I have seen mindsets change. Now that it really is an effective tool because of the holistic approach."

The outbreak of the global pandemic - Corona Virus had urged Minape to also do health awareness in the communities as part of the health promotion EDEN outreach program.

"People here don't have any idea of what is happening out there. But health is everyone's business so I had to do awareness on Covid-19 and its preventive measures which proved to be an eye opener," he said.

Also with the outbreak of African Swine Flu affecting poultry, Minape took the opportunity to educate the people of this disease affecting poultry (mainly pigs), which is a cash commodity in the highlands regions.

Minape also carried out an integrated

health patrol (immunisation) in six council wards in the Komo-Magarima electorate with the support of the ward councilors and Hela PHA through its public health division of the EDEN program.

Despite challenges of church funding delays, he (Minape) said work still had to continue because people's lives mattered.

Minape, who is based at Tigipi Community Health Post said at the time of doing health promotion awareness, a big tribal fight had come about in the area (the gateway) into Hela Province where more than fifty lives were lost. He said: "This did not stop me from carrying out awareness programs. People's mindsets have to be changed and I hope that through the work that we do at United Health Services and through the EDEN program, change can happen. It won't be easy but small change is better than no change."



Notice Board

FINANCE

1. The 2021 Goods & Services budget Submission template has already been sent to all agencies. Please prepare your budgets and submit to the CHS Finance section no later than 31 July, 2020
2. A kind reminder to agencies to continue sending in your monthly finance reports in a timely manner. Please send your reports in the first week of the new month (not at the end). As stated in the HR notice, send your reports with payroll data and updated staff establishments.
3. Update on monthly grants: Outstanding operational grants for January - May and salary grants for January – April, 2020 have been received and disbursed to agencies accounts. Given the current funding situation from the government and recent actions taken by CHS with regards to this, it is imperative that ALL agencies must save for rainy days.

TRAINING SCHOOLS

1. We still have a poor reporting trend with only 47% rating for “timely reporting”. A timely reporting is defined as receiving full package of quarterly report within 10 working days of the next reporting month (period). The National Department of Health has raised concern for accuracy in timely reporting and the Secretariat will ensure we strictly comply with this application. Our target for this exercise is to achieve more than 90% of “timely reporting” by end of 2020 and urge you all to comply.
2. Ms. Ruth Injo from Baptist Union PNG is rolling out the distribution of the HealthCare Manuals to all CHW Training Institutions. Principals and Admin Officers are advised to contact Ruth Injo and plan transport logistics to get these much needed resource books reach your schools. See contact details below for the Ms. Ruth Injo.

HUMAN RESOURCE

1. HR requirements which were presented during the 2019 Annual Conference must be completed and provided to the Secretariat HR section.
2. Payroll reports and updated staff establishments for each agency to be included and sent with monthly finance report.
3. Attendance Register (Training Schools): must be sent by Friday of the lose week.
4. Quarterly Finance Reports (Training Schools) must be sent at the end of each quarter and must also include staff and students' establishments.
5. NID Requirements are compulsory. This is a requirement of the PNG government for all public servants and government agencies on the centralised payroll system. For CHS, this would be the Training Institutions. Please visit the NID office in your province to organise your NID/birth certificate if you do not have one yet. For those who already have, you are to confirm your NID registration number.
6. All agencies are to provide their Retirement Plan for the ageing workforce to the HR division at the Secretariat
7. New Hire Cycle: Please refer to circular instruction sent via email.

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HEALTH PROMTION

1. Agencies who want to have the full EDEN TOT training must liaise with CHS Health Promotion section to arrange this.
2. Anglican West New Britain and Anglican Oro Health Managers please liaise with Mr Nickson Samblap to organise for the EDEN TOT in your provinces. This was supposed to happen earlier this year but due to Covid-19 were delayed. The opportunity to have these trainings are now so contact the CHS Health Promotion team to further arrange this.
3. The Annual EDEN Conference 2020 will be held in East Sepik in October. Those attending must start organising now. For more information, contact the CHS Health Promotion section.



Notice Board

M&E

1. All agencies must continue to send in monthly eNHIS reports by the first week of each month to the CHS M&E Section.
2. The 14 provinces not yet using the eNHIS tablet for reporting must send their reports to their provincial NHIS and a copy sent to CHS M & E section at the same time.

MEDIA/COMM

1. Please send in any stories, information and or photos of activities, work done at your agencies and facility level to CHS Media & Communication section for the newsletter.
2. Agencies to continue sending in photos, and history of their health agency for the 50th Anniversary .
3. If you are sending photos to go with a story, please send as separate attachments. Do NOT send as part of the document (story).

For the different sections, you can contact:

- **Finance:** Mr David Langer
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- **HR:** Ms Emily Kari
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- **Training:** Mr Lengi Derring
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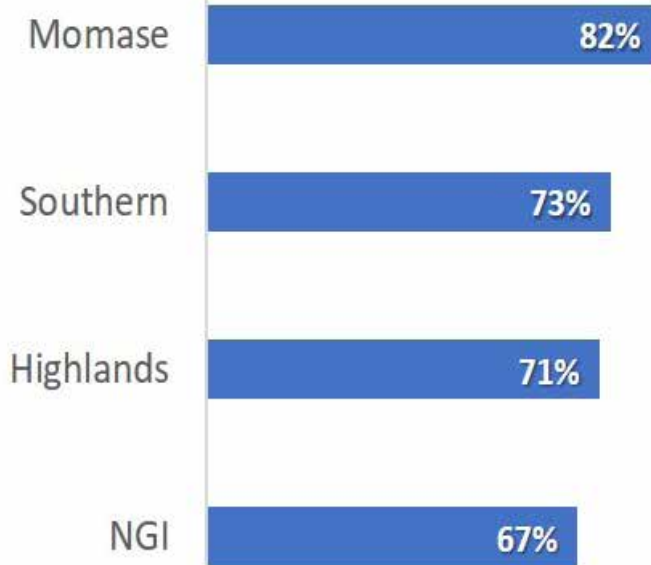
NHIS UPDATES

NHIS reports received, QTR.1, 2020



% Not Received % Received

% NHIS returns by Region



NHIS UPDATE SUMMARY FOR QUARTER 1, 2020

Table 1: NHIS Reports received by Province

Province	Reporting centres	Jan	Feb	Mar	Total Expected	Total Reported	% Returns
Western	14	13	13	12	42	38	90.5
Gulf	6	4	1	1	18	6	33.3
Central	7	5	5	1	21	11	52.4
NCD	7	6	5	6	21	17	81.0
Milne Bay	17	17	16	13	51	46	90.2
Northern	4	4	4	3	12	11	91.7
SHP	14	12	10	8	42	30	71.4
Enga	11	10	10	9	33	29	87.9
WHP	14	13	13	12	42	38	90.5
Chimbu	3	1	1	0	9	2	22.2
EHP	15	15	13	6	45	34	75.6
Morobe	17	15	15	16	51	46	90.2
Madang	10	9	7	6	30	22	73.3
ESP	15	14	10	11	45	35	77.8
WSP	8	7	8	6	24	21	87.5
Manus	1	1	1	0	3	2	66.7
New Ireland	4	4	4	3	12	11	91.7
ENB	3	0	1	0	9	1	11.1
WNB	2	2	2	2	6	6	100.0
AROB	4	4	3	1	12	8	66.7
Hela	17	13	11	9	51	33	64.7
Jiwaka	11	9	8	9	33	26	78.8
Total	204	178	161	134	612	473	72.5

Second quarter updates...

Dear all,

How time flies as we are nearing the end of the second quarter of the year. Please observe all information in this update in relation to the Partial Stop Work and other information pertaining to the Grants Availability to the respective Agencies.

A. Information Update on Partial Stop Work:

1. At the Outset we take this opportunity to thank you all for the undivided action we all took from the Board and Management level of CHS to the Agencies in the implementation of the Partial Stop work Agenda this month. We have achieved the outcome we desired at least for the period of January up to June this year with our Funding.

2. There have been some information and other educational things also we picked up on the way in relation to the setback we have faced with our funding and this being the first of its kind for us to take such actions we are appreciative of your support to this cause.

3. Please be assured of more information that is going to be forwarded to you all in light of whatever actions we will be taking in light of the slight improvements to our Funding arrears by the Government through the NDoH. All Health Managers are kindly asked to ensure individual queries by line officers on the situation are negated to its absolute minimum to avoid disappointments to all.

B: Salary and Operational (G&S) Funding.

4. Please be formally informed that the Funds for the month of May has been remitted to your individual respective bank accounts as of yesterday. Please verify this information and assist by providing receipts of the Grants for our completion formalities here.

5. Please consider this information also as important. Agencies are reminded to continue to submit your Acquittal Reports for the funds you have received

to the National Secretariat Office by the end of the 07th Day of every new month. Whether you receive funding or not. Please adhere to this piece of information.

6. During this time of Financial uncertainty (Cash Flow Issues) Maybe it is an opportune time for us all to Pray for the improvement of the prevailing situation and the efforts of the National Health Department to make ends meet for us. This is our best strength.

C. Training Schools:

7. It is with regret that we announce the non-availability of funding to our Training Schools at this juncture. Information is sketch to say the least.

8. We in Management of CHS PNG are thankful that the Training Schools are morally supporting the Partial Stop work as per the partial stop work information circular.

We are also very mindful of the consequences the funding situation is or will impact on the T/S Programs. We will work with the respective division of NDoH to provide further information on this later.

9. We are also pleading with the respective school principals to adhere to all information sent to you from our HR Section of the Secretariat. Consider them as important and where information are urgent and needed to be reverted to us please action them appropriately.

D. General Assembly

10. As per the information on another update we forwarded to you all in the first QTR the dates for the Annual

General Assembly was tentatively set for the 7th-10th September 2020. The 50th Anniversary celebrations is scheduled for the 11th September. These dates still stand. With the lingering CoVid 19 news still going around we have written a letter to the SoE controller to give his permission for us to host this Annual Activity.

11. We await this information patiently and should there be some changes needed to the number of participants for the General Assembly as per the Co-Vid Assembly and Gathering requirements we will opt for lesser people to attend this year's GA.

E: Newsletter.

12. The Quarterly Newsletter for CHS PNG is growing in popularity by every issue. It is a joy for us to include news from the Agencies every time. Please continue to support this publication and send us interesting and challenging stories to be included in the Newsletter.

13. There has been a lot said about us in the print media in the past 2 weeks and most of them are good publicity for us. Continue to be aware that information is power and that not all of them will come in the form of the updates but in the public media as well



Bernard Rutmat, Deputy Executive Officer

Health Toktok is a quarterly publication of CHS (PNG). All information in this newsletter has been verified before publication. Send any stories from your agency that you would like to see published in this newsletter to the address given. Material published in this newsletter shall not be used in any other publication unless permission is sought from CHS.

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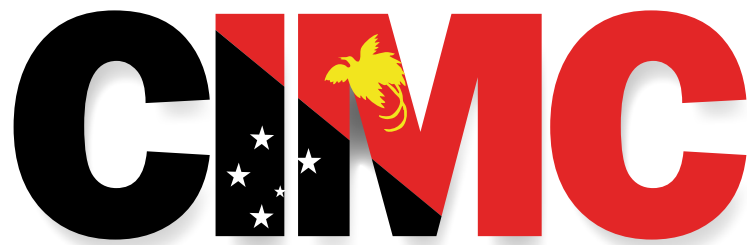
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**FAMILY & SEXUAL VIOLENCE
ACTION COMMITTEE**

WIFE-BEATING is a CRIME!



Wife-Beating is wrong, because

**It is against PNG's laws
It is against PNG's Constitution
It is against our Christian beliefs**

**It spoils our Family life
It is a bad example for your children
It can cause serious injury or death**