

Supporting HIV testing, ART initiation and adherence in Malawi in a high burden district through fellowships to fill gaps and increase Human Resources for Health



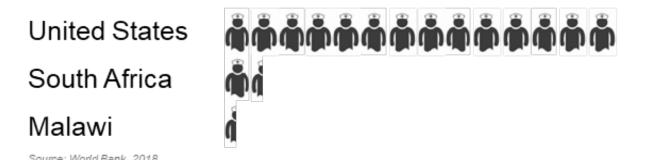
Ellen Schell^{1, 2}, Elizabeth Geoffroy¹, Kristin Nash¹, Chimwemwe Mwangonde³, Lucy Nyirenda³, Joyce Jere³, Cathy Brown⁴

1. Global AIDS Interfaith Alliance, USA, 2. University of California San Francisco, 3. Global AIDS Interfaith Alliance, Malawi, 4. The Elizabeth Taylor AIDS Foundation

Background

Malawi suffers a shortage of nurses with 0.4 nurses per 1,000 population compared with 1.3 in South Africa, and 14 in the US. Over 60% of government nursing positions in Malawi are vacant. The Malawi Government has made substantial efforts to increase the production of new nurses and Global AIDS Interfaith Alliance (GAIA) has partnered in this effort through a health worker training program that supports disadvantaged students. Begun in 2005, GAIA's Nursing Scholarship Program selects qualified students in financial need, providing tuition, clinical supplies, exam fees, uniforms, a modest living stipend, and follow-up from program staff to encourage and monitor student progression and on-time graduation.

Nurses and midwives per 1,000 people



Since 2005, GAIA has sponsored over 550 students, with a new cohort beginning their studies each year. Of these, 473 have graduated, and 89 are currently in the school pipeline. In exchange for the scholarship, GAIA Scholars commit to work in the public sector in Malawi for the same number of years as they are sponsored. Until 2015, graduates were expeditiously deployed by the Ministry of Health and Population (MOHP) after they passed licensure exams. However starting in 2015, shortfalls in the government budget delayed the deployment and new graduates were no longer assured assignment to public sector immediately following licensure. For some, the delays resulted in attrition of skills as well as economic hardship as they awaited deployment. Moreover, starting in 2016, newly-minted nurses were now required to participate in a competitive hiring process, providing resumes and attending interviews in order to apply for positions at government facilities.

To address the delay in deployment, in 2017 GAIA worked with the Mulanje District Health Office (DHO) to create 12-24 month fellowship positions at the district hospital and health centers for new graduates applying for permanent employment. Mulanje had the highest prevalence of HIV nationwide according to the 2016 Malawi Demographic and Health survey at 21% of adults.



The GAIA Fellows at their pinning ceremony.

Program Description

With fellowship salaries and training costs provided by The Elizabeth Taylor AIDS Foundation, GAIA recruited new graduates awaiting formal deployment to serve as Fellows. In collaboration with the DHO, the Fellows were assigned to a variety of clinical settings including mobile HIV testing (HTS) programs, antiretroviral therapy (ART) clinics, high HIV burden fixed facilities, as well as acute care settings. Some Fellows served in GAIA's mobile clinics that provide basic health services in remote rural settings. Fellows received HTS and ART training according to MOHP guidelines and were with provided compensation commensurate with MoHP rates for new graduates.

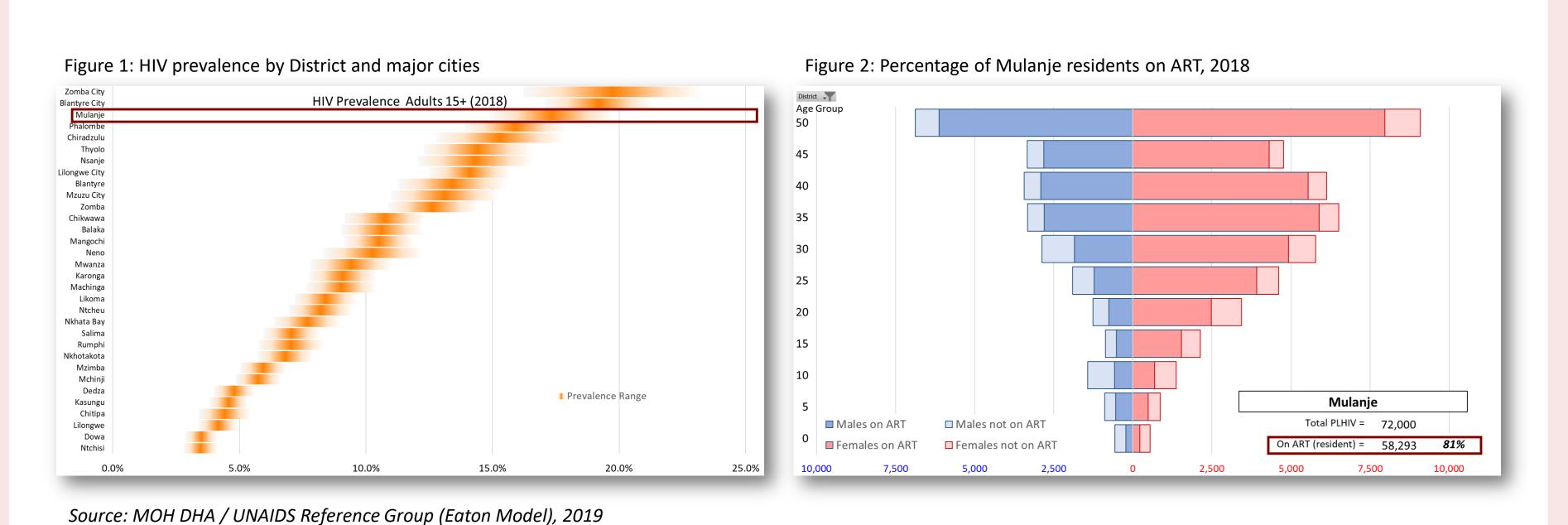
While in the program, GAIA supported Fellows to create resumes and practice interviewing skills for permanent employment. Once a fellow secured a permanent deployment, another recent graduate awaiting deployment was recruited, trained and employed in the fellowship program.

Lessons Learned

The Fellowship Program strengthened Human Resources for Health in 3 ways:

1. Bolstered the Mulanje District Healthcare workforce and advanced linkage to care for PLHIV

Thirty Fellowship positions were available at a time, and increased Mulanje's nurse workforce by 11% (from 270 to 300) at a time when the country was moving from CD4 count based eligibility for ART towards a "treat all" approach for people living with HIV (PLHIV). The addition to the workforce helped expedite linkage to care for PLHIV that had newly become eligible for treatment. During the two year program, the number of people living with HIV (PLHIV) initiated on treatment in Mulanje increased by 23% from 47,337 to 58,293.



2. Provided a bridge to permanent employment for newly graduated nurses

A total of 45 new graduates were supported through the program from 2017-2019 and employed as fellows for an average of 14 months each, with a range of 3 to 22 months. By the end of Quarter 1 2020, 44 had found permanent employment and 1 went on to obtain and advanced degree.

3. Assisted Career Development

The program gave new graduates work experience and helped them prepare for a competitive job market by teaching them how to develop a resume and prepare for an interview.

Conclusions

The program addressed the lag in deployment by keeping new graduates working in their chosen field, helping them both maintain and gain new skills. At the same time, it addressed workforce shortages, especially in HIV services when Malawi adopted a universal test and treat policy, expanding DHO capacity to serve PLHIV when there was a spike in the number eligible for and seeking ART.

This program could serve a model for developing countries affected by fluctuations in health budgets, demonstrating how to leverage private funding to bolster the work force while new graduates seek permanent employment.



A Fellow attends to a new mother and her baby



Fellows at Mulanje District Hospital

Acknowledgements

This program was funded by

