



Editorial

Virulent vials

It's important that WHO gets to the bottom of the vaccine case

A little over a week ago, the government prohibited the use of the pentavalent vaccination after harmful 'suspended particles' were found in the vials imported into the country by the United Nations Children Fund (UNICEF) through another UN body, the World Health Organisation (WHO). The five-in-one vaccine is given to children under a year old to protect them against five potential killers — diphtheria, tetanus, whooping cough, Hepatitis B, and Haemophilic influenza. But 'manufacturing defects' in the vaccine can prove fatal too. Five children lost their lives in Sri Lanka last year after being inoculated with vaccines with similar suspended particles.

Alarmingly, the defective lot of vaccines was distributed across 25 districts in the country between April-November last year and in the remaining 50 districts after November. There is no record of how many children have been inoculated with the potentially dangerous concoction. Government health experts are breathing a sign of relief as the vaccine seems to have done no significant harm — no dangerous side-effect of the vaccine has been reported in the country so far. They have also been quick to point the finger at the international agencies involved in vaccine import.

It cannot be a coincidence, in their view, that vaccines from the same faulty batch were dispatched to many African countries, thus fanning the age-old suspicion of the rich world trying to 'experiment' on poor people. To its credit, WHO has vowed to replace all 131,000 old vials, which emanated from an Indian manufacturer, with a new lot from a South Korean manufacturer.

The vaccine scandal comes hot on the heels of another infamous incident involving a UN agency, the World Food Programme (WFP). Last August, the Department of Food Technology and Quality Control found the foodstuff supplied by WFP in the Mid West to be 'inedible'. As we have said in this space before, Nepali officials as well as politicians are quick to blame international organisations working in the country in order to hide their own failings. While we maintain that position, it would also be unwise (and potentially dangerous) to ignore genuine mistakes, made willingly or otherwise, of world bodies like WHO, which has, as in the latest vaccine case, undoubtedly failed to live up to its high standard of quality control.

As of this writing, WHO is reportedly looking into the incident. It is vital for its credibility that it gets to the heart of the matter, make the findings of the investigation public and punish the guilty for a grave error — one which put the lives of countless Nepali children in danger. Meanwhile, the process of replacement of the old lot, which has already been delayed by a week, needs to be expedited so that the children scheduled to take their periodic dose do not miss their vaccination deadlines.

Vexing vocab

GOPAL SIJAPATI MAGAR

It is said that the most important part of learning a second language is learning the vocabulary of that language. Stressing this aspect, David Arthur Wilkins says that even if a student is familiar with the grammatical structures of a language, nothing can be conveyed without adequate vocabulary. However, little is written about the techniques of building vocabulary strength. Due to the lack of learning techniques, many people trying to learn a new language are often compelled to either break down their communication or use a 'repair strategy', such as expressing the meaning in different ways like using physical cues.

Everybody learns vocabulary differently. But, there are some useful tools that can be applied for effective learning. Zeynab Azimi of the University of Kashan highlights that students can learn vocabulary in either an incidental or an intentional way. The former suggests that more vocabulary can be learned through reading as well as listening to different texts because the more words we are exposed to, the better our vocabulary will be. Moreover, learning the meaning of words from context can be one of the most useful strategies in increasing vocabulary because using the context that surrounds an unknown word helps to reveal its meaning, which makes it easier to recall.

According to the latter strategy, playing with different word puzzles as much as we can is helpful for boosting

vocabulary. In this strategy, the attention of the learner is directly focused on learning new words. Research conducted on the topic has shown that learners can expand their vocabulary by playing with words. Because puzzle solving is an active form of learning that involves several useful skills including vocabulary, reasoning, spelling and word-attack skills, it can be an effective way to learn. Another benefit of using word puzzles and anagrams is that they are associated with recreation.

Meanings of new words can also be established through drills. To solidify a word as a part of vocabulary, it should be repeated at least 10 to 20 times. However, learning vocabulary is something more than memorising a list of words. So in order to internalise the words, they should be incorporated into daily practice.

Pronouncing the words correctly is another useful way to increase vocabulary. Some learners claim that pronouncing the words in the language's native accent is not always desirable, but I believe following a proper accent should be encouraged. Violating the rules of correct pronunciation not only indicates the laziness of the learner but also affects the standardisation of the language.

One easy and effective way to boost vocabulary is by starting each day with a new word and trying to use it throughout the day. Additionally, it is necessary to develop the habit of reading a variety of texts including books that focus on the words most commonly spoken everyday.

Challenge for India

Why can't those who can bring peace in Nepal do the same in their own country?



Dinesh Wagle
kpost@wagle.com.np

Do you know what the update was from India's commercial capital a day after the ghastly Maoist attack in Dantewada district of Chhattisgarh last Tuesday? "The stock market barometer Bombay Stock Exchange (BSE) Sensex crossed the 18,000-mark for the first time in 25 months on Wednesday," said a report posted on the website of The Hindustan Times. "Crossing 18,000 is a healthy sign and foreign institutional investors (FIIs) support continues," said Divyesh Shah, CEO, Indiabulls Securities.

That India is a country of contradictions is a well-known fact, but the paradox comes out glowingly when its enviable economic rise and the spreading Maoist movement are put together. Both the activities happened simultaneously in the past decade. Throwing away the Nehruvian socialistic dreams and the License Raj, the liberalised and opened-up India forcefully emerged as an economic powerhouse on the world stage. At the same time, the Maoists who thrive on poverty expanded their presence like never before. They have done in the past 10 years what they couldn't do in the previous 33 years of their movement. The Dantewada attack that killed 76 policemen was their biggest ever assault against the Indian state that they want to overthrow.

"India is a country where millions

beg," someone was saying on TV a few weeks ago. "This is also a country where a husband gifts a jet plane to his wife on her birthday." Billionaires and beggars jostle for the same traffic space on India's roads.

With the economy expected to grow in double digits in the coming years, India can certainly expect more of those FIIs that the Indiabulls CEO talked about. To fuel that growth, FIIs along with their Indian counterparts who are fast becoming multinationals in their own right must go to the villages, jungles and hills of Chhattisgarh and other states that are full of natural

resources. These are the very villages, jungles and hills where many poor and uneducated Indian people (no one calls them people in Delhi, they are called tribals) live. When the companies start digging into their hills to take out minerals, the villagers naturally get worried. They feel that the companies, with permission from the "legitimate and democratically elected Indian state", are taking away their resources, their livelihood and their identity without their consent,

without their participation and without sharing the profits with them. They want to stop those companies. They want to teach a lesson to the corrupt officials who work on behalf of the alien excavators. But they can't do that on their own. So they paint slogans on their houses: "Naxali aao, hame bachao" (come Naxals, save us).

Living in Delhi or Mumbai, it feels like the whole world is limited to these glittering metropolises. India is too big (area-wise and population-wise) a country to get affected by incidents that involve a few million people or a few hundred thousand square kilometres of

land. More so if these people are from far-flung areas. But as its distribution system is failing to close the gap between the prosperous citizens of New India and the tribals of remote India, the insurgency infected area is only expanding. And rapidly. That is why people like Arun Jaitley, leader of the Hindu nationalist Bharatiya Janata Party, are saying that the Naxal menace is "a threat to the Indian parliamentary democracy" and "we as the responsible opposition are

with the government... to crush them." So how do we, the Nepali people, respond to what is happening in India, our indispensable neighbour many of us love to hate? This is what I tweeted when I heard about the attack: "Dantewada Maoist attack is similar to Maoist assaults in Nepal years ago when India provided shelter to Nepali Maoists. What goes around comes around." I don't condone Maoist violence, not just because many of us are victims of it. Living in the villages during the insurgency was like living between a rock and a hard place. The Maoists would beat and kill people in the villages who provided overnight shelter to army patrols and vice versa.

Because we have lived through difficult times, we don't want our Indian brothers and sisters to go through the same sufferings. Warmongers in Delhi are talking about using UAVs (unmanned aerial vehicles) and air power (of the Indian Air Force) as if containing an insurgency that is deeply rooted in social inequalities and injustice was like playing a video game on iPad, the latest Apple release. I understand the argument that the Maoists don't allow development activities in the villages because they thrive on poverty. But the great Indian state can do come up with a better idea than just firing indiscriminately on its own people.

By their own high-sounding admissions, the Indians helped end violence in Nepal by prodding the Maoists into the peaceful mainstream. Why can't those who can bring peace (or create war!) in other countries do the same in their own society? The rising Naxal movement could well be the biggest test for the rulers of rising India who celebrate the success of the Chandrayan mission and the signing of a nuclear deal with the US.



land. More so if these people are from far-flung areas. But as its distribution system is failing to close the gap between the prosperous citizens of New India and the tribals of remote India, the insurgency infected area is only expanding. And rapidly. That is why people like Arun Jaitley, leader of the Hindu nationalist Bharatiya Janata Party, are saying that the Naxal menace is "a threat to the Indian parliamentary democracy" and "we as the responsible opposition are



Surya Prasad Acharya

Step by step

Here are six ways to improve Nepal's healthcare management

Health services are at the heart of the universal development agenda, with four of the eight millennium development goals focused on the topic. WHO's 62nd session meeting

elevated the member states' concerns on the health workforce in South East Asia, and has highlighted some areas of focus — the shortage of personnel in the health workforce; the existing constraints on the health workforce due to an unbalanced skill mix, improper distribution and paucity of appropriate competency levels; lack of effective and efficient human resource management capacity; acute shortage of trained health human resources professionals; inadequate training and investment, poor planning, and an unfavourable demand-supply ratio of trained workers and the effects of brain-drain.

Similar scenarios can be seen in Nepal, too. We have been fighting the same obstacles for a long time. For example, insufficient competencies in providing services, narrow skill mix of the workforce, uneven distribution of trained human resources, and improper HR management.

Commonly observed problem areas in HR management in the public sector in Nepal are recruitment, legislation, discipline, development, training, rewards, and promotions. These underlying issues have incited decreased motivation on the job, low retention rate, and low productivity in health services. As a result, the outcomes of health service indicators are highly affected.

Although the production of doctors and nurses in the country is satisfactory, these resources have not been fully utilised. Evidence points to a chronic shortage in public health services in positions like physicians, cardiologists, pediatricians, nursing staff, gynecologists, anesthesiologists, radiologists, hospital administrators, nutritionists, epidemiologists and microbiologists. Specialists prefer to join private institutions in urban settings or migrate to developed countries, and newcomers generally choose air-linked, remote districts to be quickly eligible medical doctors.

Health Sector institutions

In Nepal, there are about 4,750 public health institutions in operation. The breakdown of this number is as follows: 11 central level hospitals, centres, and laboratories; 31 regional/zonal hospitals and centres; 130 district level hospitals and public health offices; 4,283 below the district — health facilities like primary health care centres, health posts, and sub-health posts; 293 ayurvedic dispensaries; and two homeopathic and unani dispensaries.

Inadequate mobilisation of the avail-

able human resources has been identified as a primary weakness in the health sector. It is estimated that the health care workforce is about 37,000 strong. According to the MoHP, the sanctioned posts in health institutions throughout the country are distributed as: 19,293 in the health sector, 1,009 in ayurveda, 6,151 in administrative services, 663 in a reserve pool, and about 10,000 (estimated) in academic and hospital boards.

Various factors have been contributing to greater HRH (human resources for health) mobilisation: population growth has raised the demand to address basic health problems in the community leading individuals to seek primitive, preventive, curative and rehabilitative services accordingly; increased health awareness leading people to seek health services; free essential health care — a new agenda; preparedness for disas-

Projection

Projection of HRH and a handy information system with reliable databases would increase effective functioning. Identifying the category and numbers of HRH available as well as and numbers of sanctioned posts, filled posts, and wo/men in the workplace to update records has yet to be addressed. For this a careful projection of HRH can be recommended at least in line with Nepal Health Sector Support Programme Implementation Plan II. The Ministry of Health and Population (MoHP) and the Department of Civil Personnel Record, a department within the Ministry of General Administration, have taken joint initiatives to update a database of civil servants, linking the databases of the Personal Information System (PIS) and Human Resource Information System (HuRIS) under the MOHP.



ter mitigation and rescue; new challenging diseases (diarrhea, cholera, H1N1, H5N1, HIV/AIDS, etc.); and growing concerns about access and coverage of health services.

How to deal with HRH management

To address the above concerns there is an immediate need to review the health service legislation, deployment policy, transfer guidelines, and strategic plan for HRH and to strengthen the human resource planning and management capacity at each level, including the ministry. WHO has also recommended improving training, education, and research capacity to revitalise the community-based health workforce; trying to curb the international migration of health personnel; conducting a comparative study on the best practices for the management of community based health workers; strengthening the health workforce through the PHC approach; and standardising the preventive and social medicine curriculum in medical schools. To these ends, the following measures can be taken as an action points:

Employment

Most of the sanctioned posts at the 11th grade, ninth grade and staff nurse level are still vacant. There are two possible ways to solve this deficiency. First, recruit these posts permanently. Second, hire human resources for these posts on a contract basis. However, current legal provisions are a barrier to find a resolution as to which arrangement would be best. Amendments in the existing health rules and regulations and preparation of guidelines are vital to remove these barriers.

Skill mix in workforce

The skill mix refers to the combination of employees and skills available during a specific time at a given health institution; alternatively, it may refer to the combination of activities that comprise each worker's role, rather than the combination of different job titles at each level of services.

Sufficient health service delivery is only possible if the skill mix is comprehensive. An absence in any category may negatively affect health services. In this regard, finding a balance of general practitioners, specialists, and nurses in

district and zonal hospitals may be fruitful. Analysing and cataloging HR resources will be useful to address this problem. In some cases, the required resources are not available. Therefore, there is a need to inspire and encourage further research on the skill mix in both the context of the organisation and the system.

Managing migration & retention

The increasing trend of health workforce migration from rural to urban centres, urban centres to the capital, national to international, as well as migration from public health care to the private and NGO sector or UN system is very common in Nepal. These have affected the regional distribution, especially in hardship areas of the nation. To address these challenges, both monetary and non-monetary incentives are needed.

A sustainable strategy also needs to be developed to retain the trained workforce in remote districts. MoHP has been proposing incentive packages to address this issue through a pilot program since the beginning of fiscal year 2009/10.

Pre and in service training

Nineteen academic institutions — 4 public and 15 private — and six public training institutes are involved in supplying pre- and in-service health training courses at various levels. The production of trained health care professionals in comparison to needed HRH is sufficient, but still there is gap in adjusting for attrition, the career path of paramedics and certain other categories.

For this purpose, analysis of supply side institutions and additional unused capacity, annual HRH production and potential, and the total number of HRH needed have to be planned accordingly.

Funding

In the end, it always comes down to funding. These initiatives must be affordable and sustainable. There are inevitable gaps in financial resources from the government, development agencies and institutional revenue after accounting for employment and training costs. There should be clear provisions to fill these resource holes.

To sum up, there may be various methods to improve health management, but these six action-points may widely contribute to the betterment of service delivery and reform. The lack of access, coverage and quality services can only be solved once the commitment and retention of the health workforce has been improved and the skills have been properly utilised.

(Acharya is Joint Secretary, Human and Financial Resource Management Division, Ministry of Health and Population)