Service delivery realities in Gulf Province, PNG

By Colin Wiltshire
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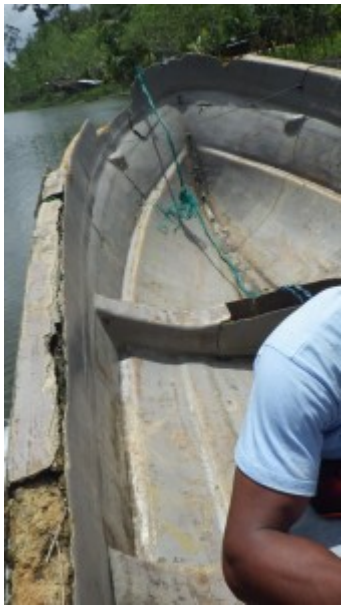
Service delivery in Gulf Province, PNG, requires a 'never say die' attitude. This is the motto for government and church service providers according to the Provincial Administrator. The PEPE Gulf survey team (see below) can confirm a great deal of truth behind these words after completing a representative survey of schools and health facilities across one of PNG's most rural, remote and underdeveloped provinces. While experiencing the predictable dysfunction of a system struggling to implement new reforms in incredibly difficult circumstances, we also met some of PNG's less-talked-about heroes operating at the end of a long service delivery chain that continue to teach many classes and provide basic health care to isolated communities.

Seeking to understand the impact of increasing revenues over the last decade in PNG at the service delivery frontline, the Promoting Effective Public Expenditure Project (PEPE), a joint venture of PNG's National Research Institute (NRI) and ANU's Development Policy Centre has just completed an expenditure tracking and facility survey covering more than 200 schools and about 150 health facilities. Eight teams covering a province each from each of PNG's four regions have been conducting the survey since October. Many have been visiting very rural and remote locations only reachable by chartered flights, boat, and/or several days walk. The PEPE Project has attempted to visit the exact same schools and health facilities that were surveyed ten years ago as part of an NRI/World Bank Public Expenditure and Service Delivery Project to ensure direct comparability between both surveys. This post is a reflection on conducting the survey in Gulf Province.

The Gulf Provincial Administration was direct in their assessment of the province when meeting the survey team. Unwilling to skirt their responsibilities for ensuring health and education services reach the people under PNG's decentralised system of service delivery, they acknowledge they have 'let the people

down’. Kerema, the provincial capital of Gulf, has been a ghost town for the better part of the last five years with poor road conditions disconnecting it from Port Moresby. Unsurprisingly, health and education indicators in Gulf Province rank among some of the worst in PNG. But the Administration has a new attitude and sense of purpose after launching their new development plan – ‘Gulf Vision 2020’. The province was full of enthusiasm for our survey team to experience first-hand the challenges its own officers face in delivering basic services.

Most of Gulf is only accessible by the open ocean and the multitude of channels connecting villages except for the large inland populations, Kantiba and Kotidanga, situated near the borders of Morobe and the Eastern Highlands Provinces. Travelling further west to Kikori District, the largest of the two districts that make up Gulf Province, is very difficult as the airstrip is not operational. The only option is to hire a dinghy with an outboard motor to travel in the open sea, which takes a day and over 100 litres of fuel, making the trip expensive, exhausting and often dangerous. The Survey Team made this arduous journey and on arrival in Kikori people asked us if we saw any signs of a dinghy that had supposedly gone missing along the same route we had travelled. The rumours were confirmed in the days that followed while implementing the survey in nearby villages as bodies were known to be washing up on the shoreline. It was alleged that at least five people had gone missing trying to transport themselves together with a live deer and cassowary from Kikori to Kerema. This was an ambitious journey, especially considering the cargo on board. The outcome was tragic but as we learnt this was not an isolated event. It was unsettling to hear the villagers describe the trip to Kerema as ‘taking your chances in the sea’, making our inevitable return trip a more daunting proposition.



Implementing the survey in this environment proved equally challenging. One of the most glaring observations from fieldwork was the number of schools closed since the previous survey was carried out ten years earlier. On a trip to West Kikori, closer towards the boarder of Western Province, the lack of schools and health facilities serving more remote populations became clearer. In our particular case, provincial and district officials assured us certain schools and health facilities were operational but when we visited we found they had been closed for at least five years. We had to travel in the dinghy (pictured left) up a river known to have many crocodiles to get to this village and were taken aback by casual fleeting comments from parents such as “sometimes the crocodiles take the small children”. The lack of access to basic services became more apparent when we looked at our detailed map to see this particular village was hardly the most remote in West Kikori. We could not help to think if this village had no access to schools and health services then it would surely be at least the same or worse for the more remote villages.

While it might seem obvious that difficulties with transport and remoteness can have a crippling impact on the level of services provided, it is by no means the determining factor. A more easily accessible school, just five minutes off the main highway on the road to Kerema, was experiencing a rapidly decreasing enrolment rate despite a new double classroom recently built with donor funding. The school records showed official enrolment figures at the start of the year to be between 30-40 students per class, whereas class size was below ten students per class at the time of the survey. This was mainly due to chronic teacher absenteeism and ‘unknown’ reasons for not receiving school subsidy funding, leaving no operational funding as parents could not be charged school fees in an election year with a clear government policy of ‘free education’. Similarly, the aid post in the village, standing no less than 50 metres away, was closed despite a new health worker’s house built right next to it. Both health workers were present but had not been paid for two months and were told to close the clinic until more reliable funding could be accessed by the responsible church agency.

The team experienced entirely different circumstances upon approaching another school that was definitely receiving its school subsidy funding. Watching our dark blue land cruiser approaching the village, which looked a lot like a police vehicle, a group of people rushed to a dingy on the shore and set off into the sea. At the same time, disgruntled parents ran to

the car yelling that the Head Teacher and School Board Chairman were escaping and demanding the team chase them down and arrest them. After explaining that we were not the police and the purpose of the team's visit was to conduct a survey, we learnt there was a rumour that the police were coming to arrest the Head Teacher and School Board Chairman who had supposedly been misusing the schools funding.

In further cases of increased funding not translating into better services, the survey team visited a school and health centre near the Oilsearch Headquarters, the new LNG pipeline and forestry roads leading into the highlands. Despite better-looking infrastructure, the functioning of the school and health facility were not dissimilar from others surveyed in the rest of Gulf. A desperate lack of teachers, health workers and suitable houses persisted despite rumours that families were receiving hundreds of thousands of kina in royalties from the associated resource companies. It was also common across many villages to find unfinished District Services Improvement Program 'DSIP' infrastructure projects, commonly referred to as the Members' projects (since the funds are allocated to Members of Parliament). On the outside, the new classrooms or aid posts normally looked like a positive development. But all too often they lacked important features such as a connected water supply, chairs and tables and perhaps the most important feature of all – the workers. These incomplete projects were normally complemented with stories of serious delays and concerns over the competence of contractors.

We encountered a decaying service delivery system in Gulf Province that is unable to reliably ensure a teacher will be present and able to teach classes each weekday or that a health worker will have an operational clinic, drugs or lighting to treat a medical emergency at night. In place of a robust and well regulated system were individuals determined to ensure basic services persist despite all the problems. There were inspiring examples of retired and retrenched teachers and health workers that continue to help communities when no other services are provided. There are also cases of teachers and health workers that go well beyond their official duties. The survey team met a dedicated Head Teacher at a remote school in Kikori who teaches all classes at her Primary School (Grade 3 – 8), as she is the only one left. She has also volunteered to be the community health worker for the past few years, as there is no health worker in the village despite a new aid post built over a year ago that that has not been used due to a dispute between government and church officials. Instead, this selfless teacher operates a health service out of her house, providing basic drugs and advice for sick people in her village. When asked about subsidies received for her school, the value seemed insignificant compared to the time and expense to access the funds. For the Head Teacher and the School Board Chairman, the closest bank is Port

Moresby, which takes them at least a week to get there and back and would cost around 3000 Kina in travel expenses, not to mention risking their lives out at sea, something this incredibly dedicated teacher and health worker has done many times.

Our return trip back to Kerema proved more challenging. The prospect of rougher seas saw us use the river channels, which are calmer and safer but much more indirect. Finally needing to confront the open ocean, we made an attempt to make it beyond the break but were swamped by waves requiring us to bail water out of the dinghy while we raced back to shore and finally conceded that it was safer to try again the next day. Stranded with all our gear, we walked along the shore to a village where some of our team had local contacts to arrange an overnight stay. During the evening we were told village sorcerers were unhappy and casting spells into the sea to make it rough because they are short of sugar and tea. Some of the team visited them to make a small offering.

The next day, however, the sea was still ominous and it was not until a respected village elder gave us his approval that the team and the skipper felt comfortable to make the journey. With half the village watching us this time, we waited patiently in shallow water for our opportunity to make another attempt to get past the break. Unlike the day before, this time we eventually made it out into the ocean encountering rough and choppy conditions. Despite the wind and rain, the skipper skilfully rode the dinghy up over the crest of large passing waves until we made it back to Kerema. Once the skipper knew we were safe, he let out a deafening howl of exhalation. As the team celebrated our arrival back to Kerema with the surveys completed and intact, we also reflected on the teachers and health workers who regularly take their chances in the sea to teach classes or deliver essential medicines when they could easily defect from their posts like so many others have and continue to do. They give the ‘never say die’ motto in Gulf Province a literal meaning and deserve increased support to keep holding up a fledging service delivery system.

Other survey teams visiting remote parts of PNG (including Morobe, Enga, Eastern Highlands, West Sepik and West New Britain) no doubt will have similar stories, and we

look forward to bringing you some more of these soon. We are now at the debriefing, data cleaning and data entry stage for the survey. We will be analysing the results of the survey next year. One of our aims is to share the results with the provincial administrations such as Gulf, which did so much to help facilitate our work. We hope to be able to identify some practical proposals as well as a useful diagnosis.

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