

DESIGNING EVIDENCE-BASED STRATEGIES FOR HEALTH WORKER RETENTION

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Background

Many countries struggle to attract and retain sufficient numbers and types of health workers to provide quality services in rural and remote areas. Ministries of health often rely on external partners to develop the evidence base for formulating retention strategies, use less rigorous methodologies, or forego data altogether when making policy decisions.

Methods

To increase country ownership and advocate for use of data for policy-making, the USAID-funded Capacity*Plus* project operationalized the **discrete choice experiment** methodology and a costing approach to provide human resources managers with step-by-step guidance, formats, and software to investigate health workers' motivational preferences and develop costing scenarios, in order to select the most cost-effective incentive strategies and increase the attraction and retention of health workers. The **Rapid Retention Survey Toolkit** and the **iHRIS Retain** costing tool (see **Figure 1**) were developed based on Ministry of Health applications in Uganda and Lao People's Democratic Republic (PDR), in collaboration with the World Health Organization.

Results

The Ministry of Health teams surveyed 484 and 158 health workers and 970 and 544 students from selected cadres in Lao PDR and Uganda, respectively. Students and health workers expressed willingness to work in rural areas if postings were made more attractive (see **Table 1**). The value placed on incentives—e.g., continued education,

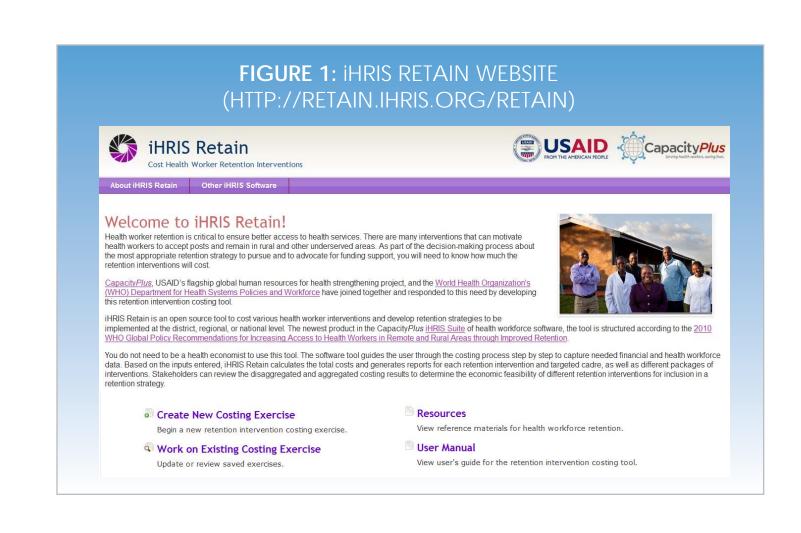
Table 1: Predicted Preference Impact (Percentage) of Retention Strategy
Packages for Nurses/Midwives in Lao People's Democratic Republic
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Results are based on surveys with midlevel nurses/midwives ($N = 106$), low-level nurses/midwives ($N = 183$),
and nurse/midwife students (N = 361)

otential Retention Strategy		Salary Increase		
	+0%	+30%	+40%	+50%
 Promote to permanent staff directly upon posting Provide transport for official and personal use Provide housing Provide scholarship for further study after 1 year Give award for high performance 	93.3%	96.1%	96.7%	97.3%
 Package 2 Promote to permanent staff directly upon posting Provide transport for official and personal use Provide housing Provide scholarship for further study after 1 year 	90.2%	94.2%	95.1%	95.9%
 Package 3 Promote to permanent staff directly upon posting Provide transport for official and personal use Provide housing Give award for high performance 	90.1%	94.1%	95.1%	95.9%
 Package 4 Promote to permanent staff directly upon posting Provide transport for official use Provide housing Provide scholarship for further study after 1 year 	89.5%	93.7%	94.7%	95.6%
 Package 5 Promote to permanent staff directly upon posting Provide transport for official use Provide housing Provide scholarship for further study after 1 year 	89.2%	93.5%	94.5%	95.4%
 Package 6 Promote to permanent staff directly upon posting Provide transport for official and personal use Provide housing 	85.8%	91.3%	92.7%	93.9%
 Package 7 Promote to permanent staff directly upon posting Provide transport for official use Provide housing 	84.8%	90.7%	92.1%	93.4%

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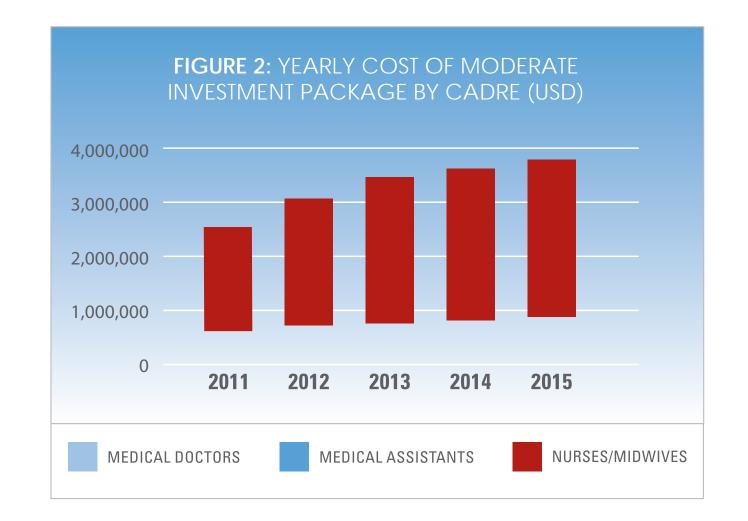
Additional packages not shown



career promotion, housing, salary—varied by cadre, depended on the specific combination of incentives presented, and allowed for estimation of the probability of rural job uptake. Using iHRIS Retain, various incentive packages were costed to yield low, moderate, and high investment options (see **Table 2** and **Figure 2**). In both countries, the moderate cost package was selected as the most appropriate to pursue.

Table 2: Retention Package Costing Scenarios, Based on Rapid Discrete Choice Experiment in Lao PDR

(US Dollars)	Most Preferred	Minimum Package	Moderate Cost Alternative
Average Annual Cost	15,258,869	1,822,347	3,283,233
Average Predicted Preference Impact (%)	92.3%	71.1%	82.3%
Total Health Sector Budget 2010-11	136,123,019	136,123,019	136,123,019
Package as Percent of Total Health Budget	11.2%	1.3%	2.4%
Health Sector Wage Budget 2010-11	23,098,239	23,098,239	23,098,239
Package as Percent of Wage Budget	66.1%	7.9%	14.2%



Conclusions

The findings suggest a number of effective strategies to attract and retain health workers. They demonstrate the importance of using rigorous, yet practical, methods to gather data on motivational preferences to determine how health workers may respond to implementation of financial and nonfinancial incentives, and the cost implications, as an important input to evidence-based policy-making.

The views expressed in this poster do not necessarily reflect the views of the US Agency for International Development or the US Government.

