

Factors Influencing Health Workers' Employment Decisions and Interventions to Address Geographical Imbalances

Wanda Jaskiewicz, *CapacityPlus* Senior Team Leader

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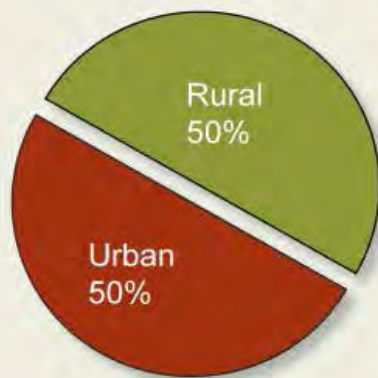
Health Worker Access in Rural Areas

Global issue: Low, middle, and high income countries

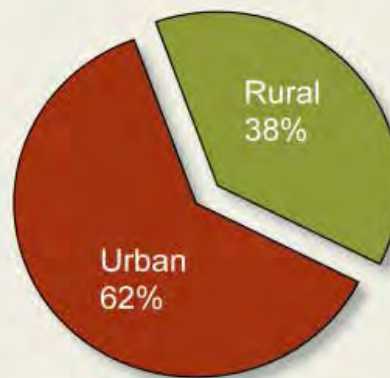
Attracting and retaining health workers depends on **factors affecting decision** to accept and stay in rural post & government strategies to respond to these factors

(Lehmann et. al. 2008)

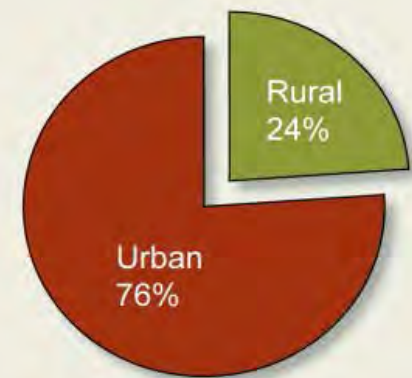
World population



Nurses worldwide



Physicians worldwide



Factors Influencing Employment in Rural and Remote Areas

Individual/personal characteristics

Origin, gender, age, marital status, ethnicity, values and beliefs

Local environment/living conditions

Infrastructure, schools, safety and security, accommodation

Community support and appreciation



Factors Influencing Employment in Rural and Remote Areas (2)

Organizational environment

Working conditions, staffing, scope of practice, support

Equipment, medicines and supplies

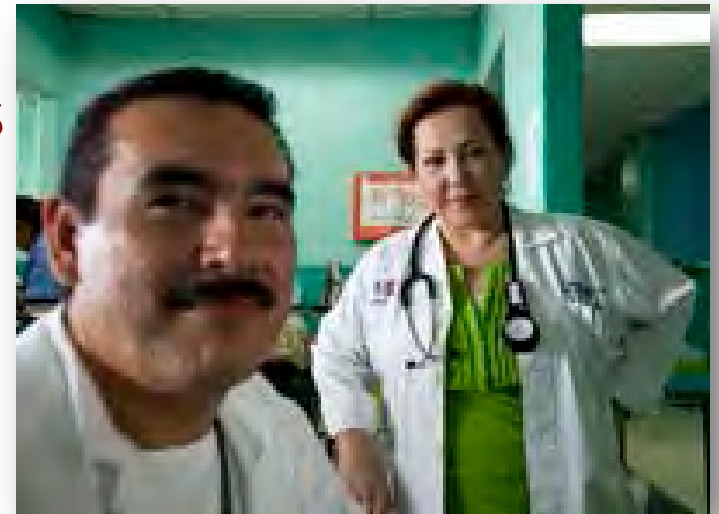
HR management

Career and financial incentives

Professional development and continuing education

Career progression

Compensation



Factors Influencing Employment in Rural and Remote Areas (3)



Education system

Training (how and where) \Rightarrow practice choices and location

Stock, cadres, specialization



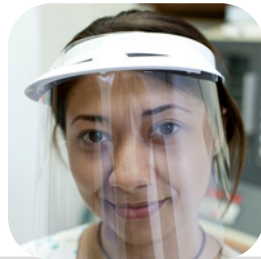
National/international context

Health financing and regulation

Socioeconomic environment \Rightarrow migration

Addressing Rural Recruitment and Retention

- Complex social, professional, economic factors influence workers' **motivation**
- A “**bundle**” of well-selected incentives or interventions*
- **Range of policy options** and interventions to address maldistribution and shortages in rural and remote areas



*WHO 2010 global policy recommendations for rural retention

WHO Policy Recommendations

| Category of intervention | Examples |
|--------------------------------------|---|
| A. Education | A1 Students from rural backgrounds |
| | A2 Health professional schools outside of major cities |
| | A3 Clinical rotations in rural areas during studies |
| | A4 Curricula that reflect rural health issues |
| | A5 Continuous professional development for rural health workers |
| B. Regulatory | B1 Enhanced scope of practice |
| | B2 Different types of health workers |
| | B3 Compulsory service |
| | B4 Subsidized education for return of service |
| C. Financial incentives | C1 Appropriate financial incentives |
| D. Professional and personal support | D1 Better living conditions |
| | D2 Safe and supportive working environment |
| | D3 Outreach support |
| | D4 Career development programmes |
| | D5 Professional networks |
| | D6 Public recognition measures |



Developing Recruitment and Retention Strategies

Situation analysis

- Identify health service needs
- Labor market analysis
- Understanding health worker preferences and needs

Criteria to select interventions

- Effectiveness: does it work?
- Relevance: time to impact, enforcement capacity, regulatory framework
- Acceptability: stakeholder engagement
- Affordability: sources of funds, sustainability
- Complementarities with other interventions

Monitoring and evaluation

- Plan for it from the beginning
- Indicators: outcomes of interest, impact
- Methods and tools: capacity of information systems
- Roles of stakeholders and partners

How to Elicit Health Worker Preferences?

- ❖ Discrete choice experiment (DCE): A **quantitative** method for **valuing different factors** that influence job choices
- ❖ **Predict** how particular groups of health workers are likely to react to different bundles of policy
- ❖ Identifies **trade-offs** workers are willing to make between factors

Which of these two job postings do you prefer?

| | Job Posting A | Job Posting B |
|-------------------------|---|---|
| Quality of the facility | Insufficient staff type and number and equipment NOT always available for facility type/level | Sufficient staff type and number and equipment always available for facility type |
| Career promotion | Directly promoted to permanent staff upon posting in rural facility | Promoted to permanent staff after one year |
| Housing | Housing allowance provided | No housing provided |
| Salary | 50% additional salary | 40% additional salary |
| Continued education | Qualify for further study and financial support after three years in rural facility | Qualify for further study and financial support after one year in rural facility |
| Transport | No transport provided | Transport provided for official activity |
| | <input type="radio"/> | <input type="radio"/> |

Laos DCE, 2010

Expanding Access in Rural Areas: Laos

Regulatory: Compulsory 3-year rural service for license; position in civil service

Financial incentives: Increased salary, transportation allowance

Education: Eligible for continued education

Personal support: Housing

✓ 400 new health workers posted in 1/3 of country's rural districts



Expanding Access in Rural Areas: Mali

Education

Rural medicine, training with a mentor, continuous professional development

Financial incentives

Pay for service

Living and working conditions

Installation kit, drugs, small library

Professional support

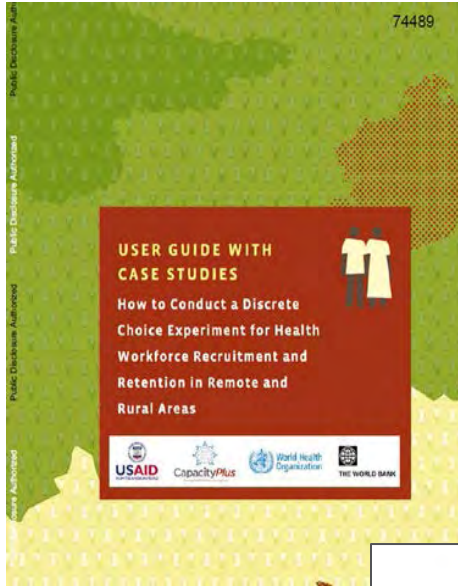
Rural Health Doctors Association (supported by a French NGO): research network, quarterly regional meetings, mentoring



- ✓ Over 100 rural doctors over a 10-year period
- ✓ 4 years on average in rural positions

Source: Codjia L, Jabot F, Dubois F. Evaluation des stratégies de médicalisation des zones rurales au Mali. WHO, 2010; Adapted from Dolea C. Presentation on Evidence on Recruitment and Retention of Health Workers in Remote and Rural Areas at the Third Global HRH Forum in Brazil. November 2013.

Resources



www.who.int/hrh/resources/dceguide/en/index.html

www.worldbank.org/en/topic/health/publication/how-to-recruit-retain-health-workers-in-rural-remote-areas-in-developing-countries



www.capacityplus.org/rapid-retention-survey-toolkit

<http://retain.ihris.org/retain>



The CapacityPlus Partnership

IntraHealth International, Inc. (lead partner)

Abt Associates

IMA World Health

Liverpool Associates In Tropical Health (LATH)

Training Resources Group, Inc. (TRG)

