Decent work and economic growth: Should leaders promote health employment as a driver of inclusive economic growth?
The concept of decent work

- Decent Work” means productive work for women and men in conditions of health, freedom, security, equity and human dignity
- Work is not only a source of income, but a source of health, dignity, family stability & economic growth

How do we design policies & programmes that “protect labour rights and promote safe and secure working environments for all workers, in particular those in precarious employment” so that they remain healthy and enjoy quality life with maximum production (Decent Work)?
Strategic Pillars of Decent Work

In the current development discourse, decent work and economic growth is located under SDG 8.

- Policies that are essential to implementing principles and rights at work;
- Promotion of employment policies and income opportunities;
- Policies that allow decentralization of resources/budgets to lower level
- Policies that enable people to take control, & be innovative over their health and different work environments
- Designing environments for expansion and improvement of social protection cover;
- Promotion of social dialogue and tri-partite opportunities

Promoting health, promoting sustainable development: it’s our health, our future and our choice.
Crown Agents: Zimbabwe Case

- **Crown Agents Zimbabwe in collaboration with Hera** is implementing the Health Development Fund Results Based Financing (HDF-RBF) programme in partnership with the Ministry of Health and Child Care and UNICEF. The programme supports decent work through:
  - Performance based Incentives under Results Based Financing in Health
  - Human Resources for Health Retention Scheme
  - Medical Products, Vaccines, Technologies
  - [Delivery Team Topping up of Vital Medicines and Health Services]
Autonomy to Workers Brought by RBF

- Work-plans & contracts attuned to Health Workers & Health Centre Committees (HCC) identified needs,
- Prioritizing Health Issues according to their perceived needs thereby creating a better working conditions for themselves
- Giving community voices to be heard so that they participate in Health Matters
- Budgets under control of Health Workers.
- Performance related bonuses, (25% Personal incentive)
- Ensuring there is space for Social accountability by communities: (Health Centre Committees, Client Satisfaction surveys and Health literacy)
- Decisions that address the issue of equity at work: {Hardship factor or remoteness taken into account and extra money is paid to Health Facility}
- Skills building: mentoring and training;
- Supportive social environments promoting health practices {proper accommodation, recreational opportunities/facilities}
Outcomes

- Good governance & accountability of RBF subsidies used in an efficient, ethical and transparent manner for better health outcomes;
- Economic multiplier effects that generate employment as cash; at HF level
- Highly motivated Health Workers; better skills to deliver high standard of work
- Increase access to priority health services (MNCH, Water & Sanitation
- Strengthened referral system (appropriate care at appropriate levels, workload spread to lower levels)
- Decentralized service delivery and revitalized primary health care services
- Prioritized package of services directly linked to burden of disease
- Increased community participation; community ownership of HFs, support, and programme monitoring (Health Centre Committees (HCCs), CBOs & Village Health Workers (VHWs) in different operational aspects of the RBF Programme
## Outcomes

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<th>Decent Work</th>
<th>Strategic Pillars of Decent Work</th>
<th>Multiplier Effects of RBF</th>
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<td>Employee Rights</td>
<td>Training and mentorship</td>
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<td>Access to PEP and essential medicines</td>
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<td>Employment policies and income opportunities</td>
<td>Extra income from small income generating projects</td>
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<td>Social protection</td>
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<td>Enhanced autonomy</td>
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<td>Design of operational plans on site addressing local priorities</td>
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<td>Use of funds in line with health facility priorities and needs</td>
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<td>Social dialogue</td>
<td>25% personal incentives on health facility earnings</td>
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<td>HRHRS topping up salaries</td>
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<td>Improved infrastructure and staff accommodation</td>
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<td>25% top-up and HRHRS increases the credit worthiness of health workers</td>
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<td>Social dialogues between the clinic and Health Centre Committees</td>
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<td>Access to relevant and current information through TV, internet, Cellphones availed through the programme</td>
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<td>Health dialogue meetings and exchange visits</td>
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Opportunities

Expanding the results based financing (RBF) and retention schemes to other sectors (Performance based)

– Ministry of Education
– Ministry of Agriculture (food security and food sovereignty)
– Ministry of Construction & Infrastructure Sector
– Ministry of Water, Environment & Climate