HEALTH WORKER MIGRATION IN SUDAN: A NATIONAL POLICY RESPONSE

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Sudan and the challenge of migration

The need for a national policy

Pillars of the policy

Achievements

Challenges

Lessons and prospects
SUDAN AND MIGRATION CHALLENGE

Health worker migration trends rising since 1970
Traditionally male type and physician dominated
Accelerated much during the past two decades

New trends:
- Other health professions besides physicians
- More female participation
- Predominantly to destinations in the Gulf especially Saudi Arabia
- Active recruitment... through agencies
**SUDAN AND MIGRATION CHALLENGE**

- In 2005, it was estimated that 60% of Sudanese physicians practice abroad.
- In 2015, over 15,000 Sudanese physicians were practicing in Saudi Arabia alone.
- Over 3,000 are working in the UK and Ireland.
- Causes relate mainly to economic factors and work environment.
- Gaps in coverage and quality of health care are the main implications for this massive outmigration.
HEALTH WORKER MOBILITY IN SUDAN: A NATIONAL POLICY APPROACH

Health worker mobility was largely unmanaged in Sudan leading to policy, professional, and public concern. This was coupled by concern raised about the work of recruitment agencies and inappropriate condition of contract and service for migrating professionals. Resulting into:

A national debate on the issue and the need to introduce a policy for migration management.
Sudan envisages a policy to appreciate mobility as something natural and inevitable and adopts measures to manage migration to maximize gains and mitigate adverse effects.

A three pronged policy was developed:

- Promoting health worker retention
- Opting for bilateral agreements with destination countries
- Mobilizing diaspora contribution to support the country

Implementation initiated along these three lines..
Sudan has taken some bold steps in this dimension through governmental commitment and streamlining of development fund

Retention initiatives included:

- A national monetary incentive to deploy health workers to states and localities including specialist physicians (a decree from the President)
- Top ups for deployed health workers through development funds (example of GAVI)
- National service and training policies requiring a period of service in the country and especially states and rural areas
BILATERAL AGREEMENTS

Sudan succeeded in negotiating and signing bilateral agreements with two important destination countries:

- Saudi Arabia... leading to managing the migratory flows, training placements for Sudanese residents, and short locum modalities for Sudanese specialists besides institutional links
- Republic of Ireland...leading to training placements for Sudanese residents and mobilization of Sudanese diaspora in Ireland besides institutional links

Implementation is underway and prospects are promising
BILATERAL AGREEMENT WITH SAUDI ARABIA
BILATERAL AGREEMENT WITH IRELAND
DIASPORA MOBILIZATION

The policy considers the Sudanese diaspora integral to the national health workforce in the country.

Several diaspora mobilization initiatives introduced with success in implementation.

An outstanding example is the initiative by the Sudan Medical Specialization Board in collaboration with the Secretariat for Sudanese Working Abroad... involving wide range of diaspora members and resulting into a sustainable training and capacity building program through involvement of diaspora members.
Engaging diaspora in promoting medical specialty training in Sudan: a proposed model

By: Elhassan Nader, Aziz Ali Khatib, and Ayed Khatib, Sudan Medical Specialization Board, Sudan

Purpose: The Sudan Medical Specialization Board (SMGB), established in 1995, is responsible for the recognition and training of medical specialists and is currently enrolling over 4000 students across 23 different medical, dental, and paramedical specialties. The SMGB is currently witnessing reforms characterized by role redefinition, decentralization of training and expansion of capacity to respond to healthcare needs in Sudan and beyond. The aim of this paper is to promote and institutionalize Diaspora engagement to support the specialty training and reform within the SMGB.

Approach: The SMGB is proposing a Diaspora Engagement Model (DEM) based on three pillars: sustainable discipline-oriented training, helmed by instructing generic training and enhancing institutional capacity of the board. The program promotes identifying gaps and areas of needs in Sudan, developing a directory of relevant Sudanese diaspora organizations, and implementing and monitoring the DEM.

Implications and value: Engagement of diaspora is expected to address numerical and quality gaps in specialty training and impact training capacities that lead to sustainability. Future return in residents terms of health workforce development, health system strengthening, and population health improvement.

Keywords: Diaspora Engagement Model, DEM, health workforce migration, specialty training
ACHIEVEMENTS

Successful national dialogue resulting into development of a national policy on health workers migration

Evolving record of policy implementation as pointed above (retention, bilateral agreements, and diaspora mobilization)

Record of evidence and expertise on the subject (health workforce mobility)

More political support and commitment for health workforce strengthening

Evident satisfaction among health workers and their professional associations
CHALLENGES

Dynamicity of the national, regional and global context

Issues of capacity to manage and monitor policy implementation

Sustainability of the retention initiatives

Multitude of diaspora groups and their sometimes conflicting agenda

Lack of adequate funding to promote some promising initiatives

Challenges of effective communication and coordination with destination countries
LESSONS AND PROSPECTS

Migration management can bring evident benefits; a win-win approach between countries is possible.

Political support and commitment is of paramount importance.

A multi-dimensional approach to migration management is suitable for countries with limited resources.

An inclusive dialogue and engagement of stakeholders is key to policy uptake and implementation.

Potential of the diaspora should not be underestimated.

The Global Code of Practice proved to be useful as policy lever.
LESSONS AND PROSPECTS

Sudan anticipates expansion of bilateral agreements for more gains

The direction is currently towards a labour market approach with consideration of the regional context.... More regional collaboration

Regional and global opportunities to support country efforts are going to be tapped:

- The regional framework for health workforce strengthening EMR
- The Global Health Workforce Strategy
- The International Platform on Health worker Mobility
Thank You