Working in Partnership: GHWA

- A global partnership dedicated to address the health workforce crisis
  - Multi-stakeholder: national governments, civil society, finance institutions, international agencies, academic institutions and professional associations.
  - Over 150 members and partners

Working together to identify solutions to the health workforce crisis in regions and countries: GHWA is hosted and administered by WHO
GHWA: Vision and Mission

**Vision:**

All people everywhere will have access to a skilled, motivated and supported health worker, within a robust health system.

**Mission:**

To advocate and catalyze global and country actions to resolve the HRH crisis, to support the achievement of the health-related millennium development goals and health for all.
Objectives

The Alliance operates within two main objectives:

1. To enable country leadership in national planning and management to improve the human resources for health situation and respond to shortages of skilled and motivated health workers.

2. To address global policy challenges through evidence-informed actions to tackle global problems in areas such as insufficient and inefficient use of resources, fiscal restraints on health sector spending, migration, priority research and cooperation among all stakeholders.
Strategic priorities: GHWA focus

• GHWA priorities:
  – To be a catalytic and enabling force - the global advocate and convener on the health workforce crisis, accelerating action in countries through:
    • **promoting synergy among partners** - to enhance resource mobilization and actions towards sustainable development
    • **advocacy** - keeping the issue high on the global agenda, promoting progress and helping to mobilize resources
    • **knowledge brokering** - sharing data, examples of good practice, information for training and capacity building.
    • **monitoring** - tracking progress made as mandated in the Kampala Declaration and Agenda for Global Action (**progress indicators being developed**)
The roadmap: Kampala Declaration and Agenda for Global Action

First Global Forum on Human Resources for Health endorsed the Kampala Declaration and Agenda for Global Action – the roadmap for next decade for coordinated, collective international and national efforts to resolve the global health workforce crisis.

Within these documents, 'retaining an effective, responsive and equitably distributed health workforce' is specified among the necessary fundamental action strategies.
As one of its key elements, the declaration states:

"We call upon governments to assure adequate incentives and an enabling and safe working environment for effective retention and equitable distribution of the health workforce."
Retention: Kampala Declaration priority points

• Assuring adequate incentives and safe working environments.

• Promoting and supporting the development of a critical mass of effective managers at all levels in the public health sector who can implement well-designed, comprehensive and coherent retention strategies.

• Active development and testing of innovative retention approaches.

• Convening regular meetings of stakeholders to discuss and monitor issues related to retention.

• Building strong national, regional and international institutions such as professional associations.

• Ensuring predictable and long-term financial support by international development partners.

• Ensuring transparency in recruitment policies based on shared values and ethical codes.
Incentives For Health Professionals

- Guidelines on incentives for health professionals
- Examined both financial and non-financial incentives
- Addressed the question what does an effective incentive scheme look like
- Multi-stakeholder collaboration:
  - World's leading health and hospital professional associations (including the International Council of Nurses (ICN), International Hospital Federation (IHF), International Pharmaceutical Federation (FIP), World Confederation for Physical Therapy (WCPT), World Dental Federation (FDI), and World Medical Association (WMA))
Types of Incentives Reviewed

Financial
• Terms and conditions of employment
• Performance payments
• Other financial support such as fellowships and loans

Non-financial
• Positive work environment
• Flexibility in employment arrangements
• Support for career and professional development
• Access to services
• Intrinsic rewards
Elements of an Effective Scheme

- Clear objectives
- Realistic and deliverable
- Reflects health professionals' needs and preferences
- Well designed, strategic and fit-for-purpose
- Contextually appropriate
- Fair, equitable and transparent
- Measurable
- Incorporates financial and non-financial elements

Provides an example to developing an incentive package
Positive Practice Environments campaign

- Positive practice environments are settings that ensure the health, safety and personal well-being of staff, support the provision of quality patient care and improve the motivation, productivity and performance of individuals and organisations.
Positive Practice Environments campaign

Over the course of five years, the campaign aims to:

1. Raise the awareness, understanding and support of all relevant stakeholders about the positive impact healthy and supportive work environments have on the recruitment and retention of health professionals, patient outcomes and the health sector as a whole.

2. Apply the principles of positive practice environments in workplace design and management practices and facilitate their establishment in the health sector.

3. Offer a global platform to share information, good practices and lessons learned in relation to healthy and supportive workplaces in general and retention incentives in particular.

4. Stimulate a sustained trend toward the establishment of positive practice environments across the health sector.

5. Recognise those settings that meet the criteria of PPE.
Financing and Economic aspects of Health Workforce Scale up and Improvement

(source: GHWA country case study, 2008)

Costs and tradeoffs concerning improved HRH retention

• What retention incentives have been tried, do they work, and how much do they cost?

• Work to date has looked at economic attrition:
  • Policies have been identified to deter it
  • Providing targeted pre-service training can reduce emigration and lower employment and pre-service training costs
  • Evidence is mixed on the effect of wage differentials on attrition
  • There is some research on supply responses to non-wage factors but there are no conclusive findings
  • There is information on wage and non-wage incentives but no systematic method for selecting the most cost-effective incentives
## Agenda for Additional Work

### Country Work
- Examine alternative financial and non-financial incentives that might reduce the temptation to migrate
- Consider changing policies for mandatory retirement ages or full pension benefits after a given number of years of service
- Find out from the country’s diaspora what conditions might bring them back to the country
- Measure and monitor attrition rates by area

### Global Work
- Document experiences from Ethiopia and other country-based programmes in a systematic way
- Conduct global analysis on wage and non-wage incentives as well as HRH overall buying power versus the buying power of other professions
- Create a global inventory of retention strategies and conduct systematic analysis of the costs and benefits and economic tradeoffs of each strategy
- Conduct analysis of the costs associated with self-sufficiency of the North
The way forward: potential future collaboration with WHO-HRH on retention in rural and remote areas

• **Promoting synergy among partners**
  – Using e-technology to keep experts in touch with each other in between expert meetings e.g. in a virtual GHWA discussion room
  – Working with the Alliance for Health Policy and Systems Research (AHPSR) to fund research at the country level to obtain evidence about successful incentives for retention of health workers, and linking with HRH Department.

• **Knowledge brokering**
  – Community of Practice with HRH department as a follow up to the expert meeting
  – Collaboration on case studies at the country level
  – Taking forward the outcomes of this meeting in a manner that adds value to the process
Health Workers for All and All for Health Workers