Conference of Ministers of Finance and Health

Theme: Achieving Universal coverage

Session 8: The Health Sector as a Job Market

Date: 05 July 2012
Time: 10:30-11:30
Venue: Tunis, Tunisia

Session Aim

Speakers will discuss the critical investment in health workforce policies, education, continuous professional development, sustainable jobs, productivity, pay for performance and results based financing innovations to improve equitable access to quality health care services. A strengthened joint mandate of the Ministers of Finance and Health is key for delivering more health “Productivity” in a dynamic health labor market.

Background

For Africa to achieve the desired levels of the Health related Millennium Development Goals substantial investments in health workforce is the strategic choice. Most countries in Africa are experiencing significant underfunding of the health sector which co-exist with critical health workforce shortages; mal-distribution and low productivity. To realise the health status of our nations, the stewardships of both Ministers of Health and Finance are inevitable and their commitments in the Ministerial Conference in Tunisia will endorse the right for every African citizen to access a skilled, motivated and supported health worker for the highest attainable health and care.

Of all the regions of the World, Africa is at the bottom when it comes to the availability of health personnel. Out of the 57 countries identified by the World Health Organization in 2006 as having critical shortages of the minimum acceptable levels of health workers per population, 36 of them are in Sub-Saharan Africa. With 12% of the world population and 25% of the world burden of diseases coexist in Africa; there is only 3% of the world health workforce in the whole region. The problem is more acute in rural areas that fail to attract and retain the minimum numbers of motivated and skilled health workforce. Health sectors in Africa – as a result - are facing serious challenges in producing; employing, incentivizing, motivating and overall managing results based performance that is value for money.

In 2006 WHO estimated that approximately 1.5 million additional health workers are required in Africa to meet the minimum density of 2.28 health workers per 1,000 population to provide essential
care and 36 countries don’t meet that requirement. Population growth, production capacity and attrition will all impact on revised projections for 2015 onwards.

Unfortunately; Africa’s health sector is underfunded where only 6 out of 53 countries (Rwanda, Botswana, Niger, Malawi, Zambia and Burkina Faso) have met the 15% target for public expenditure on health as committed in Abuja in 2001. Meanwhile it is argued that health sector efficiency and effectiveness demands greater attention especially at times of austerity.

Along with the government institutions, the role of the private sector in responding to the health workforce crisis is critical. In 2005 about 60% of what spent on health in sub-Saharan Africa was private According to a 2012 study by GHWA, a majority of the population In many low- and middle income countries seeks care from the private sector. Linking pay to performance is introduced in some African countries in order to deliver more value for the money available. Early studies showed some success of this strategy on improving outputs, service quality and outcomes.

The low number of health workers is further exacerbated by their low productivity, loose governance. Also inequitable deployment is a challenge as attracting and retaining them in rural and remote areas is a particular challenge. Migration of health workers within and in-between countries has been the focus of WHO, GHWA and global stakeholders. A code of conduct was produced in 2010 aiming to improve retention and health outcomes that need to be closely monitored and improved accordingly. Salary is perceived as the most important factor for retention by many senior HRH managers. Increasing wages was associated with decreases in annual attrition from public health workforce by 1.5% among younger workers in Ghana.

KEY DISCUSSION TOPICS

- Elaborate the steering role(s) of the Ministry of Finance in the next 5-10 years in improving health labor markets in Africa?
- Discuss what value for money HRH means?
- Explain how a more equitable health care system can be realized through the HRH?
- What is the experience to date in different countries?
- What are the most promising HRH reforms and what are the challenges?
- How can best practice be shared amongst countries, and which agencies can assist?

CHAIRS & SPEAKERS

Chair Hon. Ayassor Adji Oteh,, Minister of Finance, Togo

Co-Chair: Hon. Alexandre Manguele, Minister of Health, Mozambique

Dr. Masato Mugitani, Chair, Board of the Global Health Workforce Alliance (10 min)

Mr. Francis Day-Stirk, President, International Confederation of Midwives (10 min)
Dr. Nejmedin Kedir, Abt Associates (10 min)

Dr. Chen Shengyu, Director, Human Resources Development Center, Ministry of Health, China (10 min)

Open discussion 20 minutes