



Priority Action 4

Strengthening Human Resources for Health

By lead partners:

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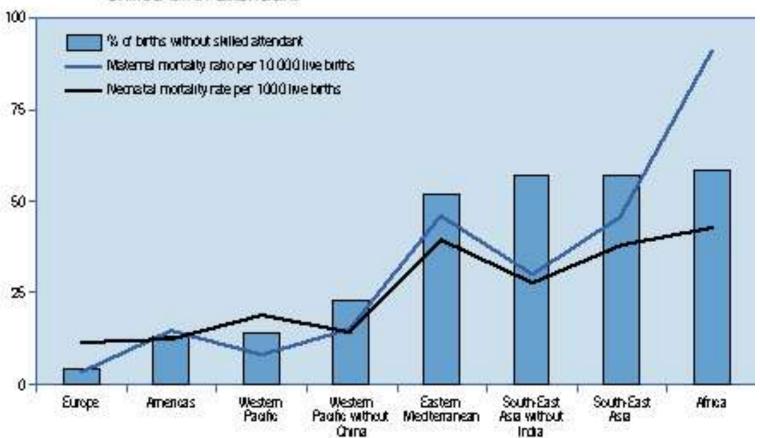
With the support from the Secretariat:

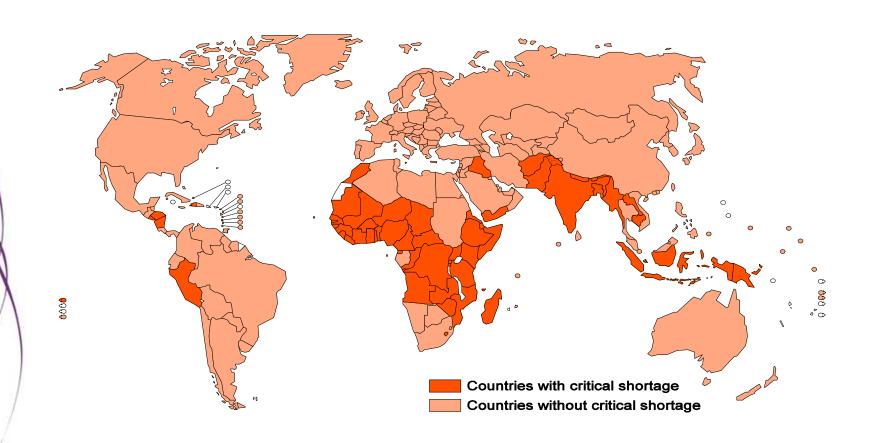
A de Francisco; K. Toure



The problem ...

Figure 1.2 Neonatal and maternal mortality are related to the absence of a skilled birth attendant



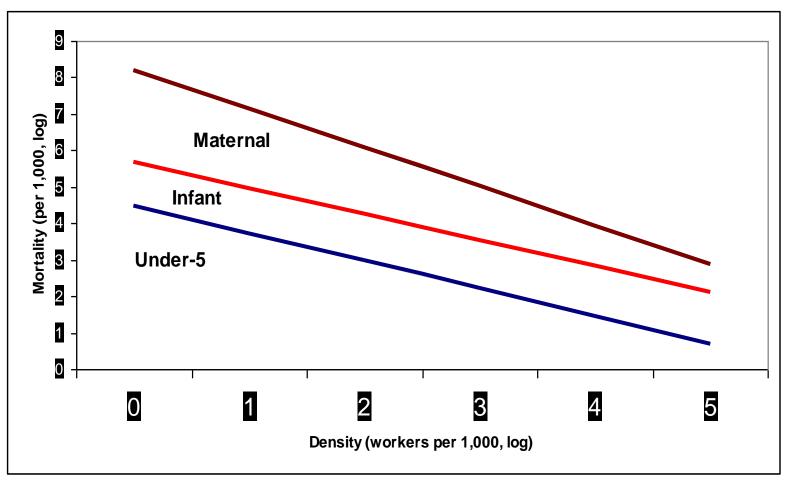


Shortage and poor distribution of human resources in high burden countries renders the provision of services for MNCH challenging

(World Health Report 2006)

improving maternal and child health through active partnership

The solution...





- Human resources is recognized as a critical area of intervention However:
 - Health care providers are not involved in policy making
 - Due in part to a lack of capacity and organizational strength of health care professional associations
 - * Assessment tools for HR are not used for HRH planning
 - Knowledge gaps on HR needs to be addressed to scale up MNCH

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PA-4

Strengthening Human Resources for MNCH

Outcome: Include integrated human resource planning as part of national MNCH plans MNCH skills and competencies are addressed..... knowledge gaps addressed, HCPA involved in national health planning

PA 4 seeks to strengthen the capacity for MNCH HR planning by making available tools for assessing HR needs for MNCH and through capacity building of health care providers to contribute to MNCH- HR planning

2009 Overview

Output I

Inventory of tools, guidelines and country experiences on HR assessment for Maternal and Newborn Health

Output 2

Review of progress on implementation of past HCPA workshop workplans (Burkina Faso and Nigeria)

Arab speaking countries HCP workshop (Amman)

Output 3

GHWA collaboration

HCPA Database

PMNCH session at XIX FIGO Congress



- Output I: Ensure that MNCH aspects of HR are adequately included in national health plans and human resource plans
 - Inventory of tools, guidelines and country experiences on HR assessment for MNCH in progress
 - Inventory will yield a database of tools with information on tool uses, strengths and weaknesses

- **Output I:** Ensure that MNCH aspects of HR are adequately included in national health plans and human resource plans
 - Adaptation and/or development of an assessment framework and tool for HR for MNCH
 - Based on the recommendations emanating from the 2009 inventory
 - Dissemination of tool through 2 regional technical meetings
 - Regional technical meetings to work with tool
 - Countries of the region to use it



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- Output 2: Analysis relating to MNCH content of human resource issues identified and research commissioned
 - Review of progress on implementation of HCPA workshop workplans in Burkina Faso and Nigeria
 - Yielded differences in progress between countries
 - Arab speaking countries workshop, Amman, December 2009: (Participation of Djibouti, Jordan, Morocco, Somalia, Sudan, Yemen and United Arab Emirates)

- Output 3: National HCPAs strengthened and involved in MNCH policies, planning and initiatives at the country level
 - Definition of a collaboration with the GHWA
 - Agreement to have PMNCH represented on the GHWA working group on HIV/AIDS.
 - ❖ Develop a working group on HR for MDGs 4&5 including PA 4 and WHA partners (GHWA Board approved this WG)
 - Participate in human resources for health reference group discussions
 - GHWA active participation in PA4 output I inventory

- ❖ Output 3: National HCPAs strengthened and involved in MNCH policies, planning and initiatives at the country level
 - Knowledge management through a HCPA database
 - * Facilitating access to country associations by creating systematic means of tracing associations
 - Increasing country association involvement in capacity building initiatives
 - * Knowledge sharing -PMNCH session at XIX FIGO Congress
 - Sharing of experiences with FIGO members towards a joint HCPA agenda for collaboration

- Output 2: Analysis relating to MNCH content of human resource issues identified and research commissioned
 - Follow up on implementation of HCPA workshop action plans in selected countries
 - Impact evaluation of regional workshops (Malawi, Burkina Faso and Bangladesh)
 - Situation analysis of needs for scaling up HR for MNCH to be undertaken in 17 countries (HCPA participating countries)
 - ❖ Bolivia regional HCPA workshop, April/May 2010

- ❖ Output 3: National HCPAs strengthened and involved in MNCH policies, planning and initiatives at the country level
 - HCPA capacity building activities are currently being conducted under output 2. Output 3 will therefore be incorporated into output 2.

Thank you