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AN ASSESSMENT OF THE ZIMBABWE GOVERNMENT STRATEGY FOR RETENTION OF HEALTH PROFESSIONALS



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INTRODUCTION

The following factors motivated this research:

"Health systems of developing countries are generally performing at sub-optimal levels for various reasons that include lack of resources, new health challenges and shortage of professional staff

"Poor economies are a major push factor for Health Professionals

"Some developing countries have opted to recruit Health professionals from developing countries to evade the high costs of training

"Concern over irresponsible recruitment from poor countries have been expressed, not only by scientists in the affected countries, but also by those in recruiting countries

"Recruiting countries have invested in special pull and stay factors for Health Professionals recruited from targeted countries

OBJECTIVES

General

To determine and assess the impacts of incentives instituted by the Zimbabwe government and non-government sector to retain Critical Health Professionals (CHP

Specific

To determine the causes of migration of health professionals

"To determine the strategies used to retain CHPs

To document the implementation of strategies to retain CHPs

"To document the monitoring of strategies to retain CHPs

To assess the impacts of strategies to retain CHPs

To assess the sustainability of the strategies to retain CHPs

To make recommendations aimed at enhancing the monitoring, evaluation and management of retention incentives to the Zimbabwe Health Services Board

METHODOLOGY

Study Design

The study was non-intervention, descriptive and analytical

Study Population

Medical doctors, nurses, pharmacists, radiographers, laboratory technicians, dentists, opticians, nutritionists and therapists

METHODOLOGY

Study Area

"Study sites included urban and rural settings

Three Administrative Provinces (Mashonaland West, Matebeleland South and Masvingo)

"Two major cities (Harare and Bulawayo)

Methods

"Desk study
"Questionnaires

"Key informant nterviews "Focus Group Discussions

"Workshop

HIGHLIGHTS OF RESULTS AND PRELIMINARY CONCLUSIONS

Some of Zimbabwe CHPs retention package

"10% rural allowance

"Support for relocation of spouses

"Facilitation of professional development

"Low interest loans

"Regular review of salaries and allowances

"Providing adequate tools of work

Temeous filling of vacant posts

"Management training

"Bondina

"Consultancy whilst in employment

Vehicle purchase schemes

"Reliable public transport

"Medical emolument (70% of basic salary)

"H-factor allowance (20% of basic salary)

"On call allowance (1.35 x basic salary)

"Recognition of additional nursing

qualifications (67.5% of basic salary)

Some suggestions for improving attractions and retention policies made by key informants

Benchmark salaries with those in other countries within SADC

"Improve career advancement pathways
"Improve professional mix at Health Ministry
of Health and Child Welfare at head office

"Management courses for trainee CHPs

"Adequate medical aid to CHPs
"Easy access to forex to pay fees
for children studying abroad
"Functional vehicle loan scheme

Negotiate with SADC countries to ensure orderly and legal migration

Land for rural health workers

"Improved infrastructure

Preliminary conclusions

Tendency of CHPs to migrate has increased.

"Movement of staff no longer sequential, i.e. movement from lower levels of the public sector to higher levels and finally migrating. There is greater tendency of staff at low levels migrating.

Major migration driver is the macro-economic environment

"Sustenance of retention incentives seems unattainable

"Bonding is unpopular and tends to promote desertion by staff without giving adequate notice