

Critical Challenges for a Decade of Human Resources in Health in the Americas

Global Challenges and
International Initiatives:
Agencies and
Foundations

The Oslo Consultation

24 - 25 February 2005

- Wide range of participants
- Take forward the Abuja Action Plan on HRH presented at HLF on health MDGs in Dec. 2004
- To consider a set of actions to address the growing crisis of HR in Africa

HLF 2 Abuja, December 2004

- HRH accorded highest 'priority among priorities' now at crisis level in many countries
- Due to:
 - Severe chronic under-investment in HRH
 - AIDS epidemic
 - Out-migration of health professionals
- Without a critical mass of motivated, skilled, and supported workers to drive health systems, countries will not achieve the health related MDGs

Norway: Active partner in Global HRH

- Many partner countries severely affected by HIV/AIDS
- Increasing availability of ART highlighted the significance of HRH
- Experience with GHI
- Norwegian support in the health sector
 - MDGs
 - Health system development
 - Harmonisation
 - HRH
- Focus on the country level

Country Led Action

- Country specific alliance building, planning, & implementation in a crowded arena
- Building on existing country led structures & processes e.g. PRS, 3-Ones principles
- Finding ways to link these structures & processes with HRH as a bridge

National Policy Framework (1)

- Each country requires its own actions- No general model can be applied across all countries
- Needs broader country partnerships across ministries & incl. GHI, bilaterals, multilateral agencies, NGOs, voluntary & private sectors
- Agreement on what to do and what not to do
- Requirement for accountability

National Policy Framework (2)

- Medium term health work force framework w/range of components to ensure complimentarity & accountability linked with:
 - Health sector plans
 - AIDS action framework
 - MTEF
 - M & E systems to measure progress and the impact of policies & strategies on the work force
 - Actionable proposals

Attention to Community Capacity

- Local NGOs, FBOs, voluntary organisations, & community institutions with defined roles should be included in health plans
- Skills of service providers can be better used by realising potential of families & communities
- Requires strategies that balance the technical approach to HRH management with social mobilisation but must be gender sensitive and aware of dangers of over-stretching communities' coping capacities
- Volunteers

Technical Assistance

- In a country led process, TA should arise from the country's national HRH policy framework
- TA should focus on:
 - Building country capacity to interact with TA
 - Institutional capacities (academic, M & E, national public institutions)
 - Sharing experience between countries (S- N/ S-S)
 - Regional capacity

Global Platform

- Required to catalyse support for country action
- Goal of global platform:
 - HRH strategies & actions are linked to HR development in general
 - Health systems development
 - Achieving improved health outcomes
- National solutions need to be accompanied by break-through actions internationally, especially for issues relating to a) fiscal space & b) migration

Transitional Working Group (TWG)

- From Oslo Consultation, TWG established to strengthen HRH to achieve national and global health goals

Future

Look forward to seeing:

- Future work of PAHO member countries in HRH
- PAHO's contribution to the Global Alliance
- Sharing of experiences between countries.
- This region has a wealth of experience in developing HRH which other countries could benefit from. Hope to hear of more south-to-south collaboration