

# Human Resources Crisis in Zambia: A Call for Urgent Action

Gilbert Kombe, MD, MPH  
Senior HIV/AIDS Technical Advisor  
Partners for Health Reformplus Project  
December 1, 2004  
Institute of Medicine  
Washington DC

# Outline of Today's Presentation

---

- I. Background on current HR**
- II. Current Challenges and Opportunities for HRH**
- III. Key Implications of HRH on Service Delivery**
  - Provision of basic health care package
  - Meeting targets of major Initiatives? E.g. PEPFAR, GFTMA, MDG
- IV. Key messages and the way forward**

# Key Questions on HRH

---

- 1. How many doctors, nurses, laboratory technicians, counselors does the country have?**
  - How are they distributed?
  - Are they really available?
- 2. What proportion of total national HR should go to HIV/AIDS, Malaria, TB?**
- 3. What are the system wide effects?**
- 4. How can the country & the international community address HRH?**

# Part I: Background



# How many public health professionals does Zambia have?

---

<b>Doctors</b>	<b>646</b>
<b>Nurses</b>	<b>8706</b>
<b>Clinical Officers</b>	<b>1161</b>
<b>Paramedics</b>	<b>1865</b>
<b>Administrative</b>	<b>16868</b>

Source: MOH/CBOH Internal Data 2004

# Ratio of Population to Doctors and Clinical Officers By Province

Province	Doctor:Population	Population:Clinical
Central	28922	7669
Copperbelt	7828	8456
Eastern	45040	9465
Luapula	51690	11929
Lusaka	5435	6563
North Western	27779	10606
Northern	57213	11764
Southern	31898	6966
Western	27325	8408

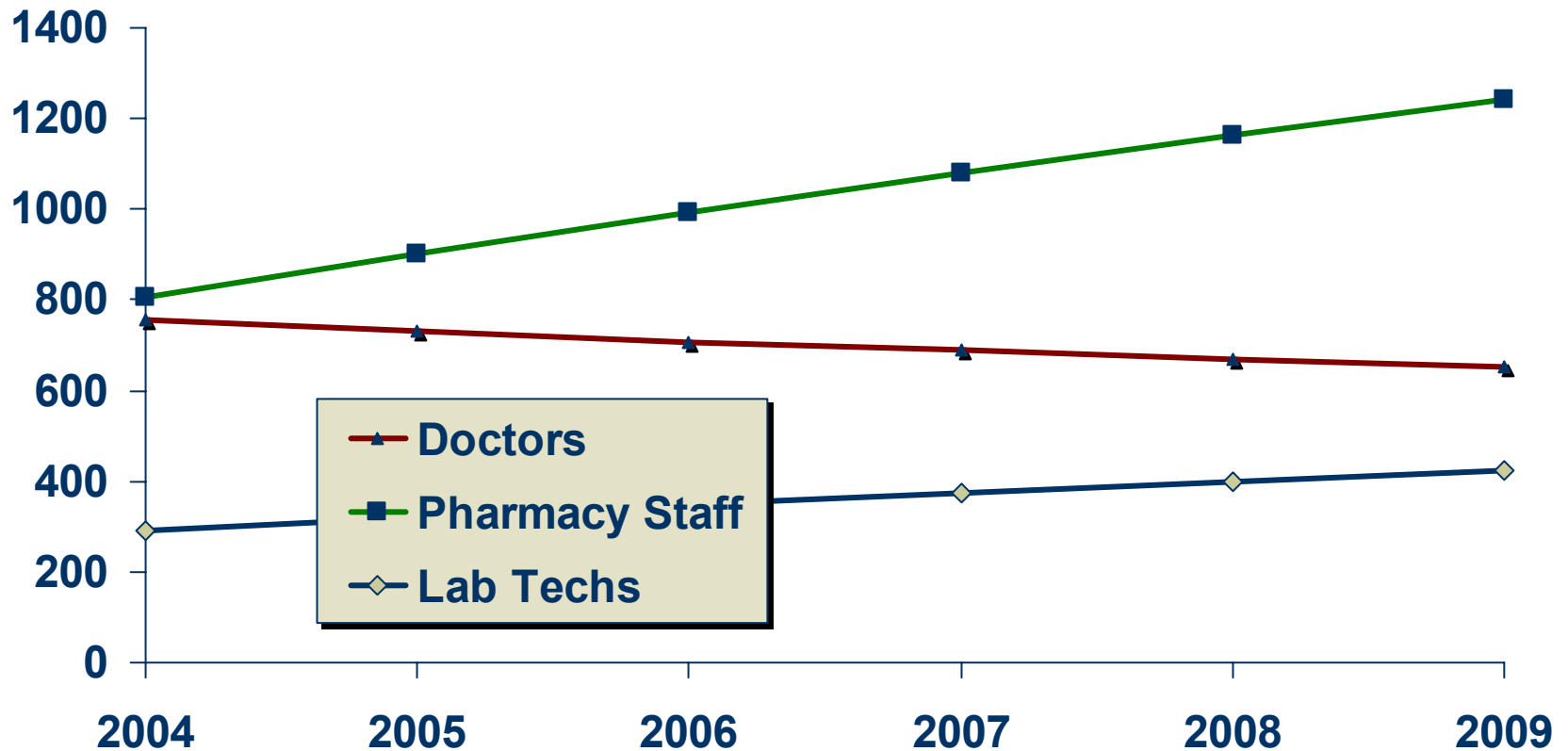
Source: MOH/CBOH Internal Data 2004

# Projected HR Stock: 2004 - 2009

Staff Type	Annual Grads	Annual Attrition Rate	Year					
			2004	2005	2006	2007	2008	2009
Doctors	49	9.8%	756	731	708	688	669	653
Pharmacy Staff	132	4.6%	807	902	993	1080	1164	1243
Lab Techs	38	3.5%	292	320	347	373	398	422

# Projected HR Stock: 2004 - 2009

Number of  
Staff



# Part II: Critical Challenges and Emerging Opportunities



# Critical HRH Challenges

---

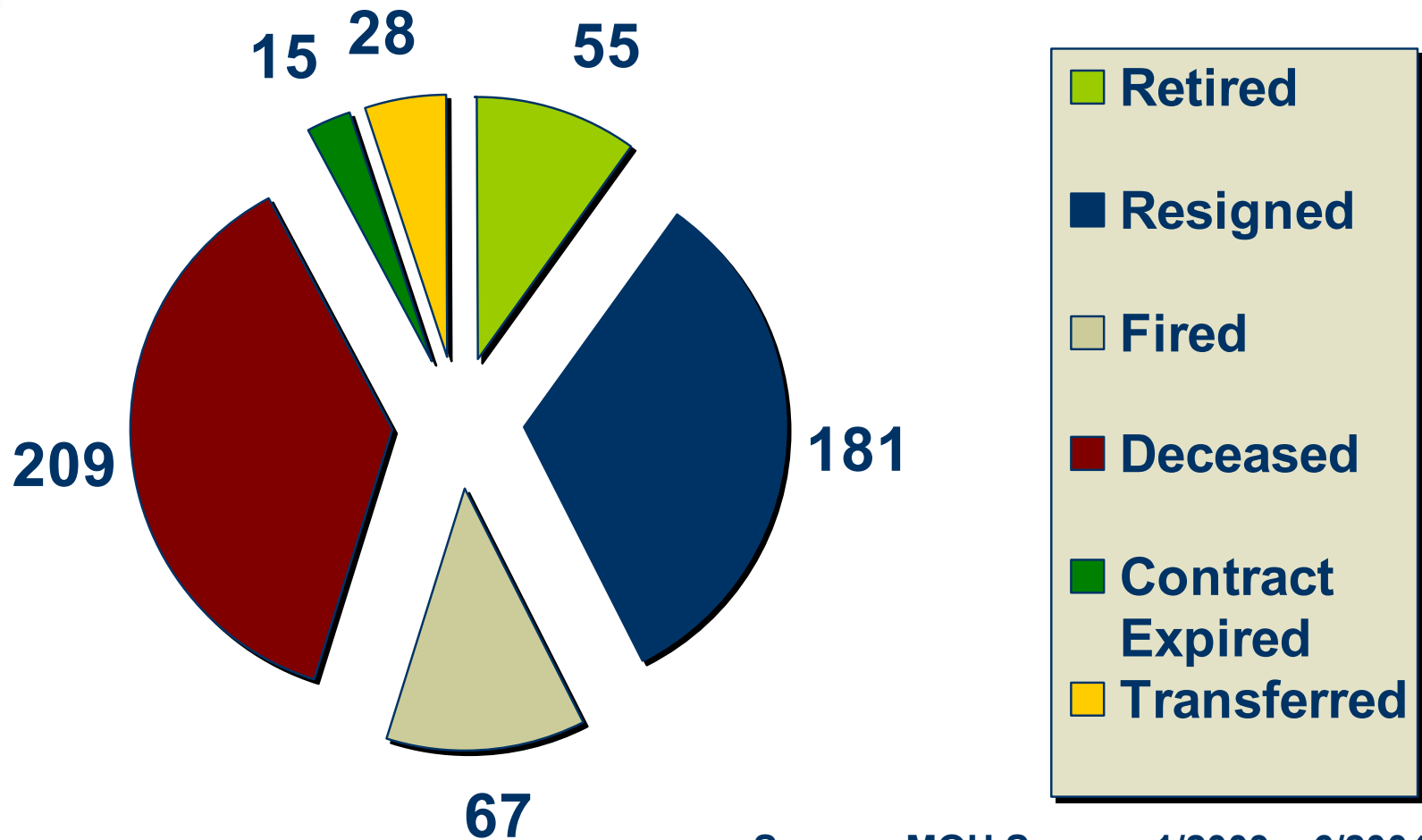
- ❖ **Increasing HR need due to HIV/AIDS, TB and Malaria**
  - ❖ **Need is greater than supply**
- ❖ **High attrition rates across all cadres**
- ❖ **Mal-distribution of health workers**
  - ❖ **38% of doctors, 24% of nurses work in Lusaka (16% pop)**

# Critical HRH Challenges Cont.

---

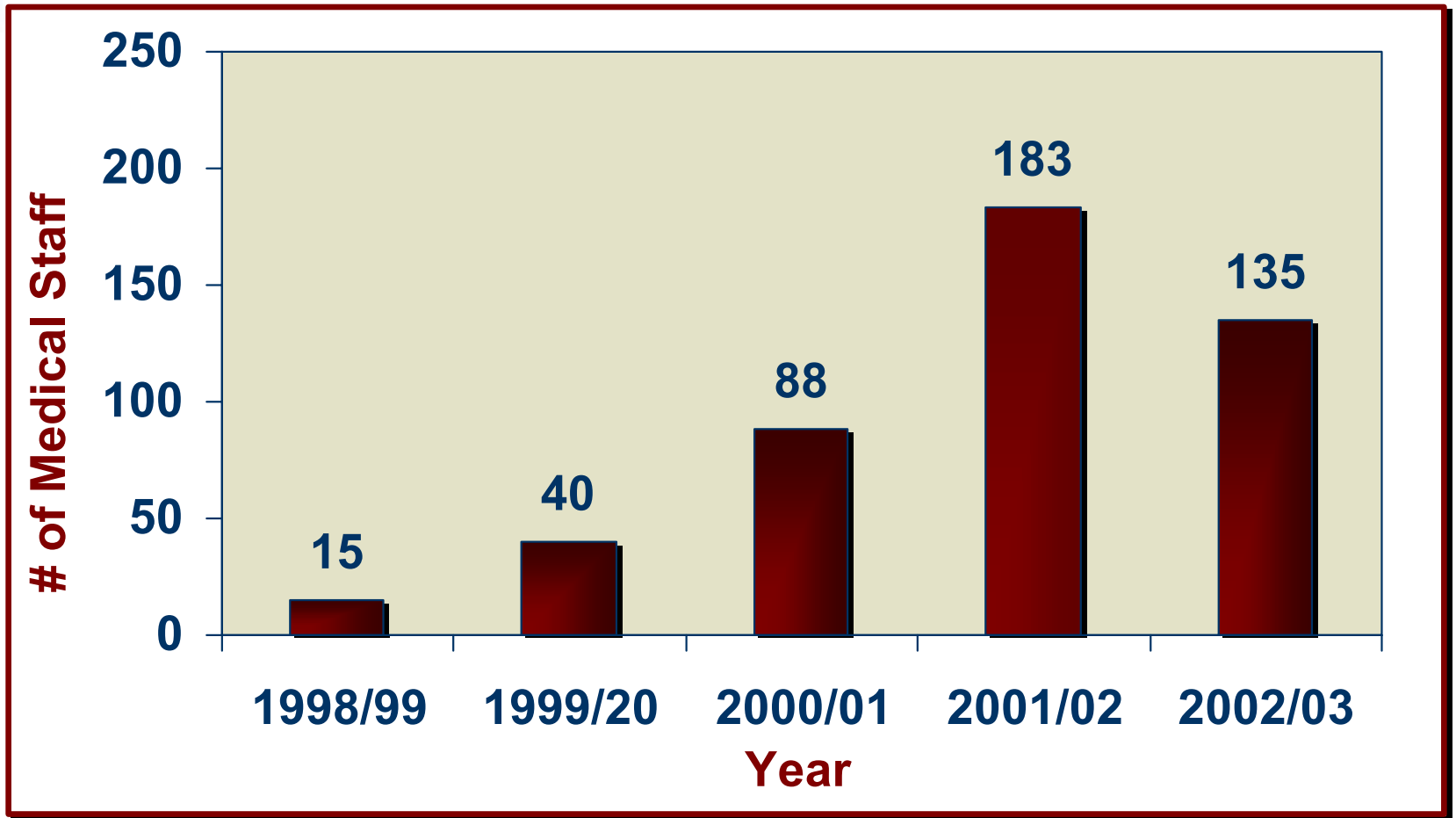
- ❖ The effect of macro-economic policies & conditionalities
  - ❖ Ceiling on country's overall spending (health 10% GDP)
  - ❖ Growth restrictions on civil service budget leading to hiring freezes
  - ❖ Need to conform to PRSP 8.1% public servant personal emoluments
  
- ❖ Weak HR management information system
  - ❖ Resulting in piecemeal solutions and studies

# Rates of Attrition by Cause in 2004



Source: MOH Survey, 1/2003 – 6/2004

# Zambian nurses Recruited by the United Kingdom 1998-2003



Source: Nursing and Midwifery Council, 2004. [www.nmc-uk.org](http://www.nmc-uk.org)

# Emerging Opportunities

---

- **Enormous funding targeted at scaling up HIV/AIDS services (PEPFAR, Global Fund, World Bank)**
  - **Expanding capacity building and training**
- **Recent national attention on HRH needs**
- **Public private partnership**



# Part III: Implications on Service Delivery

# Implications of HRH on Service Delivery

**Recent Mid Term Review of NHS Strategic Plan (2/04) stated that .. The situation is now close to disaster. Health care can not be delivered through action plans, physical facilities and supplies**



**No staff to run facilities**



**Provision of basic health package will not be met**



**Targets of major initiatives will not be achieved e.g MDG, GFTAM PMTCT, WHO 3 by 5, PEPFAR**

# Can Zambia Achieve Global Fund Targets?

Applied AIDSTreatCost Model to estimate...

- Year 1 will require 133 FTEs (doctors, nurses, lab technicians)
- Year 5 will require 440 FTEs (doctors, nurses, Lab techs)
- To accommodate a 4% uptake rate for VCT would require about 50 lab techs (FTEs), or nearly 15% of Zambia's entire public sector lab workforce (total of 350)

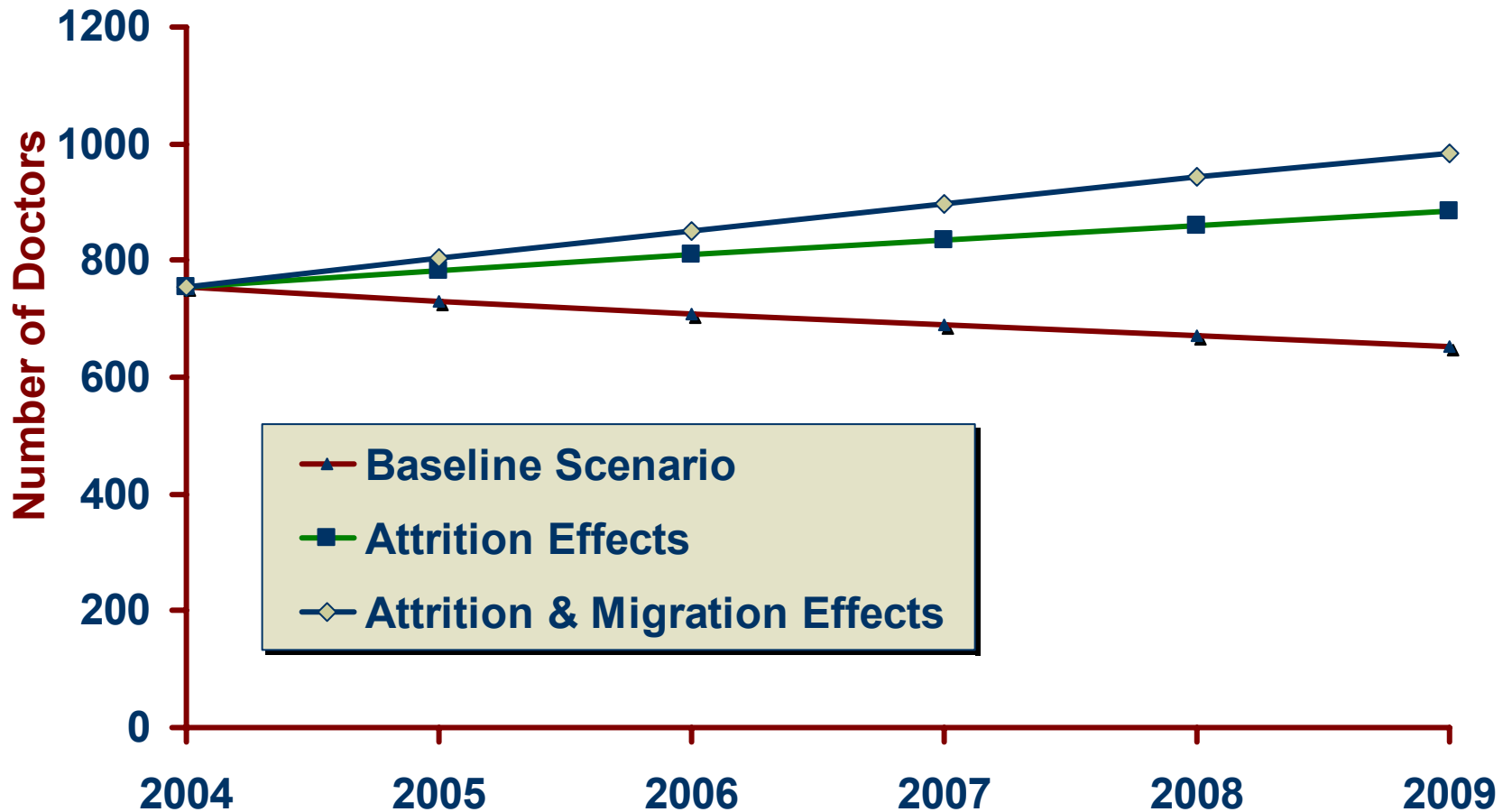


# What is the National Response to HRH?

---

- **A 10-year Human Resource Plan developed (2001)**
- **Implementation of targeted HRH studies**
- **Human resource inter-country agreement with Cuba (doctors) and Nigeria (tutors)**
- **Implementation of retention scheme for rural areas (2003-2007)**

# Need to Explore the Effects of Strengthening Compensation





---

# Part IV: Key Messages and Way Forward

# The Way Forward: Three Key Messages

---

- **HRH must be on the national agenda and action must be taken now**
  - **If not, key existing services will start collapsing**
- **Meeting PEPFAR, MDGS, 3 by 5, GFMTA, MAP targets will require substantial HRH mobilization**
- **Invest in innovative HRH solutions beyond traditional response - training**

# Acknowledgements

---

Thank you to the following for their contributions and support:

- USAID/Zambia
- Office of HIV/AIDS
- Zambia Integrated Health Project
- Central Board of Health
- Ministry of Health, Human Resource Department
- Partners for Health Reform *plus* Project
- 10 Public Hospitals