PROGRESS REPORT ON THE IMPLEMENTATION OF THE ROAD MAP FOR SCALING UP CAPACITY OF THE HUMAN RESOURCES FOR HEALTH FOR IMPROVING HEALTH SERVICE DELIVERY IN THE AFRICAN REGION, 2012–2025

Information Document

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BACKGROUND

1. Human resources for health (HRH) are essential for effective Universal Health Coverage (UHC). Thirty-seven countries\(^1\) of the Region do not have enough health workers (HWs) to ensure adequate health services. The shortages and the inequitable distribution of HWs within countries are major impediments. To address these, the Sixty-second session of the Regional Committee endorsed a Regional road map on HRH.\(^2\) The objective is to scale up the availability of health workers and strengthen their performance for improved health service delivery in the African Region.

2. The milestones due by 2015 are the focus of this report. These are: (i) development of a regional communication strategy; (ii) annual consultations with stakeholders; (iii) development of costed national HRH plans by all countries; (vi) establishment of HRH observatories in all countries; (v) increase of HRH stock by at least 15%; (vi) increase of admissions to training institution by at least 50%; and (vii) production of a WHO African Region report on HRH.

3. This report summarizes the progress made based on these milestones and proposes the next steps.

PROGRESS MADE

4. Annual consultations with stakeholders and regional communication strategy: Three consultations to assess progress of the road map were held. An implementation framework for the Road map to engage stakeholders was developed during the first consultation in 2013. Recommendations to improve the quality of medical education and training in the Region were agreed upon in the second consultation with regional experts and partners in 2014. The last consultation in 2015 came up with regional specificities to be integrated into the Global Strategy on HRH. These specificities were endorsed by the Sixty-fifth session of the Regional Committee. The milestone on the development of a regional communication strategy of the Road map was not achieved.

5. Countries with costed HRH plans, HRH observatory and increase of HRH stock: Thirty-two Member States\(^3\) have investment plans. Thirteen Member States\(^4\) established a national HRH observatory. Estimates indicate that between 2013 and 2015, the increase in the stock of doctors, nurses and midwives was about 12.8% for the three categories, 9.2% for doctors and 13.6% for nurses and midwives.\(^5\)

6. Increase of admissions to health training institutions by at least 50%: Some Member States have invested in new health schools to help to increase admissions. A regional survey is

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\(^1\) All countries of the African Region except Algeria, Botswana, Cabo Verde, Gabon, Mauritius, Namibia, Sao Tome and Principe, Seychelles, South Africa and Swaziland.


\(^3\) All countries of the African Region except Algeria, Angola, Central African Republic, Congo, Côte d’Ivoire, Equatorial Guinea, Gabon, Ghana, Lesotho, Madagascar, Mauritius, Rwanda, Seychelles, South Sudan and Zimbabwe.

\(^4\) Angola, Benin, Burundi, Cameroon, Central African Republic, Chad, Democratic Republic of Congo, Ghana, Madagascar, Malawi, Mauritania, Mozambique and Togo.

ongoing to gather the required information, including assessing the capacity of training institutions, for the production of the WHO African Region report on HRH.

7. The low progress observed in some milestones can be attributed to some challenges. The main one is the slow development/update of national HRH plans and their low implementation rates. The resources mobilized are insufficient to increase the capacity for education, training and recruitment of new HWs to meet the minimum threshold required and fully implement HRH plans. In addition, the overall management and planning capacity in health workforce interventions is still weak, including the capability to generate and maintain accurate HRH information for planning and decision-making.

NEXT STEPS

8. Member States should:

(a) Strengthen their HRH information systems by accelerating the establishment/strengthening of national health workforce observatories that would provide evidence on the health workforce.

(b) Mobilize additional internal and external resources to increase implementation rates of their HRH plans.

9. WHO and partners should support Member States to develop and implement their HRH plans in line with the Regional road map and the Global Strategy on HRH.

10. WHO should develop an implementation framework for the Global Strategy on HRH consistent with the Road map. This will guide Member States in accelerating the development/update and the implementation of their plans to address HRH shortages in order to achieve UHC and Sustainable Development Goals (SDGs).