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HWM
USAID HEALTH WORKFORCE MANAGEMENT

TECHNICAL BRIEF SERIES

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Photo: HWM Activity

Addressing Human Resources for Health at the Primary Health Care Level in Kebbi State

Background

Human Resources for Health at the PHC Level

In Nigeria, Primary Health Care (PHC) workers such as Nurses, Midwives and Community Health Extension Workers (CHEWs) play critical roles in improving health outcomes by providing essential health services to a majority of the population, particularly women and children. According to the World Health Organization's (WHO's) 2023 maternal and newborn health progress report, Kebbi State in northern Nigeria has less than 25 percent coverage of skilled attendance at birth¹ with a 0.61 Nurse/Midwife to 10,000 population ratio,² a far cry from the WHO recommendation of 58.98 Nurses/Midwives to 10,000 population.³ Kebbi State would require an additional 32,479 nurses and midwives to serve its estimated 5.6 million population⁴ to meet WHO's recommendation. Kebbi State currently produces an average of only 178 Nurses and Midwives per year.⁵

The USAID/Nigeria Health Workforce Management (HWM) Activity (2020-2025) supports the establishment of a cost-effective, well-trained, and motivated health workforce, particularly in targeted rural and remote areas of Kebbi, Bauchi, Ebonyi, and Sokoto States and the Federal Capital Territory (FCT). The HWM Activity has addressed the following challenges in the recruitment, deployment, attraction, and retention of health workers:

Recruitment

- Limited employment opportunities in the public sector for CHEWs
- Inadequate training institutions in the State to produce adequate nurses and midwives to serve the growing population
- Non-use of data to inform PHC worker recruitment



Photo: HWM Activity

Deployment

- Non-use of data to inform PHC worker deployment to facilities with the most need
- Deployment of nurses and midwives to only secondary health facilities
- Skewed deployments favoring urban PHC facilities

Attraction

- Absence of a policy to allow the recruitment of CHEWs from their training years, with automatic employment upon completion of training
- Low remuneration for PHC workers

Retention

- Non-award of promotions when due
- Insecurity in rural communities in the State
- Non-availability of secure residential accommodation with basic amenities for PHC workers, particularly those working in rural communities
- Inadequate work tools and poor PHC facility infrastructure

Despite these issues, Kebbi State is showing promise to improve the situation through 1) the commencement of the Community Nursing and Community Midwifery training programs to increase the production of PHC workers and 2) its commitment to establish a functional State Health Workforce Registry (SHWR) to guide data-driven HRH management decisions. The Kebbi State Government has also established a multisectoral HRH Technical Working Group (TWG) to provide technical direction for sustainable development of HRH in the State.

How HWM is Working Collaboratively with Kebbi State to Address Human Resources for Health Issues

Introduction of the community nursing and community midwifery programs to improve the production of PHC workers:

The Kebbi State Government currently recruits nurses and midwives from their training years with automatic employment upon completion of training. However, the Government prioritizes nurse and midwife recruitment for secondary health facilities. Recently, and partly in response to HWM efforts, the Kebbi State Government has commenced the community nursing and community midwifery programs to produce nurses and midwives for deployment to PHC facilities. The Government is also currently considering similar early recruitment and automatic employment support for CHEWs, community nurses, and community midwives to attract more enrollment into the PHC workforce pre-service training programs. HWM is also supporting the pre-service health training institutions (PSHTIs) in Kebbi State to gain full accreditation for relevant training programs. Full accreditation will facilitate approval for an increased admission quota to allow the schools to produce additional high-quality PHC health workers.

Recruitment of additional PHC workers leveraging the Basic Health Care Provision Fund (BHC PF):

The Kebbi State Government is utilizing the BHC PF provided by the Federal Government through the National Primary Health Care Development Agency (NPHCDA) to recruit additional midwives for PHC facilities. HWM is providing technical support to the Kebbi State Government for the smooth implementation of the HRH component of the BHC PF for increased availability of skilled birth attendants (SBAs) at the PHC level.

Establishing a functional State Health Workforce Registry (SHWR) to enable access to HRH data for decision making:

HWM supported the Kebbi State Government to establish a functional SHWR to inform health worker production, recruitment, deployment, and training.



Photo: HWM Activity

HWM is providing ongoing coaching and mentoring to State- and Local Government Area (LGA)-level HRH Managers to better understand and appreciate their roles and responsibilities and execute their roles more effectively in HRH management and use of HRH data decision-making.

Improving HRH management through the development of strategic plan and policy documents:

In 2021, HWM helped the Kebbi State Government develop a five-year HRH Strategic Plan (2021-2026) and policy documents to set the strategic direction for HRH planning, management, and development. HWM also helped the Kebbi State Government develop, cost, and implement the HRH activities within its annual health sector plan.

Improving HRH management through the establishment of functional HRH structures:

The multisectoral HRH technical working group (TWG) provides technical guidance for the development and implementation of HRH activities. HWM has provided technical support to the TWG to ensure improved HRH stakeholder collaboration and increased responsiveness of stakeholders to HRH issues. HWM has also supported the Kebbi State Government to form State HRH teams at the LGA level to drive the

implementation of HRH activities. The TWG works with non-State actors such as PHC worker trade unions and associations to advocate for improved State ownership, adoption, and implementation of evidence-based HRH practices to improve HRH production, recruitment, deployment, motivation, and retention. HWM has worked with the HRH TWG to conduct advocacy visits to LGAs toward strengthening existing community structures such as the Ward Development Committees (WDCs) to facilitate the provision of secure accommodations and basic amenities for rural PHC workers.

Sources

1. World Bank Open Data - Nigeria. <https://data.worldbank.org/country/nigeria>.
2. World Health Organization. "Improving maternal and newborn health and survival and reducing stillbirth: Progress report 2023."
3. Kebbi State Ministry of Health. Kebbi State Health Workforce Registry, 2022.
4. World Health Organization, 2021. "Health workforce thresholds for supporting attainment of universal health coverage in the African Region."
5. City Population, 2022. https://citypopulation.de/en/nigeria/admin/NGA022_kebbi/.

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The Health Workforce Management (HWM) Activity is a USAID/Nigeria task order under the Integrated Health Systems (IHS) indefinite delivery, indefinite quantity (IDIQ) contract. HWM supports the establishment of a cost-effective, well-trained, and motivated health workforce in targeted rural and remote areas of Bauchi, Ebonyi, Kebbi, and Sokoto States and the Federal Capital Territory (FCT).

HWM strengthens the pre-service training learning environment and in-service training programs; supports the development of a robust HRIS to keep track of recruitment, deployment, retention, and continuing education; strengthens governance and management of the health workforce; and supports HRH research to improve HRH practices and retention mechanisms.

Banyan Global implements HWM in collaboration with Abt Associates, the Institute for Healthcare Improvement (IHI), and Solina Health.