

# Increasing access to health services in remote and rural areas through improved retention of health workers: evidence from Sierra Leone

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## Background

In post conflict Sierra Leone, failure to attract and retain health workers in remote, rural areas has created a geographic imbalance in the health work force and challenges the aspirations of achieving equal access to health for all. The Ministry of Health and Sanitation (MOHS), despite efforts to develop the health workforce is still plagued with an inadequate, demotivated HRH (MOHS 2010). Current existing 'incentive packages' for the retention of health workers in these areas involve mostly monetary attributes, but very little is known about the effectiveness of such 'packages' and their long-term sustainability.

Accordingly, there is an urgent need for relevant evidence based, policy driven research to guide the MOHS to effectively plan, manage and utilise its available HRH. To date, no study in Sierra Leone has focused on the factors influencing the decision to become a health worker or the effectiveness of these 'incentive packages' on the effectiveness of attracting and retaining health workers in remote areas.

## Aims and Objectives

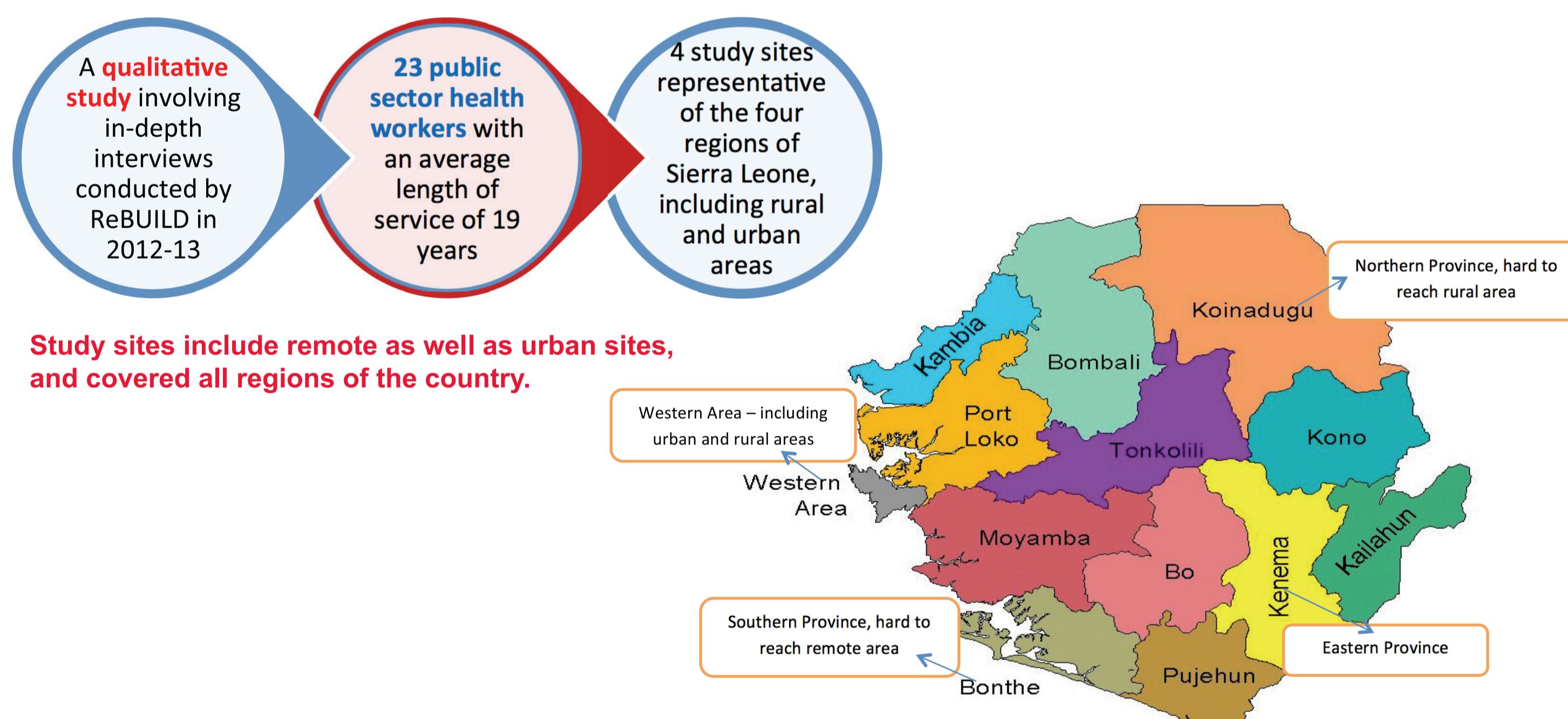
To explore the overall perceptions and experiences of health workers (HW) pre, during and post conflict

To identify HWs motivating and demotivating factors and coping mechanisms

To understand the perception of HWs in the evolution of incentives and factors influencing retention and productivity in remote areas

To deduce recommendations for effective retention of HWs in remote and provide access to equitable health services

## Methods



## Results

### Overall perception of career: Motivating and de-motivating factors

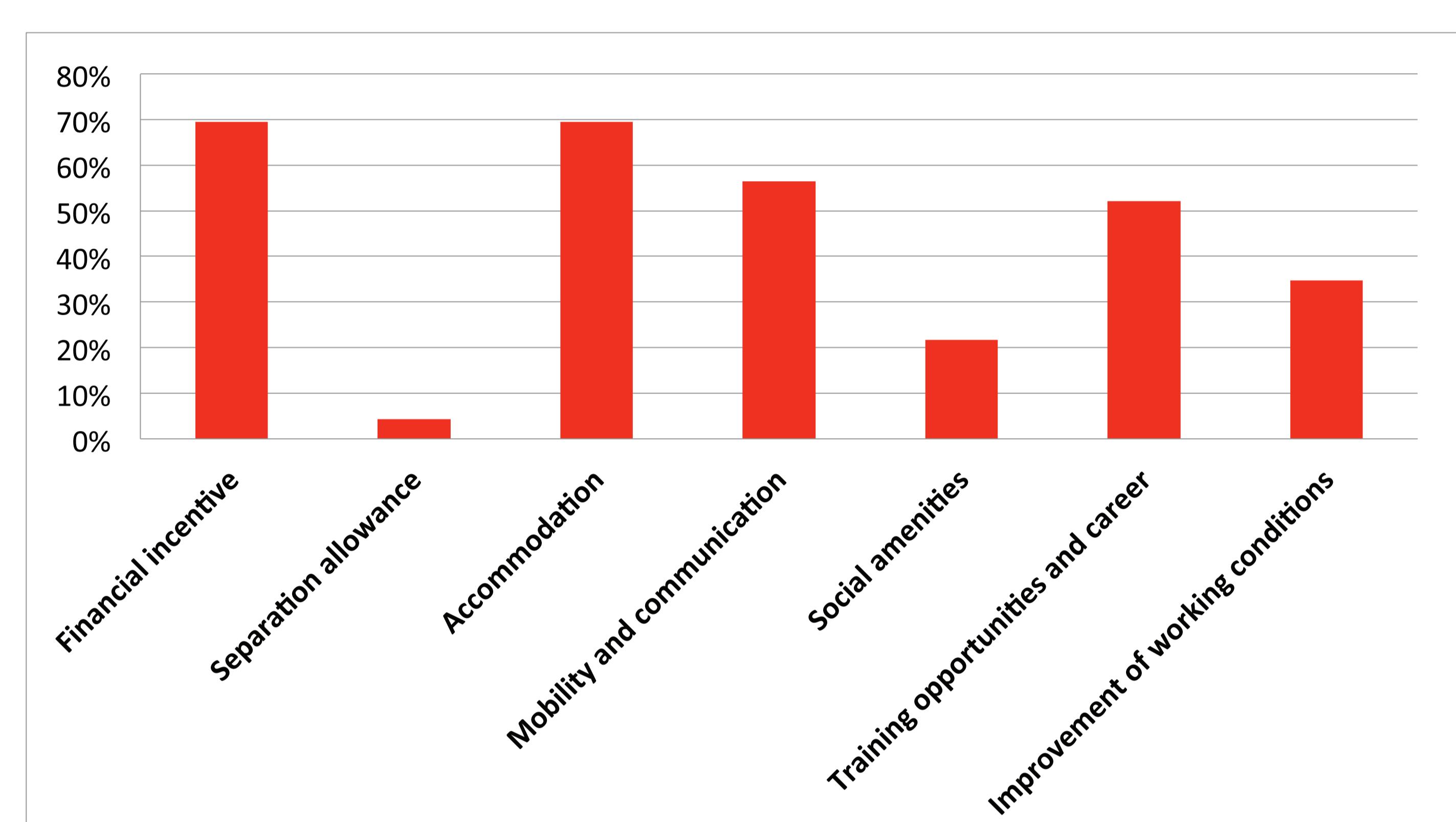
Motivating factors	Demotivating factors
Being effective in their role	Working conditions
Community service	Poor Management
Financial incentives	Limited training opportunities and lack of career progression
Improved working conditions	Limited financial incentives and benefits
Training opportunities	Political interference
Religion	Relationship with community
	Separation from family
	Security (job and personal)
	Tensions in the workplace
	Poor retention of staff
	Long working hours
	Recruitment of staff
	Challenges in rural postings

Table 1: Motivating and de-motivating factors of health workers in Sierra Leone (in order of frequency reported).

### Recommendations for an effective retention package

The figure below shows the factors rated as top priorities for an effective attraction and retention package. It was further recommended that a full package of measures should be introduced to address the rural/urban divide for health staff which should go beyond the erratic remote area allowance to include

- specific tours of duty (e.g. two years) should be respected to protect staff from feeling abandoned
- preferential training access for those who are working in remote and rural areas;
- and provision of housing close to facilities (especially for female staff, for security reasons)



## Conclusions

This study showed that in general contextual factors (e.g. economic factors, amenities and working conditions), health worker motivational factors and HRH policy levers are closely interlinked. Together, they play vital roles in influencing health workers to join the health work force and work and stay in remote areas of Sierra Leone and ultimately address the current mal-distribution of the health workforce. Challenges faced by rural posted health workers which should be addressed to increase attraction and retention include

- poor working conditions (difficult terrain, poor social amenities etc)
- length of rural posting
- emotional and financial costs of separation from families
- limited access to training
- longer working hours (due to staff shortages) and

The recruitment process in Sierra Leone is too centralised which cause inordinate delays in recruiting staff. Decentralisation of the recruitment process might also reduce the time which is currently taken to engage new staff, something which causes demotivation and attrition.

## Highlighted Key Messages

1. Working conditions in remote, rural health facilities should be improved. Financial incentives policies related to remote posting should be reviewed to establish the additional costs of living and working in remote areas and payments regularised. In addition their well-being in terms of accommodation and transportation should be a priority.
2. Rural posting policy should be reviewed and length of posting should be respected, with no political interference.
3. Remote, rural posted health workers should have equal opportunities to training and career development
4. Routes into the medical profession for those of low income should be encouraged – it is likely that these staff, especially if mid-level, will more easily be retained in remote and rural areas.

