1. Record Nr. UNINA9910148734603321

Autore	Scheffler Richard M
Titolo	Health Labor Market Analyses in Low- and Middle-Income Countries : : An Evidence-Based Approach / / Richard M Scheffler
Pubbl/distr/stampa	Washington, D.C. : , : The World Bank, , 2016
ISBN	9781464809323 1464809321
Edizione	[1st ed.]
Descrizione fisica	1 online resource (286 pages)
Collana	Directions in Development;Directions in Development - Human Development
Disciplina	331.11091724
Soggetti	Labor supply - Developing countries Manpower policy - Developing countries
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Nota di bibliografia	Includes bibliographical references at the end of each chapters.
Nota di contenuto	Front Cover -- Contents -- Foreword -- Foreword -- Acknowledgments -- About the Contributors -- Abbreviations -- Overview Tools and Data Needs to Guide Evidence-Based Policy Making on Human Resources for Health -- Introduction -- Chapter Summaries -- Conclusion -- References -- Chapter 1 A Labor Market Framework for Human Resources for Health in Low- and Middle-Income Countries -- Introduction -- Forces Affecting HLM -- Health Workers Labor Market and Health and Medical Services Market -- Integrated Framework for the HLM -- Technical Structure and Dynamics of the Impact of the HLM -- Task Shifting in the HLM -- Health Worker Productivity -- Health Worker Performance -- HLM Indicators -- Development of a Future Health Workforce -- Annex 1A: Preliminary List of Data Needed to Analyze the HLM -- Notes -- References -- Chapter 2 Data Requirements for the Economic Analysis of Health Labor Markets -- Introduction -- Data Requirements for HLM Analysis -- Identifying Data Sets for Review -- Results of the Review of Data Sets -- Recommendations for Collecting Health Workforce Data for HLM Analysis -- Conclusions -- Annex 2A: Data Sets Included in This Review -- Annex 2B: International Standard Classification of Occupations: ISCO-08 22 Health Professionals -- Notes -- References -- Chapter 3 Demand-Based and Needs-Based Forecasts for Health

Workers -- Introduction -- Needs-Based Forecasts of Health Workers -- Demand-Based Forecasts of Health Workers -- Supply of Health Workers -- Needs-Based and Demand-Based Forecast Comparisons and Shortage Calculations -- Conclusions -- Notes -- References -- Chapter 4 Measuring and Analyzing Production Supply -- Introduction -- Institutional Dynamics -- Medical Education Transformation -- Data Needs -- Indicators That Measure Progress -- Financing -- Effective Regulation -- Stakeholders -- Health Professional Schools.
Health Facilities -- Employers -- Conclusions -- Notes -- References -- Chapter 5 Health Worker Labor Supply, Absenteeism, and Job Choice -- Introduction -- 1. Framework for Analysis -- 2. Evidence -- 3. Ways Forward -- Annex 5A: Cross-Country Data Set -- Annex 5B: Equations and Variable Definitions for the Models -- Notes -- References -- Chapter 6 Migration of Health Care Professionals from Sub-Saharan Africa: Issues, Data, and Evidence -- Introduction -- Reasons for Migration -- Data Needed to Analyze Health Care Professional Migrations -- Ways to Measure the Relative Importance of Migration Determinants -- Ways to Measure the Impact of Migration -- Data Availability for Africa -- Determinants of Migration: Ghana as a Case Study -- Impact of Migration -- Conclusions -- References -- Chapter 7 Measuring the Performance of Health Workers -- Introduction -- Performance Is Presence, Quality, and Productivity -- Difficulties Inherent in the Measurement of Performance -- Tools for Measuring Performance -- Indicators -- Annex 7A: Examples of Tools for Measuring Performance -- Notes -- References -- Chapter 8 Analyzing the Determinants of Health Worker Performance -- Indicators for Analyzing the Determinants of Performance -- Ways of Understanding Process Quality Shortfalls -- Ways of Understanding Productivity Shortfalls -- Ways of Analyzing Motivation Shortfalls -- Recommendations -- Notes -- References -- Chapter 9 Measuring and Analyzing Salaries and Incentives -- Health Workers' Actual Income -- Official Income Sources -- Unofficial Incomes of Health Workers and Their Side Effects -- Methods for Measuring Official Income -- Ways of Using Administrative Data from Government Agencies -- Methods for Measuring Unofficial Income -- Direct Health Worker Surveys -- Sensitive Survey Techniques -- Patient Surveys -- Administrative Records.
Direct Observation -- Conclusions -- Notes -- References -- Chapter 10 Survey Techniques to Capture Sensitive Information from Health Workers: An Example of Their Application in Liberia -- Introduction -- Sensitive Survey Techniques -- Item Count Technique -- Aggregated Response (Sum Randomization) -- Application of Sensitive Survey Techniques in Liberia -- Testing Validity of Item Count and Aggregate Response Methods -- Results -- Regular Salary and Benefits -- Sensitive Behaviors: Direct Responses -- Sensitive Behaviors: Item Count and Aggregated Response -- Conclusions and Considerations -- References -- Boxes -- Box 1.1Vignette 1: Workforce Shortage in Thailand -- Box 1.2Vignette 2: Unfilled Posts in Kenya -- Box 1.3 Vignette 3: Maternal Health in Malawi -- Box 1.4Vignette 4: Ghost Workers in Rwanda -- Box 1.5Vignette 1: Response to Workforce Shortage in Thailand -- Box 1.6Vignette 2: Response to Unfilled Posts in Kenya -- Box 1.7Vignette 3: Response to Maternal Health in Malawi -- Box 1.8Vignette 4: Response to Ghost Workers in Rwanda -- Box 3.1Calculation of Workforce Supply in Pakistan, 2020 -- Box 4.1 Framework for Changing Regulatory Requirements -- Box 7.1Two Professionals Evaluating the Same Patient -- Box 7.2Quality of Care and Patient Outcomes -- Box 9.1Randomized Response Technique Calculations -- Figures -- Figure 1.1HLM: An Integrated Framework

-- Figure 1.2Demand and Supply of Nurses -- Figure 1.3Public and Private Market for Health Workers: One Worker's Hours and Wages -- Figure 1.4Rural and Urban HLMs -- Figure 1.5Task Shifting of Surgery Technicians -- Figure 1.6Function of a Health Worker -- Figure 1.7Health Worker Performance -- Figure 2.1Conceptual Framework Used to Define the Key Information Collected in the MABEL Survey -- Figure 3.1World Health Organization Skilled Birth Attendant Benchmark, 2006.
Figure 3.2Hypothetical Fitted Health System Values as a Function of Health Workers -- Figure 3.3Hypothetical Health Worker Shortage per 1,000 Population, 2020: The 20 Countries with the Greatest Per Capita Shortage -- Figure 3.4Illustration of SDG Composite Index Method -- Figure 3.5Demand and Supply of Nurses -- Figure 3.6Assessing Shortages and Surpluses of Workers: Conceptual Forecasting Framework -- Figure 6.1Stock of Immigrant Physicians in OECD Countries as a Percentage of Locally Trained Physicians in Source Region -- Figure 6.2African Countries with the Highest Rates of Physician Emigration, 1991 and 2004 -- Figure 6.3Number of Trained African Physicians in Africa and OECD Countries, 1991-2004 -- Figure 6.4Number of African Physicians Working in Selected OECD Countries, 1991 and 2004 -- Figure 6.5Estimated Years of Service in Country of Origin before Emigration, by Graduation Cohort -- Figure 6.6Number of Ghanaian Physicians at Home and Abroad, 1991-2004 -- Figure 6.7 Education Level of Ghanaian Migrant Physicians' Parents -- Figure 6.8 Ghanaian Migrant Doctors' Top Reasons for Migration -- Figure 6.9 Main Links with Ghana for Ghanaian Migrant Doctors -- Figure B7.2.1 Outcomes Categorized by the Average Quality of Care at Location of First Visit, Rural Tanzania, 2003 -- Figure 8.1Three-Gap Framework -- Figure 8.2Empirical Evidence of the Know-Do Gap -- Figure 9.1 Common Forms of Individual Incentives and Compensation for Public Sector Health Workers in Low-Income Countries -- Tables -- Table O.1 Sustainable Development Goal 3 -- Table 2A.1Characteristics of Data Sets -- Table 3.1Hypothetical Forecasts of Demand-Based and Needs-Based Health Worker Shortages per 1,000 Population: Pakistan -- Table 4.1Essential Domains of Health Professional Education -- Table 4.2 Cost of Medical Education in Different Countries.
Table 4.3Proposed Indicators of Health Professional Education Financing and Their Purpose -- Table 4.4Proposed Indicators of Health Professional Education Regulation and Their Purpose -- Table 4.5Proposed Indicators of Stakeholder Engagement in Health Professional Education and Their Purpose -- Table 4.6Proposed Indicators for Clinical Practicums as Part of Health Professional Education and Their Purpose -- Table 4.7Proposed Indicators of Employers' Engagement in the Health Professional Education System and Their Purpose -- Table 5A.1Cross-Country Data set -- Table 6.1 Regions of Training of African Physicians Identified in the 2011 AMA Physician Masterfile -- Table 6.2Top 12 Countries of Emigration Physicians Appearing in the 2011 AMA Physician Masterfile, by Emigration Rate -- Table 6.3Main Differences between Ghana and Abroad for Ghanaian Migrant Doctors -- Table 7.1Indicators and Possible Tools to Describe Performance of Health Workers -- Table 7A. 1General Health Management Information Systems -- Table 7A.2 Attendance Check Data Sheet (Example) -- Table 7A.3Patient Exit Interview (Satisfaction, Example) -- Table 7A.4Patient Exit Interview (Travel and Expenditure, Example) -- Table 7A.5Household Survey Questionnaire on Decision Making (Example) -- Table 7A.6Household Survey Questionnaire, Health-Seeking Experience (Example) -- Table 7A.7Direct Observation Checklist -- Table 8.1Vignette to Measure

Competence and Capacity -- Table 8.2Job Satisfaction and Motivation -- Table 9.1Sample Survey Question to Determine Benefits and Incentives -- Table 10.1Demographic Characteristics of Liberian Health Worker Respondents, 2012 -- Table 10.2Regular Monthly Compensation and Benefits of Liberian Health Worker Respondents, 2010-12 -- Table 10.3Results from Direct Responses of Liberian Health Workers.
Table 10.4Results from Sensitive Survey Responses of Liberian Health Workers.

Sommario/riassunto

This book, produced jointly by the World Bank, the University of California, Berkeley, and the WHO, aims to provide decision-makers at sub-national, national, regional and global levels with additional insights into how to address their workforce challenges rather than describe them. In order to optimize and align HRH investments and develop targeted policy responses, a thorough understanding of unique, country-specific labor market dynamics and determinants of these dynamics is critical. Policies need to take into account the fact that workers are economic actors, responsive to different levels of compensation and opportunities to generate revenue found in different sub-labor markets. Policies need to take into account the behavioral characteristics of the individuals who provide health care, but also the individuals who consume health care services and the institutions that employ health personnel. In other words, it is necessary to understand the determinants of both the supply (numbers of health workers willing to work in the health sector) and the demand for health workers (resources available to hire health workers), how these interact, and how this interaction varies in different contexts. This interaction will determine the availability of health personnel, their distribution as well as their performance levels, thus ensuring stronger health systems capable to deliver universal health coverage. The book is structured to be of use to researchers, planners, and economists who are tasked with analyzing key areas of health labor markets, including overall labor market assessments as well as and more narrow and targeted analyses of demand and supply (including production and migration), performance, and remuneration of health workers. The chapters, written by a number of internationally renowned experts on Human Resources for Health, discuss data sources and empirical tools that can be used to assess health labor markets across high-, middle- or low-income countries, but draws primarily from examples and case-studies in LMICs.