

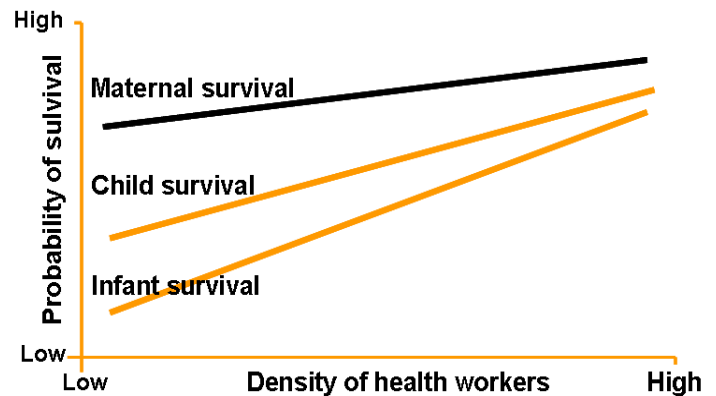
# WORKFORCE FOR HEALTH

## GLOBAL INVESTMENT CAPITAL € 1 BILLION

### Working together for health

The World Health Report 2006, shows a shortage of 4.2 million health workers. The global shortage of the health workforce and related underdevelopment of human resources for health is a contemporary reality of enormous significance. Evidence suggest that density of health workers is positively associated with the probability of survival.<sup>1</sup> In spite of this reality, the current shortage of health workers has been estimated as said to be four million world-wide.<sup>1</sup>

The need for personnel spans the continuum from highly specialized medical and public health professionals to informal caregivers. Pressing needs include education, training and retraining, reliable data, and information dissemination about the health workforce.



HEALTH WORKERS SAVE LIVES WHO REPORT 2006

Table 2 Ten-year plan of action (WH Report)

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| To align with:     |                        | 2006<br>Immediate  | 2010<br>Mid-point  | 2015<br>Decade  |
|--------------------|------------------------|--|--|---|
| Country leadership | Management             | Cut waste, improve incentives                                | Use effective managerial practices                       | Sustain high performing workforce                                   |
|                    | Education              | Revitalize education strategies                              | Strengthen accreditation and licensing                   | Prepare workforce for the future                                    |
|                    | Planning               | Design national workforce strategies                         | Overcome barriers to implementation                      | Evaluate and redesign strategies, based on robust national capacity |
| Global solidarity  | Knowledge and learning | Develop common technical frameworks                          | Assess performance with comparable metrics               | Share evidence-based good practices                                 |
|                    |                        | Pool expertise   | Fund priority research                                   |   |
|                    | Enabling policies      | Advocate ethical recruitment and migrant workers' rights     | Adhere to responsible recruitment guidelines             | Manage increased migratory flows for equity and fairness            |
|                    |                        | Pursue fiscal space exceptionality                           | Expand fiscal space for health                           | Support fiscal sustainability                                       |
|                    | Crisis response        | Finance national plans for 25% of crisis countries           | Expand financing to half of crisis countries             | Sustain financing of national plans for all countries in crisis     |
|                    |                        | Agree on best donor practices for human resources for health | Adopt 50:50 investment guideline for priority programmes |   |

A major barrier to eliminating this disparity has been the absence of global efforts to advance public health systems research as a necessary component within the human resources for health community. As a result, knowledge acquired through research to benefit the development of national plans to address the problem and ultimately save lives is sparse at best. Many countries simply do not have the evidence needed to guide the building and sustaining of a competent health workforce<sup>2</sup> or to accomplishing health priorities as outlined in the United Nation Millennium Development Goals. The knowledge and sharing of information needed to impact policy and practice is basically not available.

### References

1. Human Resources for Health: Overcoming the crisis. Joint Learning Initiative, 2004;
2. Working Together for Health: The World Health Report 2006. World Health Organization.



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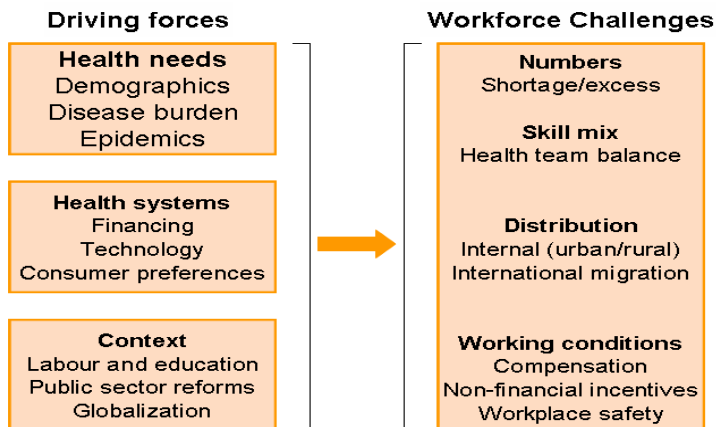
## GLOBAL INVESTMENT CAPITAL € 1 BILLION

### Introduction

The Foundation “Medical Knowledge Institute” (MKI) - founded in 2003 by Dr. Harold Robles, mission is to empower healthcare providers in developing and transitional countries to disseminate programs, which are aimed at improving the quality of life. The Institute’s goal is to offer a platform for the development of high quality programs meeting the healthcare development goals of developing and transitional countries.

The health workforce is the backbone of any health system. Its importance has been ignored or undervalued globally for decades, with the result that the world's health systems have reached a crisis point. There are not enough well-trained personnel to meet the health needs of the population.

#### FORCES DRIVING THE WORKFORCE:



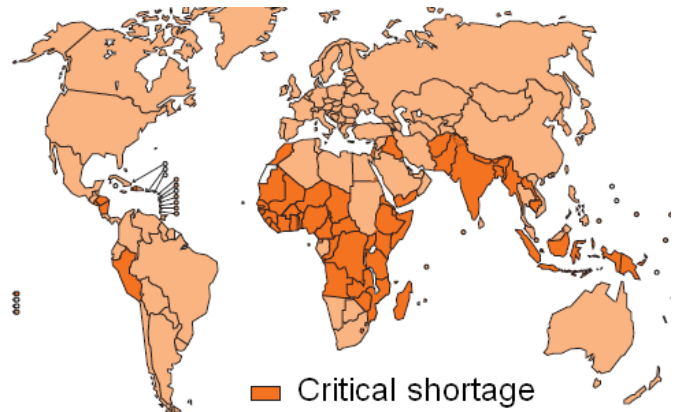
### MKI Program Agenda 2006 – 2016

The MKI program for the next 5 to 10 years will span a wide range of activities addressing key healthcare priorities in partner countries. Each country has its own specific HRH issues and circumstances. Therefore MKI HRH programs will vary according to country and will be local and/or country-specific. Programs may range from short term training for informal caregivers to national workshops or conferences for policy makers.

The Healthcare Educational programs of the Medical Knowledge Institute are dedicate to improving the quality of healthcare and promoting humanitarian values in healthcare through education, and public health programs. We will particularly focus on prevention, treatment, care and support in relation to HIV and AIDS and on prevention and early detection of cancer and cardiovascular diseases. Below is short description of a selection of MKI programs that are included in the agenda up to 2016:

#### 1) Human Resources for Health

The MKI Division of HRH purpose is to assist local and national governments, as well as non-governmental health and public health organizations, to assess and develop HRH resources in workforce policy development, capacity building and training, and information/knowledge



COUNTRIES WITH A CRITICAL SHORTAGE OF HEALTH SERVICE PROVIDERS (doctors, nurses and midwives)

dissemination. MKI assistance includes programs that:

- identify members of the health workforce within the country, including professional, non-professional, and non-medical and the key stakeholders to utilize their expertise in any project design
- map educational needs, training programs and curricula in the country, by identifying content, participant base, and collaborating institutions.
- identify and assess basic competencies and skill, that different levels of health workforce need to perform their jobs in an effective and efficient manner; develop job descriptions if needed; provide training, also identify the skill-mix needed in a country's health workforce or within a particular organization
- strengthen health management and leadership skills for all levels of health personnel. assess systematic performance and quality control of health systems; implement strategic planning for health systems to enhance delivery of health services
- analyse financing, financial management, reimbursement and payment methodologies; assist with financial planning and budgeting if needed
- strengthen health information systems and information management; design new systems that are customized to the needs of individual countries



# WORKFORCE FOR HEALTH

## GLOBAL INVESTMENT CAPITAL € 1 BILLION

### 2) MKI Faculty

MKI draws on a large international faculty. From oncology, immunology (HIV and AIDS), tuberculosis, malaria, neurology, cardiology, psychiatry, paediatrics, surgery and anaesthesiology to public health and nursing one can participate in extensive series of 5 year programs, CME curricula, conferences, consensus/advisory board meetings and workshops, designed within an interactive, practice-oriented format and responsive to local needs.

### 3) Public Health Systems Research

Many countries simply do not have the evidence needed to guide the building and sustaining of a competent health workforce or to accomplishing health priorities as outlined in the United Nation Millennium Development Goals. The knowledge and sharing of information needed to impact policy and practice is basically not available.

The sense of urgency manifested by this situation highlights the dire necessity to convene a guiding coalition of global stakeholders for structured dialogue on innovative strategies to bridging these gaps. It is critically important for participants to lay out a framework for engaging major producers, users and funders of research to further advance public health systems research as a field of study.

Objective of this MKI program are to:

1. Establish a framework for routine structured dialogue on global public health systems research
2. Develop plans for an international conference on public health systems research
3. Create, share and disseminate information on public health systems research and human resources for health
4. Develop strategies to engage others in global public health systems research

### 4) HIV & AIDS Prevention, Treatment, Care and Support Train the Trainer program

The stigma and discrimination surrounding HIV and AIDS are still a serious problem and the main cause of mother-child transmission. The Medical Knowledge Institute has joined forces with the International Confederation of Midwives (ICM) in an international training project dealing with HIV and AIDS in the broader dimension of reproductive health.

The five-year program will train an estimate number of 100,000 people in 38 countries worldwide and is launched in March 2006 in South Africa. It has been developed with technical support of the World Health Organization (WHO). At first MKI train in 5 countries 1430 master trainers, which train 100.000 healthcare workers a year. These healthcare workers bring the up to date HIV/Aids information to 10.000.000 mothers, children and their families.

Also, MKI will guide selected Member Associations in the development of education strategies to address ongoing development of knowledge, skills and practice regarding HIV and AIDS. An important objective is to provide a source of easily accessible, regularly updated information and provide midwives with the skills to access that information.

PROMILAGE OF HEALTH WORKERS SHOWING SHORTAGES.  
G30-NATIONS > 25 MILLION PEOPLE, 2004:

| Country           | Population '04 | Physicians /1000 | Nurses /1000 | Midwives /1000 |
|-------------------|----------------|------------------|--------------|----------------|
| Tanzania          | 31,4           | 0,02             | 0,37         | -              |
| Zaire             | 35,0           | 0,11             | 0,53         | -              |
| Indonesia         | 203,4          | 0,13             | 0,62         | 0,20           |
| Sudan             | 27,7           | 0,22             | 0,84         | 0,08           |
| Bangladesh        | 122,7          | 0,26             | 0,14         | 0,18           |
| Nigeria           | 103,9          | 0,28             | 1,70         | -              |
| Myanmar           | 43,9           | 0,36             | 0,38         | 0,60           |
| Thailand          | 59,7           | 0,37             | 2,82         | 0,01           |
| Iran              | 64,6           | 0,45             | 1,30         | 0,07           |
| Morocco           | 26,9           | 0,51             | 0,78         | -              |
| Vietnam           | 76,4           | 0,53             | 0,56         | 0,19           |
| Egypt             | 64,7           | 0,54             | 2,00         | -              |
| Philippines       | 71,4           | 0,58             | 1,69         | 0,45           |
| India             | 966,2          | 0,60             | 0,80         | 0,47           |
| Pakistan          | 144,1          | 0,74             | 0,46         | -              |
| South Africa      | 38,8           | 0,77             | 4,08         | -              |
| China             | 1.244,2        | 1,06             | 1,05         | -              |
| Algeria           | 29,4           | 1,12             | 2,21         | 1,13           |
| Brazil            | 163,7          | 1,15             | 3,84         | -              |
| Colombia          | 40,0           | 1,35             | 0,55         | -              |
| Turkey            | 63,4           | 1,35             | 1,70         | -              |
| Japan             | 126,0          | 1,98             | 7,79         | 0,19           |
| Mexico            | 94,3           | 1,98             | 0,90         | -              |
| Canada            | 30,3           | 2,14             | 9,95         | 0,03           |
| Poland            | 38,7           | 2,47             | 4,90         | 0,57           |
| USA               | 271,8          | 2,56             | 9,37         | -              |
| Ukraine           | 51,3           | 2,95             | 7,62         | 0,50           |
| Argentina         | 35,6           | 3,01             | 0,80         | -              |
| EU15              | 373,7          | 3,34             | 8,75         | 0,34           |
| Russian Fed       | 147,7          | 4,25             | 8,05         | 0,47           |
| Global ~80%       | 4.790,9        |                  |              |                |
| Acceptable levels |                |                  |              |                |

### 5) Oncology

- A current Cancer prevention & early detection program, an initiative of MKI in a scientific partnership with the VUmc Cancer Center Amsterdam (CCA) and other leading experts and institutions, is aimed at assisting policy makers and healthcare professionals in emerging countries in establishing their priorities and short-term goals for cancer prevention and screening, as well as in implementing new policies and guidelines in these fields.

- MKI is planning a series of *Cervical Cancer Education Roundtable* (CCER) meetings around the globe. The first CCER will be organized in the Netherlands in the Peace Palace.

- The Bob Pinedo Award for contributions to improvement in the care of cancer patients is created to honour Prof. Dr. H.M. (Bob) Pinedo and his pioneering work in oncology and global healthcare, and to annually recognize a person, institution or organization that has produced notable advances in compassionate cancer patient care.



# WORKFORCE FOR HEALTH

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### Financials – Global need, MKI finance, 1 to 10% Programme

| Mondial extra Health Workers education costs |                |
|--|----------------|
| Items  | Numbers        |
| Health Workers shortage                      | 4,200,000      |
| € / HW education year                        | 8,500          |
| Education year / HW                          | 3              |
| Global price factor / EU                     | 0.60           |
| Sum, €                                       | 64,260,000,000 |
| Management factor, %                         | 12             |
| (N)GO costs factor, %                        | 3              |
| Total sum, €                                 | 73,899,000,000 |
| Program time, years                          | 10             |
| Inflation / year                             | 2.5            |
| Cumulative inflation                         | 1.25           |
| 10 year costs, €                             | 92,373,750,000 |
| Update education, %                          | 4              |
| New total                                    | 96,068,700,000 |
| Year costs, €                                | 9,600,000,000  |
| Cost per Student, av.                        | 23,000         |

Bron: WHO Report 2006 en VPCURE.ORG

MKI has at present a minimum budget (€ 1mio) and is active in training and training development in Africa and Mid-Europe. The present program provides educating to 375 Master Midwives trainers yearly by 80% of our partners: deliver 25,000 health workers yearly, who deliver services at a 75% satisfaction level. So she has an unique organization.

Calculating to arrange a total new organization training 1 to 10% of the needed health workers (420.000) a budget of € 960,000,000 to € 9,600,000,000 during the next ten year is necessary. To set up programs and an organization to reach this a start funding of € 960,000,000, near one billion, is appropriate. After two or three year of organization, partnership, and education building, MKI is able to analyse her position and the then actually needs in the market, and obtain for a second PPP with a part of here own means to get enough funds for the following years of development.

To train 420.000 health workers in ten year, training capacity of  $42,000 + 30\% = 54,000$  is needed. With an average three years education program per health worker, MKI calculates with 162.000 education units per year. The need for Master trainers is, at 30 students per trainer, 5,400. Training 5,400 Master trainers + 30% not reaching certifications (total 7,000) + 6% spare (total 7,500) will take 250 to 300 Train the Master trainers for several disciplines. To safe time this 300 Train the Master trainers needs recruiting from, in the first place, Western institutes, bud with a native background of the countries in which the will train.

Servicing 30 to 40 counties with this Train the Master trainer means eight till ten per country, average. Besides trainers, also education institutes are needed even as scholarships, working facilities, (additional) salary systems and health care payment arrangements if not available. For that purpose MKI need in each country a partner or own organisation. The Institute of Social Sciences – ISS, at The Hague, and many other organizations, will be involved.

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### Dr. Harold E. Robles, President & Chairman

Harold Robles is President Emeritus of the Albert Schweitzer Institute for the Humanities which he founded in 1984. Over the years the Institute has organized international events and workshops under the dynamic leadership of Dr. Robles while advocating for human rights, the environment, and world peace. During the war in Yugoslavia, Robles gathered international experts in the field of Human Rights to develop strategies to address reports of widespread abuse and rape of women during the war in the Balkans. Dr. Robles is also the Co-Founder, at the request of President Gorbachev, of the International Trust for Children's Healthcare in Russia.

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## working together

## for health

