



Year 7  
Issue 5

# AAAHH Newsletter

*Asia Pacific Action Alliance on Human Resources for Health*

## The 3<sup>rd</sup> RESYST Annual Meeting Hanoi, Vietnam, 16<sup>th</sup> - 20<sup>th</sup> September 2013

On the 16<sup>th</sup> - 20<sup>th</sup> September 2013, Resilient and Responsive Health Systems (RESYST) held the 3<sup>rd</sup> Annual meeting, hosted by the Health Strategy and Policy Institute (HSPI) in Hanoi, Vietnam. Around 30 participants from RESYST partner and affiliated countries namely: India, Vietnam, Tanzania, Kenya, South Africa, Nigeria, Thailand and UK. The Annual meeting had 5 major events:

### 1. Country Progress Report

To update the events/situations which related to Health Systems Research (HSR) in each member country and to review current developments in HSR and implications for RESYST work. Dr Weerasak Putthasri presented the events/situations which related to HSR:

- a.) Implementation of Pay for Performance (P4P)
- b.) Update on situation in Thai Universal Health Coverage (UHC)
- c.) The WHA and WHO SEARO Resolution to access the health workforce education for UHC

### 2. Workshop on "International Experience on Provider Payment Reforms for Universal Health Coverage"

The workshop aimed to exchange international experiences on provider payment reforms in order to achieve the UHC goal. The workshop attended by representatives from Vietnam of the Ministry of Health, which shared international experiences on provider payment reforms for UHC. The workshop included presentations from **Dr Duane Blaauw** from the Centre for Health Policy (CHP) on incentives and payment system research, **Dr Nguyen Khanh Phuong** from the Health Strategy and Policy Institute (HSPI) who presented recent research on the capitation system being piloted in Vietnam, and **Dr Viroj Tangcharoensathien** from the International Health Policy Program (IHPP) on Thailand's lessons from provider payment reforms.



Country Progress Report Session



Dr Viroj Tangcharoensathien Presented the Thailand's Lessons from Provider Payment Reforms.

## The 3<sup>rd</sup> RESYST Annual Meeting Hanoi, Vietnam, 16<sup>th</sup> - 20<sup>th</sup> September 2013



*Feedback & Evaluation Activities*



*Journal Club*

### 3. Research Theme Meeting

The meeting objective was to share early findings of RESYST research, update on research project and also give the opportunity to the country member to exchange their experiences and learn from each other. The meeting was divided into 3 groups according to 3 RESYST research themes which are:

- a.) Health Financing
- b.) Human Resources for Health (HRH)
- c.) Governance

And also IHPP joined in 2 groups which were:

- Health Financing (**Dr Walaiporn Patcharanarumol** and **Dr Rapeepong Suphanchaimat**)
- Human Resources for Health (**Dr Weerasak Putthasri**, **Dr Krisada Sawaengdee** presented the progress of the research: Public and private nursing schools in Thailand: role and contributions in a dynamic health system., **Dr Jaratdao Reynolds** introduced the concept note of a literature review on impact and contribution of increasing private health professional production to the health system in low and middle income countries: a systematic review and **Dr Pennapa Kaweewongprasert** introduced the concept note of a literature review on state of the art of accreditation in medical and nursing school).

### 4. Introducing Gender Perspectives in Health Systems Research

led by **Dr Sally Theobald** (from The ReBUILD Consortium). Research theme groups used the ideas from Sally's presentation to think about how to integrate gender thinking into the design of RESYST research questions, datasets and analysis.

### 5. Journal Club

Junior researchers was selected by participants. They will find the interesting researches to discuss with the RESYST country members team. There were 2 discussants from Thailand which were **Dr Jaratdao Reynolds** on staffing remote rural areas in low and middle income countries: a literature review of attraction and retention and **Dr Pennapa Kaweewongprasert** on health workforce skill mix and task shifting in low income countries: a review of recent evidence.





## Health Systems in Asia: Equity, Governance and Social Impact

It will be held at Lee Kuan Yew School of Public Policy, National University of Singapore, from 13<sup>rd</sup> - 16<sup>th</sup> December, 2013

Health Systems in Asia 2013 is an interdisciplinary, social science conference, focusing on health systems adopted, or being considered for adoption, in Asian countries and their associated unique implications due to rapid economic, social, demographic and epidemiologic changes in the region. The conference is the 2<sup>nd</sup> to be held in association with Social Science & Medicine, the world's most cited social science journal, building on the success of the 2011 event. A Special Issue of selected papers presented at this conference will be published in Social Science & Medicine after the event.

In response to rapid economic and social change, the health systems of many Asian countries are experiencing major challenges. This has fostered a great deal of experimentation by governments and other health sector stakeholders. However, published research on these natural experiments has lagged behind.

The aim of the series of conferences on Health Systems in Asia is to provide a platform for researchers in a number of disciplines to present findings of research on the rapidly changing health systems of Asia, and for policy makers to engage with researchers.

The emphasis on multi-disciplinary and on a combination of policy research and basic social science makes this conference distinctive.

### Chairs

Vivian Lin,

*La Trobe University, Australia*

Gerry Bloom,

*University of Sussex, UK*

Learn more about the conference at the event below, or online here:

<http://www.healthsystemsasia.com/index.html>

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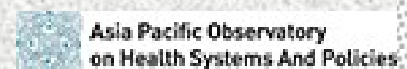


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# The Third Global Forum on Human Resources for Health



The Third Global Forum on Human Resources for Health:

Rising to the grand challenge of human resources for health

It will be held in **Recife, Brazil, from 10<sup>th</sup> - 13<sup>th</sup> November 2013**, with expected attendance of over 1,500 participants, including Heads of State, Ministries of Health and Finance, leading Civil Society Organisations, international HRH experts, health professionals, dedicated health workers, researchers and policy makers.

The Global Health Workforce Alliance are organising the Third Global Forum to serve as a global platform to advance the HRH agenda one step further, to make real progress towards UHC and to place HRH at the core of the Post-2015 Development Agenda.

To move the HRH and UHC agendas forward, under the theme “Human Resources for Health: Foundation for Universal Health Coverage and the Post-2015 Development Agenda”. The Forum will be an opportunity to share best practices and lessons learned on what policy actions and investment decisions are required for the achievement of UHC. The Global Forum is composed of high level plenaries, side sessions and satellite meeting with exhibition areas, poster presentations, ground breaking photo exhibits and inspire participants to build a better world for health workers and contribute to an exceptional opportunity for professional development and networking.

A major highlight of this forum is to announce the opening of the nominations for the HRH Awards 2013 which will honour four categories of outstanding players in the field of human resources for health: health workers working in remote/hardship area; country level decision makers; partner agencies and organizations; and journalists. The HRH Awards 2013 will be delivered during a special ceremony at the upcoming Third Global Forum on Human Resources for Health.

Learn more about the forum at the event below, or online here:

<http://www.who.int/workforcealliance/forum/2013/3gflatestnews/en/>

## KEY DATES:

**Pre-forum** - 9<sup>th</sup> November 2013 (side events)

**Main forum**- 10<sup>th</sup>-13<sup>th</sup> November 2013

**Post-forum** - 13<sup>th</sup>-14<sup>th</sup> November 2013 (field visits)

**Non-stop activities:** Marketplace



# Human Resources for Health News

## Research

- **Interventions for supporting nurse retention in rural and remote areas: an umbrella review.**  
-Gisèle Mbemba, Marie-Pierre Gagnon, Guy Paré and José Côté

This overview provides a guide to orient future rural and remote nurse retention interventions. We distinguish four broad types of interventions: education and continuous professional development interventions, regulatory interventions, financial incentives, and personal and professional support. More knowledge is needed regarding the effectiveness of specific strategies to address the factors known to contribute to nurse retention in rural and remote areas. In order to ensure knowledge translation, retention strategies should be rigorously evaluated using appropriate designs.

Read more: <http://www.human-resources-health.com/content/11/1/44>

- **District health managers' perceptions of supervision in Malawi and Tanzania.**  
-Susan Bradley, Francis Kamwendo, Honorati Masanja, Helen de Pinho, Rachel Waxman, Camille Boostrom and Eilish McAuliffe

Supervision is a central component of effective human resource management. Policy level attention is crucial to ensure a systematic, structured process that is based on common understandings of the role and purpose of supervision. This is particularly important in a context where the majority of staff are mid-level cadres for whom regulation and guidelines may not be as formalised or well-developed as for traditional cadres, such as registered nurses and medical doctors. Supervision needs to be adequately resourced and supported in order to improve performance and retention at the district level.

Read more: <http://www.human-resources-health.com/content/11/1/43>

- **A National study on nurses' retention in healthcare facilities in underserved areas in Lebanon.**  
-Fadi El-Jardali, Mohamad Alameddine, Diana Jamal, Hani Dimassi, Nuhad Y Dumit, Mary K McEwen, Maha Jaafar and Susan F Murray

This study reveals poor retention of nurses in rural and underserved areas in Lebanon, especially in the hospital sector. The status quo is disquieting as it reflects an unstable and dissatisfied nursing workforce. Developing targeted retention strategies for younger nurses and those working in hospitals as well as the offering of professional development opportunities and devising an incentive scheme targeting rural nurses is pivotal to enhance nurses' job satisfaction and retention in rural settings.

Read more: <http://www.human-resources-health.com/content/11/1/49>

# Conference Alert

Topic	Now more than ever: targeting zero
Date	7 <sup>th</sup> -11 <sup>th</sup> December 2013
Venue	Cape Town , Africa
Website	<a href="http://www.hrhresourcecenter.org/icasa_2013">http://www.hrhresourcecenter.org/icasa_2013</a>
Topic	HRH Prince Mahidol Award Conference (PMAC) on Transformative Learning for Health Equity
Date	27 <sup>th</sup> -31 <sup>st</sup> January 2014
Venue	Bangkok, Thailand
Website	<a href="http://www.pmaconference.mahidol.ac">www.pmaconference.mahidol.ac</a> .
Topic	Global Health: Interconnected Challenges, Integrated Solutions
Date	15 <sup>th</sup> -17 <sup>th</sup> April 2014
Venue	Geneva, Switzerland
Website	<a href="http://www.hrhresourcecenter.org/geneva_forum_2014">http://www.hrhresourcecenter.org/geneva_forum_2014</a>

## A Message from the AAAH Secretariat

With no conference for AAAH this year there is an opportunity for the AAAH to really develop our research and engage with other networks.

We would like to inform about Prince Mahidol Award Conference (PMAC) 2014 coming up. **As of “theme Transformative Learning for Health Equity”** will held 27<sup>th</sup>-31<sup>st</sup> January 2014 at Centara Grand & Bangkok Convention Center at Central World, Bangkok, Thailand. We will be delivered further information in the next two months.

## Secretariat Team

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*“Strengthened HRH planning and management capacity toward adequate, equitable, efficient and effective HRH and health systems for health equity and quality improvement in the Asia-Pacific region”*

