

EFFECTIVE INCENTIVE SYSTEMS HELP BECAUSE...

...they improve performance, and enable and encourage health professionals to stay in their jobs, in their profession and in their countries.

BACKGROUND CONTEXT

About the global health workforce crisis

The World Health Organization estimates a shortage of more than 18 million health workers by 2030.

The growing gap between the supply of health professionals and the demand for their services is recognised as an urgent issue for health and development worldwide. Health professionals are key to meeting the ambitious targets defined for Universal Health Coverage and the Sustainable Development Goals.

What is driving health professionals away?

Imbalances in labour supply stem from a number of causes.

These include: poor human resource planning and management; unsatisfactory working conditions characterised by heavy workloads; lack of professional autonomy; unsafe workplaces; and unfair pay.

It is within this context that policy and decision-makers, planners, researchers and managers have turned their attention to identifying evidence-based mechanisms that will be effective in improving the recruitment and retention of health professionals.



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THE VALUE OF INCENTIVES

Incentives are an important means of attracting, retaining, motivating, satisfying and improving the performance of employees.

The World Health Organization defines incentives as “all the rewards and punishments that providers face as a consequence of the organisations in which they work, the institutions under which they operate and the specific interventions they provide.” Simply defined, incentives are the factors within health professionals’ work environments that enable and encourage them to stay in their jobs, in their profession and in their countries.

Incentives can be applied to groups, organisations and individuals and may vary according to the type of employer as well as each health professional’s preferences and motivators. Incentives can be positive or negative (as in disincentives), tangible or intangible, financial or non-financial.

FINANCIAL VS. NON-FINANCIAL INCENTIVES

There is evidence that the implementation of a range of incentives is important if workers’ motivation, behaviour and performance are to be influenced.

FINANCIAL	NON-FINANCIAL
<ul style="list-style-type: none">• Salary/Wage• Pension• Bonuses• Insurance (e.g. health)• Allowances (e.g. housing, clothing, childcare, transportation)• Fellowships• Loans• Tuition reimbursement	<ul style="list-style-type: none">• Safe and clean workplaces• Vacation days• Professional autonomy and empowerment• Sustainable employment• Flexibility in working time and job sharing• Recognition of work• Support for career development• Supervision• Coaching and mentoring structures• Access to/support for training and education• Planned career breaks, sabbatical and study leave• Occupational health and counselling services• Recreational facilities• Equal opportunity policy• Enforced protection of pregnant women against discrimination• Parental leave

While poor wages are often considered the main factor linked to health professionals’ motivation and practice, non-financial incentives such as career development opportunities, appreciation, access and support to study and learning, among others, constitute critical features to attract and retain health professionals. Managers need to consider health professionals’ individual preferred incentives and health professionals have to share their preferences.

IMPLEMENTING EVIDENCE-BASED INCENTIVE SYSTEMS

Evidence-based incentives that are most likely to be effective and sustainable present a context-specific and comprehensive package, adequately resourced both financially and in human resource terms.

They also:

- **Involve input from all relevant stakeholders**, including health professionals, in the design phase.
- **Embrace the principles of transparency, fairness and consistency.**
- **Fit the purpose** for which they are intended.
- **Are regularly evaluated** to maintain the strategic impact of the incentive components.
- **Employ a combination of financial and non-financial incentives.**
- **Motivate the target population** balancing individual and team related incentives.

Failure to consider these elements when designing and implementing incentive systems could result in unfavourable results, such as greater and unsustainable organisational costs, staff attrition and migration.

The equally important need for more research to inform and support decision making in this area cannot be overstated. Improved monitoring and evaluation, enhanced generation of evidence and knowledge-sharing will contribute to the cost-effectiveness of such initiatives. Innovation and testing of new ideas must be fostered as countries, organisations and managers move forward to strengthen the health sector workforce globally.



STAND UP FOR POSITIVE PRACTICE ENVIRONMENTS

Evidence-based incentive systems are an important feature of Positive Practice Environments.

Today's policy and decision-makers, planners and managers are challenged to identify and apply a combination of financial and non-financial incentives that are responsive to meeting policy objectives. While some countries have implemented comprehensive incentive schemes to support the effective recruitment and retention of health professionals, others lag behind and must drastically improve their efforts.

Greater commitment and political will on the part of governments, employers and managers is required. Better targeted and committed funding for incentives is needed to create people-centred and resilient health systems, particularly in developing countries.

Let's join in commitment and action to create quality workplaces for quality care.

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