

Health Worker Migration Policy Council Council Conversation Series: Stories and Solutions

Championing a Regional Approach to Health Workforce Planning and Management: Profile of Professor Kayode Odusote

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Addressing the issue of migration in the context of the global shortage of health workers involves more than considering the movements and distribution of doctors, nurses, and midwives—another critical factor is the presence or absence of the dynamic, innovative thinkers and leaders are needed in order to strengthen and sustain health systems. As a physician and academic, Professor Kayode Odusote easily could have pursued a career abroad. Yet he chose to stay in his native Nigeria and focus his skills on regional leadership in advancing solutions to the health workforce crisis.



After Professor Odusote became a neurologist and professor, he joined the West African Health Organization (WAHO) to help improve health in the region by harmonizing policies and pooling resources among the fifteen member countries. He applied his interest in technology and self-professed love of “tinkering” to finding an affordable, effective solution to a particular challenge that was holding the region back.

All WAHO member countries have a critical shortage of health workers and fall below the World Health Organization’s recommended threshold of sufficient personnel to provide essential health care. In order to make the most of the health workers they do have, they need to encourage health workers to remain on the job and not migrate to another country. Additionally ensure health workers are adequately trained, equitably distributed, and well supported.

To engage in effective planning for their national health workforce, countries need reliable information on the availability and distribution of different categories of health workers. Most WAHO countries had some health workforce data linked to the Ministry of Finance’s payroll database, but these did not provide information on availability, distribution, and skills mix. Therefore WAHO sought a functional and sustainable human resources information system (HRIS) that can be used by all member countries and enable the regional exchange of information and aggregation of data.

Professor Odusote found an open source solution with the [iHRIS Suite of software](#), a free tools to empower countries to track, manage, and support their health workers developed by IntraHealth International and supported by the USAID-funded *CapacityPlus* project. iHRIS is open source therefore local developers can freely modify the code in order to suit their needs.

The WAHO’s regional approach is to implement iHRIS leverages resources from *CapacityPlus*, other USAID-funded projects, donors, and global organizations. Currently, iHRIS is being implemented in Ghana, Mali, Nigeria, Sierra Leone, Togo, seven countries in other regions, and other country members have expressed interest in implementing the software including Liberia and Niger. Empowered through training and remote technical support from *CapacityPlus*, local IT developers are customizing and implementing



the software.

Sharing Experiences, Pooling Resources

Professor Odusote who now works with the Foundation for Sustainable Health Development—Nigeria and doing consulting work for IntraHealth explains:

The approach we are trying to use is to be less dependent on external support and also be able to share experiences amongst ourselves. That's why we went for open source, the advantage being that you could train people to modify [iHRIS], use it, and learn about it. You also could build experiences locally, which you could share. The regional approach is useful because it allows you to pool resources and experiences. We now have people in Togo that can go to Mali to help. Nigerians can go to Ghana and so on. That is very important for sustainability. And doing it the way we did also allows for ownership. It wasn't that someone from the outside was telling us what to use. It was that we found something, we wanted to try it, we liked it, and we kept it.

Through an online community, in-country iHRIS developers and implementers are able to further support and extend the software. Largely in thanks to volunteers, iHRIS has been translated into thirteen languages. Growing pools of regional and local experts enable future innovation and sustainability to be done more easily at the country level. In turn, opportunities to innovate, share experiences, and sustain important efforts over time can be key factors in encouraging local talent—and leaders like Kayode Odusote—to apply their skills in their home countries and region.

Recommendations for Regions or Countries That Want to Adopt This Approach

- Conduct a needs assessment to understand each country's current health workforce information and administrative systems and processes.
- Contact the iHRIS team at hris@capacityplus.org. The team can help you get started with the software and identify organizations and donors who may be able to provide additional support.
- Identify an established regional body or health organization, such as WAHO, that can lead HRIS implementation at the regional and national level. Also provide additional support such as funding, technical assistance, and additional resources from global projects, donors, and/or organizations.
- Formalize partnerships among local, regional, and global organizations and projects doing related work that can provide technical and/or financial support to the regional body.
- Hold high-level meetings with regional and national stakeholders, such as health workforce directors or ministers of health, to ensure ownership, create data-sharing agreements, and identify policy questions.
- Engage stakeholders to agree on data standards prior to data collection and entry, so data can be aggregated, shared, and analyzed at the national and regional level.
- Ensure iHRIS integrates into the overall health information system architecture and can regularly share data with other systems, such as payroll databases, medical record systems, or applications that track service delivery.
- Customize iHRIS for each country's specific needs, administrative processes, and data standards to build country ownership and encourage use of data for daily management of health workers. Seek remote technical support when needed.
- Hold workshops and trainings to build regional and national capacity for iHRIS data collection, management, and use, and for providing technical support for the software and backing infrastructure.
- Link with other projects and organizations for further remote support.

Additional Resources:

- [West Africa's Regional Approach to Strengthening Health Workforce Information](#) (CapacityPlus technical brief)
- [iHRIS Administrator: Level I](#) (eLearning course hosted on CapacityPlus's HRH Global Resource Center)
- [A West African Perspective on Open Source](#) (two-minute video interview with Kayode Odusote)
- [iHRIS.org](#) (website with downloads, demos, and information on the iHRIS Suite)

The Council Conversation Series: Stories and Solutions is a program of The Health Worker Migration Policy Council (the "Council"). The Series includes case studies, policy briefs and films based on narratives, interviews and research that shares solutions and inspires action among the decision makers who are faced with addressing the challenges of health worker migration. The series features Council members, in addition to health workers and policy makers while showcasing best practices and examples of innovation and action towards addressing health worker migration.

The Council was established as an independent body of high-level policy makers and experts from source and destination countries dedicated to promoting solutions that address the challenges posed by health worker migration. The Aspen Institute's Global Health and Development program serves as the Secretariat for the Council as part of the Health Worker Migration Initiative. The Council believes that globally respected ethical norms, innovative collaborations between source and destination countries and efforts to develop sustainable workforce solutions will encourage better health worker migration governance while facilitating a more equitable distribution of health workers across the globe. The Council aims to ensure that the ethical principles, outlined in the WHO Global Code and other policy mechanisms, result in the development of policies and efforts that better manage the gains and losses associated with the international migration of health workers while ultimately striving to improve health outcomes for all. The Council works in partnership with WHO, Global Health Workforce Alliance (GHWA), The African Platform on Human Resources for Health, Health Workforce Advocacy Initiative (HWA) and International Organization for Migration (IOM).

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