

⁴School of Agricultural, Forest and Food Sciences, Bern University of Applied Sciences, Bern, Switzerland
Contact: helen.prytherch@swisstph.ch

Background:

For many countries, overcoming problems related to human resources is critical for progress towards Universal Health Coverage. Planning the workforce means to make decisions on required number, qualification and distribution of health workers. In Tajikistan, despite significant reforms, the health workforce is unequally distributed with physicians being mainly specialized and concentrated in urban areas.

Description:

Using the Tajik case, we present a first comprehensive assessment of the Primary Health Care (PHC) staffing situation in a Central Asian setting applying and critically discussing the Workload Indicators of Staffing Need (WISN) method developed by the World Health Organization. Staffing requirements were derived using annual service statistics, obtained from a re-count of monthly routine data from registration books at facility level in the year 2016. Available health cadres in PHC at district and facility level were compared to the according staffing needs. Sensitivity analysis was performed to test the robustness of the predictions, and to identify the main contributors to uncertainty in the predicted staff requirements.

Results:

For doctors performing general tasks in the PHC, there is currently an excess of full time equivalents. Moreover, health centres are overstaffed in terms of nurse positions. If the various speciality doctors currently working at rural health centres are not included, there is a shortage of family doctors in place. Sensitivity analysis revealed that staffing requirements in the PHC sector in Tajikistan are most importantly influenced by antenatal care visits.

Lessons:

The present study concludes that there is an oversupply of doctors and nurses at PHC and a shortage of family doctors working at the level of health centres. Consequently, a more rational health workforce planning based on well-grounded methodology such as WISN has potential to contribute to more efficient and effective health service delivery in Tajikistan.

Key messages:

- Countries shifting towards a family medicine model face challenges like an oversupply of specialists performing general medical tasks and a lack of general/family doctors in the transition phase.
- To identify staffing requirements a transparent and reproducible approach, such as the WISN methodology, is required to steer future staffing needs and possible re-training of current staff.

Bringing greater transparency to health workforce planning in Tajikistan: using the WISN approach

Helen Prytherch

H Prytherch^{1,2}, Z Kasymova¹, F Lechthaler^{4,1}, S Kiefer^{1,2}, S Yarbaeva¹, Z Hojimatova³, A Farrukhzoda¹, K Wyss¹

¹Swiss Centre for International Health, Swiss Tropical and Public Health Institute, Basel, Switzerland

²University of Basel, Basel, Switzerland

³Republican Clinical Centre for Family Medicine, Dushanbe, Tajikistan