



Experience of Gao region in the training, recruitment and retention of health workers in rural and remote areas of Mali

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Outline

- ☐ Context
- ☐ **Training**
- ☐ **Recruitment**
- ☐ **Retention**
 - ☐ Challenges
 - ☐ Conclusion

Context

- ❑ Insufficient qualified health personnel in the three northern regions (4 per 10,000 inhabitants compared to 6 per 10,000 at national level)
- ❑ Insufficient midwives in the northern regions (6% of midwives in Mali)
- Source: ASRH-DRH/2019



Context (2)

Sustainable local solutions



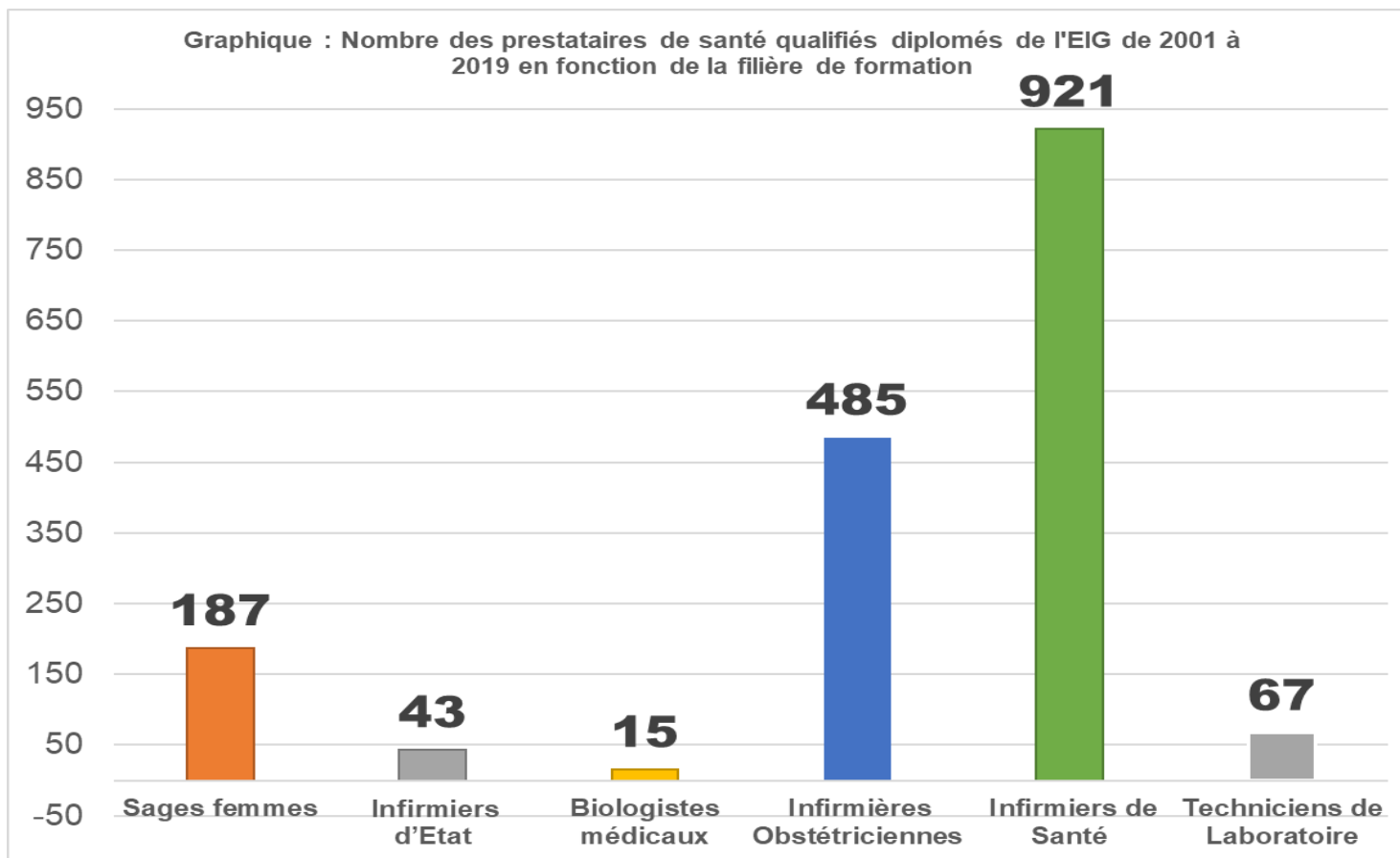
- Opened in November 2000, the GAO School of Nursing (EIG) is the result of a public-private partnership.

Goal

- Training programs responding to the health needs of the communities and embedded in the communities of the GAO region.

Training result (1/3)

Out of a total of 2267 enrolled from 2001-2019, 75.8% or 1718 health workers have been trained, 66.7% of the graduates are women



Source: Rapport d'activités EIG 2020

Training results (2/3)

Evolution of the graduates of the EIG school from 2001 to 2017

- ✓ **1581** health workers were trained, **83%** of whom were health technicians; women represented **66.5%**

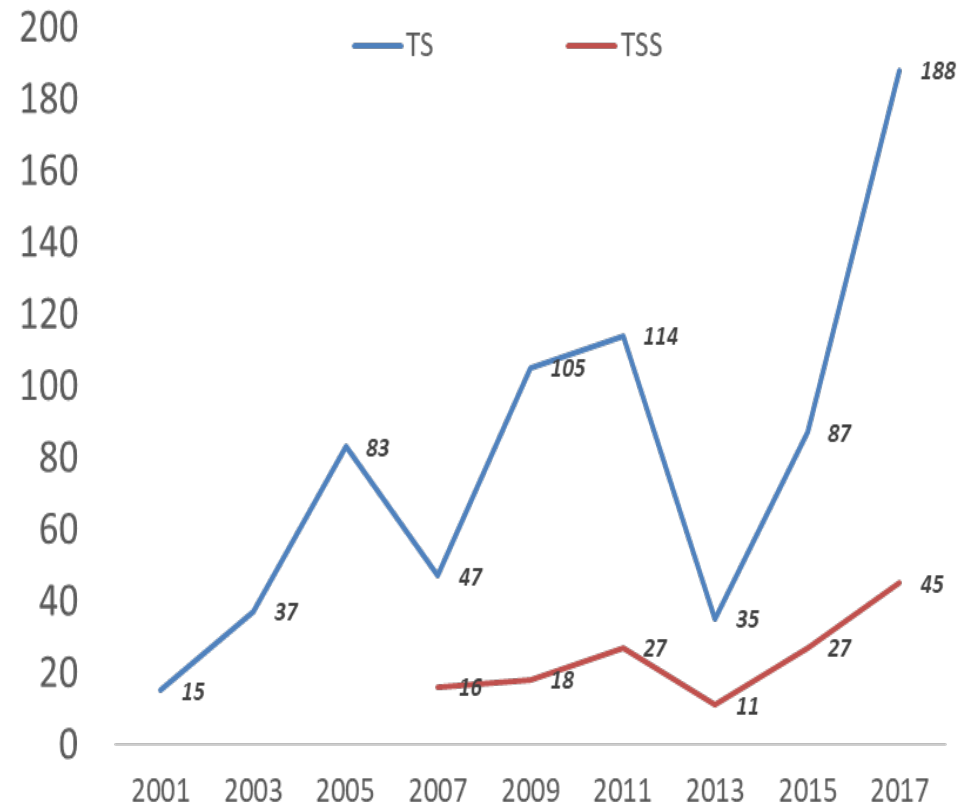


Figure 1 : Evolution de la production des effectifs de l'EIG par année et cycle de formation

Source: Rapport d'activités EIG 2018

Training results (3/3)

- Community participation in the EIG management :
 - ☐ Board of Directors
 - ☐ Payment of the training fees of the students
 - ☐ Bi-annual assessments of training needs in collaboration with the Regional Health Directorate (DRS) and the Regional Directorate of Social Development
 - ☐ Allocation of grants or financial aid

Recruitment management

- ❑ signing of contracts with the communities to serve in the locality
- ❑ Salaries paid by the local government
- ❑ Local graduates recruitment

Retention

- ❑ The average length of service (presence in the health facilities) is **10 years** for health workers who graduated from the EIG and **6 years** for health workers who graduated outside the northern regions;
- ❑ EIG graduates represented **78%** of providers in the northern health facilities (in 2019)
- ❑ **93%** of EIG graduates have only worked in the North of Mali (in 2019)

Retention factors

- ❑ Scholarships / financial aid
- ❑ Marital status of women
- ❑ Working environment
- ❑ Proximity with the I'EIG (continuing competencies development)
- ❑ Allocation of on-call housing
- ❑ Water point and solar electrification

Contribution to the improvement of health indicators in the northern regions

- Progression of MCH indicators at the level of the three regions until 2012, when the northern regions of Mali were occupied by armed groups.
- From 2013, the same evolutionary trend as before the crisis has resumed.

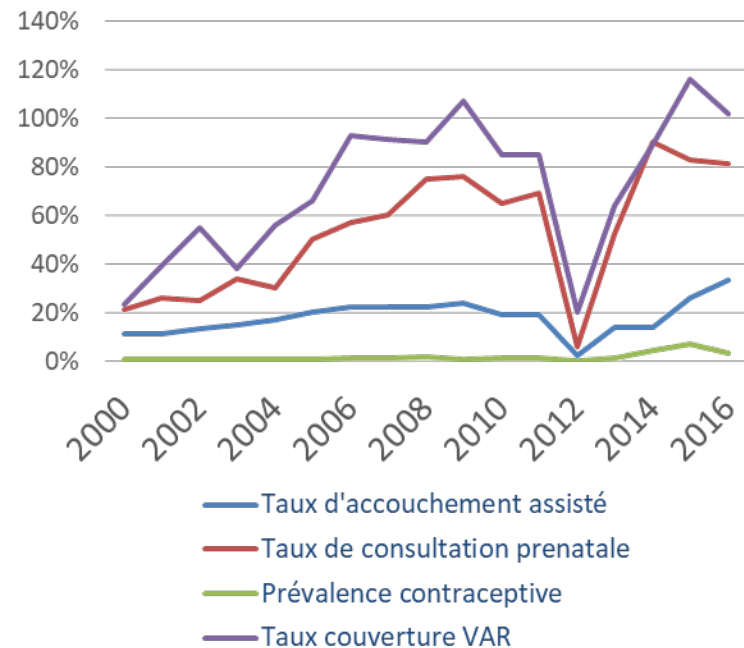


Figure 3 : Evolution of health indicators from 2000 to 2016 in the Gao region

Challenges

- ❑ Lack of a career path for the health workers
- ❑ Insufficient decentralization of health facilities
- ❑ Decline in community participation due to increasing poverty since the last three years
- ❑ Lack of logistical means for the placement of learners in the health facilities
- ❑ Persistent insecurity in the northern regions



Conclusion

- The training of providers in their locality of origin is an appropriate and efficient strategy for retaining qualified health workers in the rural areas.
- Despite growing challenges, especially those related to insecurity, efforts are being made to maintain quality health services.
- This strategy, developed by the ISG, should be sustained.