

Human Resources Issues in Iraq's Health System: A Proposed Reform Plan



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Problem Description

The healthcare system in Iraq which was considered to be one of the finest in the Middle East region during 1980s [1], is now suffering from several major problems with the continuous violence, political instability, and the corruption endemic widely spread within the country's institutions.

One of the key problems is the shortage and misdistribution of human resources in Iraq's public healthcare system. Although human resources represent the single largest cost input in the health system reaching up to 47% of ministry of health (MOH) budget [2]. However, major issues are facing the public health sector. These issues are related to and caused by many reasons. Migration of health professionals plays a significant role. Post-war unsafe and, threatening conditions for high ranking health professionals, as well as, the corruption and unfairness of the system led to migration of large numbers of them. About half the national total before the war (about 18,000) has fled the country which now has about fifth physicians and third nurses per head as neighboring Jordan [3]. According to latest statistics, about 40% of the country's primary health-care clinics lack physicians. Although the Iraqi Government estimates that 628 physicians have been murdered in recent years, the Iraqi Medical Association has put the number closer to 2000 [3]. In addition, the training of health professionals is overlooked and unable to keep up with modern knowledge and practice which led health professionals to travel seeking knowledge in other developed countries.

The unequal distribution of workforce between urban and rural areas and female male ratios is another major issue in regards to human resources in public sector [4]. Poorly motivated health workers might be likely to provide poorer-quality services. HR problem inhibit efforts to scale up services and achieve Millennium Development Goals.

The Proposed Reform Plan

To improve the current status, the following steps of reform are proposed:

a. Pushing for changes in the current policies and implementation of new regulations by MOH with the objective of increasing the capacity of human resources recruitment, employment and retention. This can be achieved through implementing high quality incentives for the workforce especially physicians and nurses working in the public sector. In addition to applying changes to improve the salary structure that allows employees to live in contented living standards. Development and application of a performance based payment system for enhancing the productivity of physicians.

b. Promoting for new regulations to be implemented that are concerned with the safety of health workers. This can be achieved through cooperation with other government institutes and facilities in order to provide special forces delivering protection for health workers and their families inside and outside the hospitals especially in conflict regions of the country. Establishing these forces requires developing new departments and managements to run them with an adequate budget. Furthermore, future planning for modern towns establishments especially designed for health workers to live around or very close to the health facilities they work in provided with gated security and continuous monitoring would be of great value.

c. Redesigning education and training programs for MOH employees through providing post graduate fellowships and professional development courses for employees on regular basis. Providing high quality international technology-related educational opportunities for MOH leadership and different levels employees.

d. Mid and long term planning for health reform in terms of human resources management development. Establishing programs, fellowship & scholarship for manager of health workforce department in Planning & resources developing. Planning for new educational facilities aiming towards graduating all with latest technology

e. Planning for increasing number of future medical schools,

nursing schools and health allied universities and institutes. Promoting nursing bridging programs to raise level of nursing staff and reduce nursing classes.

f. Promoting for equal and fair allocation of professional health workforce through developing regulations & measures allocation for all governorates (centrally and locally) and establishing plans to increase feminist percentage in health staff [5].

Potential Effects of Reform Plan on Health System Actors, Functions, and Outcomes

Implementing high quality incentives program and improving the key structure of salaries will lead to a substantial increase the employment rate in the public sector. Additionally, providing high-level safety measures would decrease the number of highly skilled and experienced physician migration outside the country and encourage their return. Not only it could help in overcoming the human resources related issues, moreover, will lead to a significant augmentation of the performance of health workers and thus improving health outcomes of the whole system. Providing professional and post graduate educational opportunities for MOH employees would be another appealing factor for health professionals leading also to increase in the desire of working in the public sector. These educational opportunities help professionals in keeping the pace with research studies and latest technology facilities, thus, providing services with global standards.

Improved management planning and development could make significant changes in establishing grounds for forming better future management and leadership in MOH and public health sector and reducing the effect of corruption in the health institutions. Finally, increasing the number of educational facilities provided with latest global practices would provide the public sector with graduates of high quality, extended vision and

remarkable leadership skills improving the quality of services provided.

Advantages and Disadvantages of the Planned Reform

The major advantage of overcoming the human resources problems in the Iraqi health system would be the sensible improvement in the health services provided to patients in terms of quality and the equal fair distribution of these services. This could essentially lead to a huge leap forward towards a complete health system reform. Developing efficient leadership with outstanding management skills could also create a healthy environment for a whole better system reducing the effects of corruption and providing better opportunities for both patients and providers. Establishing larger numbers of health workers with global standards of patient's management skills and extensive training backgrounds in rural and underserved area will be of great value.

A major disadvantage that could be encountered is the non-fair distribution of incentives to the eligible candidates including graduate education opportunities that should be ideally speaking according to seniority and priority. Corruption could take place in such event and affect the whole process negatively.

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