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TRAINING OF NATIONAL HEALTH PERSONNEL

1 INTRODUCTION

Inclusion of the topic "Training of National Health Personnel" on the agenda of the twentieth session of the Regional Committee arose from resolution WHA21.20¹ of the Twenty-first World Health Assembly which requested the Director-General to act on a series of measures, including the following item:

"(c) to suggest to the regional committees, at their meetings in 1969, that they undertake an analysis of the problems of training professional and auxiliary health personnel."

It is intended that the views and conclusions of regional committees on particular problems of training applicable to their own regions will serve to guide the Executive Board at its forty-fifth session and the Twenty-third World Health Assembly in making appropriate provisions for the Organization to assist further the training of national health personnel.

2 BACKGROUND

The lack of trained medical and paramedical personnel in many countries has long been recognized as a major obstacle to the development of health services. In this connexion, the Fifteenth World Health
/Assembly in ...

¹Text of resolution WHA21.20 is appended.

Assembly in 1962, in considering the subject of the United Nations Development Decade endorsed the recommendations of the Executive Board that governments should "concentrate on the education and training of professional and auxiliary staff for strengthening their health services, with specific measurable targets for expanding each category of staff, depending on pre-determined needs for each" (resolution WHA15.57).¹

Despite considerable efforts by many governments in this direction and although WHO for its part has continued to give education and training activities a very high priority in its overall programme, progress in the training programmes of national health personnel has been slow and not very satisfactory due to a variety of factors.

3 COLLECTION OF BASIC INFORMATION

Recognizing that it will not be feasible at this stage for each country to carry out a detailed and comprehensive study on the training of national health personnel, it is proposed that countries now be asked to provide basic information using simple uniform guidelines. The collection of such data will enable an individual assessment and review to be made as well as a comparable study of the findings both from regional and inter-regional viewpoints.

It is thus suggested that relevant information under the following headings might be provided:

3.1 National health plan

Does such a plan exist, and if so, is it within the context of an overall social and economic development plan?

3.2 Health manpower plan and projections

Is there a health manpower component of the national health plan? What are its essential details?

/3.3 Categories ...

¹Handbook of Resolutions and Decisions, 10th ed., 436-437.

3.3 Categories of existing health personnel (professional and auxiliary) ✓

- (a) Duties, functions and responsibilities of each category
- (b) Number currently in the service
- (c) Numbers trained each year
- (d) Estimate of numbers required over the next five years (by year)
- (e) Education and training of each category
 - (i) admission requirements;
 - (ii) curriculum content and design;
 - (iii) duration of training;
 - (iv) training facilities and resources for each category - number of schools, enrolment, number of graduates per year, faculty, budget, ministry responsible for training (health, education), field training facilities, etc.;
 - (v) work opportunities for each category;
 - (vi) continuing and post-basic education arrangements.

3.4 Outline of plans for training of new categories of health personnel ✓

4 PROBLEMS OF TRAINING

As well as submitting basic information on existing categories of health personnel and training activities, it would be helpful if countries could elaborate on specific problems encountered in their training programmes and how these are being solved or tackled.

Some problems commonly met are:

4.1 Lack of a national health plan based on a realistic appraisal of health needs, demands and resources

A national health plan should define health policy, describe the pattern of health services, project the health manpower necessary to implement the plan and outline the functions of each category of health personnel and the training each should receive.

/4.2 Relevance ...

4.2 Relevance of training programmes to national needs

Unfortunately in many countries, there exists a lack of flexibility in training programmes and a continuation of the more traditional type of training not particularly relevant to the social, economic and health situations of the country.

4.3 The relatively unsatisfactory state of general or basic education in many developing countries

This is a fundamental problem which health administrations cannot influence directly, but which in turn influences the requirements for admission, the level of training, the curriculum, duration of courses, etc.

4.4 Shortage of qualified teaching staff

This is a widespread problem aggravated by lack of teacher training facilities, the "brain drain" and often the lack of inducement to keep faculty members in their own countries.

Concerning the training of auxiliaries, the question is frequently raised whether they should be trained by other auxiliaries or by professional staff.

4.4 Numbers and standard of trainees

It is often a problem to decide whether training programmes should be geared to the production of a few well-qualified personnel or to the production of more personnel but of a lower category and possibly of a lower standard. These questions also involve the duration of training of each category of health personnel.

4.5 Curricula and course contents

While it is generally agreed that courses should be designed to meet national needs, it is not easy to achieve this ideal. Health administrations as the eventual employers of trainees must be involved in the planning and designing of various courses and steps must be taken to relate professional and auxiliary education and training to

/the national ...

the national health plan. Operational research may be conducted to determine a national strategy of health services that will help a country to design curricula geared to meet the needs and demands that have been ascertained.

4.6 Methods of teaching - theoretical or classroom teaching versus practical and field training

Many institutions have difficulty in keeping up-to-date with teaching methods, the use of audio-visual aids, training manuals, field training activities, etc.

Language problems regarding the translation of manuals and teaching material are encountered, particularly in courses for auxiliary personnel where the texts of manuals and books are not freely available in the local language.

4.7 Integration of training courses

There are many advantages in integrating training courses of various categories of health personnel. In this way, health workers become aware of each other's duties, responsibilities and problems and this facilitates their working as a team rather than as individuals.

It is often difficult to integrate courses and success in this direction will depend much upon co-operation and collaboration between training institutions as well as individual instructors.

4.8 Continuing education

A common problem facing health administrations is how to keep their personnel, already in the service, abreast of new developments, methods and policies.

Refresher courses, workshops, seminars are commonly used to assist in this direction.

4.9 Promotion of auxiliaries

The question is often asked whether it is desirable to promote schemes under which auxiliary health personnel can acquire higher

/qualifications ...

qualifications and more extensive training so as to permit their promotion to higher categories. The educational level of the auxiliary is an important factor in considering this matter. In situations where health auxiliaries are gradually replaced by more highly-qualified persons, some difficulties may arise.

4.10 Job satisfaction

This is an important subject to which health administrations as employers must give attention to see that there is a satisfactory scheme of employment which takes into account adequate compensation, security of tenure, meritorious increase, hardship pay, and other incentives designed to upgrade the morale of health workers thus preventing the rapid turnover of staff and possibly limiting the "brain drain".

RESOLUTION OF THE WORLD HEALTH ASSEMBLY

TWENTY-FIRST WORLD HEALTH ASSEMBLY

WHA21.20
22 May 1968

TRAINING OF NATIONAL HEALTH PERSONNEL

The Twenty-first World Health Assembly,

Considering that the World Health Organization is called upon in accordance with its Constitution to assist governments in strengthening their health services and to promote teaching and training in the health, medical and related professions;

Appreciating the efforts being made by all countries, particularly the developing countries, to speed up their economic and social development, including the improvement of their health situation;

Being convinced that in order to improve the health situation in all countries it is necessary to intensify efforts to develop and utilize human resources, and particularly to train national staff, taking into account the development plans in each country and its present and long-term needs for qualified health staff at all levels; and

Recalling resolution 2083(XX) of the General Assembly of the United Nations, dated 20 December 1965, which refers to "measures calculated to intensify concerted action by the United Nations and the specialized agencies with regard to the training of national personnel for the economic and social development of the developing countries" and "invites ... the specialized agencies ... to bear these problems in mind when they review future programmes of action",

1. RECOMMENDS Member States to give increasing attention to the training of professional and auxiliary health personnel;
2. REQUESTS the Director-General:
 - (a) to continue to give high priority to programmes of assistance to Member States in the training of professional and auxiliary health personnel;

/(b) to continue ...

- (b) to continue to collaborate with the United Nations and the specialized agencies in the utilization and development of human resources;
- (c) to suggest to the regional committees, at their meetings in 1969, that they undertake an analysis of the problems of training professional and auxiliary health personnel;
- (d) to make provision for a general evaluation during the forty-fifth session of the Executive Board of the experience accumulated by the World Health Organization, taking into account the conclusions reached by the regional committees; and
- (e) to submit to the Twenty-third World Health Assembly a report on any concrete measures that the World Health Organization might appropriately take to assist further the training of national health personnel at all levels.

Sixteenth plenary meeting, 22 May 1968
A21/VR/16