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What motivates primary healthcare workers to perform well in resource-limited settings: Insight from realist evaluation of health systems strengthening in Nigeria



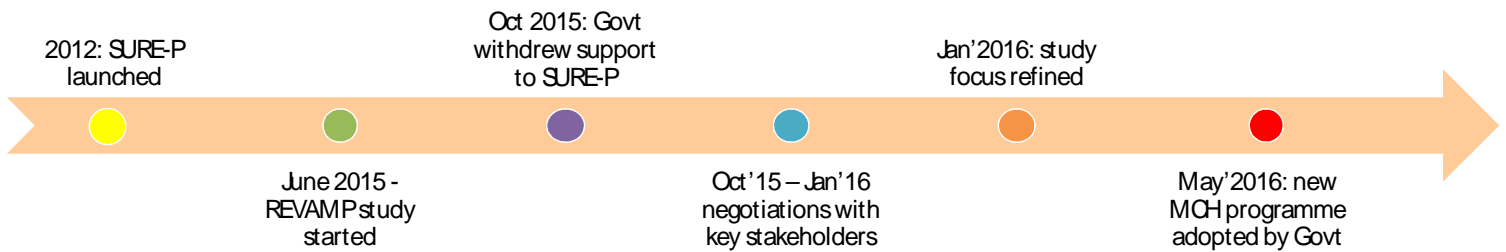
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1. Introduction

- In 2012, a UN General Assembly resolution endorsed the need for an adequate, well-trained, skilled and motivated health workforce, to accelerate progress towards Universal Health Coverage (UHC).
- There is abundant evidence on production of primary health care (PHC) workers to ensure access to and utilization of health services.
- There is growing recognition that a motivated workforce provide quality healthcare
- Information is limited on key factors that motivate PHC workers to perform well, particularly in resource-constrained countries.
- We present emerging insights on key influences on PHC workers motivation.

2. The Subsidy Reinvestment and Empowerment Programme (SURE-P)

- From 2012 to 2015, the Government of Nigeria implemented a social protection programme (SURE-P) to improve the lives of most vulnerable groups.
- One component focused on improving maternal and child health (SURE-P/MCH) through:
 - a) Recruiting and training PHC workers (2,000 midwives and 10,000 community health workers).
 - b) Upgrading infrastructure, improving availability of supplies and medicines and activation of ward development committees
 - c) Providing financial incentives to pregnant women to promote access to maternity services such as ante-natal care and facility deliveries



3. Methods Used

- In June 2015, we started the realist evaluation of the SURE-P/MCH programme in Anambra State, south-eastern Nigeria
- To assess the sustainability of programme effects, data was collected through documents review, in-depth interviews (n=63), focus groups (n=12), facility exit survey and secondary analysis of facility data.
- We used a realist analytical framework of theory testing, verification and theory consolidation to understand how the context of SURE-P/MCH implementation shaped PHC workers' motivation.

4. Key findings

Motivators of performance	De-motivators of performance
An interplay of factors at individual, organizational, systems and societal levels affected staff motivation	
1. Individual: workers' love of their jobs and patient welfare	1. Organizational: Lack of security and staff accommodation
2. Organizational support: on-the-job training, supportive supervision, available staff, equipment, and drugs	2. Organizational: Lack of ambulances for referrals to specialist h facilities
3. Societal: Appreciation and recognition of workers' role	3. Systems level: Poor policies that hinder staff recruitment

5. Discussion and Conclusion

- Though withdrawal of support to SURE-P/MCH programme caused significant resource and staff shortages at organizational level, yet, individual and societal motivations have been sustained
- Lack of security and material resources constrain motivation of PHC workers to provide round-the-clock maternity care.
- Context-specific interventions, that include boosting PHC workforce security and feasible changes in policy, can improve staff motivation and consequently quality of MCH services.

6. References

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