

# HUMAN RESOURCE FOR HEALTH ACTIVITIES IN VIETNAM

Viet Nam has made significant progress in improving human resources for health over recent years. The number of health staffs is increasing by the years. Total of 229,887 the public health workforce in 2001 is growing at 271,149 in 2006. The qualifications of health staffs are increasing, improving the quality of health services.

## HRH target to 2010 and 2020

According to Decision 153/ 2006/QD-TTG dated 30/6/2006 of Prime Minister on the Master plan for the Health System Development in Vietnam in the period to 2010 and the Vision by 2020, the human resources for health targets are:

- 7 doctor/ 10.000 populations in 2010
- 8 doctor/ 10.000 populations in 2020
- 1 pharmacist/ 10.000 populations in 2010
- 2-2.5 pharmacist/ 10.000 populations in 2020
- 3,5 nurses-midwife / 1 medical doctor
- 80% of commune health stations have medical doctors (60% in mountainous areas).

Despite the progress made, as many countries, Viet Nam faces the HRH challenges. The reasons are (1) increasing population's demand on health care services; (2) requirement HRH for local level due to reorganization health care system; (3) Socio-economic development; (4) expanding private sector

## Key HRH issues

- Mal distribution of staffs among regions in the country, with shortages of staffs in rural and remote areas,
- Shortage of health staffs, especially doctor at the local level
- Lack of qualified staffs in rural and remote areas
- Weak regulatory mechanisms for ensuring the quality of health worker performance, with no licensing system
- In appropriated incentive policy, particularly to attract and retain health workers in disadvantaged and remote areas.
- Health staffs migration from rural to urban and from public to private facilities

## Policy and HRH activities

To address these challenges, the Government and Ministry of Health are giving high priority to HRH. Recently, there were some policies and HRH activities are given.

In order to address the geographic imbalance, Governmental Decision No 1544/QĐ-TTg dated 14 Nov 2007 was issued the “Program on health workforce production for disadvantaged and mountain areas in the North, Central part, Central highland and Mekong delta regions by accreditation training”. It aims to increase the number and qualification of health workers serving these communities. Besides, there are projects to improve health care services as well as improving capacity of health staffs in these areas, such as projects “strengthening capacity of local health care system in some provinces” supported by GAVI, “Health care for population in Tay Nguyen” supported by ADB, “Support health care activities for the mountain provinces in the North of Vietnam” loaned by WB.

In term of improving health workforce capacity at local level, there is a policy on rotation sending health staffs at central level to work at provincial and district level.

In recent years, the Ministry of Health is expanding global and region level cooperation to learn and share experiences in term of HRH management and development. On August 2008 Ministry of Health invited experts on HRH from Thailand to Vietnam to learn Thai experiences in developing HRH policy.

### **GHWA support for HRH activities in Vietnam**

In order to address the health workforce challenges in Vietnam, Global Health Workforce Alliance (GHWA) has supported Vietnam through World Health Organization. According to GHWA, WHO’s strategy on HRH as well as Vietnam’s priorities, the key activities are proposed

(1) Developing training manual on administrative health management for district health staffs and conducting trainings for about 45% heads of district health unit from 63 provinces in the whole country.

Recently, district health system has been reorganized. In 2006, at district level, the district health unit was established to assist District People Committee in administrative management on health care activities in the localities. Almost health staffs have been moved from district health centers or commune health centers. They are technical workers. Very few of them have been trained in administrative and management skills. Therefore, lack of administrative management skills are still among the important problem.

The first training was conducted from 8-12 Sep, 2008. It was the first training on administrative health management for district health staffs. The Minister’s participation in the training indicated the recognition the important of trainings.

(2) Review, assessment the current HRH information system.

In order to develop HRH plan and make decision on HRH effectively, HRH information system needed to be effective. It is necessary to assess the current situation of HRH information system and give recommendations to improve the HRH information system in Vietnam.

Resolution of HRH issues and challenges requires systematic coordination of activities within and between the health sector, other sectors and development partners