Professional Associations

Critical Partners for Health Outcomes
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Oslo 13.09.11
Professional Associations Typology

- International: ICN, WFMA, WMA, etc
- Regional: ASEA/COSECSA, ECSACON, WACS,
- Regional confederation
- National: NMA
- Specialty: pediatrics etc
- Regulatory Bodies?
- Unions?
MOH Operating Environment
Ministers Perspectives: professionals

- The health professional associations were the most powerful asset and totally underutilized. If they're with you, they can be enormously effective, because they cut across all sectors, public and private and have a lot of influence on priority setting – FMOH

- They [professional organizations] resist integration and change in the health system – MOH

- All of the non-profits in health have a memorandum of understanding with the Ministry of Health and are committed to addressing the strategic plan within the government framework. They decide what they’re going to work on and we support and monitor their activities. – MOH
Stakeholder Perspectives: Country Resources

• For political reasons they may not wish to be seen as using other people. For solutions, they often bring in special advisors or expert consultants who really have no good knowledge of the context. Ministries need to be capable of drawing advice from wherever it's helpful and be assured that it's okay to do so. Sometimes they don't know what they have in the ministry and what's available in the country.

• —Stakeholder, Academic
ENGAGING HRPIs: Professional Associations

- Health Professional Associations (HPAs) hold the potential to work with governments as support and accountability agents.
- HPAs report a lack of participation in strategic meetings, outcomes of which directly effect their members.
- HPAs expressed overall lack of support – legislative or financial.

“*The health professional associations were the most powerful asset and totally underutilized.*”
– former MoH, Supporting Ministerial Leadership Report, 2010
ASEA/COSECSA
Lessons & Critical Success Factors

• Fellowship spirit needs to be strong
• Members willing to sacrifice
• Commitment to professionalism
• Commitment to Social Accountability
• Advocacy strategy: Inform and Inspire or Name and Shame
• Rule No1: “Do Not Give up”.
Lessons & Way forward

• Capacity grows up from within; not dropped down.
• Country context critical: political, social, cultural, resource factors. Takes time and patience.
• Local Institutions to grow capacity exist HRPIs.
• Need to support governments and HRPIs simultaneously to grow:
  – Expand locally driven research, Strengthen management and leadership, Improve sharing of information and strengthen networks, Close implementation gap and improve monitoring and evaluation of performance.