In 2005, world leaders committed themselves to universal access to HIV/AIDS treatment by 2010. One of the greatest challenges in meeting this promise is the critical shortage of health workers.

The HIV/AIDS pandemic has pushed already weak public health systems in developing countries to the threshold of collapse.

Today, doctors and nurses are trying to treat hundreds of thousands of patients per week by working long hours for little pay in decaying clinics and hospitals.

On these pages, health workers from Kenya and Malawi talk about the crisis they face and their ideas for solving it.

“HIV/AIDS has brought a lot of patients. We’re now dealing with double, three times the number of patients the hospital was designed to cater for. It’s frustrating.

If you can’t even find a thermometer, how can you give patients quality care? We are trying our best but we can be alone to serve 90 patients at a time.”

- Ruth Mwale, Principal Nursing Officer, Kamuzu Central Hospital, Lilongwe, Malawi
How dire is the shortage of health workers?

- In the poorest countries of the world, there is only one doctor for every 100,000 people.
- In 12 sub-Saharan African countries, there are only enough trained health workers to cover 10% of the population.
- In order to provide the most basic health care, the developing world needs 4 million trained health workers immediately.

Poor countries are haemorrhaging health workers. Many are lost to HIV/AIDS, but most migrate to rich countries in search of better pay, better working conditions and better lives for their families.

“At least four medical centres have no nurses so they have closed.”

- Moses Ngwira, Deputy District Health and Clinical Officer, Dowa District Hospital, Malawi

“This district was supposed to have 104 nurses but when I came I found we only had 16 nurses. The district health authority serves around 450,000 people.

The district hospital was collapsing.

Health workers are always leaving.”

- Dr. Matias Joshua, District Health Officer, Dowa District Hospital, Malawi
Why do health workers leave poor countries?

Meager wages

Many doctors and nurses in the developing world would prefer to stay in their home countries and serve their people, but they simply cannot live on the meager salaries offered to government workers.

Poor working conditions

Over-crowded and outdated hospitals and clinics in poor countries exacerbate the frustrations of dedicated health workers. Often they are asked to work without basic medical equipment, water, electricity or emergency transport.

Poor transport and living conditions

Many health workers travel great distances to go to work. The time-consuming and expensive commutes stretch their small wages and take away time spent with their families. This is particularly hard on women, most often the primary care-givers for children and sick relatives.

The lack of other essential services, like education, also cause hardships for health workers, who often cannot afford school fees.

“After paying water, electricity, and buying food there’s nothing left. I have a wife and two children, and relatives I couldn’t manage to assist. So I do shifts at a private hospital in town. Sometimes I work through the night. I can’t survive on my salary.”

- Dr. Matias Joshua, District Health Officer, Dowa District Hospital, Malawi

“We have one sterilising machine but when we wanted to do a C-section for a patient, it broke down. Yes, lives are lost.”

- Moses Ngwira, Deputy District Health Officer and Clinical Officer in Dowa District Hospital, Malawi

“If I have to ask the nurse, ‘Why are you late on duty?’, she will tell me, ‘Matron, I woke up very early in the morning, walked my children to school and I had to walk here because I did not have money to pay for transport.’ You can’t ask a nurse, ‘Why are you talking to the patient like that?’ because you know the nurse has left home thinking, ‘I have no money to buy milk for my children.’”

- Jane O Shehemi, Chief Nursing Officer and Hospital Matron, Nairobi, Kenya
How should we invest in health workers and improving health systems?

Donor countries must provide budget support to poor countries to train health workers and pay them with a living wage and vastly improve health systems.

Developing countries must allocate significant portions of their budgets to training and retaining health workers.

The World Bank and International Monetary Fund must end harmful economic policies which diminish developing countries’ capacity to train and pay reasonable wages to health workers and purchase medical equipment and supplies.

“My message to rich countries? We would love to save our people. We don’t want to go because of the money. If the money can come here and help our relatives, that would be much better. Home is the base.”

- Rosemary Bilesi, Nursing Officer, Dowa District Hospital, Malawi

“We don’t need much. If we can just feed our kids well and send them to school...it will be ok and I will never think about going away.”

- Sister Beatrice Mkandawire, Senior Registered Nurse, Kamuzu Central Hospital, Lilongwe, Malawi