



“PRIORITIES OF HEALTH ECONOMICS IN AFRICA”

Inaugural Conference of the African Health Economics and Policy Association (AfHEA)
10th – 12th March 2009 - Accra, Ghana

Parallel session 3: Human resources for health

PS 03/8

Measuring Health Worker Motivation in District Hospitals in Kenya.

Patrick Mbindyo¹, Dr. Duane Blaauw², Prof. Lucy Gilson^{2,3}, Dr. Mike English^{1,4}

1. Kenya Medical Research Institute Centre for Geographic Medical Research Coast-Wellcome Trust Collaborative Programme
 2. Centre for Health Policy, School of Public Health, University of the Witwatersrand
 3. Health Policy Unit, London School of Hygiene and Tropical Medicine
 4. Department of Paediatrics, University of Oxford, UK.
-

Context: Many of the influences affecting health worker performance can be summarised by a health worker's degree of motivation. Although it is likely that motivation influences performance directly and mediates or modifies the effect of interventions aimed at changing performance, there are few studies on its influence on practice change in health workers in low-income settings.

Objectives: We wished to try and account for worker motivation as a key factor that might affect the success of a practice change intervention being implemented in 8 District Hospitals in Kenya. In the absence of available tools we therefore aimed to develop a tool that could enable a rapid measurement of motivation at baseline and at various points during the 18 months intervention study.

Methods: After literature review, a comprehensive self-administered questionnaire aimed at Kenyan government hospital staff to assess the outcomes and determinants of motivation was developed. This report focuses only on motivational outcomes data that were used to construct a rapid, motivation measurement tool. Parallel qualitative work was undertaken to assess the relevance of the questions chosen and the face validity of the tool.

New Findings: Mean hospital 10-item scores from approximately 80 health workers from each of the 8 sites studied suggested variability in aggregate levels of motivation between hospitals not explained by health worker type, sex or clinical department. Parallel qualitative work in general supported these conclusions and contributed to our understanding of the latent factors identified.

Conclusions: The 10 item score identified may be useful to monitor changes in motivation over time within our study or for more widespread, rapid assessments of motivation in Kenya.