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## BRIDGES TO HEALTH WORKER EMPLOYMENT

In 2006, the World Health Organization estimated shortage of 4.3 million health workers globally, with the most urgent unmet needs found in sub-Saharan Africa. In many countries, health professional schools are working toward scaling up the education of health workers to fill this gap; however, several hurdles hamper the transition from graduation to employment. Many students don't pass required exams, don't know how to register with professional councils, or have difficulties securing employment. Lack of coordination between schools and employers, and hiring delays of up to a year further compound the problem.

Although retaining health workers in the health system is difficult, schools can create bridges that shorten the time from graduation to employment and contribute to making the transition a less frustrating experience for graduates and employers. Here are 12 suggestions that health professional schools, ministries of health, employer councils, and others can implement.

### **CERTIFICATION OR LICENSURE EXAM PREPARATION**

Many students graduate from their programs but fail their certification or licensure exams. By providing exam preparation and practice materials in the form of a short prep course or series of targeted sessions, mock exams, special tutorials on individual topics, or even handouts, schools could prime students to succeed at higher rates.

### **REGISTRATION PROCESS**

Many graduates fail to register with or join their professional councils, which in some countries is required for public sector employment. Schools can hand out registration forms shortly before students graduate, have them readily available in administrative offices, post reminders around the campus, and provide assistance with filling out the forms.

### **EMPLOYER COUNCILS**

Assembling an Employer Council with representatives from the Ministry of Health and other employers would focus discussion around the practical skills employers are seeking. This Council would advise schools on workforce needs so that they could better prepare their students for jobs which are available. In addition, the Council could offer employers education opportunities on human resources issues through seminars, conferences, and events.

### **JOB SEARCH SKILLS**

By coaching students on where to find jobs, how to write resumes, the application and interview process, and related skills, schools can better equip their graduates to secure jobs. These skills can be taught in short sessions or consolidated into a workshop. Students can be directed to online resume-improvement resources, or handouts can be shared with relevant job-search strategies. Faculty or staff can also advise and work with students on a one-on-one basis.

## **JOB BOARDS**

By posting electronic bulletin boards online, forwarding announcements to graduates through email list-serves or setting up physical bulletin boards with job vacancies around the school, schools can keep students and recent graduates abreast of opportunities. These boards would be best placed in areas students frequent, and should be updated regularly to reflect the current job market. Students could even be tasked with maintaining the boards.

## **JOB FAIRS**

By organizing and hosting job fairs in which the Ministry of Health and other employers meet and talk with students, schools can encourage networking and generate interest from rising graduates while educating them about their career options.

## **CAREER MENTORS**

Upon graduation, students might be left without a clear picture of their ideal career paths and opportunities within the health field in general, or the public health sector specifically. Schools can remedy this by providing career mentors—professionals who visit the school to speak with students about their career decisions and positions. Career mentors who can speak positively of service in rural or underserved areas can motivate students to consider such career paths.

## **PRIVATE PRACTICE WORKSHOP**

Preparing students for work in the private health sector is preferable to losing them as health resources altogether. A workshop on how to get started in setting up a private practice, find financing and supplies, and manage the business and legal components might encourage many who might otherwise disregard this option or be tempted into another field.

## **MAIL FORWARDING AND GRADUATE TRACKING**

Upon graduation, many students return to their family's home or travel for other reasons. As a result, many job offers are simply never received. If schools set up a system to hold their graduates' mail or forward it, this miscommunication could be eliminated. If linked to a database, mail forwarding could be expanded into a system for tracking and following up with alumni, which would allow schools to assess their effectiveness in placing graduates in the health system, and also provide a platform for conducting surveys of graduates.

## **MINISTRY OF HEALTH APPLICATION FACILITATION**

Schools can provide applications for jobs with ministries of health and hold workshops or meetings with students to help them complete the applications.

## **FRONT-END JOB MATCHES**

The USAID SHOPS project has had success with matching new nursing students to potential jobs that they will take upon graduation. In addition to creating a bridge to employment, the fact that the nursing students have a guaranteed job on graduation makes it easier for them to secure educational loans.

## **BRIDGING FUNDING OR EMPLOYMENT**

Often ministries of health would like to hire new graduates but require several months to a year to secure approvals, mobilize funding, or implement the hiring process. Donors can provide bridging funding for salaries for Ministry of Health jobs or bridging employment until the new workers can be fully absorbed into the labor market.