HRH2030: Human Resources for Health in 2030

About HRH2030

Working in partnership with The United States President’s Emergency Plan for AIDS Relief (PEPFAR), the USAID HRH2030 program supports low- and middle-income countries in developing the sufficient, fit-for-purpose and fit-to-practice health workforce needed to prevent child and maternal deaths, control the HIV/AIDS epidemic, reach the goals of Family Planning 2020, and protect communities from infectious diseases. The program creates sustainable solutions to health workforce challenges, such as planning, recruitment, training, productivity, performance, motivation, and retention. With a heavy focus on research and smart use of data, HRH2030 helps decision-makers boost the efficiency of existing human resources, implement tools that work, incorporate non-traditional human resources for health (HRH) into policies and plans, and pay for the workforce they need to achieve the greatest possible impact.

Global Program Objectives

1. **Improve performance and productivity of the health workforce.** Improve service delivery models, strengthen in-service training capacity and continuing professional development programs, and increase the capacity of managers to manage HRH resources more efficiently at the facility level.

2. **Increase the number, skill mix, and competency of the health workforce.** Ensure that the right kind of health workers, with the right skills, are located in the right places; build capacity of educational institutions to equip students with competencies that match patients’ health needs.

3. **Strengthen HRH/HSS leadership and governance capacity.** Promote transparency in HRH decisions, strengthen the regulatory environment, improve management capacity at national and subnational levels, reduce gender disparities, and improve multi-sectoral collaboration for advancing the HRH agenda.

4. **Increase sustainability of investment in HRH.** Increase the utilization of HRH data for accurate decision-making with the aim of increasing investment in educating, training, and managing a fit-for-purpose and fit-for-practice health workforce.

Program Partners

- Chemonics International
- American International Health Alliance (AIHA)
- Amref Health Africa
- Open Development
- Palladium
- ThinkWell
- University Research Company (URC)
Select HRH2030 Activities*

Global. With support from a multisectoral technical advisory group, the program is working to develop a methodology for measuring the socioeconomic impacts of investment in the health workforce. Establishment of the methodology and subsequent research will enable health systems decision-makers to make the case for greater investment in HRH.

Cameroon. In partnership with the Cameroon National Association for Family Welfare, HRH2030 implemented a local leadership and management (LLM) approach to engage and strengthen local leaders to mobilize communities, grassroots organizations, educational institutions, small businesses, and local governments to improve the accessibility to and acceptability of family planning services in Cameroon. Working with the Ministry of Public Health, HRH2030 is scaling up the LLM approach through engagement of family planning district health officers in multiple districts.

Indonesia and Madagascar. HRH2030 is working with the ministries of health in both countries to assess the capacity and functionality of their human resource information systems (HRIS) and prioritize future investment areas to strengthen their HRIS. Continued strengthening and scale-up of countries’ HRIS is necessary for building strong National Health Workforce Accounts.

Jordan. HRH2030 works with USAID/Jordan to strengthen the health workforce for better health services. The activity assists the Ministry of Health to enhance its human resources practices, facility management, and leadership. It works with the High Health Council to strengthen national HRH governance and use of HRH data for decision-making, and it collaborates with other national health stakeholders to improve health workers’ competencies by institutionalizing continuing professional development.

Malawi. HRH2030 works with USAID/Malawi and the Ministry of Health to enhance country capacity for HRH planning and management and increase the number of health workers in PEPFAR priority sites. Specifically, the activity supports the recruitment, deployment, management, and salary payments for USAID-supported health workers to address health workforce shortages impeding HIV/AIDS service delivery.

Senegal. HRH2030 is working with USAID/Senegal and the government of Senegal to build a sustainable, well-governed health workforce that can meet its needs for universal health coverage. Through collaboration with other stakeholders, the program reinforces institutional, organizational, and leadership capacities of the Ministry of Health and Social Action. Specifically, the program is working to develop practical guidance for the deployment and retention of health workers and to strengthen the ability of ministry employees to use data for decision-making.

* HRH2030 also works in Botswana, Burundi, Colombia, Cote d’Ivoire, Guinea, Mali, Namibia, Niger, Nigeria, Philippines, Sierra Leone, South Africa, Tanzania, Togo, Uganda, and Zambia.

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