

How to protect health workers in conflicts and crisis

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Recruiting health workers with high levels of internal motivation is critical for work in difficult conditions, where their personal security and health might be compromised, according to new research published today in *Health Policy and Planning*.

Health workers often witness the deaths of friends and colleagues during [conflict](#) situations and also face abduction, injury and death, themselves. Life history interviews with 26 health workers who lived through conflict in Northern Uganda reveal their resilience and how they coped by building trusting relationships with the community, seeking support from managers and elders, and finding strength from their faith and commitment to serve their community.

Namakula and Witter propose the following solutions to help protect and keep staff motivated during and after times of crisis, when they are likely to feel disconnected from social and professional support systems, lack supplies and face an increased work load with limited pay and personal insecurity:

- Community support
- Appreciation by supervisors
- Effective working conditions
- The opportunity to learn and develop new skills
- Formal promotion and recognition of their contributions in a dangerous situation
- Employment benefits such as food, accommodation, transport

and free healthcare

- Good leadership and communication in the workplace
- Regular and adequate pay
- Flexible working and inclusive management

This research was carried out at Makerere University and Queen Margaret University with support from the UK Department for International Development through the ReBUILD Consortium.

Justine Namakula, ReBUILD Research Fellow at the School of Public Health, Makerere: "This research helps us to understand the lived experience of health workers during and after conflict in Northern Uganda and how policy-makers can protect and motivate them"

The study is part of the ReBUILD health worker incentives research project, which aims to understand the evolution of incentives for health workers after conflict and propose policy recommendations to improve [health worker](#) retention. Recruitment, retention and management of health workers can be challenging worldwide but is exacerbated in conflict situations and fragile states. In previous research on conflict and fragile states the perspectives of health workers on the front-line has often been overlooked but they are crucial to improving policies and providing effective health services.

The Acholi sub-region of Northern Uganda experienced violent conflict as a result of fighting between the government and the Lord's Resistance Army for 20 years, between 1986 and 2006. During the conflict, the health system was split into two, a camp-based system run by international agencies and NGOs, and a health service provided by the government in towns. This article describes the experience of health workers who had lived through the conflict in the Acholi sub-region, explaining how they coped and what motivated them to stay. It is published as part of a special supplement on the 'science and practice of

people-centred health systems', the theme of the Third Global Symposium on Health Systems Research, currently taking place in Cape Town, South Africa.

More information: Namakula, J. and Witter, S. Living through conflict and post-conflict: experiences of health workers in northern Uganda and lessons for people-centred health systems. *Health Policy and Planning* 2014; 29: ii6-ii14.

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