

Editorial: On safety of Healthcare Workers

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Intention to leave is an employee's plan to quit the present job and look forward to find another job in the near future. The intention of quit is probably the most important and immediate antecedent of turnover decisions. The concept of intention to leave differs from turnover. Turnover refers to a voluntary separation of an individual from an organization those results from a combination of organizational events, working conditions, and psychological factors interacting with each other to affect employee attitudes in and toward the organization. Whereas intention to leave is individuals' perceptions towards leaving the current job and it is related to and an immediate predictor of turnover (3,4). In these days the 'crisis in human resources' in the health sector has the most urgent global health issues.

The global shortage of human resource for health limits access to effective health service for many people especially the poor and most vulnerable groups.

It hinders progress towards health and health development goals. These human resource shortages in developing countries are not due to production of health professionals but also because of employee turnover and instability at health facilities. Workers have always tended to move in search of better living, good working conditions, improved salaries and opportunities for professional development, be it within their own country; from rural to urban areas, or from public to private. When health workers leave their organization, it can negatively affect the quality of care offered, accessibility and equitable distribution of health care and the organizational performance. The organizations then will be forced to recruit new health workers and by implication tacit knowledge is lost.

Intention to leave is an immediate sign of employee's turnover. Many health facilities around the world including those in developed and developing countries have recently experienced turnover intention. Results from studies indicated that, it is sever in less developed countries.

The health workers density in most sub-Sahara Africa (SSA) countries is far below the world health organization's (WHO's) recommendation of a minimum 2.3 health workers per 1000 population. Likewise, poverty, imperfect

private labor markets, lack of public funds, bureaucratic red tape and political interference produce the paradox of shortages in the midst of underutilized talent.

According to the 2015 World Health Population report, Ethiopia, as any other SSA countries, suffers from attrition of health professionals. The country faces absolute shortfalls in their health workforce. Despite the country has high number of health workers as compared to other SSA countries, the proportion of health professionals to the population is very low, 0.84 per 1,000 people. The figure is also far below the world health organization's (WHO's) recommendation of 2.3 health workers per 1,000. This human resources for health crisis in the country is characterized by an absolute shortage of trained health workers; an imbalance in the numbers of different health worker cadres; uneven distribution of health workers between urban and rural areas; under-production of trained personnel, especially at high and mid-levels; low retention, including a "brain drain" of health workers to more developed countries that offer better compensation; and a poorly motivated health workforce.

Oromia regional state, the largest region of the country takes the highest share of problem related to health professionals' shortage at all levels. The rate of turnover intention among health professionals working in central part of the region was high (53.8%) as compared to other regions; for instance, Tigray (37.1) and Gambella(48.4%). In the last nine years, the public health sectors of the region have lost almost 60% of its general practitioners and more than 50% of pharmacists more seriously 25% medical specialists (17,18). Shortages of health workers threaten the existence of health facility and negatively influence the quality of local healthcare services.

According to the reviewed documents from Guji zone human resource department, 24% of health professionals left public health centers in 2017. Guji zone is one of the remote zones in Oromia region where such study has not been conducted so far. Therefore, the study aimed to assess health professionals' intention to leave and associated factors for better strategies to retain health professionals.