

# Brain drain problems: How should they be tackled?



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The loss of scarce skills to more developed countries is a severe problem for South Africa. We are not alone in this, and most developing countries have similar problems. There are 'pull' factors such as earning potential, research opportunities, better education for children, and issues of personal safety. The 'push' factors include poor management of health professionals, poor working conditions, inadequate equipment, administrative interference in professional

matters and the serious issue of personal and family safety. The question is really how we should tackle the problem. There are some things which we should not do:

- Attempt to 'buy' professionals back through incentive schemes or try to increase pay to induce professionals to stay in the country. These strategies will result in an escalating cost spiral which the developing world will not win.
- Develop complex legislation to restrict movement of health professionals. In the long run, this type of strategy will become a disincentive to enter health professions for the best candidates. It could also result in long expensive constitutional battles over individual rights and could act as a potent 'push' factor, aggravating the problem instead of relieving it.

There are, however, things that can and should be done to reduce the 'push' factors:

## Provide better working conditions:

### Clinical support:

Ensure better clinical support to all health professionals, especially to those who are not in central hospitals. Provide on-site training (Continuing Professional Development) as part of the work schedule. Ensure that there are sufficient funded posts to cover the workload without overwhelming individual professional staff. Make use of teleconferencing to link rural health facilities to central ones to provide clinical support to reduce the sense of isolation and ensure a learning environment. Clinical involvement by a senior colleague is vital to ensure that appropriate patients are transferred to higher levels of care at the right time. Prior acceptance of the transfer will eliminate a great deal of administrative time for rural doctors.

Provide adequate pharmaceutical services to support clinicians. If the State is unable to provide this function at present, it must be outsourced as a matter of urgency. Focus on research and get all institutions involved in research. It is important that health services are based on properly researched foundations and that health becomes a learning profession. Scientific and academic pursuits are strong motivators for health professionals. Association with universities and the conferring of academic status on high performers in rural areas will also be of considerable value in keeping health professionals in rural areas.

### Appropriate equipment:

Ensure the provision of equipment appropriate for the particular level of care. Better management of health equipment requires the establishment of a new health professional – the medical equipment manager. We will probably never have sufficient biomedical engineers to service the wide range of equipment in our health facilities and we need a different category of personnel for this function. Properly maintained equipment will eliminate a great deal of frustration currently experienced by health professionals and eliminate another 'push' factor.

### Improve facilities:

The hospital revitalisation programme must be implemented as rapidly as possible and the whole programme should probably be placed under central government control to ensure orderly, equitable and rapid roll-out of the programme. Better management of hospital and clinic facilities requires the establishment of posts like 'handy-man' to ensure that buildings are properly maintained. Health facility managers must ensure that health facilities are kept clean at all times. Cleanliness and hygiene are fundamental requirements for health facilities. Change the way doctors and allied health professionals are managed.

Here we propose a radical departure from the established health system in South Africa. We believe that it will not be possible to ensure that doctors and allied health professionals will be professionally managed within the public health system. Therefore we propose the establishment of an external, non-profit body to employ and deploy health professionals for the public sector. A similar organization should be established for nursing services.

### Use training as a labour supply system

The closure of many nursing colleges in the last decade has resulted in a rapid reduction in the number of nurses available. Nursing is a difficult career and many who train as nurses leave the profession after only a few years. However, the presence of nursing colleges and many trainees ensured that standards of nursing were maintained and the percentage of those who stayed in the system was largely adequate for our needs. We urgently need to reopen nursing colleges and establish new ones. A similar process needs to be developed as far as doctors, pharmacists and other health professionals are concerned. Many more training venues need to be opened up and practical component of training increased to the point where trainees become a significant part of the workforce. We believe that it will not be possible to stop the brain drain altogether. But there is a lot that we can do to make South Africa a better place for dedicated health professionals. All of the above have their own costs attached. The problem will not go away without costing us something. If we fail to invest in solving this problem, our professionals, not the problems, will go away.

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