

Strengthening Health Professional Associations

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Developing human resources for health (HRH) requires a multidisciplinary and multisectoral approach to ensure that health care consumers have access to high quality, cost-effective services (ICN, 2005). Professional associations for health care workers can *promote high standards of practice, advocate for the needs of both consumers and providers, form networks with other professional associations and liaise with legislative and regulatory bodies*. Strengthening professional associations is one strategy for addressing global HRH issues such as out-migration and the lack of an adequate supply of well-trained professionals to deliver HIV/AIDS services. This technical brief discusses various approaches for strengthening professional associations and outlines the benefits and challenges of such efforts.

What Is a Health Professional Association?

A health professional association or body is an organization, usually not-for-profit, which exists to represent a particular profession, promote excellence in practice and therefore protect the public as well as the good standing of the professionals. Professional associations may have the following functions:

- Representing the interests of a profession and, in essence, serving as the public voice of the profession at the national and international levels
- Protecting the profession by guiding terms and conditions of employment
- Ensuring that the public receives the highest possible standards of care by maintaining and enforcing training and practice standards, as well as ethical approaches in professional practice
- Influencing national and local health policy development to improve health care standards and ensure equitable access to quality, cost-effective services
- A branch of the association may act like a labor or trade union for organizations and health care workers that choose to conduct collective bargaining.

In some countries, professional associations carry out certification, registration or licensing of professional qualifications in a subject or clinical area. Membership in a professional body might therefore be synonymous with certification, and may be a requirement for legal practice of a profession. Many professional bodies also act as learned societies for the academic disciplines underlying their professions, and have as part of their mandate to develop the art and science of that particular profession.

What Are Challenges to Strengthening Professional Associations?

Building a sustainable, member-led professional association with the capacity to carry out a range of appropriate functions is best done in a stable environment with a strong membership body. In countries where there are political and governmental upheavals, gains made through governmental or donor collaboration can quickly be undone by changes that are out of the association's control. These may include shifts in funding and policies, transitions among government officials and shortages of human and other resources, especially in places with high prevalence of HIV/AIDS. Associations trying to sustain themselves through membership dues and fee-based services may be challenged to convince members to spend their limited income on the association.

Improving the clinical and management skills of a profession requires a large investment of time and effort that can be complicated when associations have no funding for full-time staff and are run primarily by volunteers. Members have competing priorities and limited time and energy with which to invest in their association duties. While the benefits of belonging to a professional association are often apparent in the long term, associations may only be able to provide short-term incentives to their members because of funding insecurity.

What Approaches Have Been Taken to Strengthen Professional Associations?

Interventions designed to strengthen professional associations have most often used partnership models that build on the experience of strong associations or organizations. For example:

- The Midwifery Association Partnerships for Sustainability (MAPS), a special initiative of the USAID-funded Family Planning Service Expansion and Technical Support (SEATS II) Project, focused on developing private-sector midwives by building the capacity of midwifery associations. The American College of Nurse-Midwives (ACNM) implemented MAPS.
- The Society of Obstetricians and Gynecologists of Canada (SOGC) Partnership Program has undertaken various projects with other Ob/Gyn associations working in developing countries or countries in transition. These partnerships aim to build the capacity of associations to assume leadership in promoting maternal and newborn health while strengthening the associations themselves in the areas of governance, training, leadership and fiscal responsibility.

The Link Between Democracy and Governance and Professional Association Strengthening

Strengthening the capacity of professional associations in advocacy work also contributes to the development of an independent and politically active civil society. According to Andrew Natsios, former USAID Administrator, civil society “is a complex web of private associations, of professional associations...of all sorts of non-government institutions that, when they combine together, protect individual freedom, protect civil society and protect civil liberties which are critically important to the development of a country, a stable democratic system over the longer term, and guard society against abuses.”

In countries with new or fragile democracies, politically active associations can strengthen health care infrastructure and systems and simultaneously provide models for engaging civil society to participate in democracy. For example, the USAID-funded ACCESS Program launched and works with the Afghan Midwives Association (AMA). The AMA has tripled the number of trained nurse-midwives in Afghanistan, and is working to reform midwifery education and the profession in a country with a new democracy emerging from 25 years of civil war with the second highest maternal mortality rate in the world (JHPIEGO, 2006).

■ Through a collaboration among the Zambia Nurses Association, the International Council of Nurses (ICN) and Novartis, the association received capacity-building support in malaria case management after the Zambian Ministry of Health adopted Coartem®, a combination drug therapy manufactured by Novartis, as a replacement for monotherapy in the management of uncomplicated malaria. The three organizations developed a training program to complement the implementation of the government program, improve nurses' clinical skills and create a synergy between the Zambia Nurses Association and the government's goals (ICN, 2005).

Is There a Formula for Strengthening Professional Associations?

Experience has shown that there is no single model for strengthening professional associations—interventions have to be customized to the particular association's needs and context. Strategies that have been employed successfully in a variety of contexts fall into two broad categories: 1) advancements that strengthen a professional association's internal structure and organizational effectiveness and 2) strengthening activities that enable the professional association to enhance the skills of individual members or to increase influence on external communities. In order to successfully strengthen an association, capacity-building efforts should initially focus on both of these areas of activities.

Capacity Building: Internal Structure and Organizational Effectiveness

Management and leadership, business and fundraising skills: Program management, financial management and accountability, leadership, advocacy and information technology are examples of different areas of skills strengthening that may be needed to assist an association in achieving its goals. Associations are frequently subject to the financial pressure of income generation and resource mobilization. This pressure can be greatly lessened by enhancing financial management and business development skills. Making the most of the limited financial and staff resources of professional associations to organize and implement effective resource mobilization strategies and increase membership is essential if an association is to be sustainable. Membership drives, productive partnerships with governmental and private organizations, fundraising, proposal development and linking to international resources (through sharing resource databases, for example) are ways to leverage the available resources for maximum impact (Quimby and Mantz, 2000).

Governance and strategic planning: Aspects of governance that an association should focus on strengthening include defining the roles and responsibilities of members, organizing working groups or committees and promoting a work environment at health facilities that emphasizes participation, teamwork and team-based leadership (USAID, 2004). Strategic planning is essential for effective use of the association's financial and human resources as they grow. “Planning is

important because it causes discussion, debate, and generates consensus among the association leaders about direction and priorities” (USAID, 2004). After a situational assessment, assistance provided by the MAPS initiative included helping the association with strategic planning processes, such as the development of business and sustainability plans (Quimby and Mantz, 2000). The SOGC Partnership Program facilitates strategic planning based on strong internal governance, working with associations to ensure infrastructural standards (for example, creating representative boards and functional secretariats). This type of organizational support consequently permits SOGC's partner associations to better align their programs and activities to the needs of their members and countries and make better use of scarce resources.

Member needs and services: The MAPS initiative highlighted member services as one of the principal components of association strengthening. MAPS worked with association leaders to emphasize the importance of meeting members' needs and then helped to develop tools for identifying and addressing these needs, such as member surveys and databases. A professional association should determine the information that it will provide members as a service or benefit of membership. MAPS stressed the importance of facilitating knowledge sharing through such mechanisms as continuing education, seminars and technical and regulatory updates (Quimby and Mantz, 2000). As another example, one primary member service provided by the Commonwealth Steering Committee for Nursing and Midwifery has been the production and distribution of resource materials on key issues affecting the professions, including practical tools to develop action plans on human resources (Maslin, 2005).

Capacity Building: Member Skills and External Advocacy

Training and service delivery skills: Health professional associations are well positioned to set evidenced-based standards of quality and excellence. The MAPS initiative's programs in Eritrea, Senegal, Tanzania, Uganda, Zambia and Zimbabwe included components that specifically addressed the clinical performance of the associations' members. For example, one of the objectives of the MAPS program in Zimbabwe was to improve the quality of family planning/sexually transmitted infection services provided by private midwives. ACNM partnered with the Zimbabwe Nurses Association and the Independent Clinics Organization to provide training and other support for 109 midwives. At the end of the project, 85% of private midwives met national family planning standards, compared to only 10% in 1996 (Quimby and Mantz, 2000).

The SOGC Partnership Program has incorporated SOGC's ALARM International Program (AIP), a five-day training and mobilizing tool for health professionals involved in the delivery of emergency obstetrical care in resource-constrained settings, into its association strengthening efforts. The

AIP's content is derived from evidence-based medicine and endorsed by the Partnership for Safe Motherhood and Newborn Health and the World Health Organization as a tool to ensure skilled attendance at birth. Using the train-the-trainers (TOT) approach, national teams of ALARM instructors from professional associations have been established in partner countries. The teams are equipped with the supplies and other training materials necessary for delivery of the course so that they can continue to offer the trainings independently after SOGC has completed the TOT portion of the partnership program.

Evidence-based practice and education standards:

A professional association's involvement with regulatory reform can ensure high universal standards of education and practice firmly founded on evidence and data. For example, in 1985, the International Council of Nurses commissioned a global study of nursing regulation, the conclusions of which resulted in an internationally disseminated guide, still widely used, for nurses' associations seeking to establish or reform their regulatory system (Styles, 1986). "The concept of universal standards was promulgated as ICN reasoned that principles governing nursing education and practice should be the same in every country because the need for nursing services is universal and the same, wherever it is being given" (<http://icn.ch/reghistory.htm>). The East, Central and Southern African College of Nursing (ECSACON), a regional association, developed core standards for the nursing and midwifery curricula for all countries in its region.

Professional associations also play an important role in the establishment of professional codes, such as the International Federation of Gynecology and Obstetrics (FIGO)'s Code of Ethics, which outlines standards that members are expected to uphold. The California Nurses Association and the Group of Nursing Professionals of Central America and the Caribbean have also developed standards of ethical and safe practice for registered nurses.

Many professional nursing bodies have developed frameworks for continued practice competence in order to establish standards to ensure that nurses retain adequate knowledge and skills after they have completed their basic training. As one example, the Canadian Nurses Association has developed a national continuing competence framework for nurses that responds to a call for a coordinated approach to meet consumer demands for competent health professionals in an era of global mobility (ICN, 2005). In countries where midwives do not have control of midwifery education, the International Confederation of Midwives (ICM) encourages member associations to negotiate with their governments for education to occur only after competencies and curricula have been established. (<http://www.internationalmidwives.org/Statements>)

Service delivery must be coupled with standardization and competency assessment across cadres and contexts. Professional associations

can be a major source of continuing education and technical updates; health workers should be able to rely on their associations for the latest guidance in evidence-based practice. Responses to a survey conducted by the ICN expressed the opinion that professional associations were the best-placed entities for determining professional standards, educational requirements and scopes of practice (Gragiola and Stone, 1997). ICN also emphasizes the use of research findings as a basis for decision-making in HRH development. (<http://www.icn.ch/pshhrd.htm>)

Coalition building and advocacy: A strong professional association can influence access to quality, cost-effective health services. Professional associations are natural centers for coalition building and advocacy to change policies and systems related to quality of care, task shifting, health worker mobility and deployment, retention, working conditions, incentives and staffing norms (Chamberlain, 2003; ICN, 2005).

Strong coalitions also have the potential to foster consistent commitment to quality health care nationally, regionally and across various levels of health workers. The ICM believes that all patients will "benefit when there is continuity and collaboration among the range of health care workers from community to district to regional settings" (<http://www.internationalmidwives.org/Statements>). Along with member services, the MAPS initiative pointed to coalition-building as one of the most important components of association strengthening. One successful coalition-building intervention was a study tour in Uganda for 24 private midwives from Senegal, Uganda and Zimbabwe to encourage the exchange of ideas and experiences, sharing of lessons learned and establishment of ongoing networking among the associations. As a result of MAPS' work, midwifery associations began communicating with each other through newsletters, journals and e-mails (Quimby and Mantz, 2000).

The Group of Nursing Professionals in the Andean Community of Nations, a group supported and encouraged by the Pan American Health Organization, is another collaborative example of cross-sectoral groups coming together to set standards for the health service community. Through this coalition, members of the nursing group are able to identify key audiences, influence policy agendas and have their voices heard. Similarly, the Group of Nursing Professionals of Central America and the Caribbean unites member nurses in building collaborative efforts between health and other sectors to advance the overall development and quality of nursing. "To date, achievements have been the establishment of nursing standards, hospital and community protocols, training in the quality, preparation and dissemination of a code of ethics, the implementation of the nursing process in health institutions and contributions to the curricula in schools of nursing" (Salas and Zárate, 1999).

Effective policy advocacy requires individual dedication coupled with comprehensive knowledge

The Role of a Regional Association: The East, Central and Southern African College of Nursing

Based in Arusha, Tanzania, the East, Central and Southern African College of Nursing (ECSACON) provides a strong framework for promoting professional excellence and improved health services in the region by focusing on collaboration, education, practice, research, management and leadership. ECSACON is akin to a national professional association in the services it offers to its members and the initiatives it undertakes, such as the coordination of courses and seminars aimed at improving the quality of health care and strengthening the human resources for health situation in the region.

Program Objectives:

- *Improve quality of health care through knowledge and skills development and capacity strengthening*
- *Promote sharing of best practices in human capacity development through collaboration with technical and professional groups and networks*
- *Build capacity in health policy advocacy through training and promoting evidence-based policies and programs*
- *Promote harmonization and standards in education and practice*

Selected Highlights:

- *Development of an electronic human resources database*
- *Conferences on the role of nurses and midwives in health policy reform*
- *Formation of a human resources capacity development and capacity-building program*
- *Development of a prototype Professional Regulatory Framework among member nations*

Visit the HRH Global Resource Center to find, share and contribute human resources for health knowledge and tools. For those working at the country or global level, the HRH Global Resource Center provides information to:

- Improve strategic planning and decision making
- Strengthen reports and presentations
- Support HRH advocacy
- Enhance professional development
- Save time.

of legislative processes regarding health policy in any given country. Successful coalitions broaden the base of support for a particular position and therefore can be an effective platform from which to advocate for changes in national policies that affect the practice of health professionals and quality of care. For example, the MAPS program in Zimbabwe overcame restrictive legislation that prohibited licensed private midwives from purchasing and dispensing contraceptives and medications (Quimby and Mantz, 2000). However, the interests of professional bodies have the potential to clash with national priorities, needs or cadre-specific interests. Consequently, there may be a need for continuous policy dialogues among stakeholders with different agendas. For example, doctors may oppose the delegation of certain responsibilities to nurses, who may, in turn, collectively oppose task-shifting to lay or community health workers.

Empowering female-dominated health professions: Associations for female-dominated professions, such as nursing and midwifery, provide women with a mechanism to take on leadership roles that might otherwise be unavailable to them. "A by-product of stronger associations is that individuals gain courage and strength by working together in groups toward

a common cause" (Quimby and Mantz, 2000). The continuing education offered by professional associations can also give female health workers more professional independence by providing training in business as well as clinical skills.

Conclusion

The success or failure of a health care system relies upon the continued strength of the health care workforce. Professional associations are an important bridge connecting the needs of health care clients, policy makers and health professionals delivering services. A strong professional association ensures the public of high standards of care and advocates for consumers' needs while motivating new and experienced health care professionals to continually improve the quality of care they provide as they proceed along a stimulating, empowering and rewarding career trajectory. Health professionals on such a path are more likely to continue to work in their field and to encourage the next generation to follow in their footsteps. Strengthening professional associations should be regarded as a critical component of any comprehensive development program that seeks to achieve sustainable human resources for health results.

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