DECADE OF HUMAN RESOURCES FOR HEALTH: 2006-2015

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Nowadays, a competent personnel management model is oriented towards problem-solving, facing organizational challenges and presenting results. Investments in human resources should focus on intellectual strength, as the creation and maintenance of sustainable competitive advantages depend on this asset.

The high valuation of ideas, diversified responses, innovation and expected results derives from the optimization of intellectual productivity. This has given rise to a frenetic hunt for talents to work in different areas. That is why, today, the most important organizational assets are the people.

In health, we are faced with a crisis resulting from human resource problems related to the context and contents of their work, that is: scarcity, bad distribution, inadequate work conditions, limited knowledge and competences, as well as mistaken human resource management strategies in view of health service realities and population demands, turning into stress, unhappiness an low self-esteem among workers, linked up with insufficient care and quality put in question.

There is an ongoing call for immediate action that is both able to respond to the crisis and value, invest and grant power to human resources in health. This movement requires broad participation and involvement in strategic planning and actions and must definitely be adapted to specific contexts.

In this perspective, the VII Regional Meeting of Observatories of Human Resources in Health, held in Toronto in 2005, declared the period from 2006 to 2015 to be "A Decade of Human Resources for Health" (1).

This declaration is due to the need to cope with serious challenges in terms of the development of these resources in the Americas.

The strategic guidelines included education and training, highlighting the following issues: strengthening of leaderships, greater valuation and investment in human resources, coordination and integration of actions taken in different spheres, maintenance of policies and interventions, efforts to supply more qualified information to support decision making ⁽¹⁾.

The challenges to be overcome cover the adoption of policies and programs that are capable of:

- aligning people with health system changes;
- guaranteeing their equitable and adequate distribution;
- establishing mechanisms to regulate the migration of health professionals;
- promoting interaction between teaching and health service institutions so that the human resources they supply incorporate the values, attitudes and competences of the universal care model, based on quality and equity $^{(1)}$.

Now, it is the role of each country in the Americas to put the above described strategic guidelines in practice, with a view to achieving the Millennium Development Goals and in order to provide, by 2015 – the end of this decade of priority to human resources -, universal access to qualified health services.

REFERENCES

1. Pan American Health Organization. [homepage on the internet]. Washington: PAHO; 2004. [cited 2006 January 20]. Observatory of Human Resources. [about 1 screen]. Available from: http://www.observatoriorh.org/Toronto/29SetAgenda_PT.pdf