

Publication

"Workhood" – a useful concept for the analysis of health workers' resources?
: an evaluation from Tanzania

JournalArticle (Originalarbeit in einer wissenschaftlichen Zeitschrift)**ID** 1517248**Author(s)** Gross, Karin; Pfeiffer, Constanze; Obrist, Brigit**Author(s) at UniBasel** [Obrist van Eeuwijk, Brigit](#) ; [Gross, Karin](#) ; [Pfeiffer, Constanze Dorothee](#) ;**Year** 2012**Title** "Workhood" – a useful concept for the analysis of health workers' resources? : an evaluation from Tanzania**Journal** BMC health services research**Volume** 12**Pages / Article-Number** 55

Background: International debates on improving health system performance and quality of care are strongly coined by systems thinking. There is a surprising lack of attention to the human (worker) elements. Although the central role of health workers within the health system has increasingly been acknowledged, there are hardly studies that analyze performance and quality of care from an individual perspective. Drawing on livelihood studies in health and sociological theory of capitals, this study develops and evaluates the new concept of workhood. As an analytical device the concept aims at understanding health workers' capacities to access resources (human, financial, physical, social, cultural and symbolic capital) and transfer them to the community from an individual perspective. Methods: Case studies were conducted in four Reproductive-and-Child-Health (RCH) clinics in the Kilombero Valley, south-eastern Tanzania, using different qualitative methods such as participant observation, informal discussions and in-depth interviews to explore the relevance of the different types of workhood resources for effective health service delivery. Health workers' ability to access these resources were investigated and factors facilitating or constraining access identified. Results: The study showed that lack of physical, human, cultural and financial capital constrained health workers' capacity to act. In particular, weak health infrastructure and health system failures led to the lack of sufficient drug and supply stocks and chronic staff shortages at the health facilities. However, health workers' capacity to mobilize social, cultural and symbolic capital played a significant role in their ability to overcome work related problems. Professional and non-professional social relationships were activated in order to access drug stocks and other supplies, transport and knowledge. Conclusions: By evaluating the workhood concept this study highlights the importance of understanding health worker performance by looking at their resources and capacities. Rather than blaming health workers for health system failures, applying a strength-based approach offers new insights into health workers' capacities and identifies entry points for target actions.

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