



Human Resources Management Practices in Mali Hospitals: The Case of Gabriel Toure, Point-G and the Mali Hospital in 2023

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ABSTRACT

Introduction: In a constantly evolving world where technological innovations go hand in hand with unfair competition, human resource management practices form the foundation of organizations. For many years, Malian hospitals have faced challenges in the area of human resource management.

Objectif: In this context, this study aimed to compare the human resource management practices of Gabriel Touré Hospital, Point-G Hospital, and the Mali Hospital in order to highlight the practices that work and those that have shown their limitations.

Methodology: A comparative cross-sectional study using a quantitative approach was conducted with 52 healthcare professionals, 64 support staff, and 93 patients. A structured questionnaire and a document analysis form were used for data collection.

Results: The following practices, implemented to varying degrees in the three hospitals, were identified during the surveys: Overall, 56% of healthcare professionals do not have a job description or task sheet. Only 8% of the healthcare professionals surveyed reported that their compensation is "very motivating." Among support staff, 59% find their salaries unmotivating. No clearly defined training and professional development plan for healthcare staff is in place. Human resources managers struggle to develop skills. Monitoring and evaluation of healthcare professionals' training does not appear to be standard practice in these hospitals. Regarding staff mobility (arrivals and departures), 60% of healthcare professionals consider departures to be "frequent" or "very frequent." A slightly higher proportion (62%) makes the same observation regarding new arrivals. Overall, 73% of support staff see no promotion prospects in their hospitals. The results show that, overall, approximately 56% of healthcare professionals in the three hospitals are either not at all or only slightly satisfied with their work. The majority of respondents—75% of healthcare professionals and 64% of support staff—do not intend to continue working in these hospitals. According to the survey, 33% of healthcare staff in the hospitals believe that communication within these healthcare facilities is inadequate or completely inadequate. Overall, more than half of support staff (56%) report that a formal framework for communication with management exists in hospitals. Across all hospitals, the majority of professionals report the absence of a systematic mechanism for monitoring attendance and punctuality. Overall, 33% state that there is no performance appraisal practice in their current hospital or department. When conducted, the annual review, combined with another form of appraisal, constitutes the primary method of evaluation in these hospitals; specifically, 50%, 53%, and 27% in the

Gabriel Touré University Hospital, the Mali Hospital, and the Point G University Hospital, respectively. On average, healthcare professionals were evaluated only once out of four (4) scheduled evaluations during the last 12 months, representing a rate of 19%. More than half of those surveyed stated that there was no performance monitoring of staff. In tertiary referral hospitals, more than 67% and 50% of healthcare professionals were unaware of the production of performance reports for civil servants and trainees, respectively. According to the results, the expressed capacity-building needs take various forms, including training, financial support, material and logistical support, and human resources. These needs vary from hospital to hospital. Union membership or membership in a professional association is not very common among healthcare professionals. Overall, 63.5% of them are not members of a union or professional association. Over the 12 months preceding the survey, healthcare professionals who were union or professional association members at the hospital observed, on average, two strikes and at least one other action (sabotage, march, sit-in, etc.) to demand better working conditions. Social dialogue is primarily managed formally; this is the case in 44% of instances within tertiary referral hospitals. The majority of support staff (52%) report that their concerns are not addressed by hospital management. In general, their needs are only partially met. According to 86.5% of professionals, the protection of vulnerable individuals is the primary method of implementing social action in their hospital.

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Conclusion: These results demonstrate that current human resource management practices in hospitals are largely inadequate and require improvement.

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INTRODUCTION

Human resource management practices were defined by Schuler & Jackson (1987) [1] as a system aimed at attracting, retaining, developing, and motivating employees to ensure the survival of the organization and its members. According to Armstrong (2012), they "concern all aspects of how individuals are employed and managed within organizations" [2].

Over the past 20 years, healthcare sector reform in many countries has been driven by a strong desire to reduce costs and expand coverage. Various approaches have been introduced, such as decentralization and the forging of public-private partnerships, but little attempt has been made to understand or address the human resource (HR) aspects and the implications of such structural changes [3]. The development and rationalization of human resources has always been a constant concern for successive Malian governments. Despite numerous reforms related to human resource management in the public sector, user complaints continue to worsen: the satisfaction rate has gradually decreased from an average of 64% in 2005 to 32.12% in 2013 (ANEH, 2005-2013), cited by Diallo B. 2018, 2020. While some studies have been conducted on this subject, few have compared existing practices in different hospitals. It is in this context that we initiated this study to highlight the practices that work and those that show their limitations in Malian hospitals.

OBJECTIF

The aim was therefore to compare the human resource management practices in place in three (3) local hospitals: Hôpital du Mali, Gabriel Touré, and Point-G.

METHODOLOGY

This was a cross-sectional, comparative, multicenter study adopting a positivist epistemological framework and a hypothetico-deductive approach. We opted for a quantitative approach. We used a structured questionnaire for individual surveys with 209 individuals (52 healthcare professionals, 64 support staff, and 93 caregivers). CSPro version 7, SPSS version 21, Excel 2013, and Word 2013 were used for data collection, data analysis, graph creation, and document entry, respectively. A secondary data analysis using a document analysis sheet was also conducted.

RESULTS

The study highlighted the following results: the sex ratio was 1.91, with the 30-45 age group being the largest (52.63%). The population was mostly married (73.57%), Muslim (91.9%), and had a higher education level (38.27%). The overall satisfaction rate was 41.9% for Mali Hospital, compared to 39.5% for Gabriel Touré Hospital and 25% for Point-G Hospital.

Overall, 56% of healthcare professionals did not have job descriptions or task sheets. This percentage was higher at Gabriel Touré University Hospital (55%) and Point-G Hospital (73%) than at Mali Hospital (41.2%). When asked whether describing tasks has an influence on staff behavior, more than 80% of healthcare professionals surveyed answered in the affirmative across all hospitals.

Civil service examinations are the primary method of recruiting healthcare professionals in tertiary referral hospitals (52%), followed by contract-based recruitment (30%).

In most public hospitals, the link between workload and pay is virtually nonexistent, making the private sector a supplementary opportunity where results and performance are rewarded. According to the survey, only 8% of healthcare professionals interviewed stated that their salaries are "very motivating." This percentage is higher at the Mali Hospital (18%) and almost zero at the Point G University Hospital. Among support staff, 59% find their salaries unmotivating. This percentage is lower at the Mali Hospital (50%). For both healthcare professionals and support staff, most respondents believe that salary levels influence employee behavior. Overall, this view is shared by 90% of healthcare professionals and 72% of support staff.

No training and professional development plan for healthcare staff has been clearly developed and implemented. Human resources managers are struggling to develop skills. Indeed, 38.5% and 42.2% of healthcare professionals and support staff in the three hospitals, respectively, report having received no training or refresher courses since their recruitment. The percentage of healthcare professionals with no training is lower at the Point G University Hospital (33%), while the percentage of support staff is lower at the Gabriel Touré University Hospital (28%). The lack of training appears to be worsening over time in these hospitals. Overall, the average number of healthcare professionals who have completed at least one training or refresher course is five, but they have completed fewer than two in the last 24 months. Monitoring and evaluation of healthcare professional training does not appear to be a standard practice in these hospitals. Half of the professionals (50%) report that their training has not been evaluated, and for almost the same proportion (47%), follow-up to the training has not been carried out. Training is better monitored and evaluated at the Mali Hospital (67%) than in university hospitals (Gabriel Touré 47% and Point G 20%).

Regarding staff mobility (arrivals and departures), 60% of healthcare professionals consider departures to be "frequent" or "very frequent." A slightly higher proportion (62%) makes the same observation regarding arrivals. Only at the Mali Hospital do healthcare professionals find arrivals more "frequent" or "very frequent" (60%) than departures (53%). It appears that, regardless of the hospital, more than 80% of healthcare professionals believe that staff performance is linked to career advancement.

Overall, 73% of support staff do not see promotion prospects in their hospitals. This situation constitutes a major obstacle to staff performance.

The results show that, overall, approximately 56% of healthcare professionals in the three hospitals are not at all or only slightly satisfied with their work. The Gabriel Touré University Hospital, with 5%, has the highest percentage of healthcare staff who are not at all satisfied with their work. The lowest satisfaction rate is observed at the CHU du Point G (approximately 27%).

The majority of respondents, 75% of healthcare professionals and 64% of support staff, do not intend to continue working in these hospitals. The Point G University Hospital recorded the highest percentage of healthcare professionals not wanting to continue working (47%), while the Gabriel Touré University Hospital had the highest percentage of support staff (40%). These results indicate a desire among many employees of these tertiary referral hospitals to find work elsewhere. Healthcare professionals cite, among other things, the hospital's inadequacy to meet their expectations, the lack of recognition for good work, poor working conditions, mismanagement, and tasks that are not suited to their skills. As for support staff, delayed payments, a lack of respect and consideration, meager salaries, and the desire to pursue further studies are the main reasons for their intention not to continue working. According to the survey, 33% of healthcare staff in hospitals believe that communication within these facilities is inadequate or completely ineffective. This deficiency is most pronounced at the Gabriel Touré University Hospital (40%). Overall, a majority of support staff (56%) state that a formal framework for communication with management exists within the hospitals. This indicates that the number of support staff who believe that such a formal framework for communication does not exist remains high, and the situation is similar in all three hospitals.

In all hospitals, the majority of professional staff report the lack of a systematic attendance and punctuality monitoring system. The proportions vary from 55% at Gabriel Touré University Hospital to 60% at Point-G and 65% at Mali Hospital.

Overall, 33% of them state that there is no performance evaluation practice in their current hospital or department. This observation is confirmed by two-thirds of the professionals at Point-G University Hospital; this hospital has the highest percentage of staff not subject to performance evaluation.

When conducted, the annual review, combined with another form of evaluation, constitutes the primary method of assessment in these hospitals. The rates were 50%, 53%, and 27% respectively at Gabriel Touré University Hospital, Mali Hospital, and Point G University Hospital. On average, healthcare professionals were evaluated only once out of four (4) scheduled evaluations over the past 12 months, representing a rate of 19%. Mali Hospital (31%) stands out from Gabriel Touré University Hospital (20%) and

Point G University Hospital (10%) with a higher rate of healthcare professional evaluations. More than half of those surveyed stated that there was no performance monitoring of staff. These proportions were higher at Gabriel Touré University Hospital (60%) and Point G University Hospital (66.7%) than at Mali Hospital (58.8%).

In tertiary referral hospitals, over 67% and 50% of healthcare professionals are unaware of the production of monitoring reports for civil servants and trainees, respectively. Regarding staff monitoring report production, the Mali Hospital stands out from the Gabriel Touré University Hospital (40% and 45%) and Point G University Hospital (47% and 20%) with a higher rate for trainees (65%) and a lower rate for civil servants (29%).

According to the results, the expressed capacity-building needs take various forms, namely training, financial support, material and logistical support, and human resources. These needs differ between hospitals. At the Gabriel Touré University Hospital, financial support, expressed by 92% of healthcare professionals, constitutes the primary need, while at the Mali Hospital and the Point G University Hospital, the main needs are for material and logistical support (97% and 100%). Regardless of the hospital, training needs are expressed by the majority of support staff. The need for additional human resources is a significant concern, particularly at the Mali Hospital (23%).

Union membership or membership in a professional association is not very common among healthcare professionals. Overall, 63.5% of them are not members of a union or professional association. The percentage of healthcare professionals who are union or association members is lower at the Mali Hospital (59%). In the 12 months preceding the survey, healthcare professionals who were union or association members at the hospital participated, on average, in two strikes and at least one other action (sabotage, march, sit-in, etc.) to demand better working conditions. This situation appears to be more frequent at the Gabriel Touré University Hospital (an average of three strikes and two actions) and the Point G University Hospital (an average of two strikes and two actions).

Social dialogue is primarily managed formally; this is the case in 44% of tertiary referral hospitals. This practice is more frequent at the Gabriel Touré University Hospital (60%). 2/3 of the staff at the Point G University Hospital do not know what method of social dialogue management is practiced within the establishment.

The majority of support staff (52%) report that their concerns are not addressed by hospital management. This is a much higher rate at the Point G University Hospital (CHU de Point G), at approximately 78%. In general, needs are only partially met; this is the case for 44% of staff at the Gabriel Touré University Hospital and 53% at the Mali Hospital. However, a small fraction of support staff at the Gabriel Touré University Hospital (8%) report that their concerns are fully addressed. According to 86.5% of professionals, the protection of vulnerable individuals is the primary method used to implement social action in their hospital. In addition to this type of support, the analysis by hospital highlights a predominance of measures to facilitate or guarantee access to care at the Mali Hospital (94%). This hospital is distinguished from the Gabriel Touré and Point G University Hospitals in particular by higher proportions of health professionals reporting different ways of implementing social action in their establishments, apart from support measures for life projects related to health issues.

DISCUSSION

Our results highlighted the following human resource management practices within hospitals: job descriptions, recruitment, compensation, training, personnel management, communication, staff monitoring and evaluation, unionization, social dialogue management, and implementation of social action. These practices are implemented at different levels depending on the hospital. For some practices, the level is acceptable. However, for others, it is unacceptable. This indicates that significant efforts still need to be made regarding HRM practices in these hospitals.

Our results are comparable to those of BENIE. J in Abidjan, which led primarily to the following conclusions: HRM practices (internal communication, training and skills development, performance evaluation, labor relations, and working conditions) are used in general hospitals, to varying degrees of implementation (BENIE, 2024) [4]. The study by DIALLO. B also highlighted the fact that job/task descriptions, recruitment, training, compensation, career management, motivation, communication, evaluation, and staff control are the most commonly used practices in university hospitals in Mali (DIALLO, 2020) [5]. Finally, our results also align with those of empirical studies by (Chrétien et al., 2005), (Bayad & Liouville, 2001), and (NDAO, 2011) [6], [7] & [8], which were conducted in different contexts (America, Europe, and Africa).

CONCLUSION

Human resource management practices play a fundamental role in all organizations and are a key factor in their sustainability. In our hospitals, some practices should be encouraged, while others raise numerous questions. Hospital HR managers should draw inspiration from successful practices in other sectors and, if necessary, propose alternatives to those that have proven ineffective.

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