

STRATEGIC INTERVENTIONS AND HEALTH WORKFORCE MOTIVATION: A CASE OF SELECTED HEALTH FACILITIES IN BUGESERA DISTRICT.

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Abstract: The main objective of this study was to evaluate the effectiveness of strategic interventions for health workforce motivation in selected health facilities in Bugesera District, Rwanda. Specifically, the study examined the effectiveness of performance-based financing (PBF), salary increases, professional development opportunities, and work environment factors on healthcare workers' motivation. A descriptive research design using both qualitative and quantitative methods was employed, with data collected from 140 healthcare providers in Nyamata Hospital and Benefactor David Clinic calculated using Slovin's (1960) formula $n = N / (1 + N * e^2)$. The data was analyzed through descriptive statistics, including means, standard deviations, and correlation analysis, with a t-test applied to assess significance at a 95% confidence interval. The study found that PBF had a significant positive effect on motivation, with a mean score of 4.07 and a strong correlation ($r = .945^{**}$). Salary increases also significantly impacted motivation (mean = 3.54, $r = .965^{**}$). Similarly, professional development opportunities ($r = .965^{**}$) and work environment factors ($r = .949^{**}$) strongly correlate positively with health workforce motivation. The study concluded that strategic interventions, including financial and non-financial incentives, are key to improving health workforce motivation. It recommended that the Ministry of Health provide a balanced approach to incentives, incorporating career development and professional growth opportunities.

Keywords: *Health Workforce, Motivation, Strategic Interventions*

1. Introduction:

Motivation of healthcare providers is critical in delivering quality health services, especially in low- and middle-income countries like Rwanda. Despite the introduction of performance-based financing (PBF) in several health facilities, maintaining high motivation among healthcare workers remains a persistent challenge. Low motivation among healthcare staff has been linked to various issues, including medical malpractices (Okuyama et al., 2018), high turnover rates (Dieleman & Harnmeijer, 2016), and poor service delivery (Ministry of Health, Rwanda, 2021).

While financial incentives such as PBF and salary increases have been shown to improve worker performance, the long-term effectiveness of these interventions is uncertain if not complemented by non-financial interventions such as career growth opportunities and improvements in working conditions (Franco et al., 2022; Bonfrer et al., 2014).

Given the critical role that healthcare worker motivation plays in improving health outcomes, this study aims to evaluate the effectiveness of financial and non-financial strategic interventions, such as PBF, salary increases, professional development opportunities, and work environment improvements, in motivating the health workforce in selected health facilities in Rwanda. By identifying gaps and areas for improvement, the study seeks to propose strategies to enhance the overall motivation of healthcare workers, thereby improving service delivery and patient outcomes.

The conceptual framework for this study was based on understanding the relationship between various strategic interventions and healthcare workforce motivation. The framework considers several independent variables, such as financial incentives, including PBF, salary increases, and other monetary rewards (Franco, L. M., Bennett, S., & Kanfer, R, 2022). It also considers non-financial incentives, including professional development opportunities and a work environment that enhances skills (Bradley, S., & McAuliffe, E., 2019).

2. Materials and Methods

A descriptive cross-sectional study using a quantitative and qualitative approach explored the effectiveness of strategic interventions to motivate healthcare workers in selected Bugesera District, Rwanda health facilities. The qualitative approach was used to collect detailed information using interviews with healthcare providers in selected health facilities, and its data was thematically analyzed to have narratives that support the quantitative data of the research. The target group comprised medical doctors, nurses, and allied health professionals working at Nyamata Hospital (a Public Health Facility) and BT David Clinic (a Private Health facility) in Bugesera District.

A stratified sampling technique was used to select healthcare providers from the two selected Hospitals. The professional category was used as a stratum for each selected hospital. Then, study participants were selected using a simple random sampling technique based on probability proportional to sample size in that strata/professional category. The list of healthcare providers in the selected hospitals was obtained from the Human resource department in each selected Hospital, their Council's registration numbers were entered into SPSS version 22, and healthcare providers whose registration number was randomly selected became study samples.

Data was collected using a questionnaire divided into five sections: questions on Socio-Demographic Information, the effectiveness of financial incentives, non-financial incentives, barriers to effective implementation, and Health Workforce Motivation.

The Statistical Product and Service Solutions (SPSS) Version 22.0 was used to enter, edit, and code the data for analysis. The findings were presented using tables and graphs. The data was assessed by calculating descriptive statistics, including means, standard deviations for continuous variables, and counts and percentages for categorical variables. The respondents' results were summarized using tables and graphs. The t-test assessed the factors associated with interprofessional collaboration. The odds ratio corresponding to a 95% confidence interval was computed using binary logistic regression. A significance level of 0.05 was used as a cutoff point and 95% confidence interval.

3. Results and discussion

3.1 Socio-demographic characteristics of the respondents

The results presented in Table 4.1 show that 65.0 % of healthcare providers in selected health facilities were male, while 35.0 % were female. In the age groups, the respondents were concentrated in the age groups between 25 and 34 (42.9%), 35 to 44 (45.7%), and 45 and 54 (11.4%), while none were above 55 years old. 26.4% were medical doctors, 41.4% of respondents were nurses, 19.3% were midwives, and 12.9% were allied health professionals. The majority of respondents were nurses.

Table 1 Socio-demographic characteristics of respondents (N=140)

Variable	Type of Variable	Frequency	Percent
Gender	Male	91	65.0 %
	Female	49	35.0%
Age	25 to 34	60	42.9%
	35 to 44	64	45.7%
	45 to 54	16	11.4%
Professional Registration Category	Medical doctors	37	26.4%
	Nurses	58	41.4%
	Midwives	27	19.3%
	Allied health professional	18	12.9%
Professional Degrees	Advanced Diploma (A1)	76	54.3%
	Bachelor's degree	46	32.9%
	Master's degree	18	12.9%
Professional experience	less than one year	11	7.9%
	1-5 years	70	50.0%
	6-10 years	41	29.2%
	11-15 years	18	12.9%
Type of Facility	Nyamata Hospital (Public)	121	86.4%
	BT David Polyclinic (Private)	19	13.6%
Total		140	100%

Source: Primary data, (2024)

Among health care providers; 54.3% had advanced diplomas (A1), 32.9% had bachelor's degree, and 12.9% had master's degree. The majority of healthcare workers had between 1 and 5 years of experience (50.0%), followed by those with between 6-10 years of experience (29.2%) and those with between 11-15 years of experience (12.9%), and last of those with less than one year of experience (7.9%). A big number, representing 86.43%, were working in Nyamata Hospital (Public), and 13.57% were working in BT David Polyclinic (Private).

Effectiveness of performance-based financing (PBF) in improving motivation among healthcare providers

Table 2 presents the results of the first objective of this study, which is to evaluate the effectiveness of performance-based financing (PBF) in improving motivation among healthcare providers in selected health facilities in Bugesera District. The data was analyzed, and 45.0% agreed that performance-based Financing (PBF) is regularly offered in health facilities, 42.1% strongly agreed that performance-based Financing (PBF) significantly enhanced employees' job satisfaction while 10.0% disagreed.

On the other hand, 47.1% agreed that PBF incentives motivate employees to work beyond their standard job requirements while only 12.1% disagreed., The overall means of results was 4.07, which was between agree (4) and strongly agree (5); it presented that the performance-based financing (PBF) had a significant effectiveness motivation to the healthcare providers in selected health facilities in Bugesera District, Rwanda.

Table 2 Effectiveness of performance-based financing (PBF) in improving motivation among healthcare providers

Source: Primary data, (2024)

Statement	Strongly Disagree				Neutral		Agree		Strongly Agree		Total			
	n	%	n	%	n	%	n	%	n	%	N	Mean	Sd	Skewness
Performance-based Financing (PBF) is regularly offered in my health facility	0	0	20	14.3	12	8.6	63	45.0	45	32.1	140	3.95	.992	-.797
Performance-based Financing (PBF) significantly enhance my job satisfaction as a healthcare professional.	0	0	14	10.0	0	0	67	47.9	59	42.1	140	4.22	.882	-1.344
PBF incentives motivate me to work beyond my standard job requirements.	0	0	17	12.1	8	5.7	66	47.1	49	35.0	140	4.05	.947	-.977
Overall Mean												4.07		

Performance-based financing (PBF) positively influenced healthcare workers' motivation, particularly by aligning financial incentives with performance goals. This incentivized workers to improve their clinical practices, enhancing patient care and adherence to clinical protocols.

Research in Rwanda by Basinga et al. (2021) similarly showed that PBF enhanced healthcare outcomes and worker performance in the short term but required supplementary interventions for long-term retention and motivation.

The qualitative data gathered from interviews with healthcare providers in selected health facilities in Bugesera District offered rich insights into the effects of financial and non-financial incentives on their motivation, performance, and retention. The total of the 8 interviewees acknowledged that financial incentives, particularly performance-based financing, helped them focus on patient care without the added stress of financial insecurity.

Quote from Interviewee A: "When my salary was increased, I felt more motivated to stay in my job. The extra income in terms of PBF helped me support my family better and made me feel like my efforts were being recognized." This aligns with Herzberg's Two-Factor Theory, which posits that salary is a hygiene factor that reduces dissatisfaction, though it may not drive long-term motivation (Herzberg, 1966). The ability to meet basic financial needs boosts morale but must be accompanied by non-financial incentives for sustained motivation.

Effect of salary increases on job motivation among healthcare providers

Table 3 presents the results of the second objective of this study, which is to analyze the effect of salary increases on job motivation among healthcare providers in selected health facilities in Bugesera District. The data was analyzed; 68.6% agreed that the salary increases were provided annually within the Hospital, while 9.3% strongly disagreed.

Out of 140 respondents, 60.7% agreed that salary increase in their organization had improved their overall job satisfaction while 19.3% disagreed. A Percentage of 45.7% strongly agreed that they were motivated to stay in their current job because of salary adjustments over time while 14.3% were on the neutral side. The salary increases were linked to their performance, which motivated them to work harder; 48.6% agreed, while 5.7% strongly disagreed. The overall mean of results was 3.54, which presented that the salary increases significantly affected job motivation to healthcare providers in selected health facilities in Bugesera District, Rwanda.

Table 3. Effect of salary increases on job motivation among healthcare providers

Statement	Strongly Disagree		Disagree		Neutral		Agree		Strongly Agree		Total		Skewness
	n	%	n	%	n	%	n	%	n	%	N	MeanSd	
Salary increases is provided every year within the Hospital	13	9.3	31	22.1	0	0	96	68.6	0	0	140	3.28 1.100	-1.001
Salary increases in my organization have	0	0	27	19.3	0	0	85	60.7	28	20.0	140	3.81 .971	-.908

Buchan et al. (2019) also argue that salary increases can be an effective strategy to prevent the migration of healthcare workers to higher-paying private sectors or abroad, a common issue in resource-limited settings. The sense of financial stability provided by salary increases helps alleviate economic pressures and improves the likelihood of retaining skilled healthcare professionals.

Quote from Interviewee B: "The salary increase was appreciated, but after a while, it feels like it's not enough. We are often overworked, and the cost of living keeps rising. Sometimes, the raise was not as impactful as I initially thought."

Salary increases significantly impacted healthcare workers' overall motivation, particularly regarding job satisfaction and financial security. Workers reported that stable and competitive salaries improved their willingness to remain in their current roles. Salary increases were closely linked to workforce retention. Healthcare workers who received regular salary adjustments were less likely to leave their positions for opportunities in private facilities or abroad. Salary increases improved motivation and retention, but their direct impact on performance was moderate. Financial incentives alone did not necessarily lead to better clinical outcomes, but they did reduce absenteeism and improve job commitment.

Table 4 shows that 57.9% strongly agreed that there was a well-structured program for professional development opportunities within their health facility, and 61.4% agreed that the professional

development opportunities provided by their health facility had significantly improved their skills and competencies. A percentage of 59.3% agreed that health workers are satisfied with the level of professional development support (workshops, mentorship) provided by their organization, while 11.4% disagreed.

The overall mean of results was 3.34, showing that professional development opportunities significantly improved healthcare workers' motivation in selected Bugesera District, Rwanda health facilities.

Table 4 Effectiveness of Professional Development Opportunities on healthcare workers' motivation

Statement	Strongly Disagree		Disagree		Neutral		Agree		Strongly Agree		Total		
	n	%	n	%	n	%	n	%	n	%	N	Mean	Sd
There is well-structured programme for professional development opportunities within my health facility	0	0	0	0	0	0	59	42.18	1	57.9	140	4.58	.496
The professional development opportunities provided by my health facility have significantly improved my skills and competencies.	0	0	0	0	0	0	86	61.45	4	38.6	140	4.39	.489
I am satisfied with the level of professional development support (workshops, mentorship) provided by my organization.	0	0	16	11.40	0	0	83	59.34	1	29.9	140	4.06	.867
Overall Mean	3.34												

Source: Primary data, (2024)

The Expectancy Theory (Vroom, 1964) also supports this finding, as workers may perceive that salary increases do not directly correlate with their daily efforts to improve performance. Instead,

intrinsic motivators like professional development opportunities and recognition may substantially improve healthcare workers' performance.

Non-financial incentives, exceptionally professional development opportunities, emerged as powerful motivators for healthcare workers. Many respondents highlighted the importance of continuous training and skill development as motivators, especially for younger professionals who value career growth. Quote from Interviewee C: "I feel motivated when I have opportunities to attend workshops and gain new skills. It shows me that the hospital cares about my professional growth."

This finding is supported by Dieleman et al. (2016), who observed that professional development opportunities are vital to fostering intrinsic motivation among healthcare workers, leading to higher job satisfaction and improved performance.

Impact of work environment factors on healthcare worker motivation

Table 5 presents the results of the fourth objective of this study, which is to assess the impact of work environment factors on healthcare worker motivation in selected health facilities in Bugesera District, Rwanda. The analyzed data shows that 52.1% strongly agreed that their health facility's physical work environment (infrastructure, safety, equipment) positively affected motivation to perform health care providers' duties. 57.1% agreed that healthcare workers felt supported by their colleagues and supervisors, which improved their motivation at work, and 42.9% strongly agreed. On the other side, 52.9% agreed that the work environment in the facility helped healthcare workers to maintain a healthy work-life balance, which enhanced their job satisfaction, while 7.9% disagreed. The overall mean of results was 3.35, which presented that the work environment factors significantly impacted healthcare worker motivation in selected health facilities in Bugesera District, Rwanda.

Table 5 Impact of work environment factors on healthcare worker motivation

Statement	Strongly Disagree				Neutral				Strongly Agree				Total		
	n	%	n	%	n	%	n	%	n	%	n	%	N	Mean	Sd
The physical work environment (infrastructure, safety, equipment) in this health facility positively affects my motivation to perform my duties	0	0	0	0	0	0	67	47.973	52.1	140	4.52	.501	-.087		

I feel supported by my colleagues and supervisors, which improves my motivation at work	0	0	0	0	0	0	80	57.160	42.9	140	4.43	.497	.292
The work environment in this facility helps me maintain a healthy work-life balance, which enhances my job satisfaction.	0	0	11	7.9	8	5.7	74	52.947	33.6	140	4.12	.835	-1.060
Overall Mean													3.35

Source: Primary data, (2024)

Dieleman et al. (2016) emphasize that improvements in infrastructure, such as better lighting, ventilation, and sanitation, are associated with better job performance and increased motivation. In environments where workers feel physically safe and comfortable, they are more likely to focus on their professional responsibilities and engage meaningfully with their work.

The work environment, including infrastructure, resource availability, and management support, played a vital role in influencing job satisfaction. Healthcare workers reported that well-equipped facilities and supportive work environments helped them feel more motivated and able to perform their duties effectively. The availability of necessary resources and a supportive work culture directly influenced clinical performance. Studies have shown that excessive work demands and inadequate time off can lead to stress and exhaustion, reducing job satisfaction and motivation (Franco et al., 2018).

Work environment factors, such as access to adequate medical supplies and equipment and a supportive organizational culture, were highlighted as crucial to motivation. Healthcare workers who felt they had the necessary resources and a collaborative working environment expressed higher job satisfaction and were likelier to stay in their positions. Quote from Interviewee D: "The work environment is really important. When I have all the equipment I need and the support of my colleagues, I can focus on my job. If the environment is stressful or lacking resources, it's hard to stay motivated." This reflects the findings of Franco et al. (2022), who argue that a supportive work environment significantly influences healthcare worker motivation and performance. Improvements in physical infrastructure and team dynamics contribute to better retention and job satisfaction.

Health Workforce Motivation

Table 6 presents the results of the health workforce motivation dependent variable in Bugesera District, Rwanda. The data was analyzed, and out of 140 respondents, 54.3% agreed that healthcare workers felt motivated to deliver high-quality healthcare services in their facilities. On the strategic

interventions (both financial and non-financial) implemented in their health facilities contribute to their overall job motivation, 13.5% disagreed while 49.3% agreed. On that, healthcare workers were satisfied with their current job in the healthcare sector; 50.7% agreed, while 49.3% strongly agreed. The overall mean of results was 3.25, presenting significant health workforce motivation in Bugesera District, Rwanda.

Table 6 Health Workforce Motivation

Statement	Strongly Disagree				Disagree		Neutral		Agree		Strongly Agree		Total			
	n	%	n	%	n	%	n	%	n	%	n	%	N	Mean	Sd	Skewness
I feel motivated to deliver high-quality healthcare services in my facility.	0	0	0	0	0	0	76	54.3	64	45.7	140	4.46	.500	.174		
The strategic interventions (both financial and non-financial) implemented in my health facility contribute to my overall job motivation.	0	0	19	13.5	20	14.3	69	49.3	32	22.9	140	3.81	.941	-.617		
I am satisfied with my current job in the healthcare sector.	0	0	0	0	0	0	71	50.7	69	49.3	140	4.49	.502	.029		
Overall Mean																3.25

Source: Primary data, (2024)

The study revealed that the combination of financial and non-financial incentives was essential for long-term motivation. Healthcare workers felt most motivated when salary increases were combined with opportunities for professional development, recognition, and improvements in the work environment.

Quote from Interviewee E: "I feel motivated not just by the salary but by the fact that I'm constantly learning and growing in my role. The working conditions also play a big part. When everything works together, I'm more satisfied and committed to staying."

This finding supports the Expectancy Theory (Vroom, 1964), which suggests that workers are motivated when they perceive a clear link between effort, performance, and rewards and when those rewards are meaningful to them financially and regarding career growth.

Relationship between strategic interventions and health workforce motivation

Table 7 presents the relationship between the effectiveness of strategic interventions and health workforce motivation in selected health facilities in Bugesera District, Rwanda. The aspects of the effectiveness of strategic interventions taken were the effectiveness of performance-based financing (PBF), the effect of salary increases, the effectiveness of professional development opportunities, and the impact of work environment factors. The Statistical Package for Social Sciences (SPSS) software version 22.0 was used to calculate the Pearson coefficients. The Pearson coefficients of relationship are between -1 to 1, whereby -1 to 0 points negative relationship and 0 to 1 points positive relationship. From -1 to -0.5 shows a high negative, from -0.5 to 0 shows a low negative relationship, and from 0 to 0.5 indicates a low positive, and from 0.5 to 1 indicates a high positive relationship. The data analysis showed that the relationship between (the effectiveness of performance-based financing (PBF), the effect of salary increases, the effectiveness of professional development opportunities, and the impact of work environment factors) and health workforce motivation was .945**, .965**, .965** and .949** respectively.

Table 7 The association between strategic interventions and health workforce motivation

		Effectiveness of performance- based financing (PBF)	Effect of salary increases	Effectiveness of professional development opportunities	Impact of work environment factors	Health workforce motivation
Effectiveness of performance- based financing (PBF)	Pearson Correlation	1				
	Sig. (2- tailed)					
	N	140				
Effect of salary increases	Pearson Correlation	.954**	1			
	Sig. (2- tailed)	.000				
	N	140	140			
Effectiveness of professional development opportunities	Pearson Correlation	.953**	.972**	1		
	Sig. (2- tailed)	.000	.000			
	N	140	140	140		
	Pearson Correlation	.931**	.965**	.944**	1	

Impact of work environment factors	Sig. (2-tailed)	.000	.000	.000		
	N	140	140	140	140	
Health workforce motivation	Pearson Correlation	.945**	.965**	.965**	.949**	1
	Sig. (2-tailed)	.000	.000	.000	.000	
	N	140	140	140	140	140

** . Correlation is significant at the 0.01 level (2-tailed).

Source: Primary data, (2024)

It was presented that there was a statistically significant correlation between the effectiveness of strategic interventions and health workforce motivation in selected health facilities in Bugesera District, Rwanda.

Table 8 Model Summary of strategic interventions and health workforce motivation

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.974 ^a	.949	.948	.266

a. Predictors: (Constant), Impact of work environment factors, Effectiveness of performance-based financing (PBF), Effectiveness of professional development opportunities, Effect of salary increases

Source: Primary data, (2024)

Table 8 presents the overall model's significance in the effectiveness of strategic interventions and health workforce motivation in selected health facilities in Bugesera District, Rwanda. The results indicated that the R Square=.949. It was statistically clear that 94.9% of all variables of health workforce motivation can be explained by one of all variables of the effectiveness of strategic interventions. The standard error of coefficients was 0.266, which was low.

Table 9 Analysis of Variance of strategic interventions and health workforce motivation

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	179.128	4	44.782	632.561	.000 ^b
	Residual	9.557	135	.071		
	Total	188.686	139			

a. Dependent Variable: Health workforce motivation

b. Predictors: (Constant), Impact of work environment factors, Effectiveness of performance-based financing (PBF), Effectiveness of professional development opportunities, Effect of salary increases

Source: Primary data, (2024)

Table 9 presents the analysis of variance of the effectiveness of strategic interventions and health workforce motivation. The results presented that the variables were statistically significant with

regression mean square of 44.782 and residual mean square was .071 while $F=632.561$ and $P\text{-value} = .000b$, it confirmed that there was a statistically significant relationship between the effectiveness of strategic interventions and health workforce motivation in selected health facilities in Bugesera District, Rwanda. Mean square residual presents the mean squared differences within health workforce motivation, and it is a component of F used to test for differences between variables or is the estimate of the variance of the errors help to evaluate the change in the data that is not accounted for by the effectiveness of strategic interventions in the model.

Table 10 Coefficients ^a of strategic interventions and health workforce motivation

Coefficients ^a								
Model	Unstandardized		Standardized	t	Sig.	95.0% Confidence		
	Coefficients		Coefficients			Interval for B		
	B	Std. Error	Beta			Lower Bound	Upper Bound	
1	(Constant)	-.145	.082		-1.757	.081	-.307	.018
	Effectiveness of performance-based financing (PBF)	.135	.073	.129	1.847	.067	-.010	.280
	Effect of salary increases	.268	.115	.254	2.340	.021	.041	.494
	Effectiveness of professional development opportunities	.429	.093	.411	4.627	.000	.246	.612
	Impact of work environment factors	.204	.078	.196	2.614	.010	.050	.358

a. Dependent Variable: Health workforce motivation

Source: Primary data, (2024)

Table 10 shows the coefficients of independent variables of the effectiveness of strategic interventions. For the detail, it was statistically significant since $P\text{-value}$ was less than .05. The results presented that the effectiveness of performance-based financing (PBF) was not statistically significant with $P\text{-value} = .067$, the effect of salary increases was statistically significant with $P\text{-value} = .021$, the effectiveness of professional development opportunities was statistically significant with $P\text{-value} = .000$, and the impact of work environment factors was statistically significant with $P\text{-value} = .010$.

To conclude, the interviews with healthcare providers in selected Health Facilities in Bugesera District highlight the importance of financial and non-financial incentives in motivating the workforce. While salary increases provide a necessary foundation for motivation, professional development and a supportive work environment are crucial for sustaining motivation over the

long term. The findings align with established theories of motivation, such as Herzberg's Two-Factor Theory and Expectancy Theory, and emphasize the need for a holistic approach to workforce motivation that incorporates multiple incentive strategies.

4. Conclusions and Recommendations

Conclusion

The findings of this study have demonstrated that various strategic interventions, such as performance-based financing (PBF), salary increases, professional development opportunities, and work environment factors, significantly influence healthcare workers' motivation in selected health facilities in Bugesera District, Rwanda. As analyzed in Chapter Four, each of these interventions showed a strong and positive relationship with workforce motivation.

The data revealed that PBF is a highly effective intervention for improving healthcare workers' motivation. A majority of respondents confirmed that PBF was regularly offered and that it significantly enhanced job satisfaction. The strong positive correlation ($r = .945$) between PBF and workforce motivation suggests that performance-based financial rewards are a critical driver of motivation in healthcare settings.

Salary increments emerged as a significant factor in improving job satisfaction and motivation among healthcare workers. The correlation ($r = .965$) between salary increases and motivation confirms that financial remuneration is a key determinant of job satisfaction, making it a valuable tool for enhancing motivation and performance.

Professional development opportunities, including structured skill development programs, mentorship, and workshops, were shown to have a notable impact on healthcare workers' motivation. The statistically significant correlation ($r = .965$) between professional development and motivation suggests that continuous learning and career growth opportunities are critical for sustaining a motivated workforce.

A conducive work environment, including adequate infrastructure, safety measures, and support from colleagues and supervisors, was found to be essential for motivating healthcare workers. The correlation ($r = .949$) indicates that improvements in the physical and social aspects of the work environment play a pivotal role in fostering motivation and job satisfaction.

In conclusion, these interventions, particularly PBF and salary increases, were critical in enhancing healthcare workforce motivation and overall job satisfaction in the selected health facilities.

Recommendations

Based on the findings, the following recommendations are made to enhance the motivation of healthcare workers further:

The implementation of PBF should be expanded and consistently maintained in all health facilities. Efforts should be made to align performance rewards with clear, measurable objectives to ensure that healthcare workers feel adequately rewarded for their contributions.

Health facilities should prioritize regular salary reviews and adjustments to reflect the rising cost of living and the value of healthcare workers' contributions. Competitive salaries not only improve motivation but also help retain skilled healthcare workers.

Health facilities should invest in continuous professional development programs that offer healthcare workers opportunities to upgrade their skills and advance in their careers. Structured mentorship, access to workshops, and other learning platforms should be made widely available to enhance job satisfaction and motivation.

Administrators should focus on improving the physical infrastructure of health facilities, ensuring that healthcare workers have access to the necessary tools, equipment, and safe working conditions. Additionally, fostering a supportive work culture where supervisors and colleagues provide encouragement and assistance can significantly improve motivation levels.

Given that work-life balance was identified as a contributor to job satisfaction, health facilities should introduce policies and practices that promote flexible work schedules, mental health support, and adequate time off to avoid burnout.

Specifically, the Ministry of Health should establish a well-defined career progression opportunities linked to professional development. This includes promotions and additional responsibilities for workers who excel in training programs.

The current study evaluates the effectiveness of strategic interventions on health workforce motivation in selected health facilities in Bugesera District. More studies should be conducted in different districts to evaluate how the strategic interventions are enforced and their effects on health workforce motivation.