

CONTEXT ANALYSIS (Remember not all of these issues might be relevant in this particular case!)

Contextual feature	Specific issues relevant to this experience	Impact of these issues on actors (name these) and the case, and implications for policy implementation
Micro context		
organisational climate & culture	Doctors in the military and the public sector earn different salaries and benefits, and military privileges have historically been preferred.	caused public sector physicians (Ministry of Health staff) to become dissatisfied, which sparked industrial action. brought attention to differences in compensation practices, which called for a change in policy.
other policies	Due to the absence of labor rules governing vital workers, ADHA was introduced.	Due to the initial lack of legal frameworks, it was challenging to settle conflicts, which resulted in frequent strikes. A cycle of new expectations and demands was started
organisational capacity	Administrative inefficiencies in the Ministry of Health's payment processing; the healthcare system's incapacity to manage significant payment revisions.	Government resources were strained and service delivery was disrupted as a result of ongoing discontent and additional strikes brought on b
interpersonal factors	strong support for higher pay among medical professionals (nurses, doctors, and other health workers).	Health workers' unity increased their collective negotiating power, which resulted in more inclusive policy reforms but also raised concerns about rising salary bills.
Macro context		
social & political pressures & interests	Support for striking physicians from the public and media, as well as pressure on the government to address the situation.	The government was forced to act swiftly to resolve wage inequities, and ADHA was selected as a stopgap option to continue providing
historical & socio-cultural context	long-standing complaints about the healthcare industry's low pay and unfavorable working conditions.	made people believe that the only way to get pay rises was through industrial action. This established a standard for upcoming conflicts.

economic conditions & policy	Government spending on wages is high, and payment delays are caused by budgetary constraints.	financial strain on the Ministry of Health and Finance, which prompted changes to policy, including the inclusion of ADHA in pay.
international context	Low pay is driving health professionals to migrate, and donors are worried about how long wage improvements will last.	The healthcare workforce was damaged by brain drain, necessitating policy changes to increase retention. The effectiveness of the monies' utilization to enhance health
environmental factors	excessive workloads brought on by a lack of employees; unequal pay distribution.	increased stress for the surviving medical staff, which fueled more strikes and unhappiness.

Unpacking agent behavioural drivers and power				
AGENT	Mindsets, values and interests		Forms and level of power to influence implementation	
	What are the core elements of the agent's 'mindset' (beliefs, values, interests driving behaviour in general?)	Given the elements identified in column 1, is actor's response to the change likely to be committed, compliant, indifferent, resistant, or hostile?	What forms of power can the agent mobilise to support his/her actions around the change?	What power limits does the actor face in taking action around the change?
Ministry of Health	maintaining healthcare service stability while controlling budgetary restrictions.	Due to financial limitations, they were first cooperative but eventually became resistant.	control over healthcare workforce policies and the ability to make policies.	Funding is provided by the Ministry of Finance; unions exert pressure.
Ministry of Finance	controlling the public budget and averting financial emergencies.	unwilling to accept pay increases yet obedient when coerced.	Control over spending; ultimate consent for decisions pertaining to wages.	Limited by available national finances and competing sectoral demands.
Ghana Medical Association (GMA)	promoting improved pay and working conditions for medical professionals.	Extremely dedicated to change; used strikes as a direct form of protest.	powerful collective bargaining power and the capacity to interfere with medical services.	reliant on governmental policy decisions; strikes were criticized by the public.

Nurses and Allied Health Workers	requesting improved working conditions and pay parity with physicians.	After being kicked out of ADHA, they became resistant after initially being indifferent.	the capacity to organize strikes and win over the public.	divided unions; less negotiating leverage than physicians.
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