Global context for Health Workforce

Khassoum Diallo,
Coordinator, Data, Evidence and Knowledge Management, Health Workforce Department, WHO

PAHO Regional Workshop on NHWA and SOWNR, Miami, July 2019
Global policy frameworks and initiatives

1. **Optimize the existing workforce** in pursuit of the Sustainable Development Goals and universal health coverage (e.g. education, employment, retention)

2. **Anticipate and align investment in future workforce requirements** and plan the necessary changes (e.g. a fit for purpose, needs-based workforce)

3. **Strengthen individual and institutional capacity** to manage HRH policy, planning and implementation (e.g. migration and regulation)

4. **Strengthen data, evidence and knowledge** for cost-effective policy decisions (e.g. National Health Workforce Accounts)

One vision: Accelerate progress towards universal health coverage and the 2030 Agenda for Sustainable Development by ensuring equitable access to health workers within strengthened health systems

Two goals: Invest in both the expansion and transformation of the global health and social workforce

Three organizations: ILO, OECD, WHO

Four SDGs

- Ensure healthy lives and promote well-being for all at all ages (Goal 3)
- Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all (Goal 4)
- Achieve gender equality and empower all women and girls (Goal 5)
- Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all (Goal 8)

Five workstreams:

- To facilitate the implementation of intersectoral approaches and country-driven action and catalyse sustainable investments, capacity-building and policy action: (1) advocacy, social dialogue and policy dialogue; (2) data, evidence and accountability; (3) education,
Agenda 2030 for Sustainable Development
SDG 3 - HEALTH

SDG 3: Ensure healthy lives and promote well-being for all at all ages

Target 3.8: Achieve universal health coverage, including financial risk protection, access to quality essential health-care services, medicines and vaccines for all

- 3.1: Reduce maternal mortality
- 3.2: End preventable newborn and child deaths
- 3.3: End the epidemics of HIV, TB, malaria and NTD and combat hepatitis, waterborne and other communicable diseases
- 3.7: Ensure universal access to sexual and reproductive health-care services

New SDG 3 targets

- 3.4: Reduce mortality from NCD and promote mental health
- 3.5: Strengthen prevention and treatment of substance abuse
- 3.6: Halve global deaths and injuries from road traffic accidents
- 3.9: Reduce deaths from hazardous chemicals and air, water and soil pollution and contamination

SDG3 means of implementation targets

- 3.a: Strengthen implementation of framework convention on tobacco control
- 3.b: Provide access to medicines and vaccines for all, support R&D of vaccines and medicines for all
- 3.c: Increase health financing and health workforce (especially in developing countries)
- 3.d: Strengthen capacity for early warning, risk reduction and management of health risks

Interactions with economic, other social and environmental SDGs and SDG 17 on means of implementation
The Global Strategy on HRH: Workforce 2030

1. **Optimize the existing workforce** in pursuit of the Sustainable Development Goals and UHC (e.g. education, employment, retention)

2. **Anticipate future workforce** requirements by 2030 and plan the necessary changes (e.g. a fit for purpose, needs-based workforce)

3. **Strengthen individual and institutional capacity** to manage HRH policy, planning and implementation (e.g. migration and regulation)

4. **Strengthen the data, evidence and knowledge** for cost-effective policy decisions (e.g. National Health Workforce Accounts)
World Health Assembly Resolution on the GSHRH

Resolution WHA69.19

**URGES Member States** to implement policy options towards:

- consolidating a core set of human resources for health data with annual reporting to the Global Health Observatory, as well as progressive implementation of national health workforce accounts, to support national policy and planning and the Global Strategy’s monitoring and accountability framework.
The High-Level Commission on Health Employment and Economic Growth

Aims to stimulate and guide the creation of 40 million new jobs in the health and social sector, and to reduce the projected shortfall of 18 million health workers, primarily in low- and lower-middle income countries, by 2030.

The Commission seeks to:

• Highlight the benefits across the SDGs from investments in the health workforce;

• Draw attention to the necessary reforms in health employment, education and service delivery;

• Generate political commitment and inter-sectoral action towards more and better investment in the health workforce.
Case for Investment: Health Workforce

“*The Commission concludes that, to the extent that resources are wisely spent and the right policies are put in place, investment in education and job creation in the health and social sectors will make a critical positive contribution to inclusive economic growth.*”

Prof. Joseph E. Stiglitz
Nobel laureate economist
The High-Level Commission

10 recommendations
1. Job creation
2. Gender equality and women's rights
3. Education training and competencies
4. Health service delivery and organization
5. Technology
6. Crisis and humanitarian settings
7. Financing and fiscal space
8. Partnerships and cooperation
9. International migration
10. Data, information and accountability
Why investments on HRH are essential to achieving SDGs

Health worker supply

2013

¾ education capacity is in high and upper middle income countries

2030

18 million shortfall, primarily low and lower-middle income countries

Health worker education

Source: GSHRH 2016
Meeting the health SDGs means investing $3.9 trillion over the next 15 years. Excluding investments into the education and training of the workforce.

<table>
<thead>
<tr>
<th>That is</th>
<th>$76</th>
<th>$58</th>
<th>$51</th>
</tr>
</thead>
<tbody>
<tr>
<td>per capita in Low income countries</td>
<td>per capita in Lower middle income countries</td>
<td>per capita in Upper middle income countries</td>
<td></td>
</tr>
</tbody>
</table>

It is spent on

| 34% | 36% | 4% | 16% | 10% |
| Infrastructure | Health workforce | Supply chain | Drugs & consumables | Systems strengthening |

It offers

| 97 million lives | 535 million healthy years of life | 23 million health workers | 415,000 new healthcare facilities |

**Investing in health SDGs: 70 million decent job creation opportunity**


**World Health Organization**

SDG HEALTH PRICE TAG
www.who.int
The WHO Global Programme of Work 2019-2023

Mission

Promote health – keep the world safe – serve the vulnerable

Strategic priorities

Health coverage – 1 billion more people with health coverage
Health emergencies – 1 billion more people made safer
Health priorities – 1 billion lives improved

Strategic shifts

Step up global leadership – diplomacy and advocacy; gender, equity and rights; multisectoral action; finance

Drive impact in every country – differentiated approach based on capacity and vulnerability

Focus global public goods on impact – normative guidance and agreements, data, innovation

Organizational shifts

- Measure impact to be accountable and manage for results
- Reshape operating model to drive country, regional and global impacts
- Transform partnerships, communications and financing to resource the strategic priorities
- Build critical processes and tools to optimize organizational performance
- Foster culture change to ensure a seamless, high-performing WHO
THANK YOU.

who.int/hrh

#workforce2030