World Health Organization

EXECUTIVE BOARD
138th session
Agenda item 10.1

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Global Strategy on human resources for health: workforce 2030

Draft resolution proposed by Norway, South Africa, Switzerland, Thailand, United States of America, Zambia, Zimbabwe and European Union Member States

The Executive Board,

Having considered the report on the draft global strategy on human resources for health: health workforce 2030,[1]

RECOMMENDS to the Sixty-ninth World Health Assembly the adoption of the following resolution:

The Sixty-ninth World Health Assembly,

(**PP1)** Having considered the report by the Secretariat on the draft Global Strategy on Human Resources for Health: Workforce 2030;

(**PP2)** Reaffirming the continuing importance of the application of the WHO Global Code of Practice on the International Recruitment of Health Personnel (hereafter "WHO Global Code");[2]

(PP3) Recalling previous Health Assembly resolutions aimed at strengthening the health workforce;[3]

(PP4) Recalling also the United Nations General Assembly resolutions in 2014 and 2015 that call on Member States, in cooperation, as appropriate, with relevant international

[1] Document EB138/36.

[2] Adopted through resolution WHA63.16 WHO Global Code of Practice on the International Recruitment of Health Personnel (2010).

[3] Resolutions WHA64.6 (2011) on health workforce strengthening, WHA64.7 (2011) on strengthening nursing and midwifery, WHA66.23 (2013) on transforming health workforce education in support of universal health coverage, WHA67.24 (2014) on follow-up of the Recife Political Declaration on Human Resources for Health: renewed commitments towards universal health coverage WHA65.20 (2012) on WHO's response, and role as the health cluster lead, in meeting the growing demands of health in humanitarian emergencies and WHA68.15 (2015) on strengthening emergency and essential surgical care and anaesthesia as a component of universal health coverage.

organizations and relevant non-State actors, to develop effective preventive measures to enhance and promote the safety and protection of medical and health personnel, as well as respect for their respective professional codes of ethics;[1] and that underline the importance of adequate country capacity to respond to public health threats through strong and resilient health systems with the availability of motivated, well trained and appropriately equipped health workers;[2]

(PP5) Inspired by the ambition of the 2030 Agenda for Sustainable Development, including its strong multisectoral dimension and call to achieve universal health coverage;

(PP6) Guided by Sustainable Development Goal 3(c)'s call to "substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States";

(PP7) Recognizing that health workers are integral to building strong and resilient health systems that contribute to the achievement of the Sustainable Development Goals and targets related to nutrition, health, education, gender, employment, and the reduction of inequalities;[3]

(PP8) Recognizing further that the Sustainable Development Goal 3 and its targets will only be attained through substantive and strategic investments in the global health workforce, as well as a substantial shift in health workforce-related planning, education, deployment, retention, management, and remuneration;

(PP9) Recognizing that countries' own domestic health workforce is the primary responder in all countries, including those with fragile health systems, and is key for building resilient health systems;[4]

(PP10) Deeply concerned by the rising global health workforce deficit and the mismatch between the supply, demand, and population need for health workers, now and in the future, which is a major barrier in achieving universal health coverage as committed to in Sustainable Development Goal target 3.8;

(PP11) Taking note of the renewed focus on health system strengthening and the need to mobilize and effectively manage domestic, international and other forms of health financing in its support;[5]

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[1] United Nations General Assembly resolution 69/132 (2014) on global health and foreign policy.

[2] United Nations General Assembly resolution 70/L.32 (2015) on global health and foreign policy.

[3] See Sustainable Development goals and targets, available at https://sustainabledevelopment.un.org/?menu=1300 (accessed 25 January 2016).

[4] Resolution WHA64.10 (2011) on strengthening national health emergency and disaster management capacities and resilience of health systems; and document A68/27 on global health emergency workforce.

[5] The initiative Roadmap: Healthy Systems – Healthy Lives; Resolutions WHA64.9 (2011) on sustainable health financing structures and universal health coverage, WHA62.12 (2009) on primary health care, including health system strengthening, WHA64.8 (2011) on strengthening national policy dialogue to build more robust health policies, strategies and plans and WHA62.13 (2009) on traditional medicine.

(PP12) Encouraged by the emerging political consensus on the contribution of health workers to improved health outcomes, to economic growth, to implementation of the International Health Regulations and to global health security;

(PP13) Recognizing that investing in new health workforce employment opportunities may also add broader socioeconomic value to the economy and contribute to the implementation of the Sustainable Development Goals,

(OP) 1. ADOPTS the Global Strategy on Human Resources for Health: Workforce 2030 (hereafter "Global Strategy"),[1] including its vision of accelerating progress towards universal health coverage and the Sustainable Development Goals by ensuring universal access to health workers, its principles, its four strategic objectives and its milestones for 2020 and 2030;

(OP) 2. URGES all Member States,[2] as integral to health systems strengthening:

(1) to adapt the Global Strategy's four strategic objectives within national health, education, and employment strategies, and broader socioeconomic development contexts, in line with national priorities and specificities;

(2) to engage relevant sectors and ensure intersectoral mechanisms at the national and subnational levels as required for efficient investment in and effective implementation of health workforce policies;

(3) to implement policy options as proposed for Member States by the Global Strategy, supported by high-level commitment and adequate financing, including through the implementation of the WHO Global Code, in particular towards:

(a) strengthening respective capacities to optimize the existing health workforce to contribute to the achievement of universal health coverage;

(b) actively forecasting and addressing gaps between health workforce needs, demands, and supply, including through intersectoral collaboration;

(c) building the institutional capacity at the subnational and national levels for effective governance and leadership of human resources for health; as e.g. an essential component for building comprehensive national health systems providing a long term solution in managing emergency outbreaks in their initial phase;

(d) 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. [This includes

[1] To be attached at Annex following adoption of the resolution by the Health Assembly.

[2] And, where applicable, regional economic integration organizations.

annual reporting on steps taken to develop effective preventive measures to enhance and promote the safety and protection of medical and health personnel;][1]

(OP) 3. INVITES international, regional, national and local partners and stakeholders from within and beyond the health sector to engage in, and support, the implementation of the Global Strategy and its milestones for 2020 and 2030, in alignment with national institutional mechanisms to coordinate an inter-sectoral health workforce agenda, specifically calling for:

(1) education institutions to adapt their institutional set-up and modalities of instruction, aligned with national accreditation systems and populations' health needs; to train health workers in sufficient quantity, quality, and with relevant skills, while also promoting gender equality in admissions and teaching; and to maintain quality and enhance performance through continuing professional development programmes;

(2) professional councils, associations, and regulatory bodies to adopt regulations to optimize workforce competencies, and to support inter-professional collaboration for a skills mix responsive to population needs;

(3) the International Monetary Fund, the World Bank, regional development banks and other financing and lending institutions to adapt their macroeconomic policies and investment criteria in light of mounting evidence that investments towards health workforce planning, and training, development, recruitment, and retention of health workers are productive to economic and social development and achievement of the Sustainable Development Goals;

(4) development partners, including bilateral partners and multilateral aid mechanisms, to augment, coordinate, and align their investments in education, employment, health, gender, and labour in support of domestic financing aimed at addressing national health workforce priorities;

(5) global health initiatives to ensure that all grants include an assessment of health workforce implications, leverage national coordination and leadership, and contribute to efficient investment in and effective implementation of national health workforce policies;

(OP) 4. REQUESTS the Director-General:

(1) to provide support to Member States, as and when requested, on the implementation and monitoring of the Global Strategy, including to:

(a) optimize their existing health workforce and to anticipate and respond to future health workforce needs;

[1] Resolutions WHA64.10 (2011) on strengthening national health emergency and disaster management capacities and the resilience of health systems), WHA65.20 (2012) on WHO's response, and role as the health cluster lead, in meeting the growing demands of health in humanitarian emergencies and United Nations General Assembly resolution 69/132 (2014) on global health and foreign policy.

(b) to strengthen governance and leadership of human resources for health through the development of normative guidance, the provision of technical cooperation, and through the fostering of effective trans-national coordination, alignment, and accountability;

(c) support Member States in developing and maintaining a framework for health workforce information systems, including the consolidation of a core set of health workforce data with annual reporting to the Global Health Observatory, as well as the progressive implementation of National Health Workforce Accounts, in order to strengthen the availability, quality, and completeness of health workforce data;

(d) [additionally support Member States in ensuring the safety of health personnel, including the implementation of preventive measures as called for by United Nation General Assembly resolution 69/132 (2014) on global health and foreign policy];

(2) to include an assessment of health workforce implications of technical resolutions brought before the World Health Assembly and Regional Committees;

(3) to facilitate the exchange of information and good practice on human resources for health and collaboration among Member States and relevant stakeholders, continuing the practices within the WHO Global Code;

(4) to submit a regular report to the World Health Assembly, through the Executive Board, on progress towards the milestones established by the Global Strategy and aligned with reporting on the WHO Global Code.

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