Human resources for health and implementation of the outcomes of the United Nations’ High-Level Commission on Health Employment and Economic Growth

Report by the Secretariat

1. Following the request by the United Nations General Assembly in resolution 70/183 (2015) to explore steps to meet the global shortfall of trained health workers, the United Nations Secretary-General launched the High-Level Commission on Health Employment and Economic Growth on 2 March 2016. Its task is to make recommendations to stimulate and guide the creation of at least 40 million new jobs in the health and social sectors, and to reduce the projected shortfall of 18 million health workers, primarily in low- and lower-middle-income countries, by 2030. The Commission was designed as a strategic political initiative to create momentum towards the implementation of WHO’s global strategy on human resources for health: workforce 2030 (adopted in May 2016 in resolution WHA69.19).

2. The Commission, chaired by the Presidents of France and South Africa with the heads of ILO, OECD and WHO as Vice-Chairs, submitted its report Working for health and growth: investing in the health workforce1 to the United Nations Secretary-General on 20 September, 2016. The Commission’s report, through its 10 recommendations and five immediate actions, gives the necessary political and intersectoral momentum to the implementation of WHO’s global strategy on human resources for health, with particular attention to the WHO Global Code of Practice on the International Recruitment of Health Personnel (adopted in 2010 in resolution WHA63.16) and the need to transform health workforce education in support of universal health coverage (resolution WHA66.23 (2013)).

3. This report provides a summary of the Commission’s recommendations and their linkages to existing decisions and resolutions of the Health Assembly, United Nations General Assembly and United Nations Security Council.

THE COMMISSION’S RECOMMENDATIONS AND IMMEDIATE ACTIONS

4. In recognition of the impact of the health workforce on attainment of all the Sustainable Development Goals, commissioners were appointed from the education, employment, health, labour

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1 Available at http://www.who.int/hrh/com-heeg/ (accessed 18 October 2016).
and foreign affairs sectors of governments and international organizations, and from health professional associations, trade unions, academia and civil society. An independent Expert Group and a joint secretariat of staff members from ILO, OECD and WHO consolidated the available evidence and enabled technical and online consultations with multiple constituencies, including five technical consultations with Member States and other relevant stakeholders, 149 online submissions and 17 background papers.¹

5. The Commission’s report presents evidence from the health and social sector, taking economic and labour perspectives, highlighting its capacity as a crucial source of future jobs, particularly for women and young people.² The Commission concludes that “to the extent that resources are wisely spent and the right policies and enablers 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.”

6. The Commission puts forward six recommendations to transform the global health workforce so as to be able to meet the needs for achieving the Sustainable Development Goals, with focus on the following areas: job creation, gender and women’s rights, education training and skills, health service delivery and organization, technology, and crises and humanitarian settings. An additional four recommendations, in the areas of financial and fiscal space, partnerships and cooperation, international migration, and data, information and accountability, are made to enable this transformation.

7. Stressing the need for urgency, the Commission identifies five immediate actions to be taken between October 2016 and March 2018. These include the adoption of a five-year implementation plan, enhanced accountability, accelerated and progressive implementation of national health workforce accounts, an international platform on health workers mobility, and the massive scale up of professional, technical and vocational training. A high-level ministerial meeting will be held in Geneva on 14 and 15 December 2016 to propose actions and launch a consultative process that can take these recommendations forward.³

LINKAGES TO EXISTING DECISIONS OF THE WORLD HEALTH ASSEMBLY, UNITED NATIONS GENERAL ASSEMBLY AND UNITED NATIONS SECURITY COUNCIL

8. The Commission’s recommendations and immediate actions reinforce the pressure to implement WHO’s global strategy on human resources for health and prior resolutions of the World Health Assembly related to human resources for health.⁴ They also call for further strengthening of the health workforce implicit within related Health Assembly resolutions on the International Health

¹ All the information is available at: http://www.who.int/hrh/com-heeg/ (accessed 18 October 2016).


³ The outcome will be published on the WHO website at: http://www.who.int/hrh/com-heeg/en/.

⁴ Resolution WHA63.16 (2010) adopting the WHO Global Code of Practice on the International Recruitment of Health Personnel, resolution WHA64.7 (2011) on strengthening nursing and midwifery, and resolution WHA66.23 (2013) on transforming health workforce education in support of universal health coverage.
Regulations (2005) and those relating to humanitarian settings and public health emergencies.\(^1\) The Commission emphasizes the need to ensure the protection and safety of health workers, as called for by United Nations General Assembly resolution 69/132 (2014) and United Nations Security Council resolutions 2175 (2014) and 2286 (2016).

9. The Commission’s recommendations and immediate actions align closely with WHO’s priorities in support of universal health coverage, with specific links to integrated people-centred health services, meeting workforce requirements for preparedness and response to emergencies, demographic and epidemiological transitions (for example, ageing populations and the increasing importance of noncommunicable diseases), WHO’s gender strategy and related area of work, and International Health Partnership for Universal Health Coverage 2030.\(^2\)

10. Through its recommendations and immediate actions the Commission aims to deliver gains across the 2030 Agenda for Sustainable Development, including those in particular towards Sustainable Development Goals 1 (End poverty in all its forms everywhere), 3 (Ensure healthy lives and promote well-being for all at all ages), 4 (Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all), 5 (Achieve gender equality and empower all women and girls) and 8 (Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all).

**ACTION BY THE EXECUTIVE BOARD**

11. The Board is invited to note the report.

\(^1\) For instance, resolution WHA64.10 (2011) on strengthening national health emergency and disaster management capacities and the resilience of health systems; see also decision WHA68(10) (2015) which contains a section on the global health emergency workforce and document A68/27 on global health emergency workforce.