Context

The Fifth Global Forum on Human Resources for Health was held from 3–5 April 2023 under the theme Protecting, safeguarding, and investing in the health and care workforce. The Forum convened over 4000 participants online and 200 delegates at WHO Headquarters in Geneva, Switzerland from more than 160 countries, including government ministers from health, education, labour and finance; labour unions and health professional organizations; global health partners; investors; regulators; educators; civil society; health workers and experts. The programme included seven high level roundtables, four special sessions and 30 parallel sessions. Participants shared evidence and experiences gained at the halfway point of the Sustainable Development Goals (SDGs) and from the COVID-19 pandemic. They explored avenues for scaling up the critical investments needed to progress on universal health coverage given the prevailing macro-economic context and financing constraints. Marking more than five years since the adoption of the Global Strategy on Human Resources for Health: Workforce 2030 and the Working for Health Programme, the Forum provided updates on their implementation.

The Forum was convened around three questions:

° Lessons learned and opportunities from the COVID-19 pandemic
° Overcoming market failures between education and employment in the health and care sector
° Generating investments in the health and care workforce

Three key areas for action and the way forward

Three key areas for action emerged to urgently prioritize and scale investments to address the global health and care workforce shortage:

Protect. We must protect the existing workforce and reduce attrition with decent work and improved working conditions:

° Health does not deliver itself. Failure to attract and retain health workers through decent work will only further accelerate workforce losses and undermine hard-won universal health coverage and health security gains. All countries must work towards comprehensively addressing the challenges of poor working conditions; gender inequalities in the workplace including the 24% gender pay gap across the health and care sector; threats to occupational health and safety in the face of unprecedented levels of health and care workforce burnout, anxiety and depression; and workplace violence and harassment.

° Caring for those who care. Implementation of the recommendations of the Global health and care worker compact in all countries is essential to prevent harm, provide resources, ensure inclusivity and safeguard the rights of health and care workers, including supportive and dignified working conditions.

° Collaborate across all sectors, partners, and with civil society on workforce solutions. Multisectoral policy and social dialogue and collaboration between governments, workers, employers, educators and regulators – with the active engagement of civil society, youth, investors, and other key stakeholders – is critical to foster trust, improve labour relations, strengthen support, and to deliver the intersectoral actions required for the education, employment and retention of health and care workers.

“Health and care workers deserve more than “Thank you”. They deserve quality education and training; They deserve safe working conditions; They deserve decent pay; They deserve respect. They deserve our every effort to protect, invest, together.”

Dr Tedros Adhanom Ghebreyesus
Director-General
World Health Organization
**Invest.** We must position and prioritize investments and action on tackling the health and care workforce shortage at the top of the agenda.

- Prioritize health and care workforce investments to restore health systems. This may not be easy against the current macroeconomic context and fiscal constraints. It is, however, fundamental to make progress in health outcomes which have stagnated or regressed.

- Investment in the health and care workforce is an investment in human capital that will generate socio-economic dividends. Standalone capital investments in health will have limited impact unless the requisite human capital investments are considered. Development banks, bilateral and multilateral agencies and philanthropic foundations must position health and care workforce investments in education and employment as priority human capital investments for achieving universal health coverage, health security and inclusive growth and must work together as co-investors in one national plan.

- Invest in and build workforce governance and leadership capacity. Robust data and information systems will strengthen national capacity to address and manage health labour market challenges and make evidence-based policy, planning, and investment decisions. The use of accurate, timely workforce data will help build and develop the workforce needed to implement essential public health functions, including emergency preparedness and response.

- Urgently support smarter, blended and long-term investments in education and employment. Health labour market diagnostics and strengthened workforce data must inform more strategic investments in health and care worker education, lifelong learning and employment and retention, with a particular focus on primary health care. Domestic financing must be increased and blended with grant, concessional and private sector investments for public purpose to maximize education and employment opportunities and ensure self-sufficiency.

**Together.** We must act in solidarity, and with all sectors and partners.

- Health workforce solutions are intersectoral and must engage health, finance, economy, labour, education and social justice sectors. Health workforce challenges cannot be solved without political, technical, and financial support, collaboration and co-ownership by other sectors. All sectors and partners need to rally behind one national plan, led by the effective governance, leadership and coordination of the health sector.

- Better manage migration and co-invest in countries facing severe workforce shortages to double their health and care workforce in the next ten years. Increasing the production capacity in these countries to be able to train an additional 8-12% of their current stock annually can double their workforce in the next 10 years. International migration of health workers from low- and middle-income countries is at record levels in the aftermath of the COVID-19 pandemic and threatens to further weaken health systems across 55 countries in the WHO health workforce support and safeguard list 2023. Urgent action is required by all countries to respect the WHO Global Code of Practice on the International Recruitment of Health Personnel. High-income countries must produce sufficient workforces to meet domestic needs while co-investing in health systems in low- and middle-income countries.

- Pool investments and actions to scale capacities and strengthen absorption of health and care workers into the health labour market. Strategically strengthen regional and sub-regional collaboration to collectively build resources and scale education and regulatory capacities in low- and middle-income countries, particularly in the African and Eastern Mediterranean regions and small island developing states that collectively face a shortage.

**WHO commits to a way forward**


Embedding the health and care workforce as a cross-cutting priority in the 14th WHO General Programme of Work with an increase in the internal allocation of WHO budget to this priority.

Engaging with Heads of State, regional economic bodies, Ministers, heads of the international financing institutions to identify domestic, international and philanthropic funding.

Convening a multi-sectoral advisory group on the health and care workforce reporting to the Director-General.

The outcomes will inform WHO’s support to its Member States and the [United Nations General Assembly’s High-Level Meetings on Universal Health Coverage](https://www.who.int/healthsystems/publications/assembly-high-level-meetings) and Emergency Preparedness, Readiness and Response in September 2023.