

# A Labour Market Approach to Investing in the Health and Social Workforce to achieve the SDGs

The health labour market approach assesses bottlenecks, trends and policy questions in the market for health workers. Given its comprehensive and forward-looking approach it has become a fundamental component in effective intersectoral policy making, investment cases, health workforce planning and regional health employment and economic growth action plans.

#### Changing dynamics in the global labour market

Labour markets are changing rapidly; demographic and epidemiological shifts and technological advances have resulted in a transformation of the global labour market. With the service sector leading employment growth in most countries; the health and social sector has emerged as a major contributor to job creation. Employment growth rates in the health and social sector are often double that of overall employment growth. Investing in the health sector is a strategic opportunity for accelerating economic prosperity, youth employment, and women's labour participation. In OECD countries 1 in every 10 jobs is in the health and social sector<sup>i</sup>. However, even with such growth the demand for health workers continues to outstrip supply. Worldwide the demand for health workers is expected to double to 80 million health workers by 2030 in primarily middle- and high-income countries; leaving a global shortfall of 18 million health workers in primarily low and lower-middle income countries. This will be felt most acutely in Africa where the shortfall is estimated to reach 6.1 million and in South East Asia where the shortfall is estimated to reach 4.7 million<sup>ii</sup>. Given that every health worker job is supported by two additional jobs, addressing the health worker shortfall in the African region could boost current rates of job creation by 40%.

Health workers play a pivotal role in improving health, but also in the wider economy. A deeper understanding of the health and social workforce, including the required investment, has become imperative to achieve efficient, effective, resilient and sustainable health systems.

Timely analysis of labour market trends is fundamental to designing the effective health labour market policies needed to address the bottlenecks and meet the growing demand for health workers. In addition to workforce shortages, issues of maldistribution, unemployment, absenteeism, gender inequities and performance are prevalent in the health labour market.

Health Labour Market Analysis (HLMA) generates the information required to inform intersectoral policy making, strategic investments, and effective health workforce planning at national and sub national levels. HLMA permits a comprehensive understanding of the key factors influencing the supply and demand of health workers. This improves the ability to both forecast and plan for the health worker needs of the future and guide short-term strategies to address immediate issues.



## Four important benefits of the Health Labour Market Approach:

- Generates the evidence required to develop effective and efficient intersectoral workforce policies that meet population needs
- Provide coherent answers to prevailing policy questions
- Permits strategic planning and efficient use of resources
- Quantifies the contribution of the health workforce to the economy

# Why adopt a health labour market approach in human resources for health planning?

Worldwide almost half of the health budget is allocated to workforce; in Europe it is estimated to be over 70% of the health budget<sup>iii</sup>. Reforms and investments into the health and social sectors can be made more effective and efficient if they are coupled with evidence-based strategies to ensure a responsive and productive health labour market. The education, training and employment of health workers also represents almost half of the investment required to achieve the health-SDGs in low- and middle- income countries.

National roadmaps, health reforms and new policies to accelerate progress towards Universal Health Coverage (UHC) have health workforce implications that must be taken into account now and in planning for the future. In many cases, health workforce analysis is limited to an understanding of the density of health workers, their distribution and education pipeline. However, by analysing the trends and forces influencing the education and employment of health workers, a mix of policy solutions can be better identified to address the bottlenecks and key workforce challenges and shape the labour market to best meet current and future national health needs.

A lack of evidence-based health workforce planning results in inefficiencies, which slows progress towards UHC, global health security and the SDGs. The health labour market approach allows the rapid translation of information from multiple sources and sectors to decision makers. Such an approach provides information about where the health labour market can contribute general labour market outcomes and respond to economic challenges such as youth unemployment, population ageing, and female labour force participation.

Global health initiatives to establish governance mechanism to ensure that all grants and loans include an assessment of health workforce implications —
Recommendation of the Global Strategy on Human Resources for Health:
Workforce 2030 (2016)

Undertake robust research and analysis of health labour markets, using harmonized metrics and methodologies, to strengthen evidence, accountability and action – Recommendation of the UN High Level Commission on Health Employment and Economic Growth (2016)



# What types of studies does the WHO support?

Health labour market analysis is central to the health labour market approach. It relies on the

collection and synthesis of labour market information across sectors; and using harmonized methods to evaluate and understand the trends, bottlenecks and opportunities in the health labour market.

Going beyond the traditional health workforce planning process the health labour market approach estimates the contribution of the health workforce towards economic and development goals. Health workers contribute to economic growth and the SDGs, capturing their contribution is critical in building an investment case for health and social workforce. By generating such evidence, the investment and reforms required to achieve the right number and mix of health and social care workers become clear.

# The analytical work supported by the WHO enables countries to:

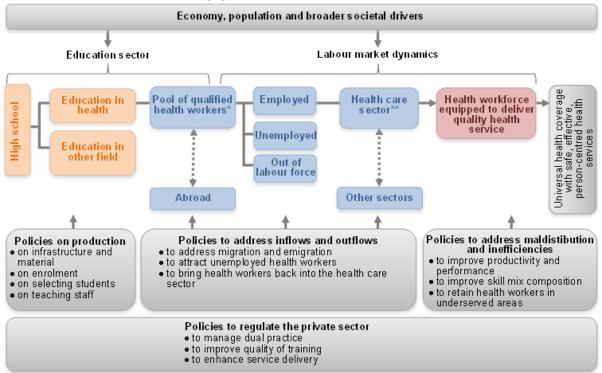
- Rapidly assess the Health Labour Market
- Evaluate fiscal space
- Quantify the return on investment of health workers
- Assess skill mix and workload
- Project labour demand and need
- Strengthen strategic intersectoral planning

The health labour market approach can also aid in ensuring decent work in the health sector by tracking the labour market conditions and motivation of the health workforce and providing the evidence required to support policies to foster a motivated a well skilled health workforce equipped to deliver quality health services.

#### **Health Labour Market Framework**

The health labour market is a dynamic and complex system. It comprises of the production of health workers through the education system thorough to the pool of active skilled health workforce equipped to deliver quality health services where they are needed. The production of health workers is an open system with an international component. Therefore, some health workers practicing in a given country are trained abroad. Certain countries have upwards of 40% of their qualified doctors being foreign-trained. Other countries experience high loss of health workers to immigration. In addition there is the return-migration of those who train or work abroad temporarily. It is important to capture the entire pool of qualified health workers to understand the absorption of health workers into the health system. Which is why the WHO has adopted a health labour market framework to provide an overview of health labour market dynamics and contributions of health workforce policies to the attainment of equitable access to quality health services and UHC.





## Health labour market approach and the Working for Health programme

Through the *Working for Health* programme, a new joint five-year action plan for health employment and inclusive economic growth, WHO is also working with the International Labour Organisation (ILO), Organisation for Economic Cooperation and Development (OECD) to expand and transform the health and social workforce <sup>v</sup>. The programme will support countries in health labour market analysis, enhancing national workforce strategies and creating investment cases for the health sector.

The health labour market approach has led to significant progress in many countries. WHO has worked across Asia, Africa, the Middle East and Europe. Of notable success was our work in the West Africa Economic and Monetary Union where health labour market analyses were instrumental in guiding the multisectoral regional health employment.

<sup>&</sup>lt;sup>i</sup> Organization for Economic Cooperation and Development. 2016. Health Workforce Policies in OECD Countries – Right Jobs, Right Skills. Right Places.

Global strategy on human resources for health: workforce 2030. Geneva: World Health Organization; 2016 (http://www.who.int/hrh/resources/16059 Global strategyWorkforce2030.pdf?ua=1, accessed 9 August 2016).

Hernandez P, Grager S, Evans DB, Tan-Torres Edejer T, Dal Poz MR. 2006. Measuring expenditure of the health workforce: evidence and challenges. (http://www.who.int/hrh/documents/measuring expenditure.pdf)

iv Sousa A, Scheffler RM, Nyoni J, Boerma T. A comprehensive health labour market framework for universal health coverage. Bull World Health Organ. 2013. (<a href="http://dx.doi.org/10.2471/BLT.13.118927">http://dx.doi.org/10.2471/BLT.13.118927</a>)

v Working for Health: A five year action plan for health employment and inclusive economic growth. International Labour Organization, Organization for Economic Cooperation and Development and the World Health Organization. 2017. (http://apps.who.int/gb/ebwha/pdf\_files/WHA70/A70\_18-en.pdf)