

Human resources for health

The Seventy-fifth World Health Assembly,

Having considered the report by the Director-General;¹

Recalling resolution WHA74.14 (2021) on protecting, safeguarding and investing in the health and care workforce and previous related resolutions, and reaffirming the provisions in resolution WHA74.14;

Noting the continuing disruption to essential health services and the delivery of coronavirus disease (COVID-19)-related services, including: (a) all medical countermeasures such as personal protective equipment, vaccines, diagnostics and therapeutics; and (b) treatment when sick, including in an intensive care unit, due inter alia to inequitable access to quality, safe, effective and affordable health products within and among countries and to insufficient workforce availability in most countries;

Concerned that the progress being made in addressing the global shortage of health workers is inequitable, highlighting the variation across regions, particularly in those countries on the WHO Health Workforce Support and Safeguards List (2020);

Alarmed at the increasing challenges to the health, well-being, lives and safety of health and care workers, including attacks on the health workforce and health facilities from the beginning of the COVID-19 pandemic and including in conflict and other settings in recent years and especially in recent months and the reported increases in psychological distress and mental health conditions experienced by health and care workers exacerbated by the onset of the COVID-19 pandemic, influencing reduced productivity and performance and impacting workforce retention;

Recognizing United Nations Security Council resolution 2286 (2016) on protection of the wounded and sick, medical personnel and humanitarian personnel in armed conflict, and acknowledging resolution WHA70.6 (2017), which recognized the need to substantially increase the protection and security of health and social workers and health facilities in all settings, including acute and protracted public health emergencies and humanitarian settings;

Further recalling resolution WHA63.16 (2010) on the WHO Global Code of Practice on the International Recruitment of Health Personnel, through which the Sixty-third World Health Assembly adopted the Global Code, and the Global Code's recognition that an adequate and accessible health workforce is fundamental to an integrated and effective health system and to the provision of health services, bearing in mind the necessity of mitigating the potentially negative effects of health personnel migration on health systems, particularly those of developing countries;

¹ Document A75/12.

Bearing in mind the recommendations of the Report of the WHO Expert Advisory Group on the Relevance and Effectiveness of the WHO Global Code of Practice on the International Recruitment of Health Personnel on the need for full implementation of the Global Code as well as health workforce- and health systems-related support and safeguards through strengthened international cooperation, particularly to countries facing the greatest challenges;

Noting the mismatch between global and regional workforce needs to achieve universal health coverage, COVID-19 recovery and future emergency preparedness and response versus the inadequate investment in health and care workforce education, decent employment, continuous training and retention;

Recognizing the need to further advance equity for women in the health and care sector and emphasizing the critical role that women, who represent almost 70% of health workers, play in the health and care sector,

1. ADOPTS the Working for Health 2022–2030 Action Plan as a platform and implementation mechanism for accelerating investments in health and care worker education, skills, jobs, safeguarding and protection;
2. CALLS ON Member States, in accordance with national contexts and priorities:
 - (1) to implement the Working for Health 2022–2030 Action Plan and integrate, as appropriate, its objectives and actions for workforce planning and financing, education and employment, and protection and performance within their health and care workforce strategies, investment plans and programmes at national and subnational levels, in line with resolution WHA74.14 (2021);
 - (2) to implement and monitor policy options and actions, supported by multisectoral partnership, coordination and financing;
 - (a) to enhance protection and safeguarding, as well as to optimize the distribution, deployment and utilization of the health and care workforce, with a focus on the employment, inclusion and participation of women at all levels and youths;
 - (b) to consider regional and global approaches to building multidisciplinary health and care worker capacity to address and respond to population needs, with particular emphasis on the most vulnerable groups, and to enable the functioning of efficient health systems and service delivery, with specific attention to equity, accessibility diversity and social inclusion;
 - (c) to maximize the health, social and economic benefits of investment in the health and care workforce, with a view to achieving universal health coverage;
 - (3) to utilize, where relevant, the global health and care worker compact to inform national review, action and implementation to protect and support health and care workers;
 - (4) to engage at the national, regional and global levels to undertake and accelerate work on building a health and care workforce through training programmes and using best available educational and training facilities, online platforms and hybrid learning opportunities; and to increase the absorption of trained staff into health and care systems through sustainable employment practices;

3. INVITES international, regional, national and local partners and stakeholders from across the health sector and other relevant sectors, as appropriate, to engage in and support implementation of the Working for Health 2022–2030 Action Plan:

(1) to implement, as appropriate, national, regional and global employment initiatives to promote decent jobs, including for youth and women in the health and care sector;

(2) to invite Member States and regional bodies to undertake educational investment and educational training opportunities in person and through hybrid learning or other technological platforms to allow greater access to learning tools, including through the WHO Academy;

(3) to support the Working for Health Multi-Partner Trust Fund and encourage direct funding to Member States for the implementation of the Working for Health 2022–2030 Action Plan in collaboration with national stakeholders, United Nations agencies and implementing partners;

4. REQUESTS the Director-General:

(1) to support implementation of the Working for Health 2022–2030 Action Plan by Member States through technical support, and mobilize catalytic funding and expertise, especially for those countries on the WHO Health Workforce Support and Safeguards List (2020), taking advantage of the existing WHO training platforms, such as the WHO Academy, as a key resource for global health professionals, political leaders, business leaders and representatives of civil society;

(2) to support Member States in how to protect health and care workers and safeguard their rights, and to promote and ensure decent work, free from racial and all other forms of discrimination, and a safe and enabling practice environment, including by taking into account, as appropriate, the global health and care worker compact;

(3) to report on the progress of the implementation of this resolution to the Seventy-eighth and Eighty-first World Health Assembly (in 2025 and 2028, respectively), aligned with reporting on the Global Strategy on Human Resources for Health: Workforce 2030 and the WHO Global Code of Practice on the International Recruitment of Health Personnel; and also report to the Eighty-third World Health Assembly in 2030, in advance of the Working for Health 2022–2030 Action Plan's end-point.

Eighth plenary meeting, 28 May 2022
A75/VR/8

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