The New Health Workforce – Going Beyond the Health Sector, Keeping People at the Centre

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The Population Health Context

- Continuing challenges in tackling communicable diseases in some MS across the region
- Within the European Region the impact of the major NCDs accounts for an estimated 86% of the deaths and 77% of the disease burden.
- The population of the European Region is projected to increase only slightly by 2020 – from 894 million to 910 million – but then to return to current levels by 2050, but...
 - the number of working-age people is expected to decline steadily
 - the number of older people aged 85 years and older is projected to rise from 14 million to 40 million by 2050
 - Dementia prevalence is expected to double to around 20 million people by 2030
- Mental health disorders affect about 25% of the population every year and are more prevalent among the more vulnerable groups.









The HRH Context

- 'Health systems can only function with health workers' (Global HRH Strategy, 2016)
- The health workforce is critical to achieve health and wider development goals in the coming decades
- There is a worldwide shortage of health workers and the situation is becoming more challenging globally and regionally
- WHO has forecast a worldwide 18 million shortfall by 2030; over twice the
 7 million shortfall estimated in 2013
- The number of migrant doctors and nurses in OECD countries has increased by 60% over the past 10 years (from 1,130,068 to 1,807,948)
- Within the European Region there will be estimated (demand) shortage of 1.4m (WHO/GHO)







Who Are the Health Workforce?

'... not only the better known cadres of midwives, nurses and physicians, but all health workers, from community to specialist levels, including but not limited to: community-based and mid-level practitioners, dentists and oral health professionals, hearing care and eye care workers, laboratory technicians, biomedical engineers, pharmacists, physical therapists and chiropractors, public health professionals and health managers, supply chain managers, and other allied health professions and support workers. ... and closer integration of the health and social services workforces to improve longterm care for ageing populations.'

- Global HRH Strategy: Workforce 2030, WHO, 2016

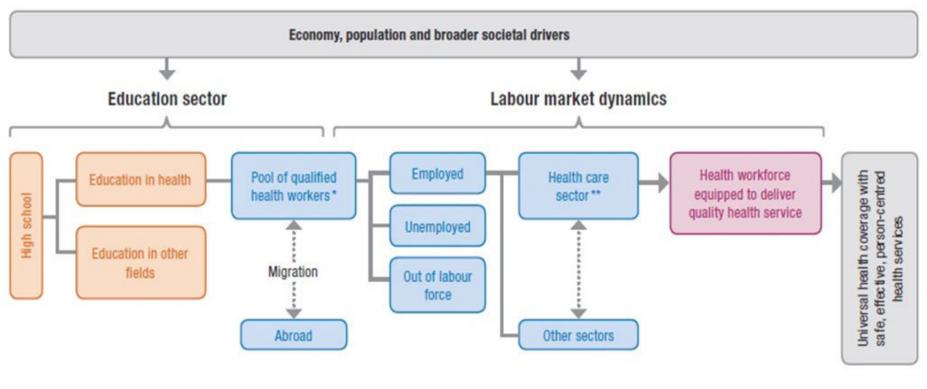








The Health Labour Market Framework







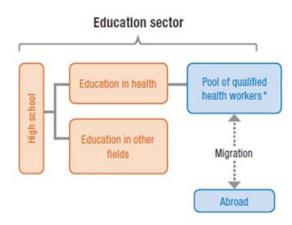




The Future Health Workforce

Policies relating to production of the future health workforce:

- Infrastructure and materials
- Enrolment of students
- Selection of students
- Teaching staff



Some of the factors to be considered:

- Alignment of education and training with population health needs
- Attraction of second level students to third level programmes
- Attrition rates at undergraduate and postgraduate levels
- Attraction, recruitment and retention of clinicians to teaching roles and posts
- Management of clinical placements





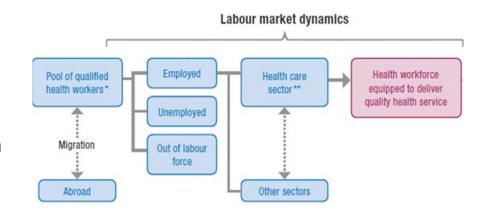




The Current Health Workforce

Policies relating to the current workforce:

- Inflows and outflows
- Migration and emigration
- Attracting unemployed health workers
- Bringing health workers back into the health sector
- Measures to address maldistribution and inefficiencies
- Measures to improve productivity and performance
- Skill mix composition
- Retaining health workers in underserved areas



Some of the factors to be considered:

- Attraction, recruitment and retention strategies
- Continuous professional development
- Working environment
- Career pathways









Working for Health and Well-being Beyond the Health



What you do for us without us is not for us

Sector

WHO and the Public Health Agency of Canada have described intersectoral action for health and well-being as:

"actions undertaken by sectors outside the health sector, possibly, but not necessarily, in collaboration with the health sector, on health or health equity outcomes or on the determinants of health or health equity"

... ultimately actions are delivered by people

























