

SUMMARY OF **GUIDING PRINCIPLES** FOR

National Health Workforce Strategies

Developed by the Health Workforce Advocacy Initiative

The development of national health workforce strategies represents an essential step in scaling up the health workforce to meet national and international goals, including the health-related Millennium Development Goals. Effective, rights-based national health workforce strategies are essential if governments are to fulfill the human right to health and to improve health outcomes for their populations. The right to the highest attainable standard of physical and mental health requires that national plans adhere to principles including equity, participation, and accountability, that they are based on major health needs of the population, that they make quality health care available, affordable, and accessible for everyone, that they represent continued progress towards filling this right, and that states spend the maximum of available resources towards meeting this and other human rights.

The following is a summary of guidelines developed by the Health Workforce Advocacy Initiative to guide development of national health plans. The full guidelines and other useful documents are available at <http://www.healthworkforce.info/HWAI/Materials.html>. The guidelines include the following:

Targets:

The plan should aim to ensuring that all people, in all places, have access to a skilled health worker who is equipped, motivated, and supported. Further, the plan should be targeted to achieve the MDGs and other health goals and commitments.

Equality and non-discrimination:

Prioritize a more equitable distribution of health care workers, take measures to meet the needs of marginalized groups, and pay attention to gender issues in planning.

Comprehensive approach:

Cover all aspects of the workforce, as well as all sectors and cadres.

Workplace health, safety, supplies, and infrastructure:

Ensure health workers' health and safety, adequate levels of supplies and infrastructure, and an effective referral system.

Education and training:

Address task shifting, harmonize pre-service training with national health needs, incorporate in-service training that contributes to professional development, provide supportive supervision for workers, and incorporate human rights education into pre-service training.

Compensation and support:

Ensure adequate package of salaries and benefits for all cadres of health workers (including community health workers), include measures to support home-based care, and identify measures to draw non-practicing workers back into the system.

Ensuring quality:

Regulate private sector and other actors and maintain quality in scaling-up of pre-service training.

Process of developing health workforce plan:

Link plan to broader health sector strategy, ensure broad participation of stakeholders and multi-sectoral collaboration, base planning on best available evidence and gather evidence where current evidence is inadequate, incorporate monitoring and evaluation, provide specific actions and timeframes for implementation, and make the plan publicly available and accessible.

Financing:

Increase domestic funding to at least 15% of the government budget, coordinate national strategies with bilateral and multilateral donors, and evaluate and revise macroeconomic policies.



Photo credits: UNICEF/J.P. Ireland

For more information about the Health Workforce Advocacy Initiative, go to <http://www.healthworkforce.info>