

<u>Statement to the 74th Session of the World Health Assembly, 24 May to 1 June 2021</u> on agenda item 15. Health workforce

COVID-19 has taken a heavy toll on health workers worldwide. We are pleased that WHO recognized their role by declaring 2021 the International Year of Health and Care Workers. Their recognition cannot stop at that.

We welcome the proposed resolution on "protecting, safeguarding and investing in the health and care workforce". We urge WHO to set up and host, in partnership with ILO and MS, unions and civil society, a strong global leadership mechanism.

WHO must work to address the growing regional disparities in distribution and the global lack of health workers, largely caused by health workers' emigration. HIC cannot base their health workforce strategies on syphoning health workers from LMIC. Binding international instruments are needed to regulate recruitment.

We are appalled that rich countries proceed to vaccinate their whole population while health workers in the front lines in LMIC remain unprotected. Equitable allocation of vaccines and increased vaccine production are required. Health workers have expressed their support for the TRIPS waiver.

MS must ensure their health systems are well staffed, and health workers safe. Publicly funded education must be secured to train a health workforce appropriate to local needs.

High fees are a serious obstacle for training in health professions. Fees lead to student debt, which cannot be repaid with the salaries of informalised and non-permanent jobs. MS must guarantee enough regular jobs, with adequate working conditions and compensation, which can be achieved through more investment in public health systems.

The equivalent of nearly 34 million nurses' annual salaries is lost to tax havens each year. These funds could be used for strengthening public health systems.

Health workers' representatives should participate in all discussions regarding health systems' planning to ensure policies address concrete needs.