

Frontline Health Workers Coalition Statement on the Draft UN Political Declaration on Universal Health Coverage (UHC)

June 16, 2023

Regarding the [Zero Draft, presented on May 22](#), of the Political Declaration of the United Nations General Assembly High-level Meeting on UHC, we acknowledge the efforts made by Member States, and in particular the Facilitators, to develop the Zero Draft. We thank them for the positive and important provisions for the health workforce, which they have included in the text, including on [health worker migration](#).

- We strongly support the language on health workers in operational paragraphs OP 36, 37, 38 and 39, and in particular we urge member states to maintain the language on health worker migration in OP 38
- We propose several additions to strengthen several operational paragraphs, see below additions marked ADD
- We propose a new operational paragraph on water, sanitation and hygiene in health care facilities.

OP2. Provide strategic leadership at the national level for the achievement of universal health coverage by strengthening legislative and regulatory frameworks, promoting greater policy coherence [ADD: , properly resourced health and care workforce], providing a safe and dec and ensuring sustainable and adequate financing to implement high-impact policies to protect people's health and comprehensively address social, economic and environmental and other determinants of health by working across all sectors through a whole-of-government and health-in-all-policies approach and by engaging stakeholders in an appropriate, coordinated, comprehensive and integrated, bold whole-of-society action and response;

OP32. Mobilize domestic public resources as the main source of financing for universal health coverage, through political leadership, consistent with national capacities, and expand pooling of resources allocated to health, eliminate wasted resources and improve health systems efficiency, address the environmental, social and economic determinants of health, identify new sources of revenue, improve the efficiency of public financial management, accountability and transparency, [ADD: ensure budgets are resourced to adequately remunerate the health and care workforce] and prioritize coverage of the poor and people in vulnerable situations, while noting the role of private sector investment, as appropriate;

OP36. Accelerate action to address the global shortfall of health workers in accordance with the Global Strategy on Human Resources for Health: Workforce 2030 by investing in education, employment and retention, [ADD: addressing root causes of health worker departure from service], strengthening the institutional capacity for health workforce governance, leadership and planning, [ADD: informed by dynamic assessments and monitoring of relevant workforce data, disaggregated by gender and age.] [ADD: ensuring health workers including community health workers are prioritized

and protected during health emergencies] and protecting all health workers from all forms of violence, attacks, harassment and discriminatory practices; (Source: Based on A/RES/74/2 Paragraph 60 + SG Report on UHC, advanced version + WHO Technical Brief on Health and Care Workers)

OP37. Continue to scale up efforts and strengthen cooperation to promote the training, development, recruitment and retention of competent, skilled and motivated health workers, including community health workers and mental health professionals, **[ADD: including through financial and technical support and assistance, in particular to developing countries,]** guided by target 3.c of the 2030 Agenda {ADD: (Source: Based on A/RES/72/4 Paragraph 62)}

OP38. Encourage incentives to secure the equitable distribution of qualified health workers and community health workers, especially in rural, hard-to-reach and underserved areas and in fields with high demands for services, including by providing decent and safe working conditions and appropriate remuneration for health workers working in these areas, consistent with the World Health Organization Global Code of Practice on International Recruitment of Health Personnel, avoiding active recruitment from the 55 countries facing the most severe health workforce vulnerabilities, while ensuring that bilateral labor agreements entail proportional benefit for both countries of origin and destination and protect migrant health workers, noting with concern that highly trained and skilled health personnel continue to emigrate, which weakens health systems in the countries of origin; (Source: Based on A/RES/74/2 Paragraph 62 + updated with A/RES/76/257 OP6 and WHO Technical Brief on Health and Care Workers)

OP39. Provide better opportunities and decent work for women to ensure their role and leadership in the health sector, with a view to increase the meaningful representation, engagement, participation and empowerment of all women in the workforce at all levels, and take measures towards fair employment practices and to eliminate gender biases and address inequalities, including the gender pay gap, by appropriately remunerating unpaid and underpaid health and care workers, including community health workers; (Source: Based on A/RES/74/2 Paragraph 63 + Technical Brief on Health and Care Workers)

ADD new paragraph: OPXX. "INVITE international, regional and local partners to raise the profile of and accelerate progress on safe water, sanitation and hygiene for infection prevention and control, particularly in health care facilities, in health strategies and in flexible funding mechanisms, and thereby direct efforts towards strengthening health systems as a whole." (based on WHA 72.7. OP2)]