

**Frontline Health Workers Coalition Statement to the
2015 World Health Organization Executive Board Meeting Special Session on Ebola**

The Ebola virus disease epidemic in West Africa has highlighted the urgent need for increased support for frontline health workers and the systems that support them in the region and around the world. WHO reported that as of January 21, 2015, **828** health workers have been infected with Ebola since the onset of the epidemic, and **499** of them have died caring for the **21,689** people confirmed or suspected to have been infected with the virus.

Nearly all of these lives have been lost in three countries – Guinea, Liberia and Sierra Leone – that have some of the lowest numbers of health workers per capita in the world. These three countries all had less than three doctors, nurses or midwives per every 10,000 people before the Ebola epidemic even took hold, far less than the 22.8 per 10,000 ratio WHO says is the minimum needed to deliver basic health services.

Access to competent and supported health workers can no longer be allowed to languish as a global health policy afterthought. The heroic sacrifices of frontline health workers must be met with honor, compassion and support for their efforts. Investments must be made in equipment, supplies, training, effective management and financial support for the retention of health workers to ensure that every community has the workforce needed to save lives, and the robust systems to support those workers in detecting, analyzing and responding to new and emerging public health threats like Ebola.

The Frontline Health Workers Coalition – an alliance of 40 United States-based organizations working together to urge greater and more strategic investment in frontline health workers in developing countries as a cost-effective way to save lives and foster a healthier, safer and more prosperous world – recommends the following actions by WHO member states to address this public health emergency and help build a sustainable response to future emergencies:

Worldwide

- Member states should adopt at the 2016 World Health Assembly a **financed global health workforce strategy that sets specific targets, timelines and commitments** for ensuring that by 2030:
 - All communities will have access to competent health workers, trained and supported to save lives and improve health;
 - All countries will have the health workforce and systems needed to stop Ebola and other existing and emerging public health threats.
- In the post-2015 Sustainable Development Goals, member states should support:
 - A sub-goal inclusive of all countries that sets measurable targets to strengthen the global health workforce and increase financing for human resources for health.
 - An explicit recognition that improving access to health workers is a crucial and indispensable requisite to achieving universal health coverage (UHC).
- Ensure through continued **robust investments across global health** that Ebola does not set back the extraordinary progress of recent decades in saving lives and preventing the spread of diseases.



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In Liberia, Sierra Leone and Guinea

- **Increase support for local health workers on the frontlines of the Ebola fight:** WHO member states, professional associations, local governments and communities, and non-governmental organizations (NGOs) should work together to:
 - Support the financing and timely delivery of hazardous duty pay and death and insurance benefits for local health workers during the period of active crisis;
 - Ensure personal protective equipment (PPE) and infection control supplies are provided to health workers with the requisite training and supervision to use the equipment safely and consistently;
 - Ensure the availability of psychosocial support for health workers and specific treatment centers dedicated to health workers who become infected with Ebola;
 - Create supply outposts for health workers to collect food, clean water and basic supplies;
 - Improve data collection and dissemination efforts about the epidemic, including data on the health workforce, patient tracking and supply chain;
 - Support the recruitment of contract health workers from the region for the duration of this epidemic and to assist in restoring routine health services;
 - Increase capacity and authority for local management of health workers.
- **Build a responsive and sustainable supply-chain management system:** Health workers' ability to help end the Ebola epidemic and restore halted health services depends on having adequate equipment, supplies and medicines. WHO member states should work together to ensure that both local and international health workers have the supplies they need through a responsive and sustainable supply chain management system.
- **Ensure a sustainable frontline health workforce by supporting training programs:** Ebola has tragically taken the lives of hundreds of health workers in countries that already have severe health workforce shortages. Maintaining and scaling up educational and training programs, such as medical and nursing schools for new health workers, is critical to building a sustainable response. WHO member states should:
 - Support scale up of enrollment of students from rural communities into high-quality health professional schools and community health worker training programs;
 - Ensure that educational programs for health workers are open and adequately staffed and funded to meet local health labor market demand. Closed health professional schools must be assisted to reopen;
 - Ensure all health worker training programs provide adequate and accurate infection control information on Ebola and other transmissible agents.
- **Address stigma:** Frontline health workers and their families have been attacked, stigmatized and even thrown out of their homes and communities while risking their lives to care for those infected with Ebola. WHO member states should ensure health workers are protected and honored for their work. Member states should also work together to ensure safe working and living conditions and that financial incentives are provided to frontline health workers in Ebola treatment facilities. Member states should work with partners and communities to leverage media and communications channels to promote messages about protecting health workers as a national and community asset. Community members and health workers should to be encouraged to share their stories to directly address stigma and psychosocial issues.

The **FRONTLINE HEALTH WORKERS COALITION** is an alliance of United States-based organizations working together to urge greater and more strategic U.S. investment in frontline health workers in the developing world as a cost-effective way to save lives and foster a healthier, safer and more prosperous world. For a complete listing of members, visit www.frontlinehealthworkers.org. E-mail: Vince Blaser, Deputy Director: vblaser@intrahealth.org