

PHR

**Physicians for
Human Rights**

Statement for Group of 8 meeting in July 2005: Health Workforces Must Be Supported to Achieve the Millennium Development Goals

We are nurses and doctors, pharmacists and laboratory technicians, medical assistants and community health workers, social workers and psychologists. We are non-governmental organizations. We are members of governments. We are people with HIV/AIDS. Some of us sit in government ministries, some of us work in rural health facilities, and some of us work wherever it is we find people in need. We share in common a deep concern for the health and well-being of the members of our communities and citizens of our own and other countries. Yet despite our best efforts, health systems in many developing countries are in crisis, and millions of people whose lives we could save and whose health we could preserve are dying and becoming seriously ill.

Health workers are at the core of these health systems. Health systems collapse where there are too few health workers, or health workers without proper training, supervision, and management and support structures, or health workers who are separated from their community structures and needs, or health workers who are themselves ill and dying and working in unsafe conditions. Yet this is the situation many of our countries face. Annual health budgets that are often \$10 or less per capita, the exodus of health professionals, failure to prioritize human resources, and the HIV/AIDS pandemic, both through the disease burden it creates and its impact on health workers themselves, have combined to create a crisis. Until we surmount this crisis in human resources for health and health systems, preventable death and suffering on a massive scale will continue.

Overcoming this crisis will require the joint efforts of your countries and ours. We will take the lead, but require cooperation and support in what must be a global response to a problem of global proportions. Together, we must develop and implement sustainable and greatly expanded responses that address underlying causes to the health worker crisis, that improve health systems, and that dramatically improve access to quality health services for people in underserved areas.

Everyone has the right to the highest attainable standard of health. Fulfilling this right requires addressing the crisis in human resources for health and in health systems. The efforts of our countries alone will not be enough to resolve this crisis and secure for every person the dignity she deserves. We therefore urge your governments to meet your obligations under the UN Charter and other human rights law to join us in taking the actions required to resolve this crisis.

The investments required to overcome the health worker crisis are central to achieving the Millennium Development Goals, but they are far from the only ones required. Accordingly, along with the required investments in human resources, as detailed below, we strongly urge greatly increased investment by the G8 to promote health and education, development and women's equality. Specifically:

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- The G8 and other wealthy nations are legally and morally obliged to meet the internationally agreed upon target of investing at least 0.7% of GNP in official development assistance. We call upon all your nations to commit to rapidly reaching this target, including by immediately doubling aid to Africa.
- We call upon you to agree to 100% multilateral debt cancellation for impoverished nations to enable many of our own countries to significantly increase investments using domestic financial resources in poverty reduction and human development.
- We call upon you to provide an immediate infusion of funds to enable the 3 by 5 initiative to succeed in bringing AIDS treatment to 3 million people by the end of 2005. In its December 2004 progress report, the World Health Organization estimated a shortfall of \$2 billion for 2005.
- We call upon you to remove trade barriers to agricultural and other goods produced in poor countries.

To enable our countries to have the health workforces we require to meet our people's health needs and achieve the Millennium Development Goals, we urge the members of the G8 to make the following commitments:

1. Strengthening national health systems

1.1 We urge you to support African and other developing countries that are experiencing crises in human resources for health by providing the necessary financial and technical support to enable our countries to develop and fully implement national strategies on human resources for health as a central part of any overall plan to improve service delivery and strengthen national health systems so as to achieve or exceed the Millennium Development Goals.

1.2 We urge you to ensure that through your efforts and those of others, the resources required to fully fund these strategies are available.

1.3 We urge you to coordinate your investments and those of other donors and organizations with those of regional communities and developing country governments, and to use local technical resources where possible.

1.4 Strategy development should be led by national authorities with broad stakeholder participation that engages civil society and responds to local needs.

1.5 Assistance in the development of strategies should not delay the provision of urgently needed financial assistance and other technical assistance.

2. Supporting and enlarging health worker capacity

2.1 We urge you to support, with financial and technical assistance, national efforts to create conditions that facilitate health worker retention and deployment to underserved areas, including adequate compensation; improved health worker management, planning, and information systems; incentives; continuous learning opportunities; and; safe working environments for health workers through universal precautions, safer devices, and other forms

of infection prevention and control, psychosocial support, universal access to post-exposure prophylaxis, and workplace HIV treatment and prevention programs.

2.2 We urge you to support models of education and care that respond to national circumstances and priorities, providing quality health care to the maximum number of people and expanding health services in underserved areas. The models of care will often include the development of high quality mid-level and community health worker cadres, effective competency-based training strategies, and policies, training, supervision, and adequate compensation to enable nurses to engage in advanced nursing practices. We urge you to further support the development of career pathways for mid-level and community health worker cadres, permitting competence- and skills-based movement up the hierarchy of the health system.

2.3 Community members, including people living with HIV/AIDS, have a vital role in supplementing the care provided by health professionals. We urge you to support local, regional, and national efforts to empower community health workers and caregivers, including by enabling them to have the compensation, training, accreditation, supervision, and support structure required to maximize their effectiveness. We urge you to support local efforts to increase community awareness and capacity to participate in a comprehensive scale-up of prevention, care, and treatment programming through activities such as treatment preparedness, treatment literacy, and treatment adherence support.

2.4 We urge you to support expanded capacity of health professional training institutions including through incentives and other support for faculty, expanded physical space, and creation of new training institutions as needed, and to support these institutions in reviewing curricula to assure that the skills are relevant to required public health needs and competencies.

2.5 We consider it a tragic irony that many of the same countries facing enormous human resources deficits have in our midst large numbers of unemployed health care workers. We urge you to take all necessary steps, working with our governments and other parties, including international financial institutions, to enable their rapid re-engagement.

3. Overcoming macroeconomic challenges

3.1 We urge you to seek agreement with the International Monetary Fund and other international financial institutions, finance, health, and other ministers, and central banks to increase fiscal space for expanded funding from external and domestic sources, including debt cancellation, for health and other forms of human development. Civil society must have a voice in this process. Macroeconomic challenges should not and need not impede the flow of the required resources.

3.2 We urge you to ensure that new and existing developing country agreements with the IMF and other international financial institutions do not require or lead to freezes in health worker recruitment, prevent payment of wage levels required to retain health workers, or prevent the hiring of unemployed health workers. Programs critical to public health should be exempt from budget and wage ceilings contained in such agreements.

3.3 Long-term, sustainable economic growth requires investments to reduce poverty and hunger, improve health and expand education at all levels, empower women, and ensure

environmental sustainability, including through improving living conditions in rural and slum areas and universal access to clean water and sanitation.

3.4 We urge you to commit to providing your assistance in a long-term and predictable manner, including for both bilateral and multilateral mechanisms, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria.

4. Addressing health worker needs in high-income countries

4.1 We urge you to meet your country's own health care needs without reducing the capacity of developing countries to meet our health needs.

4.2 We urge you to meet your obligations under World Health Assembly Resolution 57/19, "International migration of health personnel: a challenge for health systems in developing countries."

4.3 We urge you to evaluate the recruitment practices of public and private health providers in your country, and implement strategies that will protect the health human resource base of our countries. The strategies may include ending active recruitment from certain countries and working with developing country governments and regional and international organizations to develop satisfactory policies on recruitment, such as through managed migration with mutual benefits to both source and destination countries.

4.4 We urge you to take the necessary measures to increase your country's supply of domestically-trained health care workers.

5. Supporting international organizations

5.1 The technical capacity and normative role of the World Health Organization gives it a special role in addressing the human resources for health crisis. We urge you to provide WHO the additional funding it requires to support expanded and accelerated large-scale technical assistance in this area; to build its own capacity at headquarters, regional, and country levels, including through interdepartmental collaboration and nationally led teams, and; to enhance national capacities to develop and implement strategies to meet Millennium Development Goals, including effective development and management of the health workforce. We further urge you to ensure that WHO has the funds to develop and sustain a human resources for health observatory in Africa. All funding to expand WHO capacity should be in addition to the funding WHO requires to support anti-retroviral therapy scale-up.

5.2 The Global Fund to Fight AIDS, Tuberculosis and Malaria supports health system strengthening, including human resources. We urge you to ensure that the Global Fund is fully funded, including so that it can renew all deserving proposals from previous rounds, fully fund Round 5, and launch Round 6 in a timely manner. We further urge you to make available technical support to help applicants develop ambitious proposals in the area of AIDS, including treatment, tuberculosis, malaria, and health system strengthening.

5.3 We urge you to support regional health and development organizations in their effort to address the human resources for health crisis through regional and sub-regional interventions.

6. Ensuring soundness of donor programs

6.1 We urge you to ensure that your own funding mechanisms and programs strengthen, and do not weaken through resource diversion or other means, public health systems and their human resource capacities. Bilateral programs should help build local capacity and utilize and catalyze local capacity wherever possible.

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UGANDA

ASIA

Organizations

Arti Samajpati
Parivartan
INDIA

Asia Pacific Council of AIDS Service
Organisations (APCASO)
ASIA PACIFIC/MALAYSIA

Asia Pacific Network of People Living with
HIV/AIDS (APN+)
ASIA PACIFIC/THAILAND

Asia Pacific PLWHA Resource Centre
INDIA

The Australian AIDS Fund Incorporated
AUSTRALIA

Australian Reproductive Health Alliance
(ARHA)
AUSTRALIA

Blue Diamond Society
NEPAL

Freedom Foundation
Bangalore
INDIA

Gipa Alliance
INDIA

Gram Bharati Samiti
Jaipur
INDIA

Health and Development Networks
Chiang Mai
THAILAND

Mahatma Gandhi Institute of Medical
Sciences
Wardha, Maharashtra
INDIA

Manipur Network of Positive People (MNP+)
INDIA

MTAAG + (Positive Malaysian Treatment
Access & Advocacy plus)
MALAYSIA

Names Project Philippines
Manila
PHILIPPINES

New Zealand Family Planning Association
NEW ZEALAND

New Zealand Public Health Association
NEW ZEALAND

Progressive Organization of Gays in the
Philippines (ProGay)
PHILIPPINES

Remedios AIDS Foundation
Manila
PHILIPPINES

Rural Initiatives in Sustainability and
Empowerment (RISE)
Peshawar
PAKISTAN
Society for Rural Development
Jaipur
INDIA

Tahera Education Society
Hyderabad Andhra Pradesh
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LATIN AMERICA AND THE CARIBBEAN

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Agua Buena Human Rights Association
COSTA RICA
International Health Central American
Institute Foundation
COSTA RICA

Jamaican Network of Seropositive
Kingston
JAMAICA

Latin American Network of PLWHA
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LATIN AMERICA

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GLOBAL

ActionAid International

Communities Living with AIDS, TB and
Malaria Constituency of the Global Fund
Board

Global Network of People Living with
HIV/AIDS (GNP+)

International Council of AIDS Service
Organizations (ICASO)

Ipas

United Methodist Church, General Board of
Church and Society

G8 COUNTRIES

CANADA

Organizations

Canadian HIV/AIDS Legal Network
CANADA

Canadian Treatment Action Council (CTAC)
Toronto
CANADA

Global Network of People Living With
HIV/AIDS North America
CANADA/UNITED STATES

Interagency Coalition on AIDS and
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CANADA

The North-South Institute
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FRANCE

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ITALY

Cooperazione Internazionale (COOPI)
ITALY

Medici con l'Africa
Collegio Universitario Aspiranti e Medici
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Organizations

British Medical Association
UNITED KINGDOM

Christian Medical Fellowship
UNITED KINGDOM

International HIV/AIDS Alliance
UNITED KINGDOM

John Mordaunt Trust
UNITED KINGDOM
UK Coalition of People Living with HIV and
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Liverpool
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UNITED KINGDOM

UNITED STATES

Organizations

ACT UP
East Bay, Oakland, CA
UNITED STATES

Advocacy for Youth
Washington, DC
UNITED STATES

Africa Action
Washington, DC
UNITED STATES

AIDS Policy Project
Philadelphia, PA
UNITED STATES

The AIDS Institute
Washington, DC
UNITED STATES

American Medical Student Association
Reston, VA
UNITED STATES

Artists for a New South Africa
Los Angeles, CA
UNITED STATES

The Association of Nurses in AIDS Care
Akron, OH
UNITED STATES

Center for Health and Gender Equity
(CHANGE)
UNITED STATES

Church Women United
Washington, DC and Puerto Rico
UNITED STATES

Community HIV/AIDS Mobilization Project
(CHAMP)
New York, NY
UNITED STATES

Foundation for Integrative AIDS Research
(FIAR)
Brooklyn, NY
UNITED STATES

Global AIDS Alliance
UNITED STATES
Gay Men's Health Crisis
UNITED STATES

Global Health through Education, Training
and Service (GHETS)
Attleboro, MA
UNITED STATES

Global Health Council
Washington, DC
UNITED STATES

Health Equity Project
New York, NY
UNITED STATES

Health GAP (Global Access Project)
UNITED STATES

HIV Medicine Association
Alexandria, VA
UNITED STATES

Housing Works
Brooklyn, NY
UNITED STATES

International Association of Physicians in
AIDS Care (IAPAC)
Chicago, IL
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International Women's Health Coalition
New York, NY
UNITED STATES

Intersect-Worldwide
New York, NY
UNITED STATES

JubileeUSA
UNITED STATES

Medilinks
New York, NY
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Center (NEAETC)
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NUMEDX
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Oxfam America
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Pangaea Global AIDS Foundation
UNITED STATES

Physicians for Human Rights
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Positive Opportunities, Inc.
Harrisburg, PA
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Power of Love Foundation
San Diego, CA
UNITED STATES

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AIDS Fonds the Netherlands
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Grupo Português de Ativistas sobre
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STOP AIDS NOW!
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