Successful health systems require an effective workforce. While many Member States in the WHO European Region have made progress in recent years, a number of health workforce challenges remain that must be addressed to achieve truly sustainable and effective human resources for health. These include supply–demand imbalances, geographical mal-distribution, inappropriate skills mixes, variations in quality, gender inequality, poor working conditions and the need to improve recruitment and retention.

WHO’s *Global strategy on human resources for health: Workforce 2030*¹ and the report of the United Nations High-Level Commission on Health Employment and Economic Growth, *Working for health and growth: investing in the health workforce*,² offer Member States a unique opportunity to make a fundamental change in health workforce policy, to facilitate meeting these challenges and reinforce the key focus of Health 2020, the European health policy framework.³

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The Tallinn Charter\(^4\) continues to be relevant to regional health strategy, and Health 2020 provides direction for Member States in the Region, including the need to consider adoption of inclusive models of health care; integrated people-centred approaches; the reorganization of primary care towards a team-based system; and recognition of the potential for technological innovations, through fully functioning and integrated national health information systems, which includes the electronic health infrastructures (e-health). These key elements will help to guide countries’ health workforce policy.

The Global strategy on human resources for health outlines the strategic directions Member States should consider when addressing their health workforce challenges. Along with the recommendations of the High-Level Commission, which have now been followed by the five-year action plan for health employment and inclusive economic growth (2017–2021) adopted by the Seventieth World Health Assembly in 2017,\(^5\) the strategy makes a clear statement that investment in the health workforce can result in improved health and economic outcomes; it should not be regarded as a controllable cost. The High-Level Commission report advocates an approach to health workforce sustainability that can support effective health services delivery, improved health and economic prosperity.

This issue of Panorama complements other work within the Region to support effective health workforce policy and planning. The WHO Regional Office for Europe has developed a framework for action for a sustainable health workforce,\(^6\) which builds on the four strategic objectives set out in the Global strategy (transforming education and performance, aligning planning and investment, capacity-building, and analysis and monitoring). This has been developed to provide an instrument for Member States to assess their own priorities, objectives and policy interventions. A toolkit is also being prepared in support of the framework; this focuses on evidence and sets out effective strategies, planning tools and case studies of health workforce practice for countries and other stakeholders.

In this Panorama issue, the focus is on analysis and evidence of the four strategic objectives, reflected by the articles. It contextualizes “Workforce 2030” at a regional level, reporting the views and opinions of selected regional stakeholders in response to the deceptively simple question: “What should the health workforce in 2030 ‘look like’?” Interviewees’ answers are both illuminating and challenging. The diversity of responsibilities of the interviewees fades into the background as it becomes clear that all are arguing for fundamental change. None suggest that “business as usual” can address effectively the health workforce challenges facing the Region. The clear message is that the status quo is not an option if Member States are to meet these challenges.

But in which direction should changes be made, and with what priorities? Achieving a transformed and sustainable health workforce requires effective policy actions across multiple sectors, including health, social care, welfare, education, finance, labour and foreign affairs. Intersectoral processes must engage the public and private sectors, civil society, trade unions, health worker associations, regulatory bodies and educational institutions. The Global strategy’s four strategic objectives can only be achieved when additional enabling efforts and mechanisms

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are in place. This reinforces a fundamental requirement for strong leadership by Member States and coordinated efforts across national boundaries, underpinned by evidence and labour market analysis.

The peer-reviewed papers in this issue of Panorama are examples of the types of evidence that can be harnessed to shape, direct and test policies on human resources for health, or that can be used to improve understanding of labour market dynamics. They cover a range of perspectives and entry points into policy and planning, spanning the use and improvement of health workforce data; the role of regional and subregional networks; the contribution and challenges of e-health; and a Region-wide mapping of nursing and midwifery education. These examples of new evidence and new approaches highlight the need for effective harnessing of the evidence base and for networking to exchange knowledge on innovation and effective policies.

The Regional Office will provide technical support to Member States as they make progress towards health workforce sustainability. It will:

- promote the use of the framework for action by Member States as they consider the Global strategy, its milestones and the High-Level Commission recommendations;

- develop a related toolkit to support countries and other stakeholders to identify and address health workforce priorities;

- provide the necessary technical assistance to Member States as they identify and address their individual health workforce priorities within the framework and consider the Global strategy milestones and other potential indicators of progress; and

- provide support for national, subregional and regional policy dialogues and fora on health workforce issues that emerge as critical priorities.

Other stakeholders should consider the content of the framework, toolkit and this issue of Panorama when making their contributions to improving human resources for health policy and planning. Drawing on multistakeholder contributions, this issue reflects the widespread recognition and deepening understanding that sustaining effective human resources for health is everyone’s business. Health workforce sustainability requires whole-of-government action, with political leadership from the highest level, backed up by multisectoral stakeholder engagement.