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ILO tripartite technical workshop for the SADC region Investing in the health workforce: employment and decent work in the health sector

Johannesburg
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Conclusions

Introduction

1. The ILO tripartite technical workshop for the SADC region on Investing in the health workforce: employment and decent work in the health sector was held from 10 to 12 September 2019 in Johannesburg, South Africa. Twelve SADC Member States were represented.¹ The purpose of the workshop was to share knowledge and adopt recommendations for the development of a SADC Human Resources for Health (HRH) strategy. The workshop aimed to provide a platform to discuss major priorities, opportunities and challenges in promoting employment and decent work for the health workforce in SADC countries. The ILO tripartite technical workshop was organized in collaboration with WHO and SADC and with the support of the ILO-OECD-WHO Working for Health Multi-Partner Trust Fund.
2. Health and decent work are essential for social cohesion, human development and inclusive economic growth. Decent work in the health sector is fundamental to ensuring effective and resilient health systems, a prerequisite for addressing health workforce shortages, and to achieving equal access to health services and good quality health care. The UN High-level Commission on Health Employment and Economic Growth (Commission) emphasized the importance of the sector in providing growing opportunities for employment, particularly for women and young people. In November 2017, on the occasion of the joint meeting of SADC Ministers of Health and Ministers responsible for HIV and AIDS, the Ministers approved the review of the SADC Human Resources for Health Strategic and Business Plan with view to better align it to global developments. The SADC Ministers responsible for Employment and Labour and Social Partners discussed the Commission's recommendations and included the item 'Health Employment and Economic Growth' as one of their four inter-sectoral issues of priority to the Employment and Labour Sector.²
3. The tripartite participants identified the following challenges and opportunities for decent work in the health sector, policy priorities, and recommendations for a SADC HRH strategy.

¹ Angola, Botswana, Eswatini, Lesotho, Madagascar, Malawi, Mauritius, Namibia, South Africa, Tanzania, Zambia and Zimbabwe.

² Section 'Issues for noting', SADC Meeting of Ministers of Employment and Labour and Social Partners, 4-8 March 2019, Namibia Institute of Public Administration and Management (NIPAM), Windhoek, Namibia, "Coordination of development programmes to maximise employment creation and productivity", Record. SADC/ELS/M&SP/2019/R

Challenges and opportunities for decent work in the health sector

4. The health sector faces numerous challenges. These include limited fiscal space and greater demands for flexibility, efficiency and productivity without compromising on the delivery of quality care.
5. A common concern is that fewer people are attracted to certain health-care jobs due to low wages, long working hours, violence and harassment at the workplace and occupational safety and health (OSH) risks. The health sector needs to address these concerns in order to redress existing and projected health workforce shortages and to bolster the attractiveness of health careers.
6. A general mismatch between demand for and supply of health workers has been observed. While many graduates remain unemployed, filling vacant positions can take a long time. The excessive use of overtime is sometimes used to compensate for workforce gaps but may at the same time constitute a constraint for the creation of jobs in the sector. It is especially challenging to attract, deploy and retain skilled health workers to rural, remote and underserved areas. Technology can supplement and contribute to the delivery of health care to rural and remote areas.
7. Health worker migration has been one of the means of addressing health worker shortages in many countries, yet it poses challenges for countries of origin in the SADC region in terms of retention and preventing the drain of skilled workers. This drain puts undue pressure on source countries which may have already spent the scarce financial resources available on their training and may have a shortage of trained skilled workers themselves.
8. There are also promising opportunities and measures for developing decent work in the health sector. It is a major source of employment opportunities for youth and women. Well-regulated collaboration between public and private sector can create synergies by sharing resources. Without prejudice to ensuring the sustainability of the health workforce in source countries, health worker migration, in line with international standards, can be a means of facilitating access of health workers to labour markets under decent work conditions.
9. Social dialogue with governments and representative employers' and workers' organizations enhances decent work for health workers in a sustainable and productive manner; it can improve the ability to make progress on common interests and can also contribute positively to reach compromises on competing concerns and interests.

Policy priorities for the promotion of decent work in the health sector

10. Countries should develop effective policies, aimed at generating employment and decent work opportunities in the health sector, and in particular facilitating the transition from education and training to work, with an emphasis on the effective integration of young people into the health workforce. Such policies should be in line with relevant international labour standards, including the Nursing Personnel Convention, 1977 (No. 149).
11. Quality education for all is one of the key strategies for ensuring adequate numbers of appropriately qualified health workers. Education and training for the health sector should be designed to adequately reflect skills needed for changing health-care demands and emerging health needs. Access to education opportunities in health should be based on principles of equality and affordability, and should be inclusive of youth and women.
12. Specific programmes to protect health workers from occupational hazards and risks in accordance with national legislation and backed by effective enforcement mechanisms in

line with the relevant international labour standards, such as the Occupational Safety and Health Convention, 1981 (No. 155), and the Violence and Harassment Convention, 2019 (No. 190), are indispensable in the health sector.

13. Social dialogue is a key strategy for developing sustainable health sector policies and practices in general, and for improving the working conditions of health workers in particular. Freedom of association and the right to collective bargaining for all health workers need to be promoted in line with the 1998 ILO Declaration on Fundamental Principles and Rights at Work and its Follow-up. Social partners and governments have vital roles in promoting and using social dialogue to advance health goals and providing quality health care as a common public good.
14. Investments in health workforce information systems are crucial to inform effective health workforce planning and management at national and regional levels.

Recommendations for a SADC Human Resources for Health Strategy

15. The participants considered a document summarizing the outcomes of the SADC Member States Human Resources for Health Technical Consultative Meeting, held in Johannesburg, South Africa, 26-29 August 2019, that convened representatives of the Ministries of Health from eight SADC Member States with the aim to set the foundation for developing a new regional HRH strategy.
16. The participants welcomed the proposed themes to be included in the SADC HRH strategy, namely: 1. Investing in decent employment; 2. Education, training and development; 3. HRH management, migration and mobility; 4. Capacity for leadership, governance and policy; 5. Data, reporting, monitoring and evaluation.
17. The following recommendations were identified by the tripartite participants for the development of the HRH strategy:
 - (a) To ensure policy coherence, participants highlighted the need to enhance collaboration and social dialogue between all relevant stakeholders and to strengthen, at the national and regional level, coordination mechanisms among governments, workers, employers and other relevant stakeholders to promote decent work in the health sector.
 - (b) Participants underscored the importance of aligning the SADC HRH strategy with the SADC Employment and Labour Policy Framework (2020-2030) that is currently being developed to address impediments to job creation through intersectoral coordination. Coherence between the SADC HRH strategy and national HRH strategies should also be ensured.
 - (c) Countries should secure sustainable health financing from domestic sources in line with the 2001 Abuja Declaration, complemented by international sources where needed, with necessary priority to the health workforce. The development of public policies to attract co-investments by the private sector could contribute to expanding the fiscal space.
 - (d) Countries should develop specific programmes to protect health workers from occupational hazards and risks in accordance with national legislation and backed by effective enforcement mechanisms in line with the relevant international labour standards, as well as the ILO/WHO Joint Global Framework for National Occupational Health Programmes for Health Workers. They should invest in the

capacity building as well as protection and security of health workers in health facilities, humanitarian settings and public health emergencies, both acute and protracted.

- (e) Gender equality needs to be mainstreamed in strategies and approaches to the health sector workforce. This includes strengthening policies and strategies to promote and ensure equal opportunities, participation and treatment of women and men, including equal remuneration for work of equal value. Particular attention should be paid to developing gender-responsive legislation, policies and measures for a health sector workplace free from violence and harassment.

Next steps and way forward

Constituents should:

- 18.** Disseminate the outcomes of this meeting, report back to the relevant authorities in their respective countries and raise awareness on the process of developing a SADC HRH strategy.
- 19.** Explore whether similar activities and processes are under way in their respective countries and share this information with SADC, SATUCC, SPSF, ILO and WHO.
- 20.** Sensitize Ministries of Health on the development of the SADC Employment and Labour Policy Framework to ensure the alignment between the SADC HRH strategy and the Framework.

The ILO should:

- 21.** Provide policy advice and technical assistance in the development of national health workforce policies and strategies with the focus on employment creation and decent work, inter alia through the decent work country programmes and regional decent work programmes, in collaboration with constituents and the WHO.
- 22.** Work with WHO to facilitate inter-sectoral collaboration between the Ministries of Health, Ministries of Labour, and other relevant ministries, and social partners.