Health Workforce Advocacy Initiative
Addressing Non-Communicable Diseases by investing in health workers

Dear UN Member State Delegates,
Dear NCD-alliance,

Via this letter the Health Workforce Advocacy Initiative (HWAI) provides its support to the advocacy efforts of the NCD-alliance regarding the Political Declaration development that will be the outcome of the high-level meeting on the prevention and control for NCDs. We underline its efforts to have time-bound commitments included in the document, more specifically the call for political leaders to agree on:

- An overarching goal to reduce preventable deaths from NCDs;
- A clear timeline, including milestones, for tackling the epidemic of the four major NCDs – cancer, cardiovascular disease, diabetes and chronic respiratory disease;
- Obligatory regulatory mechanisms and fiscal policies to curb the risk factors for NCDs;
- A high-level collaborative initiative of governments and UN agencies with civil society to stimulate and assess progress.

With this letter, we also want to highlight the crucial role that health workers have in the prevention and control of NCDs and the need to set concrete targets for addressing the critical shortfall of health workers needed to respond to the NCD crisis. We would also like to emphasize the importance of ensuring that macroeconomic policies do not result in donor funding for NCDs being additional to existing domestic funding. Instead, innovative financial mechanisms should help increase the domestic revenues for health systems. More broadly, we would like to emphasize that health workers and their patients need affordable diagnostics and medical treatments and that access to such technologies are undermined by existing intellectual property and trade norms that all to often prevent adoption and use of TRIPS-compliant flexibilities. Because of inherent limitations in the NCD Political Declaration process, we also want to continue working with you in the future concerning the articulation and attainment of workforce numbers and financial targets.

WHO indicated in 2006 that 57 countries do not reach the minimum threshold of 2.5 health workers per 1000 capita that is deemed essential to provide basic health care services. 36 of these countries are situated in Sub-Saharan Africa. 5 years later it has been estimated that globally at least additional 3.5 million health care workers are required to reach the health related Millennium Development Goals (MDGs). The NCD epidemic will become a ‘double burden’ of disease for those population groups that are already affected by communicable diseases and preventable Mother and Child mortality. On top of that most of the countries with a critical health workforce shortage also show strong population growth. This pattern demonstrates that the NCD- epidemic, that requires long term care for chronic diseases, will bring serious strains to already under resourced health systems. We believe that the model of
integrated primary health care, as envisaged in the WHO Alma Ata declaration of 1978, is the best strategy to curb the NCD-epidemic¹.

We hope that the NCD-Alliance and Member State delegates can hence promote the following points (highlighted) for inclusion in the political declaration:

- Tab 10: ...its mandate, to **realize the right to health for all.** Reaffirm its leadership...
- Tab 21: ...strengthening health systems, including **integrated primary health care**, infrastructure.....
- Tab 30 Alt: ...national priorities [gender, cultural, **formal and informal caregivers**, and community perspectives]
- Tab 34 B bis.... Including palliative care, noting the crucial role of (community) **health care workers** and urgently required global investments in the workforce providing these services.
- Tab 34 C. ...recruitment of health personnel; **and the requirement for integrated and costed national Human resources for health strategies to overcome the global health workforce gap, estimated to be at least 3.5 million health workers.**
- Tab 35 ......integrated essential and **appropriate** services, **provided by sufficient, well-trained, well-remunerated and equally distributed health workers**, for prevention and control of NCDs...

Besides these precise points we would like you to take note of the Kampala Declaration and Agenda for Global Action adopted at the first global forum on human resources for health in 2008², and the outcomes of the second global forum on human resources for health in Bangkok in 2011³. Both these documents contain key issues that are relevant for the sustainable development of a global health workforce that is an essential requirement in addressing the NCD epidemic.

**Health Workforce Advocacy Initiative**

The Health Workforce Advocacy Initiative (HWAI) is an international civil society-led coalition that specializes in research, policy analysis, and evidence-based advocacy to address the global health worker shortage, a fundamental and critical barrier to achieving universal access to a well-staffed and functioning health system.

Affiliated with the Global Health Workforce Alliance (GHWA)⁴, HWAI prioritizes human resources for health (HRH) and health systems strengthening (HSS), and seeks to ensure that all people everywhere have access to skilled, motivated and supported health workers. Established in 2007, HWAI aims to:

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³GHWA. **From Kampala to Bangkok: Reviewing progress, renewing commitments**, 2011
⁴The Global Health Workforce Alliance (GHWA) was created in 2006 as a common platform for action to address the crisis. The Alliance is a partnership of national governments, civil society, international agencies, finance institutions, researchers, educators and professional associations dedicated to identifying, implementing and advocating for solutions.

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Secure global and regional commitments to prioritize HRH and HSS;
Foster development of policies and actions for well-trained, motivated, adequately equipped, and equitably distributed health workforces;
Secure adequate, predictable, and sustained funding for HRH and HSS, and remove constraints to expanded spending;
Build better accountability among HRH stakeholders on meeting HRH-related commitments; and,
Support the development and effectiveness of grassroots movements supporting HRH, and link those movements to regional and international networks.

We remain available for further questions and dialogue,

Kind regards,

The HWAI secretariat (Wemos);

Medicus Mundi International Network
Cordaid
Voluntary Service Overseas
Health GAP (Global Access Project)