

Linda Mans, Wemos/HW4All, on: Caring for carers - a relevant concern?

<http://www.wemos.nl/news/?v=6&cid=3&id=300&lid=2>

Questions regarding the paper

- What is the background and main purpose of the paper you published / to which you contributed?

The information booklet ‘Caring for Carers – a relevant concern?’ is intended for anyone directly or indirectly involved with the problem of impending staff shortages in the Dutch health care sector and similar sector shortages in other countries' health care sectors. It outlines the possible effects of Dutch health personnel policy and Dutch foreign policy for global health. With the information booklet we want to promote the responsible recruitment of health personnel both within the European Union (EU) and beyond.

- Do/did you intend the paper to influence policies in the field of mobility, migration and international recruitment of health personnel? If, yes, in which sense?

We outline the possible effects of Dutch health personnel policy and Dutch foreign policy for global health and present a number of general recommendations and recommendations targeting specific parties for actions based on a multi-sector and multi-stakeholder approach.

- What kind of evidence did you use for / refer to in the paper (statistical data, scientific research reports, existing laws and commitments, personal or institutional experiences, voices from the ground, other), and how did you generate / access it?

We used literature review and conducted interviews with health workers representative bodies and other actors that are involved with the Dutch health personnel or foreign policies (individual input and input through meetings). We also incorporated a power relations mapping/ actor mapping.

- Were there any particular challenges in the making of the paper (access to data, collaboration, finances, etc.)?

The short-term outlook for the Netherlands is dominated by continuing financial constraint. Consequently, migration of health workers is not considered a problem. Hence, it is difficult to addressing the issue of sustainable health workforces.

General assessment of evidence based advocacy and policy

- How relevant are data and scientific evidence for policy makers compared with political interests and power relations? How would you define evidence based policy?

As civil society we use data and scientific evidence to supporting our human rights perspective. This might be coloured as well (as I don't believe in ‘objective’ data), but it should be in an open and verifiable way.

- What evidence is missing when it comes to translating commitments (such as the adoption of the WHO Global Code of Practice on the international recruitment of health personnel by all WHO member states) to political action? Or is the lack of evidence rather used as an excuse for inaction?

More data and evidence is welcome. But the ‘lack’ of it is also used as an excuse not to put commitments into political action. I appreciate for instance the Finnish delegation addressing their steps towards a sustainable health workforce as follows (Sept 2013): to put different ministries at the table (health, employment, finance and foreign affairs) for developing health personnel policies that are minimally dependent on international influx, geared towards the welfare of an ageing population and that will not crack under austerity measures.

- What role does evidence play for your own advocacy work?

One of the HW4All-communication goals is to position the project in the overall landscape of actors and actions addressing the global (and regional, national) health workforce crisis. This is for me an important role of evidence: guidance.