

Agenda Items: 14, 15, & 16:

Global Health Council, in collaboration with CARE, Children’s HeartLink, FHWC, Living Goods, PATH, Pathfinder International, Save the Children, Seed Global Health, What To Expect Project, and Women in Global Health recognizes that stronger health systems are critical in the post-COVID landscape. A strong and supported health workforce, including community health workers, is crucial to ensuring countries’ capacities to meet the SDGs and serves as the backbone of the health system.

Countries cannot sustain development without addressing the injustices and inequities that undermine health systems and global health security. Women represent about 70% of health workers globally but hold only 25% of decision-making roles. Frontline health and care workers deliver care from the city to the last mile but routinely work in under-resourced, unsupportive conditions.

We urge governments and donors to prioritize equity in access to quality maternal, child, and adolescent health and nutrition care, especially community-based and primary health care services, and care for children with chronic illness, ensure that health systems are well-resourced, address financial and non-financial barriers to accessing services, and set up mechanisms for inclusive feedback.

CSOs and communities are critical to holding governments, donors, and implementers accountable and bolstering policies that promote equity and quality of health services, and must be meaningfully engaged in health governance. Member States and donors must foster country-led dialogues to support long-term, innovative, locally adapted solutions that ensure equitable access to health care and build strong foundations for our most vulnerable populations. This should involve fair pay, respect for labor rights including freedom of association, and expanded avenues for professional development for the health workforce—with oversight and accreditation led by ministries of higher education. We urge Member States to accelerate investments in health workforce education, skills, and jobs, ensuring this also prioritizes remuneration and retention of health workers (including nurses, midwives, and CHWs), especially in remote and hard to reach areas.

We applaud WHO’s commitment to [women’s, children’s, and adolescents’ health](#). The COVID-19 pandemic has disproportionately affected the health and wellbeing of women and young people, leading to an increased need for responsive access to sexual and

reproductive health care, particularly in humanitarian settings. We also welcome the report on the Health Workforce and look forward to the development of the next health workforce action plan 2022-2030, urging WHO to include civil society in every stage of its development. Member states must ensure that the WHO has the resources to succeed in this area and a strong mandate going forward. By equipping, financing, supporting, and protecting the health workforce and investing in community-level solutions, we can better prepare for future health crises and accelerate progress toward the SDGs.