



**MOÇAMBIQUE**

Conferência Internacional de Investimento  
em Infraestruturas do Sector de Saúde

# Investing in Health Workforce Development for the Achievement of Universal Health Coverage

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Ministério da Saúde



World Health  
Organization



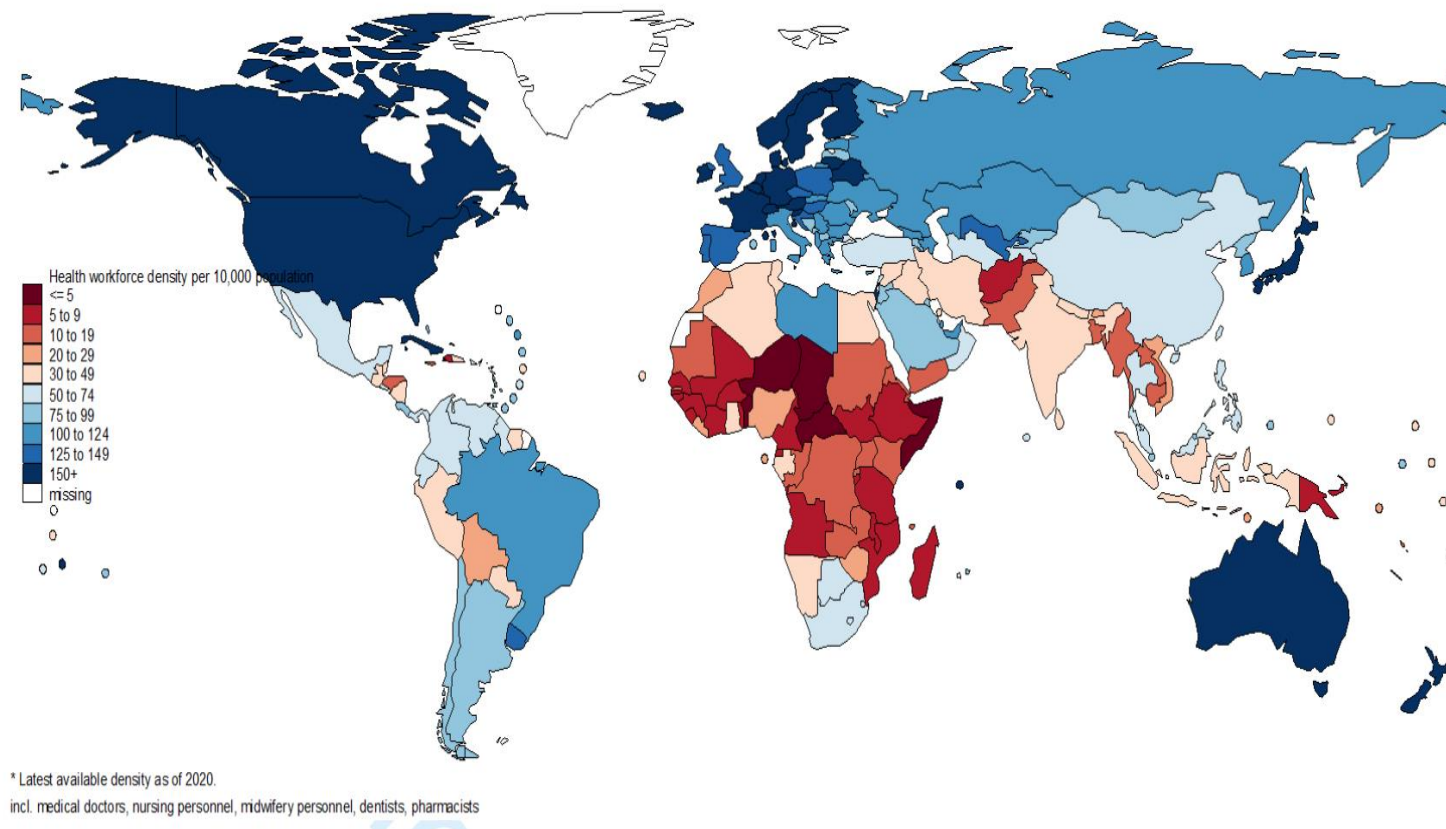
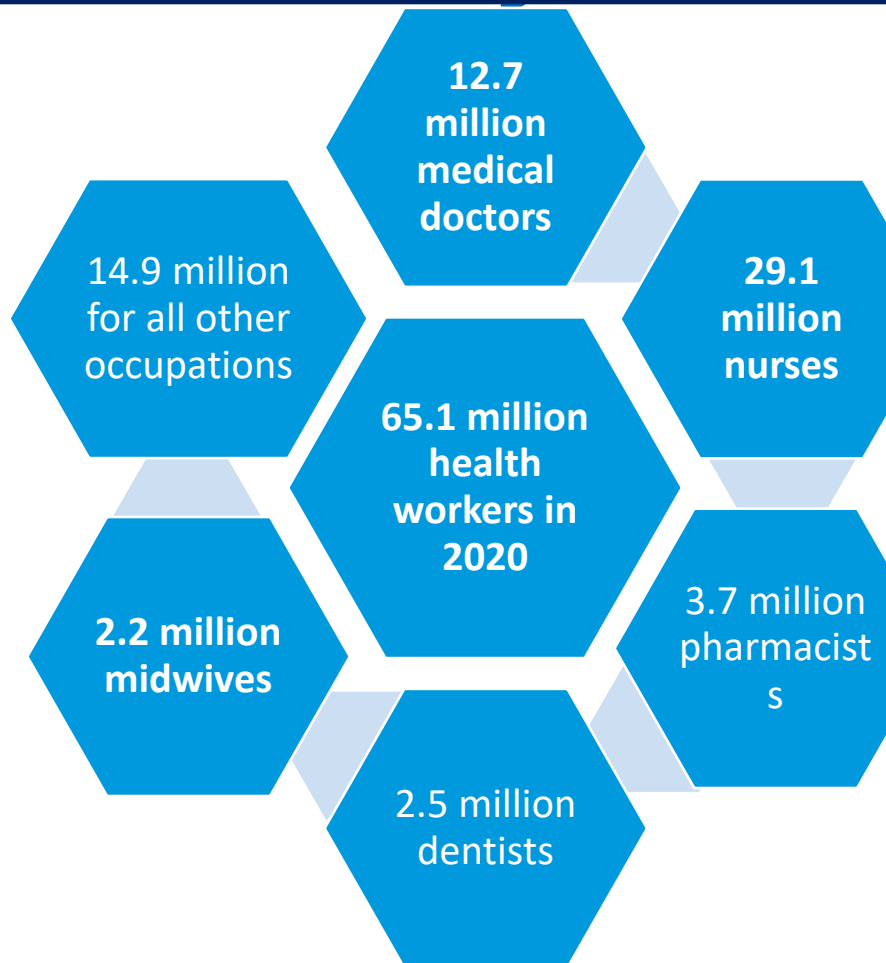
UN-HABITAT



# OUTLINE OF PRESENTATION

- ▶ Background: Global and Regional Health Workforce Context
- ▶ Key Issues and Challenges: Shortages and underinvestment
- ▶ Suggestions for Health Workforce investment actions in Mozambique
- ▶ Concluding remarks

# Global Stock and Distribution of health workers in 2020: Africa faces the greatest health worker shortage



The projected health workforce size is estimated to grow by 29% between 2020 and 2030 by 2030 – to 84 million health workers.

The global stock is not equitably distributed: 6.5-fold difference in density

# Health Workforce in the African Region

**150,000**

New health workers graduate per year

**4,000+**

*Educational institutions producing new health workers.*

More than 40% private sector.

**2.8 m**

Doctors, Nurses, Midwives, Pharmacists and Dentists in 2020

**+1 million**

More health workers in 2020 than in 2013

*...But not matching the pace of population growth and demographic shift.*

**30%**

Health Workforce Strategies and Plans **have no funding commitment**

**5.3 m**

Health worker shortage in the African region projected by 2030 (half of the global shortage) – *if compared to the global median density*

**1 in 3**

Health workers are **unemployed or underemployed**

**-43%**

There is a 43% budgetary deficit to sustain current jobs and absorb those currently unemployed.

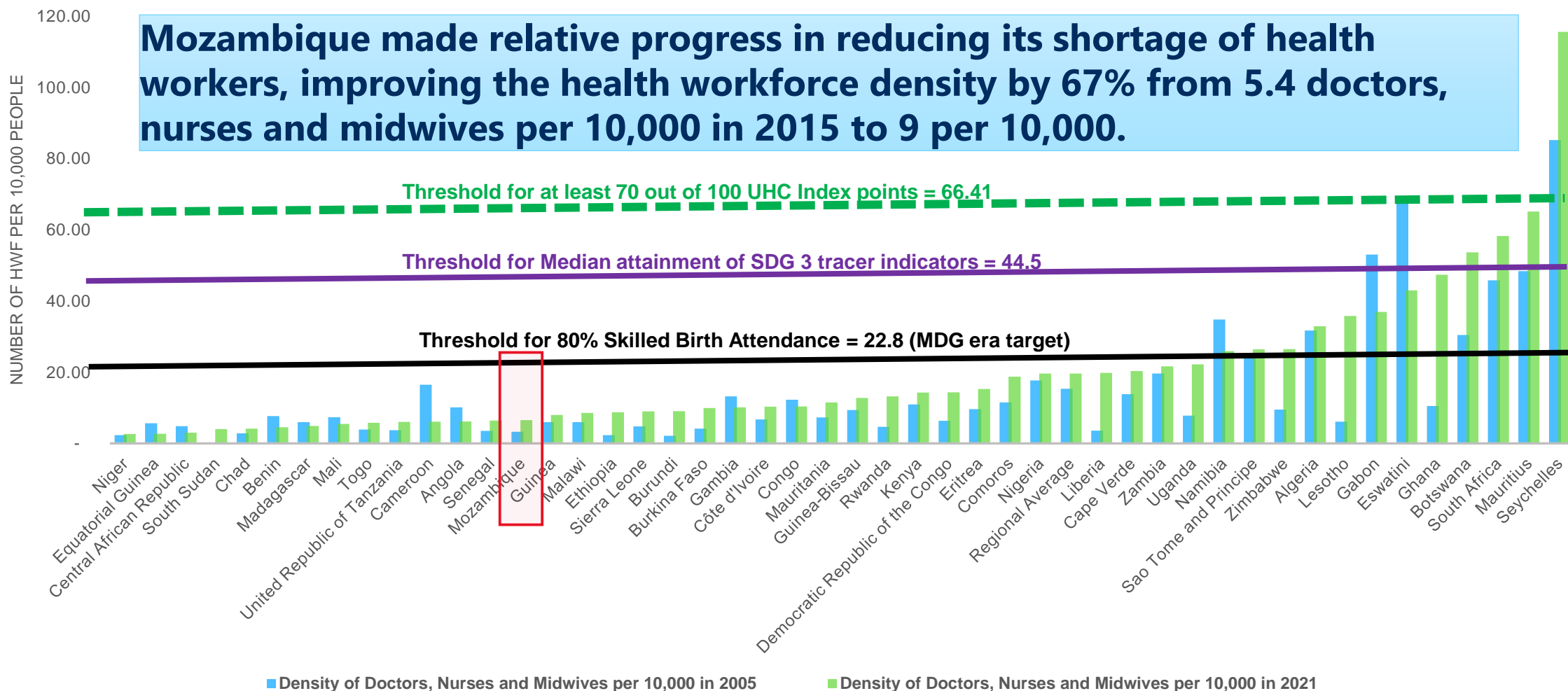


Governo de Moçambique



# DENSITY OF DOCTORS, NURSES & MIDWIVES PER 10,000 POPULATION: 2005 & 2021 VS UHC TARGETS

**Mozambique made relative progress in reducing its shortage of health workers, improving the health workforce density by 67% from 5.4 doctors, nurses and midwives per 10,000 in 2015 to 9 per 10,000.**



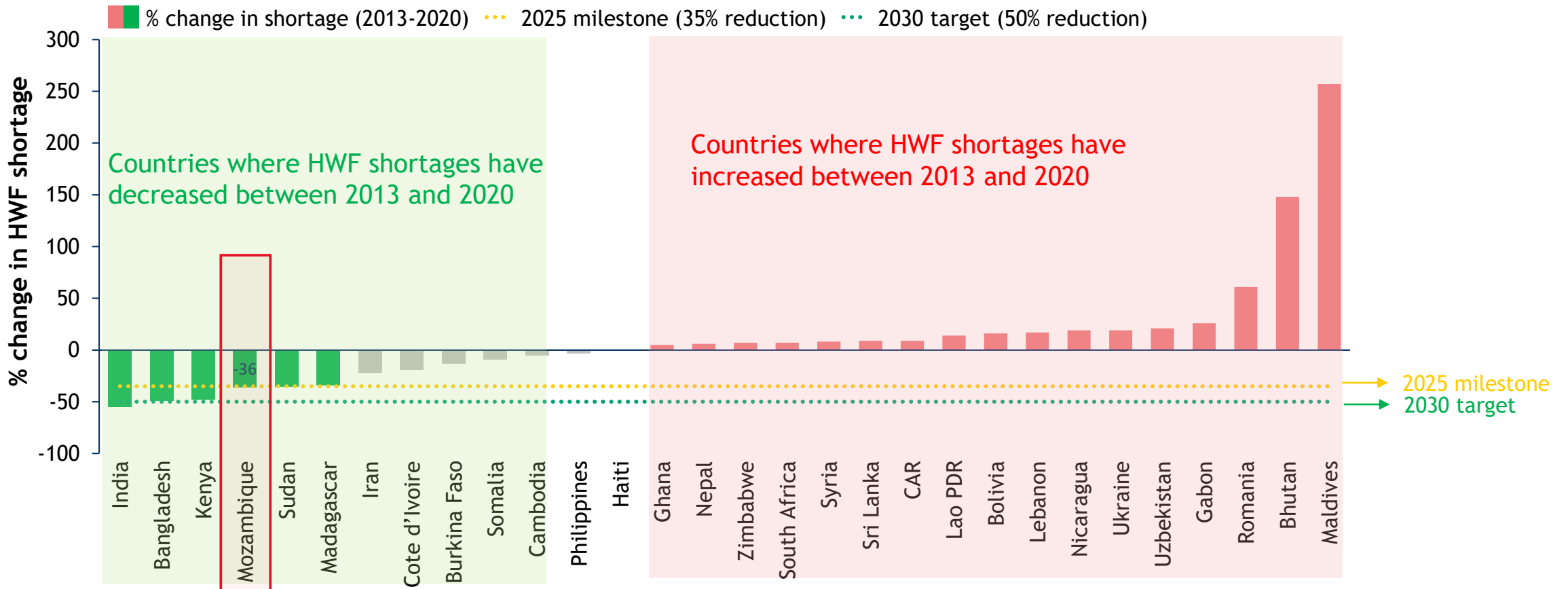
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Source: Thresholds from Ahmat, Asamani, Nyoni, Okoroafor, Karamagi, Nabyonga ... et al. (2022) Estimating the threshold of health workforce densities towards universal health coverage in Africa. [https://gh.bmj.com/content/7/Suppl\\_1/e008310](https://gh.bmj.com/content/7/Suppl_1/e008310)  
Data from: National Health Workforce Account (NHWA) data portal: Accessed 8 May 2023

# MOZAMBIQUE REDUCED SHORTAGE OF HEALTH WORKERS BY 36% BETWEEN 2013 AND 2020: THE 4TH BEST RELATIVE PROGRESS GLOBALLY (AND THE 2ND IN AFRICA)

Reduction in HWF shortages (2013-2020) against the 2025 and 2030 target (in %)



# The Mozambique Compared with Global Thresholds for SDG 3 in 2022



A threshold of 44.5 health workers per 10,000 population is associated with high attainment of the SDG 3 tracer indicators.

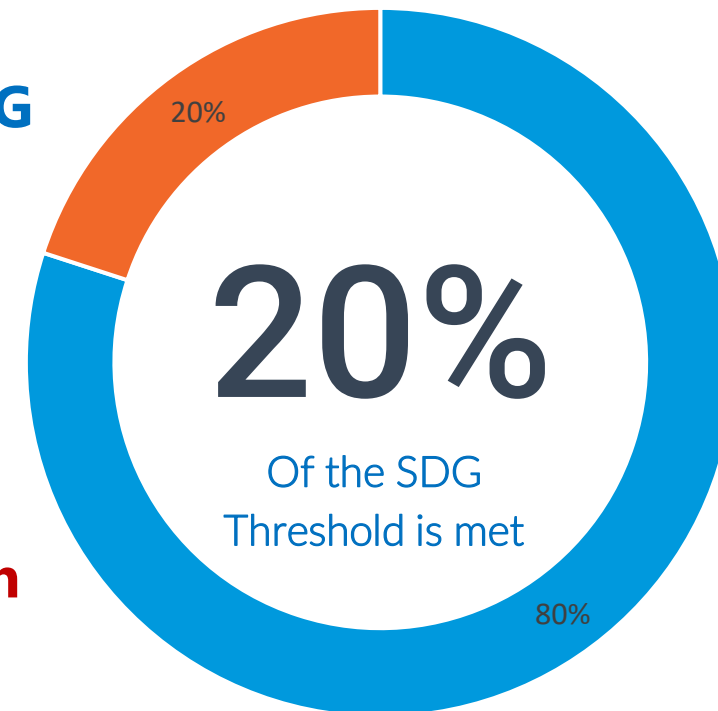


In 2022, Mozambique had a density of 9 per 10,000 population (about 20% of the global threshold).



**Mozambique could require an additional 120,000 health workers to make substantial progress on the SDG 3 targets**

- ▶ To enhance planning using precise estimates based on local context, the Government, with support from WHO and partners, is conducting a needs assessment using the local disease burden. The results are expected in a few months.



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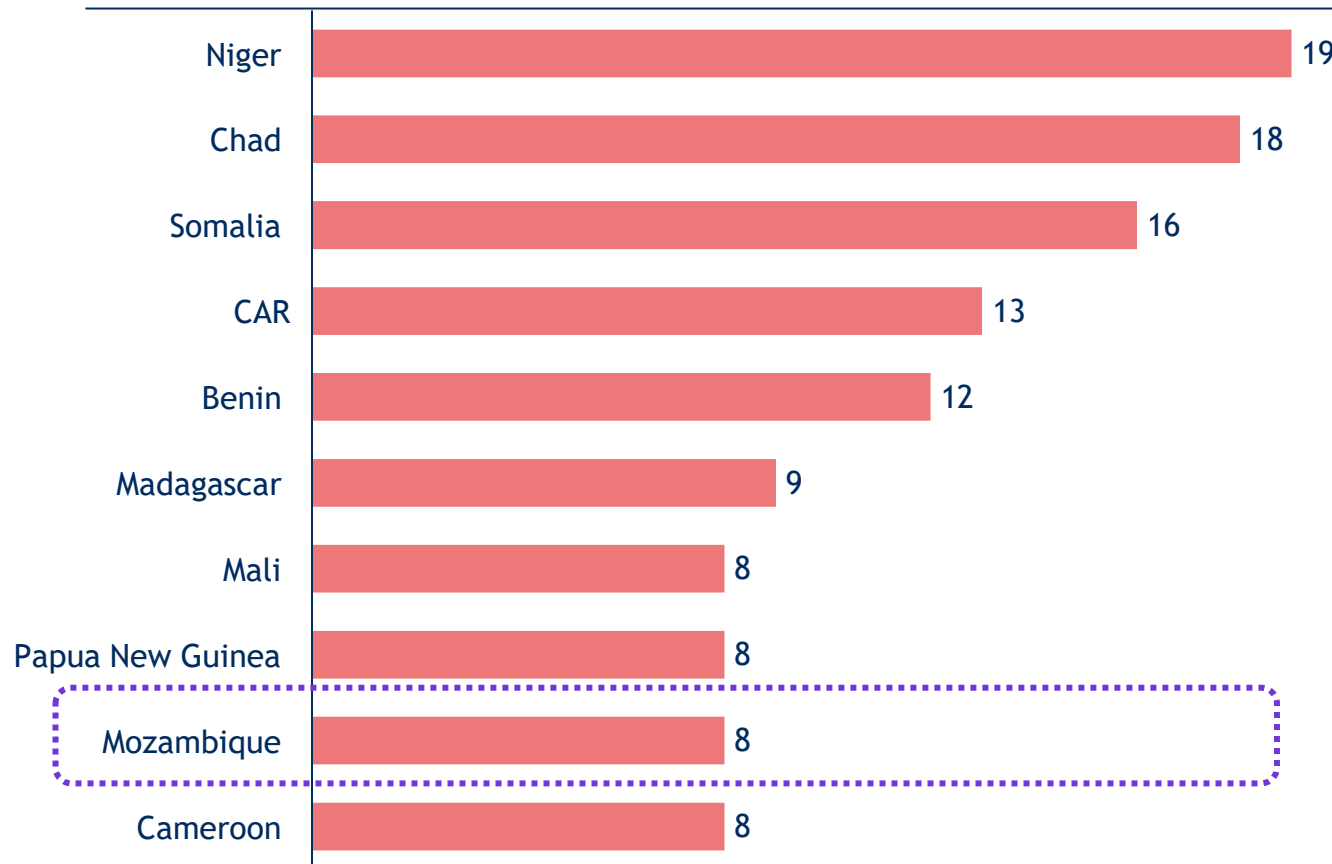




# Mozambique is among the Top 10 countries in the World with the highest relative HRH shortages compared to population size, 2020

## Top 10 countries Globally with the highest relative HRH shortages compared to population size, 2020

Factor by which current stock needs to be multiplied to remove health workforce shortage



▶ **The planned infrastructural investments** in Mozambique must be made together with **progressively expanding the workforce size.**

▶ It calls for **increasing training by 8-12% annually** and **increasing investment by 43% for employment of health workers**



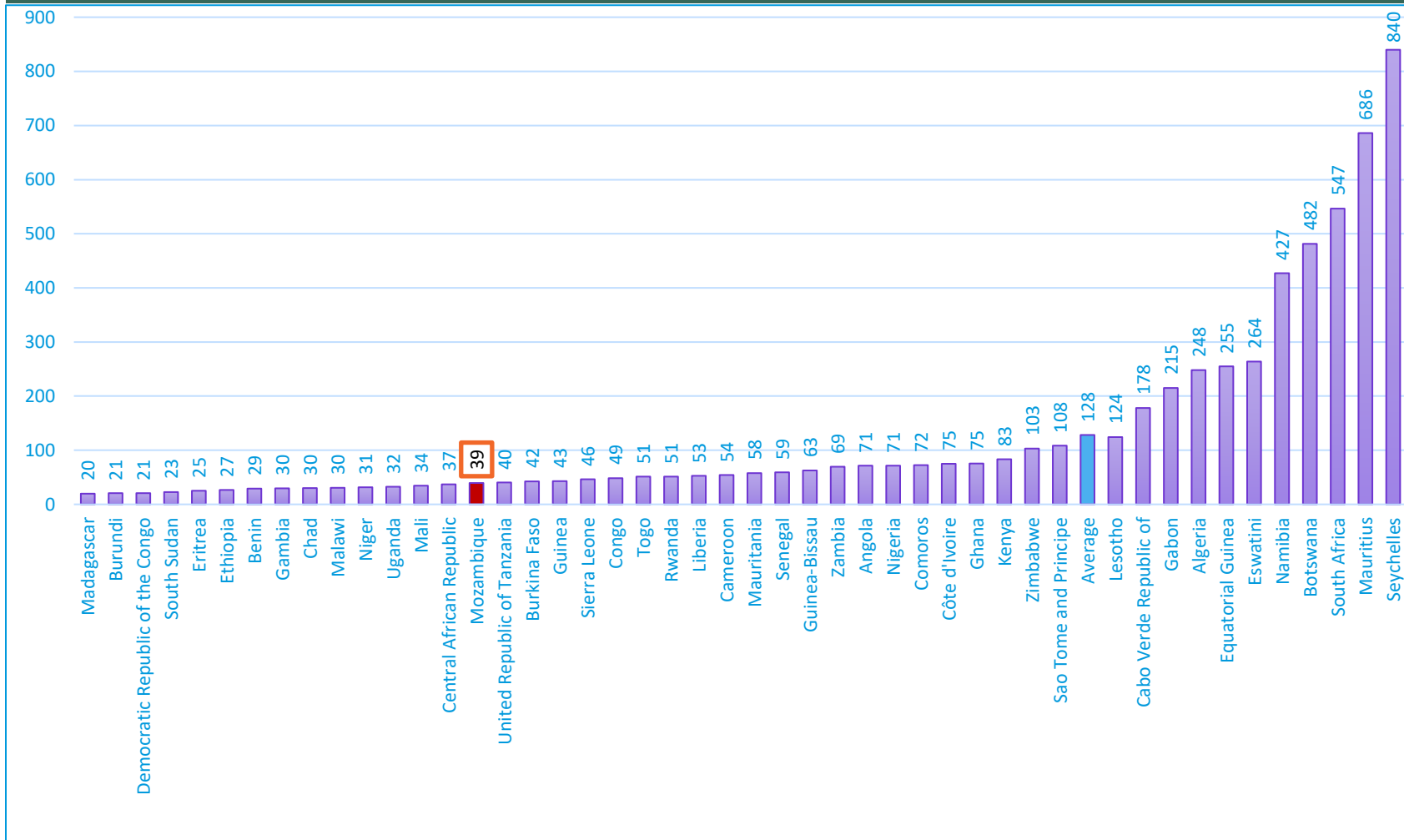
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Source: Adapted from Boniol M, Kunjumen T, Nair TS, Siyam A, Campbell J, Diallo K. The global health workforce stock and distribution in 2020 and 2030: a threat to equity and 'universal' health coverage? *BMJ Glob Health.* 2022;7(6):e009316. doi: 10.1136/bmjgh-2022-009316.



# Current Health Expenditure Per Capita in USD - 2019



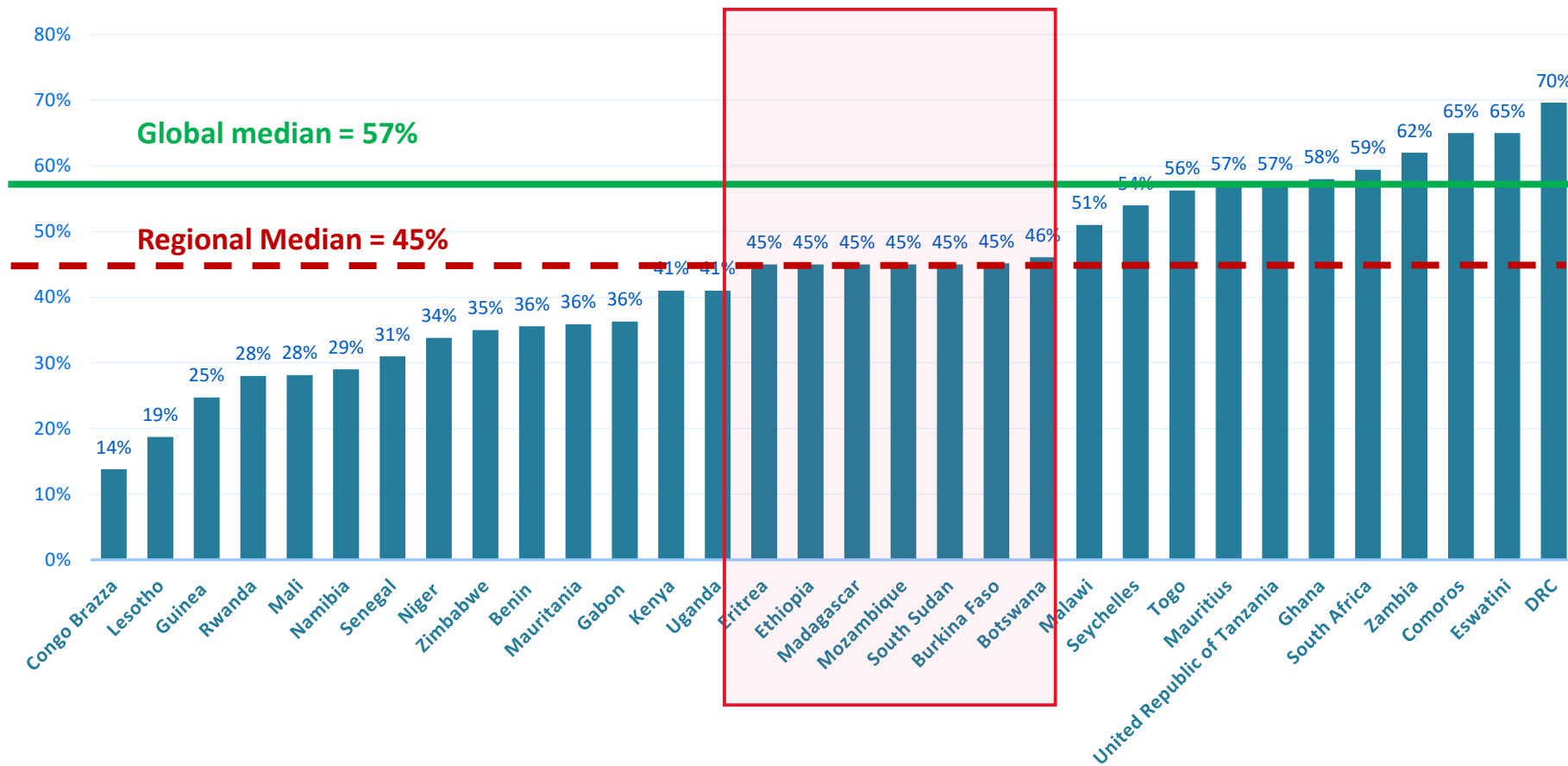
▶ **36 countries in Africa are spending less than minimum required** to ensure access to essential health services

▶ The Regional average of \$128 per capita

▶ **Mozambique is spending US\$39 per capita (about 30% of the African Average)**



# Mozambique is spending 45% of Health Expenditure on HRH compared with a global median of 57% (2021)



- ▶ About 45% of Gov't health spending is on workforce – 12% below the global median of 57%.
- ▶ Inadequate health spending
- ▶ Below average prioritization of the health workforce within the health spending

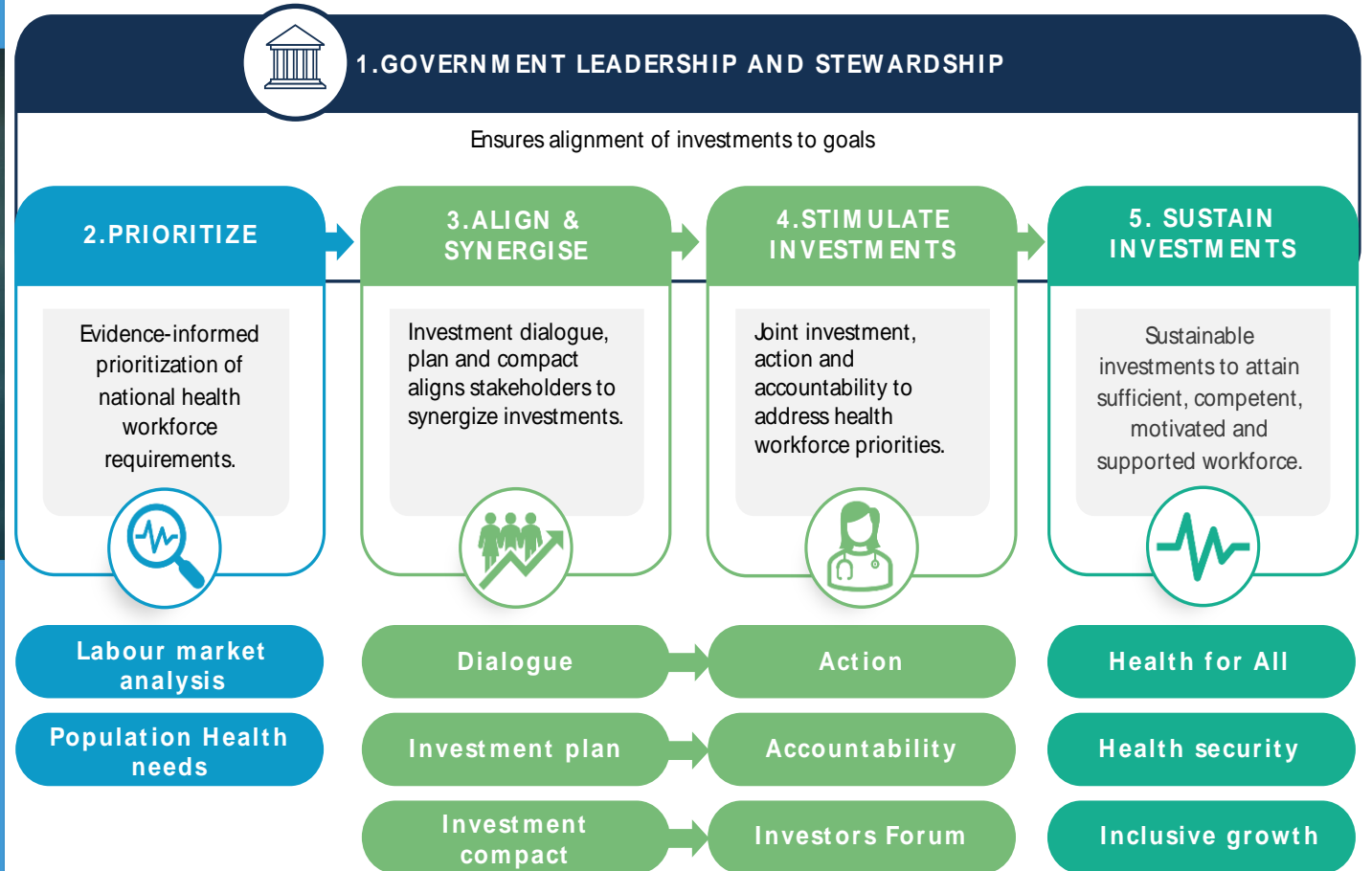


# AFRICA HEALTH WORKFORCE INVESTMENT CHARTER

Enabling Sustainable Health Workforce Investments for Universal Health Coverage and Health Security for the Africa We Want

PRIORITISE • ALIGN • INVEST • SUSTAIN

## Key Principles for Health Workforce Investment



# SUGGESTIONS FOR INVESTMENT ACTIONS IN MOZAMBIQUE

## 1. Gov't Leadership: The workforce is not a cost, an investment.

- ▶ Prioritise doubling the health workforce – especially at the primary health care level where the return on investment is greater.

## 2. Evidence-based workforce investment Compact to align and stimulate investments

- ▶ **Use ongoing health labour market assessment** for a Multi-sectoral Health Workforce Investment Compact, signed by all partners to align investments

## 3. Leverage infrastructural projects to Stimulate HRH investments.

- ▶ Every grant, concessional and blended financing should have an explicit investment component on health workforce education and employment.

## 4. Leverage the HRH Observatory for Annual Health Workforce Investment Dialogue

- ▶ Mutual accountability for investment commitment and improving efficiency

## CONCLUSION AND KEY MESSAGES

- ▶ **Mozambique is among the countries with the fastest progress in reducing the shortage of health, but also among the top countries with the highest relative shortage** and in the 55 countries needing Safeguards and Support.
- ▶ **The presidential One District One Hospital is critical for levelling up infrastructure to *lay a foundation for UHC and socio-economic growth.***
- ▶ **The infrastructural investments must be done together with workforce investments to double the workforce → requires *0.5% investment in training and at least a 43% increase in the investments to employ health workers.***
- ▶ **Without health workers, the infrastructure investment risk being wasted: Medicines do not prescribe themselves, vaccines do not administer themselves, and surgical theatres do not perform operations by themselves. **They need a health workers!****



# Obrigado

*"A situação da força de trabalho de hoje é o resultado de muitas decisões, grandes e pequenas, tomadas por muitas pessoas ou instituições diferentes nos últimos 20 anos"*  
**Tom Hall, 1998**



“Today's workforce situation is the result of many decisions, **big and small**, taken by many **different persons or institutions** over the past 20 years” **Tom Hall, 1998**



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