

**CONCLUSIONS OF THE 1ST SEMINAR ON IMPLEMENTATION OF WHO  
CODE OF CONDUCT: "MOVING THE ETHICAL HIRING OF HEALTH  
WORKERS FORWARD"  
MADRID, JUNE 17, 2011**

Strengthen health systems necessarily leads to be able to count with enough and motivated human resources. Achieving this objective requires reducing the inequities that drive professionals to emigrate to other countries or to avoid rural areas or the public health system. This is a huge effort that requires the commitment of all states, from the North and the South, to work towards strengthen health systems in countries of low and middle income, and work at developed countries for the self-sustainability.

In countries of origin the impact that migration of health professionals has on health systems is huge, and not only from the standpoint of quantitative but also in a qualitative way. It is important to consider the gross number of migrants leaving the health system of a country which may affect the overall response capacity of the health system to meet the needs of its population, but also the effects of the migration of professionals highly trained in very specific specialties that leaving left a gap difficult to fill.

To assess this impact and develop effective policies that limit inequalities behind RHS mobility is essential to get enough and adequate information. It is the mandate of WHO, PAHO and other WHO region to work within the states and the European Union (EU) to fill the current information deficit and, to make this possible it is required the support of all. This knowledge includes comparative studies of migration and national requirements for training and specialization, accreditation criteria and the establishment of registration systems that allow an adequate analysis of the health workforce situation, including migration.

At European level, efforts are being made to achieve self-sufficiency and discussed the need to deepen the collaboration between education and health to give consistent answers at quantitative and qualitative needs identified in the planning of health professionals, processes should be strengthened and improved permanently. Likewise, the records of professionals are also an essential element for planning RHS.

In Europe there is not only the problem of shortage of professionals, but in some countries the problem is their specialty and geographical distribution. Most EU countries are facing similar challenges so it highlights the need to learn together and implement strategies based on lessons learned and initial experiences as bilateral agreements.

Some of the examples shown during the seminar reflected, for example the difficulties countries are facing on rural retention of health professionals (as Portugal) or the need and good results of an improved human resources for health planning (Finland was able to decrease from 11 to 6% the shortage thanks to an increase of medical education since 2006).

The ratification of the Code of Practice is considered as a consequence of the dominant values present at the European context on the situation and problems analysed and a step forward in building a health workforce better distributed in a globalized World, a process where, according to health professionals, cooperation agencies can play an important role by supporting initiatives to strengthen the sector and specifically in the area of training and development human resources for health (HRH), and by promoting the signing of bilateral agreements and circular migration.

HRH planning, training and management, as well as the implementation of the WHO Code, need collaboration between different ministries and departments. During the event, it was stressed that collaboration among institutions is essential and, sometimes, one of the main challenges in the ethical international recruitment of HRH, being involved the Ministries of Health, Education, Labor and Foreign Affairs; and the agencies and institutions responsible of ensuring the provision of health care, do not always have an overview of the problems associated with the hiring of migrant professionals.

Regarding cooperation with middle-and low-income countries, the agencies reiterated their commitment with the comprehensive strengthening of health systems in which HRH are essential, as well as the promotion of compensations mechanisms based in adequate and updated information about migration flows. Attendees also stressed the need to not hire professionals from countries with a severe shortage of HRH.

The bilateral dialogue with partner countries is essential. Concerning compensation mechanisms to mitigate the impact of migration, there have developed some examples of pilot projects (bilateral agreements), and several countries have developed a varied menu of alternatives to input bilateral negotiation. The results of a Delphi study, developed in the framework of the European Action MPDC, can help to build up initiatives to ensure positive bi-directional impacts of HRH migration, which could be proposed to cooperation agencies in their action plans.

A strong commitment to the Code should be extended to NGOs, international organizations and global health initiatives, especially those focus on specific diseases, which have an important role in implementing best practices.

The ministerial representatives attending the seminar appreciate this initiative as a great experience for international cooperation with effective, visible results, proposing to continue this type of event to advance on the agenda of migration, considering present these findings in cooperation forums at European level.

Debates like this are essential in order to move forward towards full implementation of several European policies, such as the Council Conclusions on the EU Role in Global Health (May, 2010): *“in line with the commitments made on policy coherence for development (PCD) and in the framework of the PCD Work Programme, the Council calls on the Commission and the Member States to address the major aspects that influence global health in the five priority areas of trade and financing, migration, security, food security and climate change”* and, particularly *“on migration; encourage progress towards compliance with the agreed commitments of the EU Strategy for Action on the Crisis in Human Resources for Health in Developing Countries, and contribute to the WHA Code of practice on the international recruitment of health personnel”*.