Item 15.1 Strengthening WHO preparedness for and response to health emergencies

Before I start reading the constituency statement, I would like to read all the names of the NSAs co-signing the statement, including:

- FDI World Dental Federation
- FIP International Pharmaceutical Federation
- ICN International Council of Nurses
- WMA World Medical Association
- World Physiotherapy
- Women in Global Health
- International Association for Hospice and Palliative Care
- International Society of Paediatric Oncology (SIOP)

I am speaking on behalf of the International Council of Nurses, which is part of the World Health Professions Alliance.

WHPA's recent report[1] highlights the evidence and knowledge gathered by its five organizations on the impact of the pandemic on health professionals worldwide. The report provides profound evidence of alarming occupational risks and pervasive workload challenges faced by the health workforce, particularly women – who make up 70% of the health workforce and 90% of frontline health workers - and highlights the severe consequences they faced during the pandemic. Another report[2] also endorsed by the WHPA detailed the life-altering implications of workforce disruptions in paediatric oncology and proposed targeted recommendations.

We emphasize the urgent need to protect and safeguard health professionals and thus to improve the resilience of health systems, in health emergency planning and response. The health workforce is the fundamental resource that bridges health systems from response to recovery to delivery of essential health services and public health functions in the pursuit of UHC, global health security, and WHO cancer initiatives.

We call on Member States to strengthen mental health and psychosocial support for health professionals, during and after pandemics and emergency situations. Properly responding to this need means providing timely access to care for individuals in need,
but also organizational interventions that reduce risk factors, such as improving working conditions, ensuring appropriate training in anticipation of future health emergencies, including palliative care and nursing, and respecting health professionals' rights. Safe and supportive working environments also ensure the retention of qualified health workers to maximize investments made in health education and training.

Lastly, we urge Member States to curate and invest in systemic strategies to concretely address chronic violence in health care settings – particularly that faced by women health workers - and ensure health professionals’ participation in national planning, and policy and finance decision-making – with a particular focus on women who are historically excluded from decision-making -which can ensure that on-the-ground expertise informs decisions and ultimately benefits both patients and health systems.

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