

# Health human resources in the era of the SDGs

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More than **3.5 million deaths** occur every year from environmental risk factors such as air pollution and climate change









**550 million people** in the Western Pacific Region still do not have access to improved sanitation





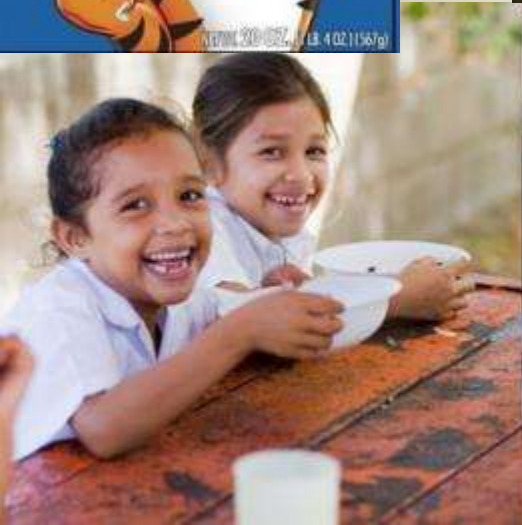
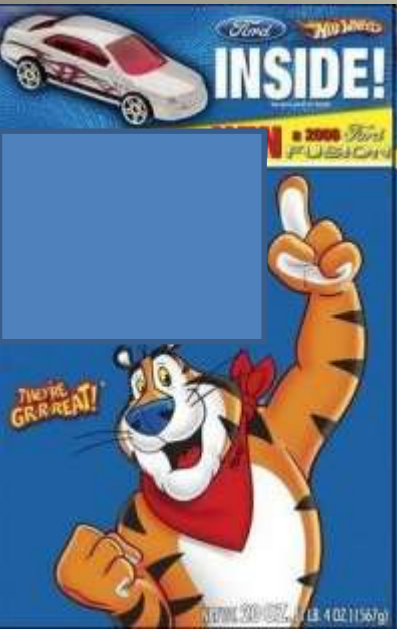
ชชชชชช  
ในความไม่สะอาด  
กำลังซ่อมแซม  
และปรับปรุงงาน  
ตลอดสมัยนี้

# New, unsustainable and distorted food and eating systems

## Easy access to calorie-rich, nutrient-poor food



# Children can recognize hundreds of brands





SugarStacks.com

# Motorization



- 2002



- 2010



**Over 90% of deaths** from road traffic injuries occur in low- and middle-income countries, in 2013 there were **323 296 deaths** from road traffic injuries Region

# One out of 8 deaths in the world is a result of air pollution (2012)



<http://guardianlv.com/2013/10/dutch-artist-daan-roosegaarde-plans-to-vacuum-up-beijings-air-pollution/>

1 out of 3 adults  
has high blood pressure





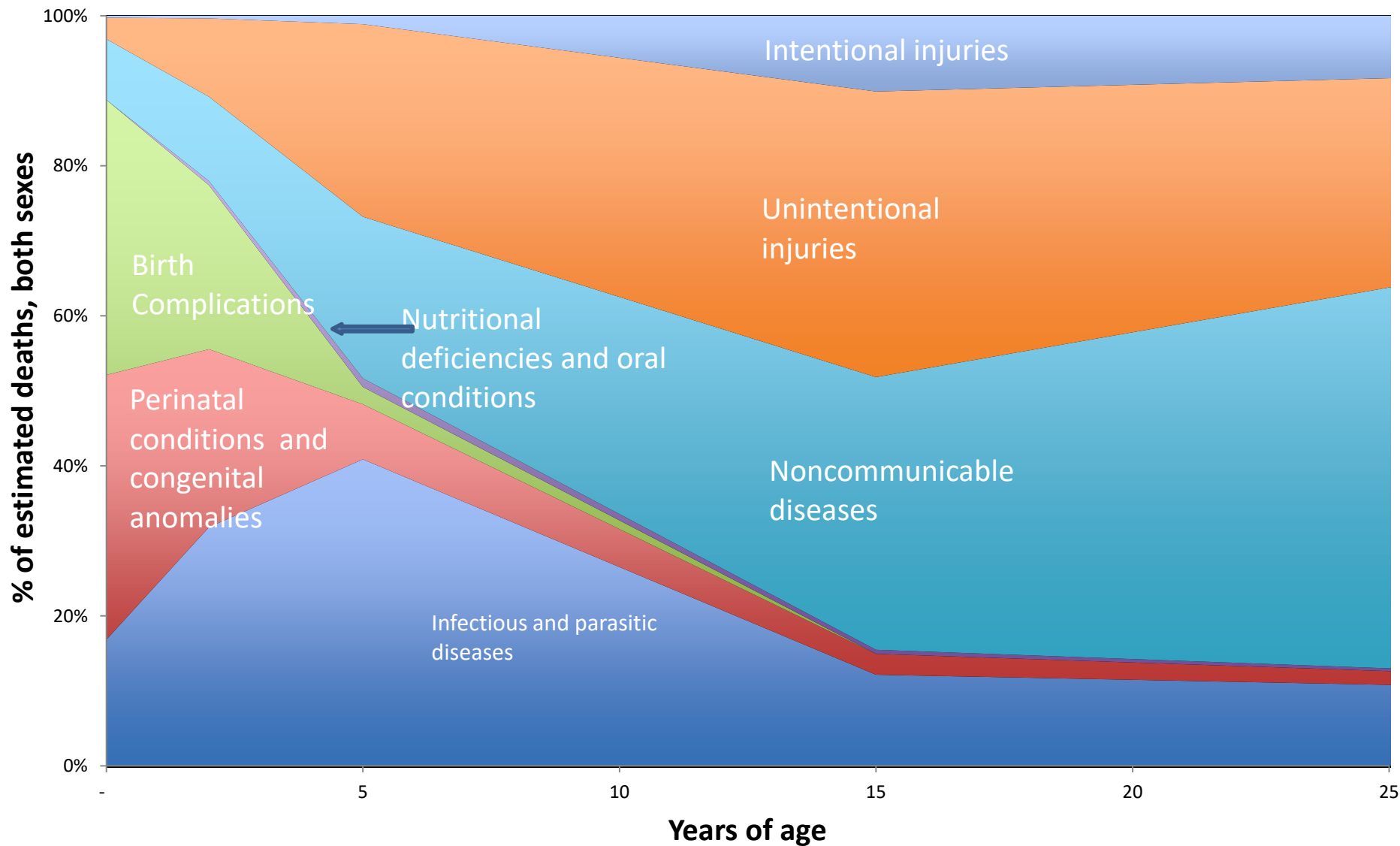
Globally, 347 million people  
have diabetes



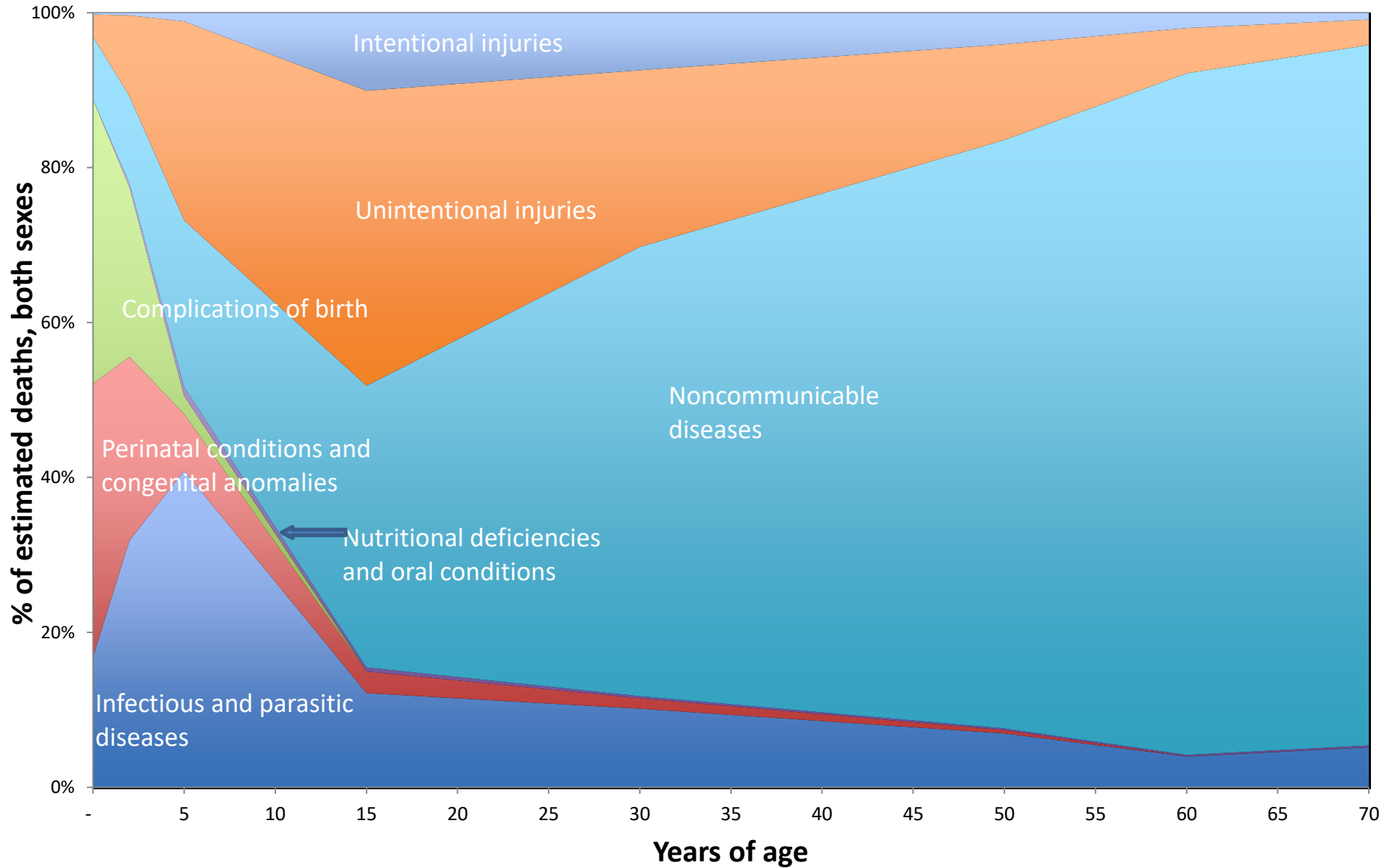
Half of all men smoke.  
Half of all women and children are regularly  
exposed to second hand smoke.



# Causes of death through the life-course in the Western Pacific (2012)



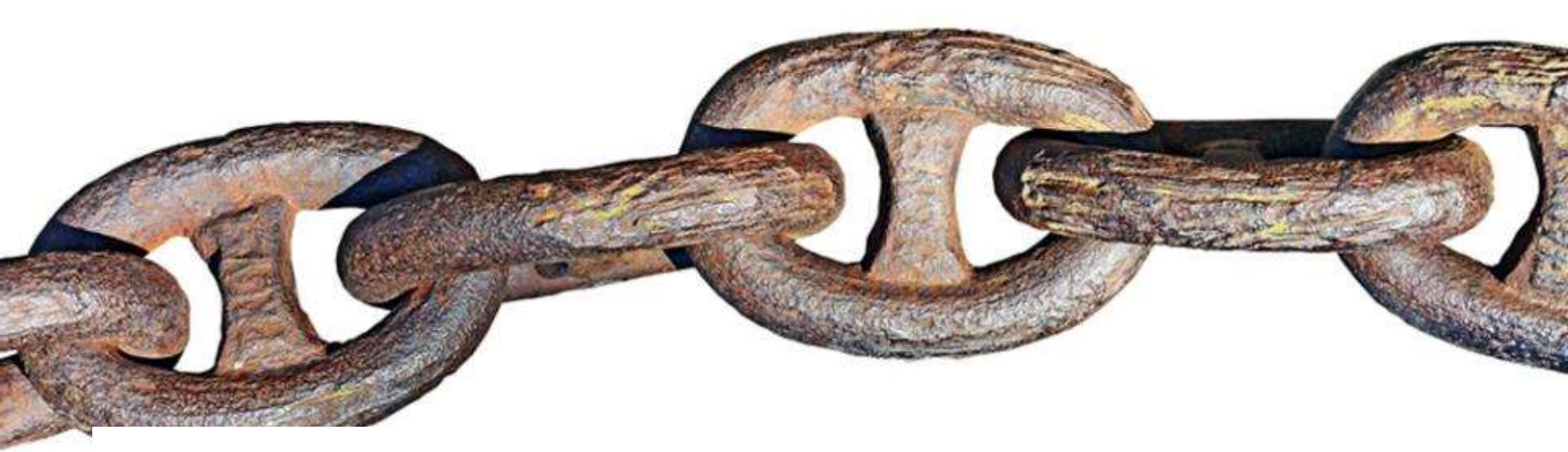
# Causes of death through the life-course in the Western Pacific (2012)





What chains us to poor health?





**Unhealthy behaviours  
and unsafe environments**





**Can we break these chains through better  
human health resource strategies?**



Health human resource  
development needs to be reviewed  
in the context of global issues and  
the global development agenda.





**Over 2 billion** people are active on social media globally, the Region has **over 1 billion** internet users



*A set of seventeen aspirational goals, the Sustainable Development Goals were adapted at the UN Sustainable Development Summit on 25-27 September 2015*

# TRANSFORMING OUR WORLD

THE 2030 AGENDA FOR  
SUSTAINABLE DEVELOPMENT





# SUSTAINABLE DEVELOPMENT GOALS

1 NO POVERTY



2 ZERO HUNGER



3 GOOD HEALTH AND WELL-BEING



4 QUALITY EDUCATION



5 GENDER EQUALITY



6 CLEAN WATER AND SANITATION



7 AFFORDABLE AND CLEAN ENERGY



8 DECENT WORK AND ECONOMIC GROWTH



9 INDUSTRY, INNOVATION AND INFRASTRUCTURE



10 REDUCED INEQUALITIES



11 SUSTAINABLE CITIES AND COMMUNITIES



12 RESPONSIBLE CONSUMPTION AND PRODUCTION



13 CLIMATE ACTION



14 LIFE BELOW WATER



15 LIFE ON LAND



16 PEACE, JUSTICE AND STRONG INSTITUTIONS



17 PARTNERSHIPS FOR THE GOALS



SUSTAINABLE DEVELOPMENT GOALS

# Indicators under Goal 3 of the SDGs

- Maternal deaths
- Proportion of births attended by skilled health personnel
- Under-5 mortality rate
- Neonatal mortality rate
- Number of new HIV infections
- Tuberculosis incidence
- Malaria incidence

# Indicators under Goal 3 of the SDGs

- New hepatitis cases
- Number of people needing interventions for NTDs
- Mortality of CVD, cancer, diabetes or CRD
- Suicide mortality rate
- Coverage of treatment for substance abuse disorders
- Harmful use of alcohol

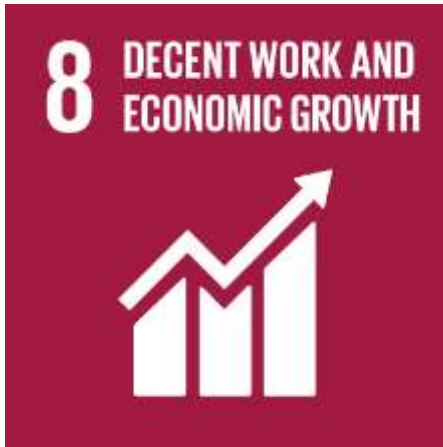
# Indicators under Goal 3 of the SDGs

- Number of road traffic fatal injury deaths
- % women FP needs met and satisfied
- Adolescent birth rate
- Coverage of tracer interventions for UHC
- Fraction of population protected against catastrophic out-of-pocket expenditure
- Mortality rate from air pollution
- Mortality rate from chemicals, water, soil pollution and contamination

# Indicators under Goal 3 of the SDGs

- Tobacco use prevalence
- Proportion of population with access to affordable medicines and vaccines
- Net ODA to medical research and basic health sectors
- Healthworker density and distribution
- Percentage of attributes of 13 core capacities for health emergencies/global health risks





# Health in other SDGs

# Who wants to die before their time?

In the Western Pacific Region, one in three women who die from noncommunicable disease are below the age of 70.

**ACTION:** Health professionals must proactively focus on services to reduce premature mortality, and not just react to cases and conditions that are presented in health facilities.



# Who does not want a smoke free world?

In most countries three out of four smokers agree that smoking should be banned in all public places.

**ACTION:** Health professionals underestimate their power as advocates and their ability to influence policies that in turn reduce behavioural risks to health .through environmental interventions  
Health professionals need to be skilled up for advocacy for policy.



# Who is not confused about nutrition?

About half of all child deaths under 5 are related to undernutrition. While one in four adults are overweight.

**ACTION:** Health professionals should actively provide information on nutrition regardless of their area of specialization – they need to engage in public action for providing the requisites for a healthy and decent life: water, food, sanitation, shelter.



# Who will be spared from poor air quality?

One out of eight deaths in the world is from poor air quality. Among the global deaths from air pollution, most occur in the Western Pacific Region.

**ACTION:** Health professionals need to be aware of environmental causes of disease, properly manage these and actively advocate for environmental protection.



# How can we be healthy if we are not safe?

Drowning is the leading cause of death for children aged 5-14 years. Road traffic injuries are the leading cause of death among people, aged 15-49 years. One in four women in the Western Pacific Region experienced violence at the hands of their partner.

**ACTION:** Health professionals should be aware of the heightened risks for injury and the pervasiveness of violence in society. Beyond advancing skills in trauma, there is a need to advocate and educate the public on safety as a health outcome in homes, roads and communities.



# Who wants to be a prisoner in their own home?

Around the world over a billion people live with some form of disability. Disability adversely affects an individual's level of functioning for activities of daily living. As a result, people with disabilities often do not receive the health and rehabilitation care they require.

**ACTION: Health professionals need to go beyond treatment of disease - not an end-point for chronic conditions – and include provision of information and services to meet rehabilitation needs of all patients.**

# Why do we value sight only when it's lost?

90 million people in the Western Pacific Region are visually impaired, including 10 million who are blind. Eight out of 10 of these cases could have been prevented or treated.

**ACTION:** Health professionals must have a holistic view of health needs of patients with consideration of quality of life at all stages of the life-course.



# Who does not have an unmet mental health need?

Every single day, 500 people commit suicide, and more than 100 million people continue to suffer from mental disorders. Meanwhile, spending on mental health is less than US\$0.25 per person per year in low-income countries.

**ACTION:** Given the huge gap in human resources for mental health and the tremendous demand for services, all health workers must have knowledge and skills in active listening, psychological first aid and counselling.



# What could be simpler and more beneficial than a mother's first embrace?

Every two minutes a newborn infant dies in the Western Pacific Region. Many of these deaths can be prevented through simple but lifesaving interventions such as skin-to-skin contact with the mother immediately after birth.

**ACTION:** Health workers must be skilled in delivering respectful services cognizant of the psycho-social needs of families.



# Healthy population



# HUMAN RESOURCES

Only 1% of the global health workforce works in mental health

**1%**

of those 1%:

**43% NURSES**

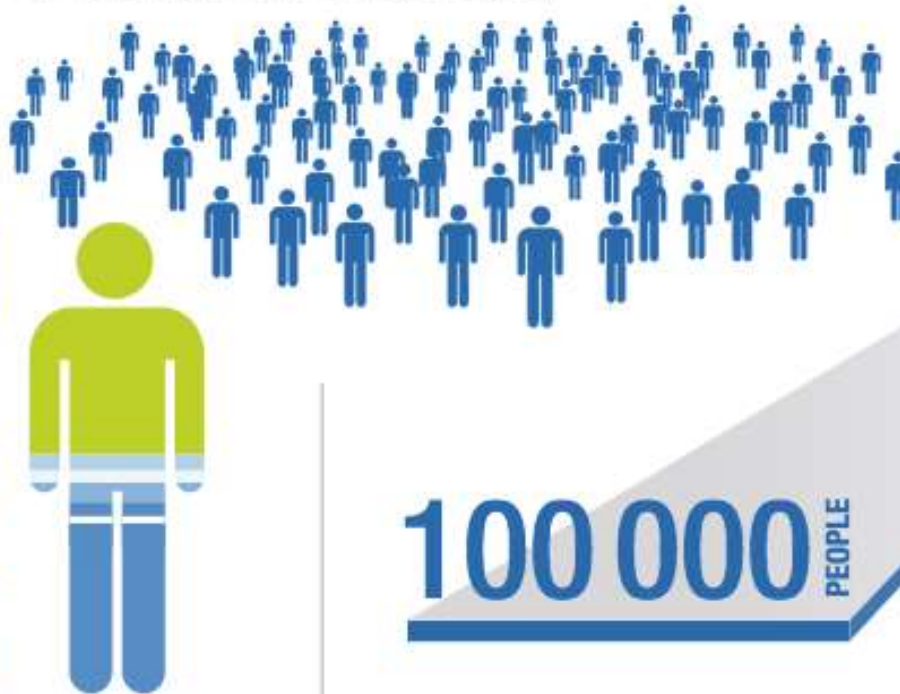
**8% PSYCHIATRISTS**

**3% SOCIAL WORKERS**

**7% PSYCHOLOGISTS**

**1.5% OCCUPATIONAL THERAPISTS**

**33% OTHER**



**100 000** PEOPLE

**1**

**45%**

45% of the world's population live in a country with less than one psychiatrist for 100 000 people

Strengthening Mental Health Programmes in the Western Pacific

DIVISION OF NCD AND HEALTH THROUGH THE LIFE COURSE



# Thinking aloud: strategic action points for the Philippines

## Full service for the 20 million poorest Filipinos

Expand the benefit package of PhilHealth to address NCD risk factors through basic drugs and medicines and rehabilitation services

Free services for the poor in all government hospitals

Reintegrate the fragmented system when federalism kicks in

## Upgraded public health protection for all Filipinos

Philippine Centers for Disease Control and Prevention linked to the Quarantine Services

International Health Alert system with health attaches in countries with many OFWs

Health promotion agency

Manufacture our own vaccines

## The Philippines as the ASEAN leader in health emergencies

Establish an ASEAN training center for disasters and health emergencies

Establish 5 Field Medical Teams with full capacity to respond to emergencies in the Philippines and the ASEAN

# The way forward

- Higher education for health professionals should be in lock-step with the Sustainable Development Goals as a context for health and development;
- Cross-cutting knowledge areas need to be urgently included in pre and post-service training: nutrition, psycho-social health, safety;
- The speed of change cannot be met without involving health professionals in methods that put emphasis on empowering the public: community and family participation in health decisions.



**DIVISION OF NCD AND  
HEALTH THROUGH THE LIFE-COURSE**

**Create Health.**