We applaud WHO for taking a transformative approach to resource mobilization for its 13th GPW. We look forward to supporting this agenda by helping to demonstrate impact, cost-effectiveness, and value-for-money. We also support attention to equity in health services. Fast-tracking GPW 13 is crucial and WHO must “act with a sense of urgency, scale, and quality” as “the health of the world’s people cannot wait.”

IntraHealth, on behalf of the 42-member Frontline Health Workers Coalition, commends the WHO for its work to address acute gaps in access to trained and supported health workers. The Dublin Declaration and Youth Call to Action at the WHO-led Fourth Global Forum on Human Resources for Health in November 2017 underscored WHO’s pledge to ensure the world’s health workers are well prepared and supported.

However, the draft GPW 13 does not address the massive efforts to strengthen the global health workforce needed to achieve the SDGs and the GPW’s “triple billion” goals of advancing UHC, addressing health emergencies, and promoting healthier populations.

We have extensive evidence linking expanded access to trained and supported health workers to progress toward UHC, global health security, and healthy populations. The Workforce 2030 Strategy and the High-Level Commission on Health Employment and Economic Growth make a striking case that investment in health employment is a potential boon not only for improving health status, but also for economic prosperity.

Yet, the draft GPW 13 does not mention health workforce until paragraph 41 and speaks to the potential cost of the health workforce when evidence shows there is a 9-to-1 economic return on investments in health employment.

We urge embedding access to trained and supported health workers in the key thematic areas in GPW 13 and amending the paragraph on health workforce to emphasize the triple return on investment in health employment of improved health outcomes, global health security, and economic growth.