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Incorporating the health and care workforce into the renewed commitment to UHC through the UHC Knowledge Hub

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Author Comments:	Dear Lancet Editors, reading through the latest WHO/World Bank report on UHC we appreciate the attention that The Lancet has brought to the UHC Knowledge Hub as a valuable resource for countries' efforts in progressing towards UHC. We support your effort and the Hub, and want to ensure that health workforce issues - integral to UHC and care quality - are incorporated from the outset. The health and care workforce in many countries is a big component of delivering services within a health system, but are often invisibilized in discussions about service coverage and financial hardship used currently as the metrics for UHC monitoring. Our correspondence builds on the Satsuki paper with a focused discussion of the most salient and timely health workforce issues as they relate to UHC. We hope you will agree.

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Incorporating the health and care workforce into the renewed commitment to UHC through the UHC Knowledge Hub

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We welcome Satsuki, *et al*., and Japan's leadership in launching the UHC Knowledge Hub and its renewed commitment to universal health coverage (UHC)[1]. The proposed activities are needed to address the modest, uneven and insufficient progress towards UHC, even as countries intensify efforts to expand access to quality health care without financial hardship.[2]. Large disparities in reductions in financial hardship persist between high- and low-income countries.[3] Stark differences also remain in service coverage, care quality and health workforce density. The health and care workforce constitute a portion of health system costs, but without investment in sufficient numbers and distribution of health and care workers to deliver quality care, progress towards UHC may stall or reverse. A healthy health workforce could eliminate an estimated 7% of global disease burden and add $1.1 trillion to the global economy.[4] The long-term sustainability of health and care systems will hinge on how its workforce capacity, capability, and deployment are understood and optimised.[5]

WHO projects that global health workforce shortages will worsen towards 2030.[6] In countries where good workforce data exist, the health workforce modelling used for planning tends to rely on workforce supply and patient service utilisation data.[7,8] Supply and utilisation statistics also underpin service coverage metrics, but deliver a skewed picture of population need including underestimates dues to unmet health and care needs[9]. These issues are not new[10], but the new UHC Knowledge Hub offers a timely opportunity to address these issues by embedding health workforce intelligence into financing and delivering Universal Health Coverage.[11]

Competing Interests

None.

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