

## What is the WHO Global Code of Practice?

The <u>WHO Global Code of Practice on the International Recruitment of Health Personnel</u> ("the Code"), adopted by the 63<sup>rd</sup> World Health Assembly in 2010, is a voluntary instrument that articulates the ethical principles on international recruitment and migration of health workers, in a way that strengthens the health systems of developing countries.

Objective	<ul> <li>Establish ethical principles and practices for international recruitment of health personnel.</li> <li>Serve as reference for the legal/institutional framework for international health personnel recruitment.</li> <li>Provide guidance for bilateral agreements and other international legal instruments.</li> <li>Advance cooperation with a particular focus on developing countries.</li> </ul>
Nature and Scope	• The Code is voluntary and global in scope.
Guiding Principles	<ul> <li>International migration of health personnel can contribute to strengthening health systems and safeguarding health personnel rights, if recruitment is properly managed and negative effects are mitigated.</li> <li>International health personnel recruitment should be conducted in accordance with the principles of transparency, fairness and health system sustainability in developing countries.</li> <li>Member States should consider the right to health of source countries' populations and individual rights of health personnel.</li> <li>The Code does not limit the freedom of health personnel, in accordance with applicable laws, to migrate to countries that wish to admit and employ them.</li> <li>Developed countries should provide technical and financial assistance for health systems strengthening.</li> <li>Member States should facilitate circular migration to the benefit of both source and destination countries.</li> </ul>
Responsibilities, rights and recruitment practices	<ul> <li>Stakeholders should ensure fair recruitment and equal treatment practices of migrant health workers.</li> <li>Recruiters and employers should not seek to recruit health workers with existing domestic contractual obligations.</li> </ul>
Health workforce development and health systems sustainability	<ul> <li>Active recruitment from countries facing critical shortage of health workers should be discouraged.</li> <li>Member States should use the Code as a guide when entering into bilateral, regional, and multilateral arrangements to promote international cooperation and coordination.</li> <li>All countries should strive to meet the health service needs through domestic human resources.</li> </ul>
Data gathering and research	• Member States should strengthen their human resources for health information systems (HRHIS), including health personnel migration, and use the data to inform health workforce policies and plans.
Information exchange	• Member States should designate a national authority for information exchange on the Code and migration.
Code implementation	<ul> <li>Member States are encouraged to publicize, implement, and incorporate the Code into applicable laws and policies, in collaboration with stakeholders.</li> <li>Member States should promote Code principles among private recruitment agencies, assess the magnitude of active recruitment from countries facing health workforce vulnerabilities, and promote good practices among recruitment agencies.</li> </ul>
Monitoring and institutional arrangements	<ul> <li>Member States should report on the application of the Code and associated challenges.</li> <li>The WHO Director-General should periodically report to the World Health Assembly on Code implementation.</li> <li>The World Health Assembly should periodically review the Code's relevance and effectiveness in achieving its stated objectives and update it as required.</li> </ul>
Partnerships, technical collaboration and financial support	• International entities, financial and development institutions, and other relevant organizations are encouraged to provide technical and financial support for health system strengthening and health workforce development in developing countries, countries with economies in transition, those that are facing critical health workforce shortages and/or have limited capacity to implement the Code.