People at the forefront in fighting COVID-19
The Physician Workforce During the Time of the Pandemic

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HEALTH WORKFORCE UNDER EXTREME STRESS

Challenges

• Material resource shortages (beds, medicines, PPE, machinery)
• Human resource shortages (specialized intensive care health professionals)
• Stigma leading to social exclusion or even psychological or physical violence incl. murder
• A High degree of illness and death among physicians
• Psychological stress leading to mental health problems
(RE-) ACTION

• In countries outside Asia, pandemic preparedness was only on paper and even that was incomplete:
  • No deployment and reserve strategies
  • No triage preparedness
  • Active reduction of reserve capacities
  • No real science-based testing strategy to analyse the epidemic
• Late reaction to the challenges although visible at the latest since the middle of January
• Random responses towards the deployment of (young) doctors, final year students, medical education
## Conclusion

- Our health systems have been organised for cost efficiency not for functional efficiency
- Health care systems have been integrated in delivery and supply chains which followed principles of cost-optimization not of health protection, social service, not to speak about humanity or dignity
- This investment failure has not only cost us lives, but it has also produced the worst economic decline since World War II
- Deficits will not be fixed by rescoping measures, but by better pandemic and disaster preparedness including the necessary investments in health care structures and prevention
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