



**Twelfth Meeting of the Small Countries Initiative
High Level Meeting**

From Scarcity to Sustainability: Can Small Nations Lead Workforce Innovations?

Wellton Riverside Spa Hotel, 11. Novembra krastmala 33, Riga, Latvia

4 – 5 June, 2026

Draft Scope and purpose

Background

The **Small Countries Initiative (SCI)**, established in 2013, is a network of 12 European countries with 2 million or less inhabitants: Andorra, Cyprus, Estonia, Iceland, Latvia, Luxembourg, Malta, Monaco, Montenegro, North Macedonia, San Marino and Slovenia.

The forthcoming SCI meeting, jointly organized by the Ministry of Health of Latvia and WHO Regional Office for Europe, builds on previous SCI commitments, ministerial statements, priorities as set out in the **Second WHO European Programme of Work 2026–2030 (EPW2)**, and the **Framework for Action on the Health and Care Workforce in the WHO European Region 2023–2030**.

Context Setting

Across the WHO European Region, the healthcare workforce (HCWF) is now the decisive factor determining whether health systems can meet rising citizen needs, protect populations during crises, and sustain essential services.

Small countries face a convergence of pressures that threaten their ability to protect population health and sustain a resilient healthcare workforce, including intensifying health security risks, dual population and workforce ageing, persistent shortages and uneven distribution, and destabilizing migration and public–private labour flows. These challenges are compounded by limited labour markets, constrained training capacity and underdeveloped workforce optimization strategies, leaving systems highly exposed to external shocks and increasingly strained in maintaining equitable, continuous and secure essential services.

The SCI meeting provides for a dedicated high-level policy dialogue for member countries to advance strategic action on Human Resources for Health (HRH), recognizing the health workforce as a critical foundation for resilient, secure and people-centred health systems.

In summary, the meeting will enable SCI countries to reflect on shared challenges and identify collective and country-specific solutions. Particular attention will be given to emerging pressures affecting HCWF, including geopolitical and health security risks, dual aging, mental health and well-being, workforce mobility and migration, nursing and advanced practice roles, and leveraging digital technologies to optimize the capability of the broader workforce.

When Small Leads, Others Follow: Scalable Pathways to Health System Resilience

The two-day SCI meeting is structured to first build a shared understanding of the pressures facing small countries and then move decisively toward practical, scalable solutions. Day one will focus on examining the core challenges to health system security, sustainability and workforce resilience, drawing on the unique agility of small countries as early-warning, rapidly adapting health systems. Second half of day one and day two will shift toward action, showcasing innovative approaches, peer learning and coordinated strategies that small countries can champion and larger countries can later adopt. Together, the meeting becomes a platform for collective problem-solving, deeper ministerial collaboration, and renewed momentum behind regional workforce and health system transformation.

Further details on core health system challenges facing small countries, along with the aim, objectives and thematic areas that will guide the upcoming SCI meeting are provided at **Annex**.

Annex - Health System Challenges, Aim, Objectives and Thematic Areas to be covered at the SCI

This annex provides a consolidated overview of the core health system challenges facing small countries, along with the rationale, aim, objectives and thematic areas that will guide the upcoming SCI meeting. It outlines the pressures shaping health workforce sustainability, the implications for health security and service continuity, and the opportunities for transformation through optimized workforce policies, integrated healthcare models and digital innovation. The material that follows is intended to ground the meeting's discussions in a shared level of understanding, clarify the strategic focus for SCI members and support.

1.1 The challenges facing SCI Countries

Small countries are confronting a convergence of pressures that directly affect their ability to protect population health, maintain essential services, and sustain a resilient healthcare workforce.

Health security threats are intensifying, driven by geopolitical instability, pandemics, cyberattacks, climate-related events, and supply chain disruptions. With limited surge capacity and smaller professional pools, small countries face heightened vulnerability. Their health workforce remains the core of national health security — yet also the most exposed asset during crises.

Population ageing is reshaping demand and shrinking supply simultaneously. Older citizens require more continuous, complex and multidisciplinary care, while the healthcare workforce is ageing even faster, particularly in rural and remote regions. This dual ageing dynamic threatens service continuity, increases dependency ratios and places sustained pressure on already stretched systems.

Workforce shortages and uneven distribution undermine resilience. Urbanization continues to draw younger professionals toward major cities, leaving rural and peripheral areas with ageing staff, limited recruitment pipelines, and reduced capacity to modernize services. These patterns widen inequities and weaken national preparedness.

Public–private imbalances in the movement of healthcare workers is a compelling challenge. For example, this can sometimes be a factor that drains capacity from essential public services, weakening surge readiness, continuity of care, and equitable access. Without coordinated governance, these shifts distort labour markets, inflate costs, and threaten the long-term security and sustainability of health systems.

Migration and mobility pressures destabilize workforce supply. Small countries are disproportionately affected by outward migration and international recruitment competition, complicating long-term planning and increasing reliance on temporary or foreign trained staff.

Workforce optimization remains insufficiently developed. Opportunities to strengthen resilience through enabling functions — such as leveraging digital technologies, skills mix redesign, advanced practice roles, patient involvement and integrated health-social care models — are not yet fully realized. Adoption is uneven; competencies vary, and systems are not consistently aligned to support modern, efficient and secure models of care.

Structural vulnerabilities amplify all of these challenges. Limited labour markets, constrained training capacity and high exposure to external shocks make it harder for small countries to absorb disruptions, maintain essential services, and ensure long term workforce sustainability.

1.2 SCI meeting rationale

Given the challenges referred to, small countries are facing a convergence of pressures that directly threaten health security and the ability to meet the healthcare needs of citizens in the context of an ageing population. These challenges are directly aligned with the priorities of the **Second WHO European Programme of Work 2026–2030** (EPW2), which places strong emphasis on building resilient health systems, protecting populations in emergencies, and ensuring that no one is left behind, a key commitment as **affirmed by SCI in their contribution to implementation of EPW2**.

This aligns closely with previous SCI commitments, including the recognition that responding effectively to multiplying, complex and multidimensional threats demand stronger health governance, as well as the shared commitment to prioritize health workforce planning and strengthen national supply capabilities, as reflected in the **Montenegro SCI statement**.

1.3 SCI meeting aim

To strengthen the health security, sustainability and resilience of small countries by accelerating healthcare workforce transformation in response to demographic change, dual ageing, and evolving population needs. The meeting will support SCI countries to develop future ready models of healthcare by enhancing workforce policies, governance and planning; advancing skill mix optimization and integrated care; and leveraging enabling functions such as digital technologies, nursing leadership and patient involvement. Through shared understanding, mutual learning and coordinated action, SCI members will generate scalable approaches that contribute to regional priorities under the EPW2 and the Framework for Action on the Health and Care Workforce in the WHO European Region 2023–2030.

1.4 SCI meeting objectives

- i. **Review progress across SCI countries** in strengthening healthcare workforce strategies, governance and implementation in line with regional and global commitments.
- ii. **Build a shared understanding of the core pressures** facing small countries — including health security threats, dual ageing, workforce shortages, regional workforce disparities and migration dynamics — and their implications for meeting population needs.
- iii. **Strengthen health system security and resilience** by identifying actions that enhance surge capacity, protect health workers, and ensure continuity of essential services during shocks.
- iv. **Assess the impact of demographic change and urbanization** on service demand, workforce sustainability and regional equity, and identify strategies to maintain access across all areas.
- v. **Advance workforce optimization** by redesigning services, leveraging digital technologies (including the use of AI), improving skills mix, including in nursing advanced practice, expanding multidisciplinary teams and enabling more integrated models of health and social care.
- vi. **Identify ways in which to enhance the capability of the existing workforce** through leveraging digital tools, including AI, strengthened competencies, modernized education, and patient involvement to support more efficient, coordinated and future-ready care.
- vii. **Promote mental health and wellbeing support** as essential to workforce retention, performance and long-term sustainability.
- viii. **Strengthen approaches to managing migration and mobility**, including ethical recruitment, retention strategies and regional cooperation to stabilize workforce supply.
- ix. **Generate scalable insights and transferable models** that larger countries can adapt, positioning SCI members as agile innovators in health system transformation.

1.5 Thematic focus areas

- i. **Health workforce and security** – understanding the role of HRH in preparedness, response and recovery, including planning surge capacity and protection of health workers and maintenance of essential services during crises.
- ii. **Demographic change, aging and urbanization** – addressing the dual challenge of an aging health workforce and the concentration of younger professionals in urban centres, and identifying strategies to ensure equitable workforce distribution, sustain regional services and support modernization across all areas.
- iii. **Optimizing the capability of the existing healthcare workforce** - by strengthening skills mix, expanding nursing leadership and advanced practice roles, enhancing interprofessional collaboration, leveraging digital technologies and deepening integration between health care. This combined approach enables more coordinated, efficient and sustainable models of care that can meet long term population needs
- iv. **Retaining the health workforce, especially in rural areas and in the public sector** – by improving working conditions of healthcare workers, in terms of reducing long working hours, reducing the number of night shifts, improving job flexibility, providing a fair remuneration among others. Also, by providing specific financial and non-financial incentives for health workers to work in rural an
- v. **Mental health and well-being of the health workforce** – policies and interventions to prevent burnout, support psychosocial resilience and improve retention.
- vi. **Health workforce international migration** – managing mobility in a manner that is sustainable, ethical and aligned with national and regional workforce needs.

1.6 Expected SCI meeting outcomes

- i. **Adoption of an agreed SCI member state statement** reflecting shared priorities for strengthening health security, workforce sustainability and system resilience across SCI countries.
- ii. **A consolidated understanding of the key pressures** facing small countries — including health security threats, dual ageing, workforce shortages, geographic imbalances and migration dynamics — and the policy options available to address them.
- iii. **Identification of good practices and scalable innovations** in workforce optimization, service redesign, skills mix transformation, advanced nursing roles, digital enablement and integrated healthcare models that can be adapted across SCI contexts and inform larger countries.

- iv. **Clear national and regional follow-up actions** to accelerate implementation of the Framework for Action on the Health and Care Workforce (2023–2030) and priority areas under EPW2 (2026–2030).
- v. **Strengthened collaboration between WHO/Europe and SCI members** on workforce planning, capability building, investment and governance reforms that enhance resilience and preparedness.
- vi. **Renewed political commitment** to building a resilient, supported and future-ready healthcare workforce capable of sustaining essential services, protecting population health, and advancing EPW2 priorities beyond 2030.