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COMMENTARY

Health workforce under pressure—How do we sustain our future?

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The health workforce is tired! The workload feels like it is evergrowing, to the point of seeming increasingly difficult to provide the highest standards of patient care.¹ Given the crucial contribution of health care staff to the education of students and postgraduate trainees, this can easily undermine the sustainability of the health workforce. The situation is tenuous, making it fitting that this special issue on 'Embracing the future' includes a clear theme of sustainability,^{2,3} which can be defined as the ability 'to continue over a period of time'.⁴

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In a previous commentary, we explored the role health professions educators play in developing the health workforce, highlighting how the health professions contribute to the United Nations Sustainable Development Goals (SDGs) across all three pillars of *environmental*, *economic* and *social sustainability*.⁵ Here, we explore these distinct but interrelated aspects of sustainability, their relevance to health professions education and their implications for the sustainability of health professions educators themselves.

Health care delivery has a complex relationship with the SDGs, and the potential for imbalance is clear. In fact, the drive for balance in one aspect of sustainability can simultaneously create imbalance in another area. For example, single-use products are commonplace in efforts to achieve infection control but, to reduce waste and improve *environmental sustainability*, additional product and labour costs may be incurred by health care institutions, thereby hampering their *economic sustainability*. The impact not only is real but also can contribute to a vicious cycle: Health care delivery contributes 4.4% to global greenhouse gas emissions,⁶ negatively impacting not just climate, but health itself, through pollution.⁷

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Our education practices induce similar dilemmas. For example, embedding teaching about *environmental sustainability* into curricula could reduce the time spent on other important topics, or increase the overall cost of curriculum delivery, thereby impacting the *economic sustainability* of our training programs and, in turn, the workforce. As a result, while both universities and health care employers have begun to recognise the impact of their organisations on *environmental sustainability*, most health professions graduates remain insufficiently equipped for their roles in achieving the ambitious targets set out by the SDGs.⁸

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Again, the cycle can be vicious. Health professions educators must educate both students and qualified staff to develop a health workforce that can tackle these complex problems.⁸ They themselves, however, often lack the knowledge and skills required to integrate sustainability into their curriculum and educational practice. With strained workloads, it can be hard for educators to find the motivation to upskill in the ways required, especially if there are ever-greater numbers of health workers to be educated.

No wonder the health workforce, including health professions educators, feel tired! So, what can we do about it? To achieve *health workforce sustainability* that contributes to rather than opposes *environmental sustainability*, *social sustainability* or *economic sustainability*, it is important to invest in health professions education and its educators. What might this look like? One recent example, from the United Kingdom, is the National Health Service's Long Term Workforce Plan, which highlights the need to 'Train, Retain and Reform'.⁹ It outlines plans to conduct 'the biggest recruitment drive in health service history'.⁹ While these are yet to be implemented, it is encouraging to see a focus on education and retention, and the recognition that new approaches to education will be needed. This is reinforced by Hirsh et al., who identify the need to 'attract, sustain, and retain' clinical teachers.³

Of course, each of us can only enact change in areas where we have influence. The coupling of responsibility for *health workforce sustainability* with educators' experience of eco-anxiety in relation to *environmental sustainability* can feel overwhelming and result in inaction. Supports exist, however, including a recent paper that developed a conceptual framework for dietitians that provides a pathway to planetary health (*environmental, economic* and *social sustainability*). The framework, which seems translatable across health professions, identified Agency, Action, Ascension, Alliance and Allyship, Advocacy and Activism and Alignment as key attributes and skills.¹⁰

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Practical approaches aligned to the framework components are now needed, and various papers included in this issue provide great examples of how we might move forward. To that end, Naidu and Ramani discuss the importance of integrating the three pillars of the SDGs through a decolonial perspective to promote equitable global sustainability. Their paper demonstrates the authors' alignment with the key skills and attributes listed above, while also calling on other health professionals to do the same.² Hirsh et al., similarly, discuss self-determination theory in a way that reflects the components of Agency, Advocacy and Action to highlight the importance of aligning individual and institutional values for health profession educator sustainability.3 While we recognise that the transformational change required to achieve environmental, social and economic sustainability is complex, especially when combined with the challenges of sustainability of the health workforce and educators, MacKenzie-Shalders et al.'s framework seems likely to provide a useful pathway for embracing a future that prioritises sustainability.

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AUTHOR CONTRIBUTIONS

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