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Achieving universal coverage: understanding barriers to rural placement for final year midwifery students

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Introduction

To achieve universal access to care, an enormous scale up of the health workforce is needed in the coming decades. The needs-based shortage of health care workers in 2013 was estimated at approximately 17.4 million globally, with the largest gap in the nursing and midwifery workforce, estimated at 9 million. While steps have been taken to decrease the global health workforce shortage, this shortage is estimated to remain as high as 14 million by 2030, barely narrowing the gap (WHO 2015a).

The overall goal of the *Global Strategy on Human Resources for Health: Workforce 2030* (WHO 2015a) focuses on ensuring availability and universal access to high quality health workforce through effective policies at national, regional, and global levels. In 2017, we continue to face ongoing challenges in health workforce needs – particularly in the distribution of health care workers and how this aligns with populations needs. Significant maldistribution exists between the needs, demands, and supply of health care workers (WHO 2015a). There is a stark imbalance between urban, metropolitan areas and rural, deprived areas that tend to be underserved, which contribute to unequitable access to health care providers. This strong urban bias is a major constraint to achieving universal health coverage in low- and middle-income countries.

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