



Life Sciences and Healthcare: Leading Through the Global Talent Shortage





Introduction

The global healthcare and life sciences sectors are undergoing a structural labor crisis characterized by a widening gap between available talent and growing demand.

Commercial indicators show unprecedented market expansion, highlighted by a \$1.7 trillion global prescription market and healthcare spending averaging 9.3% of GDP across OECD countries. Yet talent pipelines are failing to keep pace with shifting generational priorities, high rates of clinical burnout, and the rapid rise of advanced technologies.

This report examines the systemic factors driving this talent deficit and provides healthcare and life sciences leaders with a blueprint for transitioning from reactive, transactional recruitment models to proactive, consultative, and collaborative workforce strategies.

Statistics: **Global Growth**

- The global prescription market climbed 10% year-on-year to reach \$1.7 trillion ([IQVIA](#)).
- Global life sciences venture capital funding rose 30% year-on-year to \$29.9 billion in the first half of 2026 ([Cushman & Wakefield](#)).
- Healthcare spending now averages 9.3% of GDP across developed nations, above the pre-pandemic benchmark of 8.8% ([OECD](#)).

Statistics: **Talent Shortage**

- The World Health Organization projects a global shortfall of 11 million health workers by 2030 ([WHO](#)).
- Over 90% of global health leaders state that improving productivity is a priority for the year ahead ([Deloitte](#)).
- Workforce AI readiness and upskilling are the leading concerns for achieving growth targets, cited by 85% of life sciences CEOs ([KPMG](#)).



Primary Factors Driving Talent Shortages

Aging Populations

As global demographics shift, with the population aged 75 and older projected to increase by 40% in Western nations by 2040, the demand for healthcare and eldercare is growing significantly. At the same time, demographic aging represents a significant challenge for workforce planning. In 13 of 44 European countries that provided data to the World Health Organization, 4 in 10 doctors are over 55 and expected to retire within the next 10 years. This talent shortage is further compounded by clinical burnout among working-age medical professionals.

Changing Expectations of New Generations

The next generation of medical professionals is prioritizing personal well-being and flexible schedules over high-pressure career pathways. Night shifts, weekend duties, and 24-hour on-call rotations are increasingly rejected by younger physicians, who often opt for part-time clinical practice or transition into specialized ambulatory settings. In addition, many clinical professionals are leaving public hospital systems to work in private clinics or in the medical device market, accelerating the depletion of core healthcare networks.

"A couple of years ago, a doctor was almost considered a 'god in white'. Being a doctor in the hospital was the highest possible achievement. Now it's changed because people recognize it's a tough job and you don't get paid as much in a hospital compared to a private clinic."

**Charlotte Eblinger-Mitterlechner, Managing Partner, Eblinger & Partner
(IIC Partners: Vienna)**



Demand-Driven Instability

In the United States, localized staffing shortages have fueled the expansion of the "traveling nurse" contracting model, structurally inflating clinical labor costs. Travel nurses in high-demand specialties such as the Intensive Care Unit (ICU), Operating Room (OR), and Emergency Room (ER) can earn between \$1,800 and \$3,200 per week, with top-tier crisis contracts or specialized Nurse Anesthetists (CRNAs) commanding up to \$7,000 per week. This premium pay scale drives permanent staff nurses to leave institutional payrolls in favor of flexible contracting, leading to high internal attrition and forcing hospitals to rely on costly managed-service providers to maintain mandatory nurse-to-patient ratios.

Fragmented Patient Care Systems

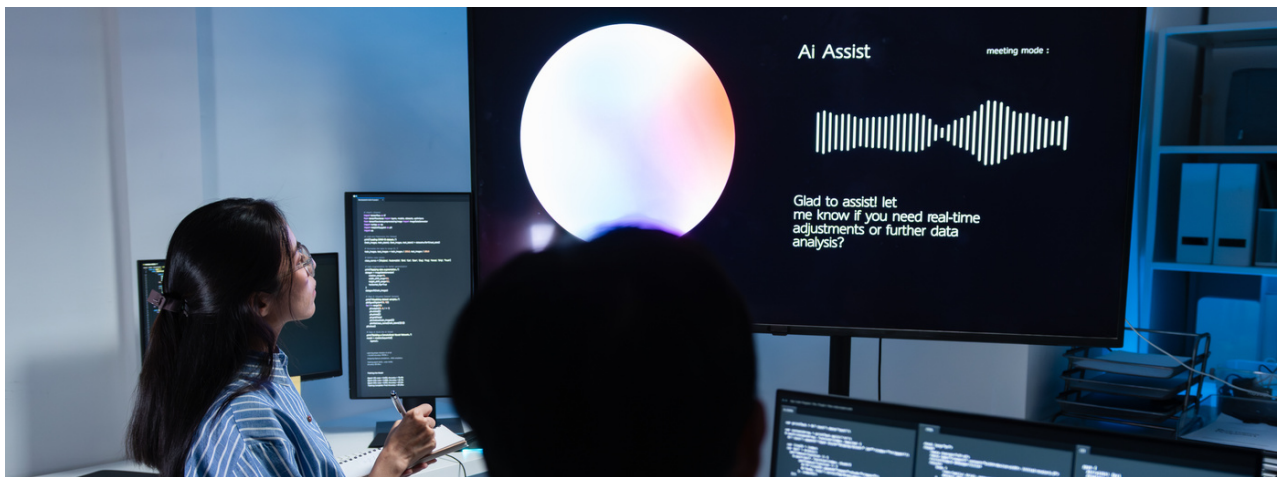
Global healthcare systems face critical bottlenecks as medical professionals often repeat expensive, time-consuming tests due to poor information sharing between practices and a lack of interprofessional trust. This duplication of effort wastes vital clinical resources and stalls patient progression.

This issue is compounded by a disconnect between the public and private sectors and severe GP shortages, leaving patients without holistic medical guidance and direction. Individuals increasingly self-diagnose and turn to pay-as-you-go private apps to "specialist-hop." This approach to healthcare crowds out high-demand specialists with patients who may require different modes of care.



"We are seeing a powerful antidote to this fragmentation in the Netherlands, where regional healthcare organizations are moving away from competitive, isolated systems toward public collaboration. Rather than tackling talent shortages independently, they are collectively managing workforce planning, avoiding predatory poaching, and co-designing professional education. Because we cannot grow medical talent overnight, addressing systemic pressures requires this vital shift toward shared regional governance, streamlined digitalization, and patient-centered processes."

**Gerald Knol, Managing Partner, Holtrop Ravesloot
(IIC Partners: Amsterdam)**



AI Skills Gaps

The explosive growth of AI technologies in drug discovery, advanced therapeutics (mRNA, CRISPR), and specialized biomanufacturing has fundamentally changed competency requirements. There is an acute global shortage of "bilingual" talent who hold deep biological and clinical expertise as well as data science and AI fluency.

Over 51% of biopharma leaders now prioritize hiring for AI-focused roles, leaving generalist life science graduates struggling to find placement while highly specialized technical roles remain vacant for months.

There are parallel concerns in other areas of healthcare, such as the use of advanced robotics and the need to retrain surgeons to operate this advanced machinery.

"AI is reshaping clinical research so rapidly that CROs failing to expand their AI capabilities risk disappearing within five years. The core challenge is a severe shortage of 'bilingual' talent; finding natural scientists or physicians who truly understand AI is incredibly difficult, forcing organizations to pivot toward hiring IT professionals who have an interest in medicine. Beyond data science, this talent deficit heavily impacts biopharmaceutical manufacturing and CDMOs. The shortage isn't at the senior management level, but rather in the essential, hands-on roles driving upstream processing, downstream processing, and quality assurance."



Andreas Reimer, Partner, ingeniam Executive Search & Human Capital Consulting (IIC Partners: Frankfurt)

Wealth-Gradient Migration

Wealthier nations actively recruit health professionals from lower-income countries, thereby shifting the fiscal burden of training and creating severe domestic shortages in the originating states. In Europe, this dynamic manifests as a westward migration. Healthcare professionals from Central and Eastern European (CEE) nations migrate to Austria and Germany to leverage higher salaries and superior hospital infrastructure. To backfill these losses, CEE hospitals recruit from the Balkans and Ukraine.

Concurrently, Austrian and German medical graduates frequently cross borders into Switzerland, where remuneration packages and working conditions are structurally superior. To counter these domestic shortages, European healthcare systems are turning to international recruitment. However, these programs face ethical concerns about creating talent deficits in developing nations, as well as operational, legal, and integration barriers. These programs can also mask systemic issues that need to be addressed in domestic talent pipelines.

The Educational Bottleneck

Rigid curriculum timelines, clinical placement difficulties, and a severe shortage of educators mean that academic output is completely outpaced by population needs. There is also insufficient post-graduate transition support, leading many professionals to leave healthcare sectors within the first year.





"When examining the root causes of our healthcare capacity crisis, the bottleneck invariably traces back to the education system, which severely restricts the volume of nurses and medical specialists we can train. Overcoming the shortfall of new graduates, combined with a very scarce labor market, requires us to leverage AI and digitalization to fundamentally rethink how the future of work is organized."

Gerald Knol, Managing Partner, Holtrop Ravesloot (IIC Partners: Amsterdam)

Shifting Global Investment

The U.S. remains the leader in global biopharmaceutical innovation, currently commanding 55% of all worldwide R&D investment and accounting for nearly half of the \$1.7 trillion global pharmaceutical market.

However, amid a domestic surge in advanced therapeutics (such as GLP-1 weight-loss treatments) and automated manufacturing, fewer than a third of biopharmaceutical leaders believe their organizations possess the internal talent and capabilities required to support future product pipelines.



"Healthcare organizations are operating in an environment where transformation is constant, yet many leadership teams are already carrying full operational loads. We are seeing boards place increasing value on executives who can lead through ambiguity, build resilient cultures, and successfully guide organizations through financial, technological, and regulatory change—not simply maintain the status quo."



Bob Clarke, Chairman, Furst Group (IIC Partners: Chicago)

Investment is also surging in regions with high operational velocity and robust financial incentives. China has emerged as a premier global innovation hub, capturing a substantial share of global clinical trials, which rose to 39% in 2023. Indicative of this trend, AstraZeneca announced a massive \$15 billion investment in its Chinese research and production facilities through 2030, deliberately placing China on par with its R&D hubs in the United States and Europe.



Jason Beith, Founder and Managing Partner, Infinitas (IIC Partners: Auckland)

"In New Zealand and across APAC, private healthcare providers are facing the same global pressures outlined in this report: aging workforces, shifting generational expectations, and rising demand for digitally fluent leaders. But in New Zealand's uniquely small and tightly contested market, these pressures are amplified. The domestic talent pool is simply not large enough to meet the sector's growth ambitions. The organizations that thrive will be those building international talent pipelines early, engaging global capability long before vacancies appear, and treating cross-border recruitment as a strategic necessity rather than a last resort."

India is also experiencing significant market growth, expanding from its position as the global leader in cost-efficient manufacturing to a dynamic innovation engine for novel drug R&D. Crucially, as biopharma organizations worldwide grapple with the severe shortages of digitally fluent, specialized talent, India offers unmatched talent availability and rapid digital adoption. Supported by government policies designed to stimulate high-value R&D, the country has emerged as a vital partner for global organizations seeking to build cross-functional capability centers, bridge the global productivity gap, and accelerate the delivery of next-generation therapeutics.



"India's healthcare sector is experiencing rapid growth while managing critical skill shortages, urban-rural divides, and the complex shift towards digital health. High-acuity clinical areas like cardiology and oncology, as well as clinical research and hospital administration, see the strongest hiring demand at the leadership level. The rise of telehealth and AI diagnostics is also creating demand for AI specialists and senior health data scientists. For these roles, healthcare organizations and hospitals are willing to pay a premium for niche talent. Often they have to consider leaders from adjacent industries and across geographies. Pharmacovigilance and regulatory affairs are also experiencing a similar boom."



Jyoti Bowen Nath,
Managing Partner,
Claricent Partners
(IIC Partners: Mumbai)

This acute talent deficit and rapid digital evolution are not only impacting technical roles, but are actively reshaping executive leadership requirements across the entire sector. As organizations adapt to broader market shifts, such as expanding medical tourism and a heightened focus on global R&D, the criteria for senior leaders are undergoing a fundamental transformation.



Ram Iyer,
Client Partner,
Claricent Partners
(IIC Partners: Mumbai)

"The profile of healthcare leaders in India is rapidly evolving. Medical tourism is on the rise with multispecialty hospitals now catering to international travelers looking for exceptional healthcare with improved rates. This has enhanced the role of commercial leaders in such setups, as patients are also looking at comfort and quality in addition to better treatment facilities. Additionally, demand for high-quality pharmaceutical products has paved the way for innovation and R&D growth. Companies are now seeking expat executives who can bring specialized skill sets to lead innovation and R&D centers. The availability of talent, especially at leadership levels, is significantly lower than the demand requires."

These investment shifts intensify competition for talent in some markets, while triggering significant layoffs in others. Historically, Germany has been a priority launch market and a primary destination for pharmaceutical investment. However, according to industry analysts, the introduction of the Statutory Health Insurance Contribution Rate Stabilization Act (GKV-BStabG) has disrupted this predictability. Designed to address a structural funding gap, the law aims to extract €1.9 billion in savings from the pharmaceutical industry in 2027 alone.

This regulatory shift has triggered some capital flight, as evidenced by Eli Lilly and Company's recent change of plans. In June 2026, the company announced it would halve its planned €2.3 billion (\$2.67 billion) investment in a state-of-the-art manufacturing facility in Alzey, Germany. The facility, designed to manufacture GLP-1 weight-loss therapies, will operate at reduced capacity, employing only 500 of the originally planned 1,000 highly skilled workers. The redirected capital is being funneled back to the United States, supporting plants such as the \$3.5 billion facility in Fogelsville, Pennsylvania. This market instability makes executives wary of accepting new positions.

"In my experience, the ultimate driver of the current talent shortage is mutual risk avoidance. Companies are holding out exclusively for 'perfect' candidates to minimize the risk of a wrong hire, while candidates are deeply reluctant to switch jobs without absolute necessity, choosing the security of the role they know over the threat of facing another redundancy next year."



Andreas Reimer, Partner, ingeniam Executive Search & Human Capital Consulting (IIC Partners: Frankfurt)



**Shane Browne,
Managing Director,
HRM Search Partners
(IIC Partners: Dublin)**

"One of the biggest mistakes we see across Pharma, Biotech and Medical Device industries is organizations treating talent planning as something that begins after the investment decision has been made. In today's European and U.S. markets, that is often too late."

New manufacturing capacity, automation, and major capital programs are creating intense competition for a relatively small population of engineering, CQV, validation, quality, and manufacturing leaders who combine technical depth with genuine regulated-environment experience. Many of the strongest people are already engaged on complex programs and are not actively looking to move."

Talent strategy therefore needs to become part of capital planning. Companies that map critical capabilities early, build relationships with specialist talent before demand peaks, and think internationally about where those skills can be found will have a significant execution advantage leading to long-term cost savings and timely project delivery."

The challenges facing healthcare and life sciences organizations are significant, but leaders who act now can mitigate some of the most pressing risks. Below we share key strategic approaches to remain competitive in talent acquisition and retention amidst this complex, shifting environment.



Strategic Hiring & Retention Advice

For executive leadership in the healthcare and life sciences sectors, navigating the global talent shortage requires a shift from transactional recruitment to a long-term, strategic talent advisory and pipeline-building framework. Based on global best practices, the following strategic interventions are recommended for implementation:

1. Employer Branding

In a talent-scarce market, employer branding is a critical operational driver of talent attraction. Employer brand fundamentals include:

Develop Unique Employer Brand Language

Organizations operating in the healthcare and life sciences sectors often rely on identical language such as "transforming lives" or "innovative science." To break through the noise, organizations must develop unique brand language and key talking points tailored to their global impact. Authentic and transparent Employee Value Propositions (EVPs) attract professionals who are genuinely inspired by the organization's work.

"One of the most significant shifts we see in the U.S. healthcare market is that leadership talent has become increasingly relationship-driven. High-performing executives are rarely active job seekers. Successfully engaging these leaders requires credibility, thoughtful consultation, and a compelling vision for the organization's future rather than a traditional recruitment approach."



Bob Clarke, Chairman, Furst Group (IIC Partners: Chicago)

Train All Staff on Employer Branding, Not Just HR & Marketing

Organizations must train everyone involved in the hiring process – especially medical directors, who are occupied with intense clinical duties – in the fundamentals of employer branding. How are we impacting lives? What are the key benefits? How are we different? The aim is not to turn clinicians into salespeople or to reduce authenticity, but a single poor experience during the candidate journey can derail a hire. Building on this concept, leading organizations empower employees by encouraging authentic, employee-led storytelling and milestone sharing across social media and professional forums.

Continuously Optimize Your Approach

An effective employer brand cannot be treated as a static, one-off project; it must operate as a continuous, living cycle that evolves alongside market developments, candidate priorities, and organizational changes. Employee surveys and focus groups gather vital data to align brand language to the authentic employee experience. Externally, organizations must monitor brand awareness and reputation relative to direct competitors using specialized perception indices and qualitative digital audits of candidate-facing channels, such as search engine visibility, Glassdoor, and Indeed sentiment.

Focus on Well-being

To combat clinical burnout and align with modern candidate expectations, healthcare organizations must move beyond compensation-centric recruiting. C-suite executives should design and offer flexible scheduling, robust mental health support programs, and part-time practice tracks. For administrative, data science, and regulatory affairs roles, hybrid and remote working arrangements should be treated as standard offerings. By prioritizing physical and mental well-being, organizations can tap into a broader, more diverse talent pool and build a sustainable and resilient workforce.

Showcase Technology and Research Opportunities

Professionals in the life sciences and healthcare sectors are often attracted to work on cutting-edge applications and pioneering R&D opportunities. Modern infrastructure is itself an executive recruitment tool. In cases where advanced technologies are not available, or infrastructure development is not possible, consider how you can develop new training and research opportunities to boost acquisition and retention.

2. Transform the Recruitment Process into a Consultative Model

In a talent-scarce market, employers must actively sell the opportunity. Talent acquisition teams must transition from database-driven outreach to a consultative relationship model. This involves providing full transparency about compensation scales, team structures, clinical culture, and technology availability. In some cases, job descriptions, structures, and titles can be customized for high-potential leaders – demonstrating that the hiring process is consultative and dynamic between two equal and engaged parties.



“Even if, as an employer, you have limited experience with executive search or direct outreach as a recruiting method, trust your search consultant and follow their advice: the recruitment process can no longer be treated as a one-way evaluation of candidates. Quite the opposite. When professionals are proactively approached about a career opportunity, it is the company that must make a compelling case for why the position is worth their interest and consideration.”

**Charlotte Eblinger-Mitterlechner, Managing Partner, Eblinger & Partner
(IIC Partners: Vienna)**

Additionally, slow-moving recruitment processes are highly detrimental in a talent-scarce market, often leading top candidates to accept competing offers. Optimizing processes and decision-making reduces the manual administrative burden on clinical leaders, shortens time-to-hire, and supports a positive candidate journey.

This optimized approach must be coupled with ongoing engagement strategies to ensure that runner-up candidates or passive prospects remain warm and connected to the organization for future hiring needs.

"For almost three decades, I have never had a medical doctor approach me as an active job seeker. That speaks for itself. Physicians are in high demand and require proactive outreach with a strong, competitive package."

Stephan Breitfeld, Managing Partner, ingeniam Executive Search & Human Capital Consulting (IIC Partners: Frankfurt)



3. Internal Upskilling and Succession Planning

One of the most efficient mechanisms to fill critical, specialized vacancies is to look within the existing workforce. Executive boards should develop internal mobility platforms that identify high-potential employees and provide them with clear, structured vertical and horizontal career progressions.

Training initiatives focused on AI literacy, advanced data interpretation, and cross-functional competencies fill critical gaps and create new career paths for existing employees. This targeted upskilling also serves as a retention tool, building long-term organizational loyalty and mitigating the costs associated with professional turnover.

Succession Planning

With a large percentage of the workforce set to retire, formal succession planning can no longer be limited to the C-suite. Continuous leadership development must extend into mid-management, laboratory operations, and senior clinical staff to prevent operational disruption during unexpected departures. [Learn more about succession planning >>](#)



4. External Pipeline Development & Market Mapping

Academic Partnerships

Executive leadership must build academic and clinical partnerships, including funding specialized residency pathways, clinical internships, and advanced biotechnology training modules in collaboration with leading universities and nursing colleges. By establishing these pipelines early, organizations create a predictable, proprietary source of talent.

Associations and Conferences

Executive leadership should incentivize their top clinicians, researchers, and data scientists to join panel discussions, present breakthrough data, and lead technical workshops at premier local and global events. This active positioning as an industry thought leader captures the attention of elite, passive candidates who prioritize working alongside visible, cutting-edge pioneers.

At a tactical level, recruiting teams should look beyond the main exhibition halls to target the high-value periphery of these events, such as special interest groups, academic poster sessions, and niche professional networking mixers. These targeted environments are ideal for scouting emerging talent and identifying the highly sought-after specialists. By maintaining year-round engagement and sponsorship with key life sciences and healthcare associations, organizations can foster ongoing relationships with top-tier talent.

Market Mapping

Organizations must undertake continuous talent market mapping activities to proactively identify high-tier talent long before open positions materialize. This approach helps boards and executive leaders transition from transactional hiring to a highly analytical, proactive talent intelligence discipline that maps the entire ecosystem.

Following a structured research methodology, market mapping systematically tracks up to three levels of management – including the C-suite, functional and department heads, and direct sub-levels – as well as unique, highly in-demand specialty skill sets across competitor organizational structures.

By capturing granular competitive intelligence such as employee counts, reporting lines, tenure, and compensation levels, organizations can inform their own structures and build external talent pipelines. Market mapping complements internal succession planning and can be carried out in partnership with specialist executive search firms.

Considering the shortage of talent across healthcare and life sciences industries, the scope can be broadened to focus on transferable knowledge across adjacent industries.



A manufacturer of advanced medical equipment was looking for a Service & Applications Manager to support the launch of a new generation of diagnostic imaging systems across Central Europe. The ideal candidate needed a rare combination of biomedical engineering knowledge, field service experience, customer training skills, and the ability to work closely with hospital clinicians. Conventional recruitment had failed because very few professionals possessed all these capabilities.



Oliver Schmitt,
Managing Partner,
Teamconsult
(IIC Partners: Prague)

Approach: We broadened the search beyond diagnostic imaging manufacturers to focus on leaders with transferable technical expertise and the ability to communicate effectively with both engineers and healthcare professionals.

Result: We identified specialists from adjacent sectors, including radiotherapy equipment, laboratory automation, surgical systems, and high-precision industrial instrumentation, in which engineers faced similar technical challenges and customer environments. We presented 3 suitable candidates within 7 weeks, and the hire was successfully closed.



Conclusion

Healthcare and life sciences organizations across the globe are facing a sustained talent shortage shaped by demographic change, evolving workforce expectations, and growing demand for digital and AI capabilities.

Meeting immediate operational needs while building the workforce of the future requires developing your talent strategy in four key ways:

- **Distinctive Value Offering:** Creating a unique, differentiated employer brand while offering flexible working and modern technology infrastructure to combat clinical burnout.
- **Consultative Talent Engagement:** Employing a relationship-driven, consultative talent acquisition model that offers transparency, customizes roles for high-potential leaders, and streamlines decision-making to maintain candidate engagement.
- **Expanded Upskilling & Succession Planning:** Investing in AI and technology upskilling while extending formal succession planning past the C-suite into mid-management, clinical leaders, and laboratory operations.
- **Ecosystem Development:** Deploying systematic talent market mapping, building academic partnerships, engaging with leading associations and conferences, and sourcing leaders from adjacent industries.

Organizations that prioritize these strategic developments will be better equipped to manage persistent workforce constraints without compromising operational continuity or the pace of clinical and scientific progress.

Request a consultation to
discuss your talent strategy.

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