Editorial by Prof. Francis Omaswa

70th World Health Assembly: Pleasant memories to write home about

Health Systems Advocacy Project (HSAP) activity updates

HSAP events in pictures

Meet the team

HEALTH DIGEST

Health Systems Advocacy Partnership Project Journey
Another reason I came back feeling good from the 70th WHA is that I witnessed time and again the return of the discussions to the days following the 1978 Alma Atta Declaration where the focus was on Integrated Primary health Care involving the active participation of the people themselves. Whenever I had an opportunity to speak at the WHA, I applauded this approach to health systems strengthening and prayed that we will not depart from it again as we did in the past if we are committed to the SDGs and the goal of Universal Health Coverage (UHC). How will countries and partners protect this welcome return to the Health for All days and direction?

The third encouraging experience was to participate at the Side Event when the government of the Republic of Zambia launched their National Surgical, Obstetric, and Anaesthesia Strategic Plan (2017 – 2021). The Republic of Zambia has shown exceptional leadership in this field having been a sponsor of the WHA resolution 68.1 in 2015 that recognized that essential surgery and anaesthesia are critical components of Universal Health Coverage thus setting the stage for placing surgery, obstetrics and anaesthesia as key components of Integrated Primary Health Care strategy for achieving UHC that leaves no one behind. Congratulations to Zambia. Can we hear more stories of other similar efforts?

My organization, ACHEST also participated at pre-meetings of CSOs where the entire agenda of the 70th WHA was dissected in detail over a two day meeting asking the question in all cases ‘Where are the people in this agenda item?’ Last year the 69th WHA adopted a resolution on Framework of Engagement with non-State Actors (FENSA) allowing these to participate at the WHA and the work of the WHO.

There are three major categories of non-state actors namely, (i) not for profit civil society organizations (CSOs), (ii) for profit industry and commercial organizations and (iii) philanthropic organizations. The CSOs see themselves as watchdogs making sure that the public interest is safeguarded at all times in the work of the WHO.

These CSOs have established an office in Geneva under the name Geneva Global Health Hub (G2H2) as a watch tower for observing and responding to what is going on at this global health capital.
According to the United Nations, 6.6 million children die before the age of five every year. Almost half of them (44 percent) are newborns. At the same time, 289,000 maternal deaths occur every year, mostly from preventable causes. And for every woman who dies, approximately 20 others suffer serious injuries, infections or disabilities.

There exists a huge disparities between the richest and poorest countries; a staggering 99 percent of maternal deaths occur in developing regions.

Women in Sub-Saharan Africa suffer the highest maternal mortality ratio. Research by UNICEF (2016) has found that there are 546 maternal deaths per 100,000 live births—a total of 201,000 maternal deaths—every year.

Health Systems Advocacy Partnership project (HSAP) which is largely an advocacy project seeks to contribute towards achieving SRHR through strengthened health systems that will contribute to reducing maternal mortality deaths in Africa.

Health Systems Advocacy Partnership project funded by the Dutch Ministry of Foreign Affairs is being implemented by 3 partners: African Centre for Global Health and Social Transformation (ACHEST), Amref Health Africa in Uganda and Coalition for Health and Social Development (HEPs), representing (HAI).

The main Project Objective is to enable communities realize their right to the highest attainable sexual reproductive health, crucial for equitable sustainable economic development.

Secondly is to create space and strengthen civil society to engage effectively with governments, the private sector and other stakeholders accountable for health systems to deliver equitable, accessible and high quality SRHR services.

The HSAP primarily focuses on two of the World Health Organization’s building blocks for strong health systems: strengthening human resources for health and essential health commodities, while advocating for good governance and equitable health financing.

The HSAP project works from the premise that there is considerable interest in understanding and documenting what works to support national planning, to promote policy dialogue across different stakeholders and sectors, but also to facilitate learning within and across countries and communities.

African Centre for Global Health and Social Transformation (ACHEST) focuses its work on strengthening human resources for health and advocating for good governance and equitable health financing in five contexts that include: Uganda, Kenya, Zambia, the African region all of which informs its work at the Global level.

In engaging with the CSOs, ACHEST works with Coalition of CSOs on Maternal, Neonatal, Child and Adolescent Health to build their capacity in; lobby and advocacy and research to engage effectively with governments, the private sector and other stakeholders accountable for health systems to deliver equitable, accessible and high quality SRHR services.

I hope country level CSOs can operate similar watch towers. There are several effective ones in many countries.

Finally there was the networking which is extremely valuable as a source of learning and an enabler in forging partnerships and connections for carrying forward the work generated by and that follows the WHA.

I am looking forward to a future of effective health action that actually leaves no one behind.

Three cheers to Dr. Tedros and UHC.
The African Platform on Human Resources for Health, a platform that brings together Health leaders passionate about HRH hosted at ACHEST held the 5th African Health Workforce forum at the Commonwealth Resort, Munyonyo in Kampala from 19th to 21st April 2017.

The three days high level forum that was premised on the theme: Positioning the African Health Workforce for Sustainable Development expounded the Human Resources for Health Implications for Universal Health Coverage, the challenges posed by the African context of high population growth with escalating levels of poverty among other health challenges in Africa.

The forum that brought together delegates from more than 15 countries from within and without Africa was conducted under the following thematic streams: Health Workforce education and training; Preparing the African HWF for universal Health Coverage; Leadership for HWF Development Management and Regulation; Nursing and Community Health Workers; and HWF Migration.

The major objectives of the forum were: To review the status of implementation of the “Road map for scaling up human resources for health for improved health service delivery in the African Region; Gain deep understanding of relevant recent developments such as the “Global strategy on human resources for health: (Workforce 2030);” the African Health Strategy; and discuss the implications for African countries of the establishment of the Global Health Workforce Network (GHWN), at the WHO secretariat in Geneva.

Dr Khama Rogo, Lead Health Sector Specialist at World Bank, Africa Regional Office, Nairobi while giving a keynote address recollected the challenges faced in Human Resources for Health in Africa siting the recent occurrence in Kenya where doctors went on strike for 100 days, disabling the operation of the health system in Nairobi.

He cautioned African leaders not to plan like they did 40 years ago and expect efficient health systems.

Prof. Francis Omaswa, the Executive Director of African Centre for Global Health and Social Transformation (ACHEST) and the chair of the APHRH while giving an overview, highlighted education and training as the biggest opportunity for Human Resource development in Africa, yet a huge challenge too. He advised that because Human resources for health involves a multi-stake holder approach, there is therefore need to have a multi-stakeholder planning for human resources based on the needs of the different countries from the time of training.

Dr. Sarah Opendi, the State Minister of Health and General Duties who was the chief guest at the forum brought to light the facts on the health workforce densities on Africa that have stagnated over the last decade due to high population growth rate and the investments in education and training which have not matched the population growth despite vigorous global campaigns.

“Population growth rate will only come down when we have health workers that can provide the needed family planning services to the population in need.” Dr. Opendi noted while opening the forum.

The outcome of the three forum was a well-documented communiqué that is being used as a stick to hold the African leaders accountable to deliver on their promises.
African Centre for Global Health and Social Transformation (ACHEST) together with Amref Health Africa in Uganda and Coalition for Health Promotion and Social Development (HEPS-Uganda) representing Health Action International (HAI) in Uganda held an Inauguration meeting of the National Advisory Committee of the Health Systems Advocacy Project (HSAP) on the 4th April 2017 at Protea Hotel in Kampala.

The National Advisory Committee, a committee that is constituted by experienced and expert individuals working in different sectors plays a pivotal role in the HSAP project, a project funded by the Dutch Ministry for Foreign Trade and Development Cooperation that seeks to contribute towards achieving SRHR through strengthened health systems.

The main objectives of the Inauguration meeting were to: inaugurate the National Advisory Committee (NAC), but also to use the opportunity to disseminate project base line findings and share project overview and progress.

The meeting brought together 100 participants from both the National level and the six districts of Implementation who included among others; Members of parliament, civil society organizations, District Health Officers, the Media; Faith based institutions and central and local government representatives.

Dr. Patrick Kadama, Director Health Policy at ACHEST when speaking at the inauguration noted that, “there has been space for dialogue without space for dissent, but the Health Systems Advocacy Partnership (HSAP) project sets to strengthen dissent and dialogue spaces in Uganda.”

Dr. Jesca Nsungwa Sabiti, the Chairperson of the NAC advised that more focus should be put on the human resources for health issues that the project seeks to address without diverting to other issues that might emerge during the project implementation process.

Key recommendations were made at the inauguration that included: The need to involve Members of Parliament from the 6 project implementation districts; prioritizing advocacy for full implementation of laws and policies especially at district/national level; and bringing on board the disadvantaged groups like Persons with Disabilities (PWDs) by advocating for access to SRH commodities and other services for them.
African Centre for Global Health and Social Transformation (ACHEST) in partnership with the Civil Society Coalition on Maternal Neonatal, Child and Adolescent Health (RMNCH) convened together a two days meeting for the members of the coalition and Members of Parliament to dialogue on Sexual Reproductive Health; Human Resources for Health, Health financing; Governance and Commodities issues.

The agenda of the two days meeting that ran from 6th-7th June 2017 at Imperial Royale Hotel Kampala under the Health Systems Advocacy Partnership (HSAP) project was to: Introduce the project to the Members of Parliament and the bigger CSO coalition members; provide the CSOs with space to engage with MPs on different advocacy is- sues around Sexual and Reproductive Health.

HSAP seeks to create space for a strong civil society to engage effectively with governments, the private sector and other stakeholders accountable for health systems, to deliver equitable, accessible and high-quality SRHR services and commodities funded. And it is funded by the Dutch Ministry of Foreign Affairs.

The two days meeting brought together 17 members of parliament from committees on: Health, Legal, Human Rights and members of the Uganda parliamentary forum on quality of care; and 45 members of the Civil Society from 32 Civil Society organizations working on; youth, children, SRH, policy, HIV/AIDS and Human Resources for Health related issues.

Dr. Patrick Kadama, Director Policy at ACHEST when presenting on the Health Systems Advocacy Partnership project and roles of coalition members noted that Reproductive health is an outcome of a strengthened health system.

An organized group of CSOs to perform the role of a watch dog is pivotal in boosting the realization of the health outcomes.” Dr. Kadama noted.

Prof. Francis Omaswa, the Executive Director of ACHEST noted that the coalition of CSOs working on maternal health on Maternal health is building a climate of opinion in the whole country that can leverage by using its numbers. He encouraged them to engage in: knowledge gathering through research, capacity building and training in lobbying and advocacy including mind set negotiation that can influence advocacy endeavors.

“Members of parliament too play a critical role in realizing advocacy results for better health.” Prof Omaswa recognized.

During the meeting The coalition members put together a six point advocacy issue paper that included: Human Resources for health; Health financing; Youth friendly services, Sexual Reproductive Health commodities, Comprehensive Sexuality Education and the East African Community Sexual Reproductive Health Bill and other policies that need amendment and implementation which they presented to the MPs.

Dr. Michael Bukenya, the chairman parliamentary committee on health while responding to the advocacy issues presented by the coalition members brought to light the progress of work done so far on the issues raised.

He also requested ACHEST to share with MPs knowledge materials that can re-enforce their work and capacity building opportunities.

During the meeting, coalition members also elected new members of the steering committee to steer and
Preeclampsia is the second cause of death among pregnant women! Preeclampsia is a serious disease related to high blood pressure that can strike fast—“eclampsia” which is the Greek word for lightning. Dr. Annet Nakimuli, the Head of Preeclampsia at Mulago Hospital in Kawempe says.

Ms. Lauren a 22 year old woman and her husband were eagerly expecting their first born baby, full of anticipation like any other couple would.

During her antenatal visit at 6 months, everything went well and the couple was told they were expecting twins. This got them really thrilled, unfortunately this excitement was short lived.

A few days after, Lauren started feeling pains that were not exactly explained. The pains were followed by swollen feet and swollen body. When she went to a higher level health facility, she was diagnosed with preeclampsia and later referred to Mulago hospital where the foetus was removed to save her life, seven days after the baby died due to breathing related complications.

When further tests were carried out, it was found that her kidneys were damaged. Lauren is not alone; there are so many mothers both young and old who die to preeclampsia. “10-40 % of the maternal deaths in Uganda are due to preeclampsia.

Many women in Uganda die and lose their babies to preeclampsia due to ignorance about the disease which is the second cause of death among pregnant women, second to hemorrhage.”

Dr. Annet Nakimuli, a senior Gynecologist and Obstetrician at Mulago Hospital told the press during a press briefing organized by Health Systems Advocacy Partners that include: African Centre for Global Health and Social Transformation (ACHEST); Amref Health Africa and Coalition for Health Promotion and Social Development (HEPS) during the Inaugural World Preeclampsia Day held at the Golf Course Hotel on 22nd May 2017 under the theme: “Take the Preeclampsia Pledge – Know the symptoms. Spread the word.

Dr. Nakimuli noted that during the antenatal visits, women find when Blood Pressure machines in some health facilities are non-functional and their conditions never get to be diagnosed at early stages where the condition can be managed, coupled with the challenge of stock out of Magnesium Sulphate, a major commodity used in the management of the condition.

The objective of the press briefing was to raise awareness of preeclampsia and its country wide impact on the lives of; mothers, babies, and families.

Dr. Jesca Nsungwa Sabiti, Commissioner Planning at Ministry of Health when giving the position of government on the available services, space, policies and guidelines for handling preeclampsia noted that preeclampsia is a neglected disease among women and there isn’t any comprehensive data available on preeclampsia, but the ministry of health is working with National Identification and Registration Authority to establish figures around preeclampsia.

She recognized the key role played by CSOs in raising awareness and called CSOs to continue with their effort in raising awareness that will pay by putting an ending this pandemic in Uganda.

The partners presented a joint statement that had clear cut recommendations that included among others; An urgent need for additional research in preeclampsia and funding into preeclampsia and
Forum for the Advancement of Professionalism, Ethics, and Service (FORPES) for Sustainable Development launched in Kampala.

“People in Uganda compared to other African countries had the opportunity to get education and they surely embraced it. Ugandans were the best professionals in Africa, but this has since changed. We now read stories in the newspapers where doctors are arrested for various reasons including claims of negligence among others.

Prof. Francis Omaswa, the Executive Director of African Centre for Global Health and Social Transformation (ACHEST) and the Co-Chair of FORPES and Fellow, Uganda National Academy of Sciences (FUNAS) made these remarks during the launch of the Forum for the Advancement of Professionalism, Ethics and Service for Sustainable Development on the 16th May 2017 at Imperial Royale Hotel, Kampala.

FORPES would like to see strong professional groups ensuring that the professionals have the right quality and standards of service delivery, but not name and shame as we see now.” Prof. Omaswa remarked.

The Forum for the Advancement of Professionalism, Ethics, and Service (FORPES) at the launch brought together more than 50 stakeholders from government, private, civil society, and professional associations and councils, to discuss and address issues of common interests.

Hon. Justice James Ogoola, Chairman, the Elders’ Forum of Uganda (TEFU) while giving a keynote address at the launch decried plummeting level of importance attached to service. He highlighted: greed, sluggishness, laziness, and corruption as the ills that have numbed the human conscious.

Moses Ali, First Deputy Prime Minister of Uganda representing the Rt. Hon. Dr. Ruhakana Rugunda as the Guest of Honour at the forum launch noted that Professionalism and Ethics are key in ensuring service delivery.

ACHEST at the World Health Summit on Social Accountability in Tunis

Dr. Elsie Kiguli-Malwadde, Director Health Workforce Education and Development represented African Centre for Global Health and Social Transformation (ACHEST) at the World Summit on Social Accountability in health organized by the International French-Speaking Network for Social Accountability in Health (RIFRSS), the Tunis Medical faculty and the Network Towards Unity for Health (TUFH) from 8th to 12th April 2017.

The summit that brought together 400 participants from more than 50 countries held in Hammamet, Tunis was premised on the theme: “Improving the impact of education institutions on people’s health. The theme was expounded through subthemes that included: leadership, accreditation, competencies and partnerships among others.

At the conference key note speeches as well as 200 relevant posters, papers were presented.

Dr. Kiguli Malwadde who was part of the organizing committee for the conference and the vice secretary General for the TUFH Network presented a poster entitled: “Growing partnerships: Leveraging the power of collaboration between Universities.”

As a way forward, the conference came up with a Tunis declaration on Social accountability in health.
Countries in the African region have made commendable strides in health; however, the newly adopted Sustainable Development Goals require greater efforts to ensure healthy lives and wellbeing for all. It is critical to improve the scope and mode of delivery of health services and also to address the existing inequities in order to have a meaningful impact on people’s lives.

African Centre for Global Health and Social Transformation (ACHESTs) Executive Director Prof. Francis Omaswa, Director Policy, Dr. Patrick Kadama, and Dr. Peter Eriki, Director Health Systems attended the 1st African Health Forum in Kigali Rwanda. The forum convened by the World Health Organization in the African (WHO’s) Region Regional Office for Africa (AFRO) from 27 – 28 June 2017 to highlight the importance of addressing the challenges and opportunities for effective health service delivery and policy priorities.

Prof. Omaswa, ED ACHEST, while making a submission at the forum in Kigali reminded the African leaders that: “Community Health workers are a part of the Integrated Health System, but should not be seen as a magic bullet that will achieve Universal Health Care (UHC) alone.” They should be promoted to be part of the integrated health system.

He also commended private sector; specifically the faith based health facilities for their role in promoting health care. 40%-50% of the health care services is provided by the private sector, a great need to integrate them into UHC implementation.

The WHO, as the technical agency and custodian of public health in the Region, seeks to further galvanize commitment, foster collaboration and align strategic priorities in advancing the health agenda in the Region, especially around the Sustainable Development Goals (SDGs).

It is strategic partnerships, effective engagement and coordinated joint action that will ultimately result in effectively addressing the urgent and ever changing health needs of the people living on the African continent. Many of the presenters identified.

The forum was organized under the theme of “Putting People First: The Road to Universal Health Coverage in Africa.” Participants at the forum deliberated on: Improving health security, progress towards equity and Universal Health Coverage (UHC), and the unfinished agenda of communicable diseases while exploring the new Sustainable Development Goal (SDG) targets, and tackling social and economic determinants of health on the African continent.

The 6th East African Health and Scientific Conference in Bujumbura

African Centre for Global Health and Social Transformation (ACHEST) was represented at the 6th East African Health and Scientific Conference and International Health Exhibition and Trade fair by Dr. Peter Eriki, Director Health Systems together with Dr. Elsie Kiguli-Malwadde, Director Health Workforce Education and Development from 29th to 31st March 2017 in Bujumbura, Burundi.

The three days conference was held at Ecole Technique Professionally and coordinated by the East African Health and Research Commission (EAHRC). The conference was premised on the theme: “Preparedness for and control of disease outbreaks, epidemics and pandemics in the context of Climate change, globalization and gaps in the health System.

The subthemes of the conference included; emerging, re-merging, zoonotic diseases, vaccines, diagnostics and antimicrobial agents in control of communicable diseases, antimicrobial resistance, health systems and social mobilization in control of outbreaks, epidemics and pandemics and occupational health, safety and climate change.

During the meeting, Dr. Eriki chaired a panel on Maternal and Child Health while Dr. Kiguli-Malwadde participated in a panel in health professions training in East Africa.

The meeting had very high attendance by participants from the East African region.