5th FORUM OF THE AFRICAN PLATFORM ON HRH,
19 – 21 APRIL, 2017, KAMPALA, UGANDA.

African HRH Platform, Kampala Communiqué.

Investing in people is critical to human development; Africa needs to invest in home grown solutions, ensuring that more resources are mobilized: the future is in our own hands, and we shall leave no one behind.

1. The Fifth Forum of the African Platform on Human Resources for Health took place at the Speke Commonwealth Resort, Kampala, Uganda, from 19th to 21st April 2017 and brought together a wide range of participants from across the African continent and several partners. The Forum was held under the theme: Positioning the African Health Workforce for the Sustainable Development, and explored the HRH implications for UHC, the challenges posed by the African context of high population growth with escalating levels of poverty among rural populations leading to increasing pressure to migrate, the role of the private sector as a poorly regulated but key player in both the provision of health care and utilization of HRH, the need to produce adequate numbers of appropriately trained health professionals in fulfillment of the vision for a Skilled, Motivated, Supported Health Worker for every person in every village. The opportunities and challenges arising from a number of global commitments such as the Global HRH Strategy (Health Workforce 2030), the Report of the High Level Commission on Health Employment and Economic Growth, the Regional Road Map for Scaling up the Capacity of the Health Workforce in the African Region, and the African Union Health Strategy.

2. The Forum laid emphasis on the importance of leadership and governance of the health sector at all levels, and reiterated the need for deliberate efforts to strengthen HRH leadership within the continent needed to better negotiate for more investments in the health workforce through multisectoral approaches. The SDGs were viewed as an opportunity that presented the setting for a multi-sectoral engagement at all levels. Moreover, the recommendation of the High-Level Commission that called for an additional 6 million jobs within the health sector in Africa by 2030 presented an opportunity for Africa to bridge the gap in number of health skills by employing more health professionals.

3. The Forum agreed that it was within Africa’s capacity, with the support of development partners, to address the HRH issue, and that without addressing it there would be no gains in the SDGs – UHC will not be possible without an adequate and functional HWF, and without that achievement of the SDGs would be negatively affected. It will require evidenced need-based comprehensive HRH planning for requisite recruitment, training, deployment, utilization, motivation and retention of health professionals in the right mix.

4. The Forum took note of the resources challenges within African countries, and the global shift towards reliance on mobilizing domestic resources and called for more efficient and effective utilization of available resources, including HRH, to ensure that more was done with the available resources. This will entail innovative utilization of existing resources, through inter-professional, inter-disciplinary collaboration, in the spirit if multi-sectoral engagement and true partnership with emphasis on community engagement. Clearly, the health sector will need to
engage other sectors, such as Finance, Public Service, Local Government, Urban Authorities and Labour, for a just share of the resources for HRH.

5. The Forum appreciated the progress made in a number of areas during the MDG era, but noted that more should be done towards the attainment of the SDGs. To build on those gains and sustain progress will require high level political engagement, with the realization that health is a leading economic and labour sector, that health is not only a development issue, but a human rights issue and an issue of global security. A lot of advocacy and political dialogue will be required for commensurate resource allocation for health and the health workforce. This will require the constant engagement of communities and civil society as well, but with the government taking the leading role.

6. The Forum was of the view that health professional training needed to be transformative to embrace new and innovative training models, such as e-learning platforms, community-based or community embedded and the regional colleges that have the potential to increase the pool of available skills, while retaining the health professionals in often underserviced areas, should be given all the required political, legislative, financial and professional support to function effectively.

7. The Forum reflected on the critical role of research, and the need to build local, regional and continental research capacity in areas such as the implications to the health workforce of emergency and outbreak preparedness in order to manage emerging and re-emerging challenges such as the Ebola Virus Disease outbreak in West Africa, 2013 – 2016. This will require investment in research capacity building to ensure that research efforts are led by local experts. The Rt. Hon. Prime Minister of Uganda launched two reports from independent international commissions on infectious diseases outbreaks supported by the National Academies of Science of the USA namely “The Neglected Dimension of Global Security; A Framework to Counter Infectious Disease Crises” and “Integrating Clinical Research into Epidemic Response; the Ebola experience”.

8. The Forum received and endorsed a proposal from the All Party Parliamentary Committee of the UK Parliament on the proposed campaign named “Nursing Now – a global campaign on nursing” that proposes to raise the profile of Nursing raised globally so that Nurses will be able to use their skills, education and training to their full capacity and that women will be empowered with more opportunities for employment and influence. Further, local economies will be developed through employment within health services and associated fields.

9. The Forum noted that the continuing engagement on HRH over the years since the Joint Learning Initiative report (2004) has made significant gains: HRH and Health are now seen as an investment with tangible economic gains, instead of only a cost, and the role of HRH in development and UHC is clearly established. What is required is stronger advocacy for HRH, and there is a critical role of the community, civil society, professional organizations and other non-state actors working in support of ministries of health to engage other sectors towards greater and adequate investments in health.

10. The Fifth Forum of the African Platform on HRH therefore makes the following call:

10.1 To the Ministries responsible for health to provide leadership, and to initiate and engage in high level political dialogue to accelerate domestication, translation and implementation of the various global and continental commitments on HRH, with a view to implementation of those framework that will ensure availability of skilled and motivated health workers everywhere, in every village.
10.2 To WHO to continue its normative and international coordinating role to ensure that all international agencies, non-state actors and other development partners supporting HRH efforts align their efforts to common frameworks, supportive of country needs and plans.

10.3 To WHO to support the full implementation of the WHO Global Code of Practice on the International Recruitment of Health Personnel, including building the capacity of countries to report on this code.

10.4 To community actors, civil society and other non-state actors to intensify the advocacy efforts to ensure that HRH remains high on the global agenda, that more resources are allocated to HRH efforts, that the story of the plight of the health worker is documented and disseminated; and that they are part of the high political dialogue on HRH.

10.5 To training institutions, regulatory bodies, professional associations (bodies) to roll-out, scale up or advocate for transformative approaches to the production of skilled health workers.

10.6 To the Global HRH movement and the global development community to keep a focus on Africa, and to forge partnerships with and for the African HRH champions towards the realization of the SDGs which necessarily includes addressing the HRH gaps for health service delivery. There is need to pay attention to Epidemic Outbreak Preparedness and Response and to disseminate the content of the two reports that were launched at the Forum. The Forum encouraged the UK All Party parliamentary Committee to press on with plans to launch a global titled “Nursing Now” and calls upon the all actors for support.

10.7 To the African Platform on HRH Board and Secretariat to intensify efforts to mobilize resources for the implementation of the outstanding HRH agenda for Africa, to ensure that all stakeholders in Africa remain engaged and accountable for HRH. In particular, it is incumbent upon the Platform to ensure that health workforce migration remains a topical issue in the global arena.

10.8 To the African Platform on HRH Board of Directors and Secretariat to widely disseminate the outcome of the highly rich forum deliberations and to intensify efforts to mobilize resources for the implementation of the outstanding HRH agenda for Africa, to ensure that all stakeholders in Africa remain engaged and accountable for HRH. In particular, it is incumbent upon the Platform to ensure that health workforce migration remains a topical issue in the global arena.

11. The Forum committed to participating effectively at the 4th Global Forum on HRH in Dublin, Ireland in November 2017 and charged the leadership of the African Platform to work with partners and the Forum Organizing Committee to plan for high visibility of African issues at the 4th Global Forum on HRH.

12. The Forum concluded with a General business meeting of Forum members which directed the Board and the Secretariat to update the Constitution of the Platform develop a new advocacy and business plan and organize elections for a new Board within the next six months.