



WORLD HEALTH ORGANIZATION 68TH SESSION OF THE REGIONAL COMMITTEE FOR AFRICA

**WHO Director General Calls for Political
Commitment and Partnerships to Improve Health
and Well-being**

**President Macky Sall Commends WHO
for Improving Health in Africa**

The Director
General of the World
Health Organization
(WHO) Dr Tedros



Adhanom Ghebreyesus has identified political commitment, partnership and a transformed WHO as key to improving the health and well-being of all people in the world, especially in Africa.

Speaking at the opening ceremony of the 68th Session of the WHO Regional Committee for Africa (RC68) currently going on in Dakar, Senegal, Dr Tedros informed the delegates that there are very positive signs of political commitment in some of the countries adding that ultimately it is the political leaders that will achieve the “triple billion” targets of the 13th General Programme of Work and ultimately the Sustainable Development Goals (SDGs).

“It’s you as political leaders who are accountable for the decisions you make and the results you achieve. WHO’s role is to give you the best support we can”, he said.

The Director-General said that the reason WHO has developed tools such as the Joint External Evaluations and multisectoral action plans for Non Communicable Diseases is to support countries to exercise that responsibility.

He reminded delegates that to achieve the SDGs, there is need for innovative, dynamic and purposeful partnerships. According to Dr Tedros, achievement of SDG 3 will be through effective coordination of collective efforts. *“It will not happen if all of us just do our own thing. It will not happen if fragmentation and duplication continue. But it can happen if we work together. It can happen if the arrays of actors on the global health stage leverage their collective strength”* he said.

Dr Tedros noted that there were achievements to celebrate but also challenges to address in the area of Universal Health Coverage as seen from the 13 African countries he had visited in the last one year. *“Many countries are taking bold steps towards universal health coverage,”* he said citing South Africa, Madagascar and Rwanda as Member States that have made tremendous progress.

Regarding health services coverage, Dr Tedros informed delegates that if nothing is done about the health workforce now, the world will face a shortfall of 18 million health workers by 2030 and six million of these will be in Africa.

“That shortfall not only leaves people without support for their everyday health needs, it leaves a huge hole in the region’s defences against outbreaks and other



**H.E MACKY SALL,
The President of Senegal**

The President of the Republic of Senegal, His Excellency Macky Sall has commended WHO for its efforts to improve the health situation on the continent. While opening the 68th Session of the WHO Regional Committee for Africa in Dakar yesterday, President Sall said that *“much progress has been made in our countries by governments, with the support of partners, including WHO, to fight communicable diseases such as tuberculosis, HIV/AIDS and malaria”*.

President Sall urged WHO and partners to intensify the fight against non-communicable diseases (NCDs) because their spread in African countries has become a worrying problem. He called for sustained actions on the control of NCD risk factors including smoking, harmful alcohol use, obesity and physical inactivity.

He noted that the weakness of health systems in African countries had resulted in *“the spread of non-communicable diseases and recurrent epidemics on the continent”*. This, he added, calls for strengthened collaboration among African countries and stronger WHO coordination in line with its mandate.

The President reminded delegates that *“health is a strategic development issue for countries that aspire to sustainable development. It is an economic development factor and not an investment loss.”* In that regard, the President pointed out that *“major investments should be directed towards the development of health human resources.”* He further highlighted the need to address the issue of human resources for health; *“our health systems will remain weak as long as*

emergencies” he said. Investing in health workers is therefore not only an investment in a healthier Africa but also an investment in a safer Africa.

He noted that the two recent Ebola Virus Disease (EVD) outbreaks in DRC have tested WHO’s preparedness and response system. He added that as heightened response activities to EVD continue in DRC, WHO is also focussing on strengthening EVD preparedness and surveillance in fragile, conflict-affected and vulnerable states.

According to Dr Tedros, while outbreaks and other health emergencies capture global attention, individuals and families face their own emergencies every day. For instance, while life expectancy in Africa increased by 10 years since 2000 which is double the global average, there is an 11-year discrepancy in life expectancy between this region and the global average. Hence the leading causes of death, diseases and threats must be addressed with the same urgency as a sudden disease outbreak.

Dr Tedros informed delegates about the ongoing WHO transformation which will put countries at the centre of all the work of WHO citing the 2020/21 programme budget as an example. *“The budget has been developed based on country priorities. Its focus is on strengthening the capacity of our country offices to deliver impact”* he revealed. The transformation will therefore translate into a 30% increase in technical capacity for country offices and most of this will put in the African Region.

Dr Tedros emphasised the urgent need for countries to move fast and achieve SDG 3 noting that if that happens, *“we will not only achieve better health and well-being for billions of people, we will drive progress towards all of the SDGs”*.

The Government of Senegal and WHO honour African Public Health Experts for their significant contributions to health services delivery in Africa

The Government of Senegal conferred the highest national honorary award called the ‘Commandeur de l’ordre national du lion’ on Dr Deo Nshimirimana, the former WHO Representative to Senegal for his exemplary contributions to health development in the country. This was at a gala dinner which was held in the evening of 27th August 2018 to welcome delegates to the Sixty eighth session of the WHO Africa Regional Committee for

we do not focus on human resource training in general, and especially in specific areas” he said adding that health must be at the centre of priorities to achieve the Sustainable Development Goals.

The President informed the delegates that his government’s health programme is anchored on and committed to Universal Health Coverage. *“We have engaged the government in several projects and initiatives to increase health coverage and doubled the doctor’s training grant. In 2015, we set up a universal health coverage agency. This has significantly increased access to health care for populations. In three years, we must achieve 100% national coverage from the current coverage of 47%”* he said.

President Sall concluded his address by reaffirming his government’s commitment to enhanced collaboration with the WHO. He congratulated the organizers of the 68th session of the WHO Regional Committee for the excellent preparations pointing out that *“this session is an appropriate forum for exchange of information, decision-making and engagement”*.

The official opening ceremony of the 68th session of the WHO Regional Committee for Africa was held at the King Fahd Palace Hotel in Dakar. In attendance were the WHO Director General, Dr Tedros Adhanom Ghebreyesus, the WHO Regional Director for Africa, Dr Matshidiso Moeti, the Chairman of the 67th Session of the Regional Committee, Dr David Parirenyatwa, Ministers of Health and Heads of Delegations of Member States and representatives of UN agencies and partner organizations.

Minister of Health and Child Care of Zimbabwe, Dr David Parirenyatwa calls for more efforts to advance Towards Universal Health Care in Member States

The outgoing Chairman of the WHO Regional Committee and Minister of Health and Child Care of Zimbabwe, Dr David



Africa (RC68). Presenting the award, the Honourable Minister of Health of Senegal, Mr Abdoulaye Sarr commended Dr Nshimirimana for his excellent vision, leadership and collaboration with the Government and people of Senegal to advance the course of health in the country.

The WHO Regional Office for Africa (AFRO) also conferred awards on several deserving WHO staff members and teams that have excelled in their various fields of endeavour. Mr Raul Thomas, the Director for the General Management and Coordination Cluster in AFRO received the Director-General's award for his exceptional leadership in the management of staff wellbeing in 2017 while the WHO Health Emergencies Team of South Sudan was presented with the WHO Health Emergencies Team Award.

Other awardees included the Regional Office Programme Budget Management Team, the External Relations, Partnerships and Governing Bodies (EPG) Team, Dr Lucile Imboua-Niava, the WHO Representative to Senegal and Dr Akpaka Kalu, the WHO Representative to Ethiopia who received the Regional Award of Excellence in various categories.

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Programme of Work - DAY 2: Tuesday, 28 August 2018

07:30– 08:45	Breakfast meeting	Gavi Alliance Breakfast– Doing business differently to achieve tangible results for children in immunization towards Universal Health Coverage
		Ministerial Side Event on SRHR Initiative
09:00– 09:15	Agenda item 4 (cont'd)	Report of the Committee on Credentials
09:15– 09:45	Agenda item 6	Statement of the Chairperson of the Programme Subcommittee (Document AFR/RC68/3)

Parirenyatwa has thanked Member States of the WHO African Region for entrusting him with the responsibility of serving as the



Dr David Parirenyatwa, Minister of Health and Child Care of Zimbabwe

Chairman of the Regional Committee. He also applauded the Government of Senegal for its warm hospitality and for the wonderful facilities put at the disposal of the delegates to ensure the success of the meeting. He conveyed his special gratitude to the WHO Regional Director and the Secretariat for the preparations for and the organization of the meeting.

Dr Parirenyatwa reported that during his tenure of office he encouraged Member States to heed the call by the WHO Director General to accelerate and advance towards the attainment of Universal Health Coverage (UHC). *"Related to our Region's commitment, you will recall we managed to start a dialogue about the possibility of having a Nelson Mandela award in recognition of his contribution towards the health of humanity in its diversity", he said.* This, he added gives us an opportunity to address and ponder over pertinent health issues aimed at improving the health of the population at the continental level.

Furthermore, Dr Parirenyatwa highlighted key issues that need to be considered in the WHO Programme Budget for 2020-2021, which is under development to operationalize the 13th General Programme of Work of WHO. He therefore emphasized the importance of operationalizing the agreed global goals within the African context.

On the "triple billion" target which is Dr Tedros's vision, Dr Parirenyatwa called for concerted efforts to ensure that one billion more people enjoy better health and wellbeing, one billion more people are protected from emergencies and one billion more people benefit from universal health coverage.

Finally, he highlighted the achievements

09:45– 11:00	Agenda item 7 Progress report on the Implementation of the Transformation Agenda of the World Health Organization Secretariat in the African Region: 2015–2020 (Document AFR/RC68/4)
11:00– 11:30	Tea break
11:30– 12:30	Agenda item 8 Report on regional managerial Compliance activities and Matters arising out of Internal and External Audits (Document AFR/RC68/5)
12:30– 14:30	Lunch break
13:00– 14:30	Side Event <i>Improving Public Finance Management to advance Progress towards UHC in Africa</i>
14:30– 16:00	Agenda item 9 WHO's work on Resource Mobilization through strengthening partnerships to better support Member States (Document AFR/RC68/6)
16:00– 16:30	Tea break
16:30– 18:00	Agenda item 10 Regional framework for the implementation of the global Strategy for cholera prevention and control, 2018–2030 (Document AFR/RC68/7)
18:00	End of the day's session
18:00–19:30	Side event <i>Tackling the burden of hypertension and strengthening the management of severe NCDs through public health approaches</i>

made by the African Region during the last year including the increased efforts in resource mobilization and sustainable financing in the light of the changing global and economic landscape. He urged the Member States to establish mechanisms for increasing domestic public financing for health.

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The WHO Regional Director for Africa Reports Significant Contributions to Public Health in Africa



The WHO Regional Director for Africa, Dr Matshidiso Moeti presented yesterday, the 27th of August 2018, the report of the work of the

organization in the last one year at the ongoing Sixty Eighth Session of the WHO Regional Committee for Africa (RC68).

Presenting the report, Dr Moeti highlighted the key achievements of the organization in the areas of health security and emergencies, health systems strengthening, Universal Health Coverage (UHC), prevention and control of communicable and non-communicable diseases, and reproductive, child and adolescent health among others. She also charted a way forward for the organization in the next one year.

According to her presentation, increased investments in improving the capacity of Member States to detect and respond to health emergencies, and in the organization's capacity to support countries led to the detection of 331 alerts in 29 countries out of which 110 were classified as public health emergencies such as disease outbreaks, natural disasters and humanitarian crises. For these, the organization deployed more than 1000 personnel to support intensive responses to 20 public health events in 13 countries.

RC68 eJournal



The Secretariat of RC68 will publish a daily Electronic Journal (eJournal) which replaces the printed versions



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published during the previous Regional Committees. The easy-to-use eJournal is designed to improve interactions with our readers and to reach a wider readership. It offers new features such as built-in videos, photo galleries and audio recordings. The

eJournal will be distributed in the three WHO working languages namely English, French and Portuguese. The eJournal can be accessed by email on all computers, mobile phones, iPads and all types of mobile devices at any time during the Regional Committee. Inquiries about the eJournal including suggestions for improvement should be sent to Phyllis Jiri on (jirip@who.int).

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MEDICAL CONTACTS

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2. Samu National : 1515 - 338698252
3. Poison Centre : 818001515

INTERNET IN THE MEETING ROOM

User Name: RC68
no password is required

SECURITY

- Emergency police: 17
- Fire Brigade: 18
- UNDSS Senegal: Mr Pierre-Etienne Ruff, Security Advisor, Tel: +221 77 450 58 21, Email: pierre-etienne.ruff@undss.org
- WHO AFRO: Mr Fofana Ibrahim, Security Advisor, Tel: +221 77 335 16 35 E-mail: fofanai@who.int

COFFEE BREAK / LUNCHES

Snacks, morning and afternoon tea/coffee and lunch will be served free of charge to participants during the

Two operational hubs (in Nairobi and Dakar) and one liaison office embedded in the Africa Centre for Disease Control were also established to further enhance the emergency operational capacity of the organization. Eighteen African countries were supported to conduct Joint External Evaluations of their International Health Regulations core capacities. Furthermore, the Democratic Republic of Congo (DRC) was supported to timely and effectively control a major outbreak of Ebola virus disease, including the deployment of an EVD vaccine (for the very first time) in combination with other prevention and control measures. DRC and Angola were also supported to control outbreaks of Yellow Fever among others.

In the area of health systems strengthening, Dr Moeti reported that the organization launched a regional UHC flagship programme which is currently supporting Member States to intensify implementation of activities aimed at achieving the Sustainable Development Goal (SDG) 3. During the reporting period, 25 countries were also supported to produce national health accounts to monitor results allocated to health services and to develop effective health financing strategies.

In collaboration with partners, a five-year sub-regional Human Resources for Health (HRH) action plan to address the HRH crises in the Region was developed while the Small Island Developing States of Cabo Verde, Comoros, Mauritius, Sao Tome and Principe and Seychelles were supported to establish a system for pooled purchase of essential medicines for the management of non-communicable disease. Other countries were also supported to develop their essential medicines lists.

In the area of communicable diseases control, Dr Moeti reported that the support of WHO/AFRO resulted into the adoption of the "treat all" policy for people living with HIV/AIDS in two thirds of African countries. There was also an increase from 67% to 79% in the coverage of prevention of mother to child transmission interventions in the Region. There was a heightened momentum to control viral hepatitis with the development of viral

working days of the Committee. Lunch for Ministers and all Heads of Delegation will be served in **Le Manguier** restaurant. Members of the delegations and secretariat staff will have their lunch in the Adriana and Green rooms that are opposite each other in the main conference (see the layout in the events app).

ELECTION OF THE CHAIRMAN, THE VICE-CHAIRMEN AND RAPPORTEURS

The Regional Committee elected the following officers:

Chairman of RC68: Mr Abdoulaye Diouf Sarr
Minister of Health,
Senegal

1st Vice-Chairman: Dr Thaddée Ndikumana
Minister of Health,
Burundi

2nd Vice-Chairman: Dr Aaron Motsoaledi
Minister of health,
South Africa

Rapporteurs: Dr Sarah Opendi Achieng
Head of delegation,
Uganda (English)

Dr Boulam Hacene
Ambassador extraordinary
and plenipotentiary
of Algeria in Senegal and
Head of delegation
Algeria (French)

Pr Doutor Joao Leopoldo
Da Costa
Deputy Minister of Health
Head of Delegation
Mozambique (Portuguese)

EXHIBITION

As in previous Regional Committee sessions, there is an exhibition on the work of WHO and Member States in the African region. The exhibition is mounted in room A0 behind the plenary hall. This year's exhibition focuses on WHO's 70th anniversary (successes and challenges), the Regional Office's Transformation Agenda and Universal Health Coverage. Delegates are invited to visit the exhibition hall.

hepatitis national action plans by almost half of Member States. Five Member States were also supported to prepare for tuberculosis prevalence surveys and to assess the level of resistance to anti-tuberculosis medicines.

In the area of polio eradication, Dr Moeti reported that the organization supported 40 African countries to have their polio free documentation accepted by the Africa Regional Certification Commission while Kenya was supported to become the 41st African country that is Guinea Worm free.

Furthermore, the organization supported a number of Member States to develop Non-communicable Diseases (NCDs) action plans. At the same time, the organization collaborated with the West Africa Health Organization to train national NCDs Programme Managers on the essential package of NCDs interventions.

Dr Moeti further highlighted that about 41 Member States were supported to introduce the inactivated polio vaccine while 38 and 33 others introduced the pneumococcal conjugate and rotavirus vaccines respectively. In addition, the Adolescent Health Flagship programme was launched for the Region.

In the area of partnerships, the Regional Director highlighted the key achievements of the organization including among others, the signature of a cooperation agreement with the International Telecommunication Union to intensify deployment of digital health technologies to improve health services delivery in the Region. The organization also negotiated an agreement with the International Federation of the Red Cross and Red Crescent to scale up advocacy for health in the region.

She also reported that the organization continued to strengthen its operational platform during the reporting period. For instance the functional reviews aimed at making WHO Country Offices more efficient and fit-for-purpose were conducted in 25 countries while the organization continued to vigorously implement its accountability and internal control frameworks.



Our Collaboration with WHO is Dynamic and Participatory

1. **Honorable Minister, yesterday we took part in a march through Dakar city, which was very well attended by the general public. What should we learn from this event?**

That was an opportunity to celebrate the 70th anniversary of the World Health Organization. Seventy years is something to celebrate. We celebrated this in the best way possible in the context of prevention, because we all know that sports in general and walking in particular play an important role in the prevention of non-communicable diseases. We have therefore combined the useful with the pleasant. It was a beautiful event and an extremely important moment. This was our way of contributing to the celebration of WHO's 70th anniversary.



2. **Senegal is hosting the 68th Session of the WHO Regional Committee this year, what were the challenges you faced during the preparatory phase, and what are your expectations from this event?**

The challenges in organizing this type of event are related to the satisfaction of participants and concerns about the availability of funds in the country. Today, what Senegal is expecting is that the Dakar meeting will be an opportunity to identify the real health challenges and priorities of African populations. The speech of the Head of State on this subject was very clear, in terms of identifying the major priorities of our continent. I am convinced that at the end of the discussions, together we will come out with something that unites us in terms of priorities and issues.

Moving forward, Dr Moeti said that the organization will build upon its achievements in the current reporting period and accelerate implementation of the 13th WHO General Programme of Work which was approved by the Seventy First session of the World Health Assembly in May 2018. Implementation of the second phase of the Transformation Agenda and key initiatives such as the UHC and Adolescent Health Flagship programmes will also be sustained.

Furthermore, the workforce of the organization will be given relevant trainings to improve their technical, managerial and leadership capacities to ensure timely and efficient delivery of high quality results.

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BANKING

The current currency in Senegal is the WAEMU CFA franc.

- US\$ 1 = 574 F CFA
- 1 EURO = 656 FCFA

HOTEL CONTACTS

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 The Palms: + 221 33 868 05 05
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CONTACTOS IMPORTANTES

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2. Ms Maïmouna Diop , Administrator, TEL: +221 77299 17 74, e-mail: mdiop@who.int
3. Mr. Odon Mushobekwa, Regional Manager

3. How would you describe the cooperation between Senegal and WHO to date?

We have a very good relationship with the WHO. WHO is the lead of the health sector technical and financial partners in Senegal. WHO's contribution to the implementation of our health policy is dynamic and participatory. I have a coordination meeting with WHO every Tuesday on the implementation of our policy. So it is a great relationship that we look forward to continuing building and strengthening.

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RC68 Photos



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Burkina Faso needs partner support to accelerate progress toward maternal, newborn, child and adolescent health outcomes



*Interview with Dr
Isaïe Medah,
Director General
of Health, Burkina
Faso*

1. How
would you
describe the
situation of
maternal and
child health in Burkina Faso?

It is similar to the situation in other West African and ECOWAS countries. It is characterized by high maternal and infant mortality rates despite the efforts that have been made for several years. Although there has been a reduction in mortality rates, this is not being achieved at the desired rate so as to enable us achieve the sustainable development goals. For example, maternal mortality is estimated at 330 per 1000 live births according to the Multi Indicator Cluster Survey of 2014. Infant mortality is over 80 per thousand live births. It is therefore a situation that is not at all encouraging, although



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remarkable efforts have been made.

2. What challenges does your country face in reducing maternal and child mortality?

Our major challenge today is how to accelerate progress towards achieving the Sustainable Development Goals.

3. What are you doing about it?

To this end, the country has drawn up a National Economic and Social Development Plan. In this plan, there are three expected health results: the first result is on improving people's access to quality health care; the second is on improving the nutritional status of children and pregnant women; and the third is on accelerating demographic transition. As you know, high birth rates reduce government efforts to improve the health and well-being of populations. In addition, since 2015, the government has declared free health care for children under five and pregnant women. This represents 25% of Burkina Faso's general population. This is already a very big effort. The country has also created the National Health Insurance Fund as an operational tool for universal health insurance. Continuing its efforts, the country invested nearly 25 billion CFA (US\$ 44 million) per year to ensure free access to health. In terms of moving forward, it is a matter of looking for ways to increase this free care by adding, for example, family planning, because the government is in the process of making family planning free.

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 Good
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