HIGHLIGHTS OF THE 2022 - 2023 BIENNium IN SÃO TOMÉ AND PRíNCIPE

WHO Contributions to the Health Sector

Photo caption: President of the Republic, Carlos Vila-Nova greeting the Minister of Health, Célsio Junqueira and the WHO Interim Representative, Françoise Bigirimana

January 2024
Index

Message from the acting WHO Representative - Dr Françoise Bigirimana ........................................... 3

Country Cooperation Strategy 2023-2027 - a five-year cooperation plan with 5 priorities ...... 4

1 - STRENGTHENING HEALTH GOVERNANCE .................................................................................. 5

1.1 - PNDS - 10-year National Health Strategic Plan ........................................................................ 5

1.2 - Health Financing - a national health financing leading to Universal Health Coverage .......... 6

1.2.1 - National Health Accounts 2018-2021 .................................................................................. 6

1.2.2 - The Health Financing Progress Matrix (HFPM): A new tool .............................................. 8

1.3 - Strengthening the Partnership for Health - Coordination mechanism for aligning partners with national health priorities ...................................................................................... 8

2 - STRENGTHENING THE PHARMACEUTICAL SECTOR TO IMPROVE ACCESS TO MEDICINES AND ESSENTIAL HEALTH PRODUCTS ........................................................................... 9

3 - IMPROVING ACCESS TO QUALITY ESSENTIAL HEALTH CARE AND SERVICES, INCLUDING INTERVENTIONS TO CONTROL PRIORITY DISEASES .................................................................... 10

3.1 - Improved health services in the Autonomous Region of Príncipe (RAP) ................................ 10

3.1.1 Assessment of the capacity and functionality of the Dr Manuel Quaresma Dias da Graça hospital .......................................................................................................................... 11

3.1.2 WHO support .......................................................................................................................... 12

3.2 - Disease control to improve access and quality of essential health services ...................... 13

3.2.1 - Lymphatic Filariasis .............................................................................................................. 14

3.2.2 - Leprosy - a disease that is still neglected, but has a cure ....................................................... 14

3.2.3 - Improving access to and the quality of prevention, diagnosis and treatment services for malaria, tuberculosis and HIV/AIDS .................................................................................. 15

3.3.4 Prevention of vaccine-preventable diseases ......................................................................... 17

4 - PUBLIC HEALTH EMERGENCY PREPAREDNESS AND RESPONSE ........................................ 20

4.1 - São Tomé and Príncipe Emergency Medical Team (EMT) ......................................................... 22

4.2 - Training field epidemiologists ................................................................................................ 22

5 - CELEBRATION OF THE 75TH ANNIVERSARY OF WHO AND HEALTH PROMOTION ACTIVITIES .......................................................................................................................... 23

5.1 - Celebration of World Health Day on 7 April 2023 ................................................................. 23

5.2 - Advocacy and raising awareness on alcohol abuse ................................................................. 24

5.3 - Promoting physical activity in collaboration with the Ministries of Youth and Sport and Women's Rights ...................................................................................................................... 25
Message from the acting WHO Representative – Dr Françoise Bigirimana

During the 2022-2023 period, notable results were achieved in São Tomé and Príncipe in the field of health, particularly in terms of planning, developing norms and standards, strengthening capacities, and combating diseases and public health emergencies. These results will be described according to the main strategic objectives of the biennium 2022-2023 for WHO in Sao Tome and Principe, which were as follows:

- Strengthening the governance of the health sector by providing support to develop the National Health Sector Policy and Strategy and a national health financing strategy, with a view to progressing towards Universal Health Coverage and the SDGs 2030.
- Strengthening the pharmaceutical sector to improve access to essential medicines and health products.
- Improving access to quality essential health care and services, including interventions to control priority diseases.
- Preparedness and response to health emergencies, epidemics, and public health events.
- Health Promotion and well-being.

The implementation of these interventions required strong WHO leadership, governance, advocacy, and partnership efforts in the context of the WHO’s 13th General Programme of Work and UN reform.

In order to better position itself as a leading organisation in the field of health, more effectively and efficiently supporting the country, WHO - São Tomé and Príncipe has defined its Country Cooperation Strategy (CCS 2023 - 2027), aligned with the new PNDS towards Universal Health Coverage.

On behalf of the WHO team in São Tomé and Principe, I would like to express our gratitude to the Ministry of Health and the government as a whole, to partners and donors for the collaboration during this biennium.

Photo caption: Members of the WHO office team in São Tomé and Principe
Country Cooperation Strategy 2023-2027 - a five-year cooperation plan with 5 priorities

The WHO Country Cooperation Strategy (CCS) with São Tomé and Príncipe was adopted in July 2023 and defines five priority areas of intervention for the next five years:

1. refocusing on the district health approach and strengthening primary health care to achieve universal health coverage;
2. strengthening International Health Regulation capacities, emergency prevention, preparedness and response;
3. promoting health in all policies to improve the health and well-being of the population;
4. developing a sustainable health financing strategy; and
5. developing the health workforce.

The strategic areas identified in the new document are those in which WHO has the capacity and comparative advantage to utilise expertise and core functions to provide technical support, develop standards and policies to ensure quality health care and services, create more partnerships for health and assess trends and progress, and continue efforts to strengthen health system capacities.

This Country Cooperation Strategy 2023-2027 reaffirms the WHO’s commitment to supporting São Tomé and Príncipe in achieving its national vision and objectives in the health sector and is valued at more than 10 million US dollars as WHO catalytic funds, which will enable it to mobilise other development partners in São Tomé and Príncipe.
1 - STRENGTHENING HEALTH GOVERNANCE

During 2022-23, the WHO invested resources and time to support the government in updating its health policy and developing the PNDS to better guide its future action. And it was with the aim of achieving greater performance from the national health system that the Government of São Tomé and Príncipe adopted a new National Health Development Plan (PNDS 2023-2032) in 2023, aligned with its vision for development and the National Health Policy. Efforts will be made to improve capacity and access to services by reorienting the health system to prioritise primary health care and improving the availability, distribution and quality of human resources, etc.

The country thus wants to realise a new paradigm of a health system rooted in the communities and closer to the people, where health care is accessible to all, and without taking into account the age or socio-economic condition of anyone.

1.1 - PNDS - 10-year National Health Strategic Plan

With the aim of finding lasting answers to the problems in the health sector, the government of São Tomé and Príncipe, with the support of the World Health Organisation and other partners operating in the health sector, has drawn up the first National Health Development Plan 2023 - 2032.

As an essential instrument of governance, guiding and facilitating the building of a commitment to achieving an improved state of health in the archipelago, the PNDS integrates and emphasises the efforts of all those involved in promoting and protecting health. It also outlines strategies.
that contribute to the development of human resources, innovation and research in health, and a sustainable financing plan for the Health System.

1.2 - Health Financing - a national health financing leading to Universal Health Coverage

São Tomé and Príncipe is the country in the African region and Small Island Developing States (SIDS) where the percentage of households with catastrophic health expenses in accessing health services, including seeking medical care or medical evacuations to Portugal, is the highest. According to the report of the exploratory mission on Universal Health in São Tomé and Príncipe (2021), 54 per cent of households do not have the means to buy the medicines they need and 10 per cent do not have access to the health services they need.

The WHO has therefore prioritised this important area of work in its new Country Cooperation Strategy (CCS, 2023-2027) by providing the necessary technical support to the country, using the expertise and tools available at all three levels of the Organisation (Country Office, AFRO Region and Headquarters), including a comprehensive and coherent health resource flow (HRF) assessment follow-up tool, the Health Financing Progress Matrix (HFM), the WHO’s standardised qualitative approach to assessing the country’s health financing system.

Progress towards Universal Health Coverage (UHC) in São Tomé and Príncipe needs not only a strong political commitment, but also a coherent health financing strategy.

The National Health Financing Strategy, which is still at the level of analysis and the creation of national competences, will support the successful implementation of the new PNDS by outlining the strategic guidelines for the government:

- Mobilise internal and external funding for health.
- Improve equity in access to health care among the most vulnerable people.
- Improve financial protection against catastrophic health expenses for all.
- Promote strategic acquisitions, especially for primary care services, and improve the efficiency and equity of public spending.
- Improve the resource monitoring mechanism.
- Reinforce governance for health financing.

1.2.1 - National Health Accounts 2018-2021

Carried out between November 2022 and April 2023, this activity was supported by partners, particularly WHO, GAVI and the Global Fund to fight AIDS, TB and Malaria, as an effective and efficient decision-making tool for better monitoring of sector interventions with a view to rationally allocate resources to health and optimising their use. The financial information from these 4 years assessed is valuable for the development of the national health financing strategy.
The national health accounts (NHA) provide an exhaustive description of financial flows within the health system, and show where resources come from and how they are used. The NHA make it possible to assess the effectiveness of public policies in favour of health, with a view to correcting funding imbalances and achieving universal health coverage in São Tomé and Príncipe.

NHAs are a tool for monitoring the exhaustive and coherent evaluation of the flow of resources made available to the health system. They are used to calculate the total amount of health expenditure and medical goods consumed by the country over a given period. This procedure makes it possible to monitor and evaluate all the financial resources mobilised by the country to achieve national objectives and international health commitments. They are essential for monitoring trends in health expenditure and the factors that underlie them, and are of paramount importance for planning and distributing resources within the framework of health policy.

### ESTRUTURA DE FINANCIAMENTO (Em Milhões de Dbs)

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Photo caption: Sources of funding for NHA in São Tomé and Príncipe

According to the results of the national health accounts 2018-2021, the average state budget for health is around 12.3 per cent for the period 2018-2021, which is lower than the Abuja Declaration, which recommends that countries allocate at least 15 per cent of the total state budget to the health sector.

Total health expenditure in São Tomé and Príncipe also rose from STN 321.5 million to STN 863.3 million, representing growth of 168.6 per cent and an average annual increase rate of 14.3 per cent. The structure of total health expenditure is mainly dominated by current expenditure (97.4 per cent). Investments in health are estimated at 2.6 per cent of total health expenditure.

The contribution from external partners and donors was 46.9 per cent in 2021 and remains the main source of funding, followed by state spending and households.

The health insurance system is almost non-existent (0.7%). The country's social security system covers only a small part of the population and does not cover the risk of illness. The introduction of universal health insurance and cost-sharing systems could reduce the burden of household spending and move towards universal health coverage.

The WHO's support made it possible to strengthen the national institutional capacities essential for setting up the team to draw up the national health accounts with the aim of institutionalising the NHA as an annual exercise for the Ministries of Health and Finance.
1.2.2 - The Health Financing Progress Matrix (HFPM): A new tool

The HFPM aims to assess the current situation in São Tomé and Príncipe, as well as to make clear, evidence-based recommendations on priority directions for health financing policy, accelerating progress towards Universal Health Coverage and helping to build health system resilience.

Essentially qualitative in nature, but making extensive use of quantitative indicators, the HFPM assesses a country’s health financing institutions, processes and policies, and their implementation, against a set of benchmarks based on good practice and the synthesis of global evidence on what works in health financing to progress towards Universal Health Coverage.

To this end, a programme roadmap was proposed and implemented:

- Organisation of a national dialogue to start the process of drawing up the National Health Financing Strategy, with the inclusive participation of the ministries of health, finance and other sectors, development partners and WHO experts.
- Debate on the results of the National Health Accounts 2018-2021 and sharing of global good practices in health financing.
- Presentation and debate on the process and stages of drawing up the National Health Financing Strategy.
- Introduction in November 2023 of the Health Financing Progress Matrix tool (HFPM) and launch of the national evaluation.

1.3 - Strengthening the Partnership for Health - Coordination mechanism for aligning partners with national health priorities

The multiplicity of partners sometimes leads to duplication and fragmentation of development aid. In view of this situation, the WHO created a consultative platform of health partners in São Tomé and Príncipe in 2023.

It is a mechanism for partners working in the health sector to establish a basis for dialogue and coordinated action and collaboration between them and the government in order to minimise fragmentation, ensure alignment and achieve better health results in the country. On the other hand, this platform aims to mobilise more resources for the implementation of the PNDS 2023-2033.

The platform of health partners includes bilateral and multilateral partners and international NGOs that work on or finance projects in the field of health. During 2023, two meetings were organised by the WHO and attended by the United Nations Coordination Office (RCO), the United Nations Children's and Education Fund (UNICEF), the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA), the Marquis of Vale-Flor Institute (IMVF), the African Development Bank (AfDB), the Global Alliance for Vaccine Improvement (GAVI), the Global Fund, the European Union (EU), the World Bank, and the Embassies of Portugal, Brazil and China. The WHO, as the United Nations' specialised agency for health issues, is coordinating this platform.
The WHO has mapped partners and its programmes in the field of health and has created an online platform for the continuous sharing of information and updates from partners on existing projects or opportunities for funding and collaboration.

At one of the meetings, the ministry of health presented the National Health strategic Plan and the budget gap for the next three years, as a way of appealing for more support from the development partners.

In addition to this platform, the WHO is also part of other coordination initiatives in the health sector, such as the Country Coordination Mechanism (CCM) that does the oversight of the Global Fund and GAVI programs, and also within the framework of the UN Country Team (UNCT), which includes all the United Nations agencies represented in São Tomé and Príncipe.

2 - STRENGTHENING THE PHARMACEUTICAL SECTOR TO IMPROVE ACCESS TO MEDICINES AND ESSENTIAL HEALTH PRODUCTS

A well-organised and efficient pharmaceutical sector is an extremely decisive factor in the smooth running of the health system, as it has a significant impact both on the population's access to medicines and pharmaceutical products and on household and government spending on health.

However, São Tomé and Príncipe continues to face frequent stock-outs of essential medicines in the health services, high and unaffordable prices for most of the population, as well as insufficient human resources and poor skills in the pharmaceutical sector.

The bureaucracy and slowness of the stock procurement process at the central drug purchasing centre (FNM) is also one of the challenges facing this sector.

Furthermore, the country is facing a lack of adequate institutionalization of the services that make up the pharmaceutical sector, such as the regulatory system, the medicines supply warehouse and the implementation and monitoring of pharmaceutical policy. There is also the lack of and failure to update clinical protocols and therapeutic guidelines, norms, standards and procedures that facilitate the management of pharmaceutical sector, the prescription of medicines and the guarantee of control and quality, as well as the challenges in terms of funding and infrastructure that contribute to limiting the pharmaceutical sector impact.
The WHO provided technical support in collaboration with the WHO Collaborating Centre in Brazil (FIOCRUZ), and carried out a programmatic and financial assessment of the pharmaceutical sector in São Tomé and Príncipe in 2022. An action plan was drawn up for this sector and is already being implemented. Other achievements include:

- Development and technical validation of national guidelines on pharmaceutical services, standards, statutes and internal regulations on pharmaceutical services in the country;
- Development of standard operating and procedures and FNM technical manuals;
- Design of a standardized medical prescription model training and dissemination in all health facilities, as well as a patient safety manual for prescribing and dispensing medicines;
- The National List of Essential Medicines (LNME) and additional lists for pediatrics and public health emergencies were also drawn up in São Tomé and Príncipe.

The WHO has also recommended the institutionalization of the pharmaceutical regulatory system, the adoption of statutes and internal regulations for the proper functioning of the central pharmaceutical warehouse and the strengthening of the control of pharmaceutical products. It should also be noted that thanks to the WHO’s intervention, a warehouse is being built with the support of the UNDP and the Global Fund. The new infrastructure is equipped with modern resources and technologies.

3 - IMPROVING ACCESS TO QUALITY ESSENTIAL HEALTH CARE AND SERVICES, INCLUDING INTERVENTIONS TO CONTROL PRIORITY DISEASES

The vision for health services in the PNDS is of a service that is accessible to the entire population and of high quality. And this goal will only be possible by strengthening the institutional capacities for managing, planning, regulating and operating a National Health Service, and under the leadership of the Ministry of Health, in integrating policy and taking on the country's health commitments.

The PNDS also emphasizes the importance of defining the health services to be provided at each level of healthcare provision, their expansion and quality, and the commitment to bring them ever closer to the population. On the other hand, decentralised and inclusive health services that include financial sustainability mechanisms and are available in the right places and provided by trained professionals, with a view to progressing towards Universal Health Coverage.

3.1 - Improved health services in the Autonomous Region of Príncipe (RAP)

The double insularity of the RAP has a negative impact on the health of the population of the island of Príncipe, with restrictions on access to health care and a high dependence on the Dr Ayres de Menezes Central Hospital, which is a 45-minute flight away. On the other hand, the shortage of trained and specialised staff, coupled with the deterioration of health infrastructures, the visible impacts of climate change on the health system and the recurrent unavailability of hospital medical equipment, medicines and health products, among other constraints, jeopardize the ability to provide health care with a minimum of safety and quality.
Declared a World Biosphere Reserve by UNESCO in July 2012, the island of Príncipe is the first African reserve to be part of the world coastal biosphere network and has since been making efforts to become a centre of attraction for tourism, a very important economic asset for the entire archipelago.

The island of Príncipe is the second largest island in the country, occupying approximately 14.2 per cent of the national territory and 150 km from the island of São Tomé. Established as an autonomous region since 1995, Príncipe covers an area of 160 square kilometres and has an estimated population of 9,341 inhabitants, according to projections made by the National Statistics Institute in 2022. Santo António is its main urban centre and consequently the region’s capital.

The Dr Manuel Quaresma Dias da Graça Hospital is 45 minutes away by plane and around 8 hours by boat from the island of São Tomé. In the event of an emergency, patients are transferred or evacuated to the Dr Ayres de Menezes Hospital in São Tomé, but the process depends on the availability of air transport, financial resources, weather conditions and a whole range of factors... and all of this always represents a risk to patients’ lives.

In 2023, the WHO has focused to this region in order to mitigate its vulnerability and improve access to and the quality of essential health care and services for its population.

3.1.1 Assessment of the capacity and functionality of the Dr Manuel Quaresma Dias da Graça hospital

A joint multidisciplinary technical mission was carried out including a team from the Ministry of Health. The mission focused on assessing the capacity and functionality of the regional hospital, Dr. Manuel Quaresma Dias da Graça hospital, with focus on the organisation and work processes, infrastructure and availability of medical equipment.

The report has highlighted key challenges as follows:

- Lack of qualified human resources, lack of specialists and lack of training in emergency health management;
- Limitations in the response capacity of clinical services;
- No services even for essential emergency surgery such as cesarian section;
- Lack of service for emergency and intensive care;
- No blood transfusion service;
- The oxygen equipment no functioning;
- Huge gaps in hygiene, water and sanitation (WASH);
- The hospital infrastructures are old, with serious deficiencies in terms of safety for patients and staff, access to water and electricity, maintenance of equipment and waste treatment.

Among key recommendation, WHO proposed:

- Development of a costed regional health plan for resource mobilization. The plan should present all the needs and priorities within a logical framework for a strong regional health system, with a certain degree of autonomy to manage essential health services and emergencies; followed by the mobilization of resources for the installation of a blood bank and essential surgery and the renovation of the hospital.
Training of health professionals, including the implementation of Telemedicine with the Ayres de Menezes Hospital and the deployment of specialized medical missions to the hospital in Príncipe, are some of the interventions that can help mitigate geographical isolation and the limited resources of the health system, with a direct impact on improving the level of health care;

3.1.2 WHO support

WHO is committed to supporting the development of the RAP health plan and to do an advocacy and resource mobilization to address the many challenges identified in this assessment.

The WHO will also advocate and provide the necessary support for the implementation of telemedicine in the RAP hospital from the central hospital or other foreign institutions.

Provide urgently a new oxygen equipement for the hospital in Príncipe.

Photo caption: Formal handover of the Oxygen Plant by the WHO Representative to the President of the Regional Government of Príncipe

It is a containerised oxygen production unit and produces oxygen with a purity of over 93%, within the recommended standard.

In addition to donating this oxygen centre, the WHO has purchased spare parts to maintain it and has carried out work to improve the facilities by building new structures to house the new equipment.

The donation is part of the organisation’s support for the health system and aims to put an end to the shortage of medical oxygen in Santo Domingo’s hospitals.
This support from the WHO is part of a drive to improve and empower the country's health services through the arrival of technical missions of biomedical engineers who have been able to provide technical assistance and carry out inspections and evaluations of the oxygen production system, maintenance and repair of various other medical devices, which during the first months of the COVID-19 pandemic quickly reached the limit of their capabilities due to a lack of regular maintenance.

On-site training was also given to 12 national technicians on the operation and maintenance of other medical equipment such as sterilisers, the repair of electric scalpels and oxygen concentrators, the maintenance of oxygen plant accessories and the safety management of medical devices.

3.2 - Disease control to improve access and quality of essential health services

The control of communicable and non-communicable diseases is one of the priorities defined within the framework of cooperation between the WHO and the Government. The WHO has been focusing its support on tackling communicable diseases, including vaccine-preventable diseases, malaria, HIV/AIDS, tuberculosis and neglected tropical diseases (NTDs) by strengthening institutional capacity, producing evidence, strategic planning, mobilizing resources, monitoring implementation and evaluating the performance of the different programmes. This effort, combined with those of other partners, has resulted in significant gains that put São Tomé and Príncipe on the list of countries on the path to eliminating lymphatic filariasis (LF), malaria and mother-to-child transmission of HIV.

Within the framework of non-communicable diseases, the WHO has essentially focused on the search for evidence capable of guiding integrated policies and strategies to combat them, using a multi-sectoral approach that takes risk factors and social determinants into account.
With regard to neglected tropical diseases (NTDs), São Tomé and Príncipe shows a very optimistic picture when compared to other countries in the African region. However, efforts must be redoubled to eliminate diseases such as lymphatic filariasis (Giba), which has made enormous progress in the country.

3.2.1 - Lymphatic Filariasis

Lymphatic filariasis, commonly known as elephantiasis, is a painful and deeply disfiguring disease. It is caused by an infection with parasites classified as nematodes of the Filarioidea family, which are transmitted through the bite of infected mosquitoes. Mosquitoes (Culex, Anopheles or Aedes) become infected with microfilariae (of the species Wuchereria bancrofti, Brugia malayi or B. timori) by ingesting blood when they bite an infected host.

The larvae then migrate to the lymphatic vessels where they develop into adult worms, thus continuing a cycle of transmission. Although the infection can be acquired during childhood, its visible manifestations, such as oedema of the limbs, breast or hydrocele, can occur later in life, causing temporary or permanent disability.

Lymphatic filariasis has a major social and economic impact. Initial estimates of lymphatic filariasis worldwide indicated that 25 million men had hydrocele and more than 15 million people had lymphoedema. At least 36 million people continue to have these chronic manifestations of the disease.

As a result of the national strategic plan to fight neglected tropical diseases (NTDs) and in line with the WHO AFRO roadmap for the fight against NTDs, three mass treatment campaigns against Lymphatic Filariasis were carried out in São Tomé and Príncipe.

In 2018, the first national mass treatment campaign was therefore conducted with the dual therapy Diethylcarbamazine and Albendazole (DA). In 2019, still following the WHO recommendation, the second campaign was carried out with the triple therapy of Ivermectin, Diethylcarbamazine and Albendazole (IDA), followed by a third at the end of 2020.

The three mass treatment campaigns, which had 100 per cent geographical coverage, were accompanied by treatment coverage (TC) surveys that confirmed epidemiological coverage of over 65 per cent in each of the 7 health districts (the minimum level recommended by the WHO for this intervention to be effective).

A survey to assess the level of transmission was carried out in 2022, with the presence of external experts, which concluded that transmission of lymphatic Filariasis has been interrupted in the country's 7 health districts. Therefore, mass treatment must stop and surveillance and monitoring of transmission must continue towards elimination. To this end, two more transmission surveys are planned for 2024 and 2026.

3.2.2 - Leprosy - a disease that is still neglected, but has a cure

Leprosy is a chronic infectious disease that predominantly affects the skin and peripheral nerves caused by mycobacterium leprae known as Hansen's bacillus. It is a curable disease and, when left untreated, can cause progressive and permanent disabilities. It is a disease registered in all
six WHO regions, with the majority of annual detections of new cases coming from South-East Asia. In 2022, 174,087 new cases were reported worldwide (12.6 per cent in Africa).

São Tomé and Príncipe is among the countries where the incidence of leprosy is relatively low. According to data from the leprosy prevention and control programme, there have been no cases of leprosy in São Tomé and Príncipe since 2016, which suggests that the country is in the process of eliminating leprosy.

In order to find out the real epidemiological situation of leprosy in the country, a WHO technical mission was carried out in 2023, which observed some cases of leprosy and unfortunately confirmed the existence of this pathology in São Tomé and Príncipe. During a short field visit, 10 cases were found, 9 of which were multibacillary (MB) and 1 paucibacillary (PB). Of the 10 cases, 3 were registered in children under the age of 15. Field visits and contact tracing must continue in order to increase the detection of cases and institute appropriate treatment to help reduce the transmission of the disease.

The experts found that the failure to report leprosy is due to a lack of familiarisation among health professionals with the disease. As an immediate action, the WHO organised two training sessions for 20 health professionals in São Tomé and 15 others in the Autonomous Region of Príncipe. The training was aimed at doctors, surgical technicians, nurses, laboratory technicians, midwives and community health workers. The training focused on the clinical signs of leprosy, its history, prevention, diagnosis, classification, treatment, sequelae and the fight against the stigma caused by this disease.

In view of the situation, the WHO has undertaken to immediately order medicines to treat the leprosy cases observed.

The mission recommended drawing up a plan to combat leprosy. The WHO in turn committed to supporting the development of this plan by 2024. It should include, among other things, staff training, capacity building at laboratory level, the creation of a leprosy database, as well as information, education and communication actions on the disease.

3.2.3 - Improving access to and the quality of prevention, diagnosis and treatment services for malaria, tuberculosis and HIV/AIDS

São Tomé has made important progress in the fight against communicable diseases such as malaria, tuberculosis and HIV/AIDS, thanks to the commitment of the governments and the
technical and financial support of the different partners and under the leadership of the national cadres. The WHO has consistently shown its commitment and technical support in the framework of improving access to and the quality of prevention, diagnosis and treatment services for malaria, tuberculosis and HIV/AIDS in collaboration with the Global Fund and other partners.

This biennium coincided with the end of the strategic plans to fight malaria and the consolidated plan to fight HIV/AIDS/Hepatitis and Tuberculosis. Thus, recognising that programme evaluations are evidence-based management tools that, through analysis of the epidemiological situation and evaluation of the performance of the respective programmes, aim to strengthen them for better results and greater impact, which the country already achieves systematically, the WHO has focused its technical and financial support on evaluating the performance of these programmes.

Based on the results of these evaluations, new strategic plans were developed which served as the basis for developing the proposal to mobilise resources from the Global Fund within the framework of the new grant.

- **Evaluation of the National Malaria Control Programme 2017-2021:**

  The average incidence recorded stood at 5.6 per 1,000 nationwide and 0.8 per 1,000 in the Autonomous Region of Príncipe in 2021. The country has therefore not achieved its goal of reducing malaria incidence to less than one case per 1,000 inhabitants in all districts of São Tomé and Príncipe and to zero (0) autochthonous cases in the Autonomous Region of Príncipe. However, the mortality reduction targets were achieved overall, with a mortality rate of 0.0 cases per 100,000 inhabitants in 2022. With these evaluation results, the goal of eliminating malaria by 2025 has been jeopardised. Based on the results of the evaluation, WHO supported the drafting of the new strategic plan.

- **Malaria Elimination Strategic Plan 2023 - 2027**

  The aim is to reduce the incidence of malaria to less than 5 cases per 1,000 inhabitants in five districts of São Tomé and zero (0) indigenous cases in the Autonomous Region of Príncipe and the district of Caué by 2027. The focus will be on the following actions: strengthening the epidemiological and entomological surveillance system, detection and quality laboratory diagnosis and treatment, strengthening integrated anti-vector control interventions, evidence-based prevention measures such as epidemic mapping, stratification, vector resistance; and also innovative actions to strengthen social mobilisation.

- **Epidemiological Review of the National HIV/AIDS Control Programme**

  - There is a downward trend in prevalence in the population aged 15-49, standing at 0.5 per cent in 2021. In terms of key populations: prevalence by group is as follows: sex workers (SW): 1.6; prisoners: 0.5% in 2022.
  - The high ARV coverage rate of 98 per cent.

- **Evaluation of the Prevention of Mother-to-Child Transmission of HIV (EMTCT):**

  Results indicate that São Tomé and Príncipe may be on the path to Eliminating Mother-to-Child Transmission of HIV. The 2019-2021 rate of mother-to-child transmission of HIV is 3.4 per cent, which encourages the country to submit an application for assessment in 2024 for certification.
This performance was possible because there are strong maternal and child health services that provide comprehensive primary prevention and treatment services for pregnant women and exposed babies. Primary prevention services are supported at primary care level by a cadre of dedicated, qualified health professionals who are able to provide services on a sustained basis. However, the availability of quality data and the continuous supply of the necessary screening products and medicines and co-payments has the potential to undermine the achievements and gains, and the sustainability of the EMTCT strategy.

-Preparation of the Integrated Strategic Plan for the fight against Tuberculosis, HIV-AIDS, STIs 2023-2027

Based on the results of performance evaluations and evidence, the WHO supported the developing of the new integrated strategic plan for the fight against Tuberculosis, HIV/AIDS, Sexually Transmitted Diseases and Viral Hepatitis 2023-2027. As an ambitious vision, the plan envisages a São Tomé and Príncipe free of tuberculosis, HIV/AIDS, STDs and viral hepatitis by 2035.

During the period 2022 - 2023 the WHO signed a Memorandum of Understanding with the Global Fund to provide technical assistance to achieve greater and better impact of interventions within the framework of the Malaria, Tuberculosis and HIV/AIDS programmes financed by the Global Fund. The grant is coordinated by the Ministry of Health, which is the main beneficiary represented by an autonomous agency known as the "Grant Management Cell" (CGS).

This support from the Global Fund contributed greatly to the provision of technical assistance from the WHO, as indicated below:

- Technical support for the implementation of malaria, HIV/AIDS and TB programmes in accordance with WHO guidelines and technical directives;
- Programme review of the National Malaria and TB/HIV Programmes 2018-2022;
- Preparation of the National Malaria Elimination Plan 2023-2027 and the new integrated TB/HIV/STI/Hepatitis Strategic Plan 2023 - 2027;
- Important technical support in drawing up the proposal for the Global Fund’s new funding cycle, which enabled the mobilisation of Global Fund funding of 12,934,452.00 euros for the next three years for São Tomé and Príncipe.

3.3.4 Prevention of vaccine-preventable diseases

The different vaccination strategies implemented by the Expanded Programme on Immunisation with the technical and financial support of the WHO, UNICEF and GAVI have led to a gradual and steady improvement in vaccination coverage over the last ten years.

Routine vaccination of children covers the following diseases: Tuberculosis, Polio, Measles, Whooping Cough, Tetanus, Hepatitis B and Yellow Fever, for children under 5 years old. The WHO also supported the reinforcement of the vaccination of girls aged 10-12 against HPV (Human Papilloma Virus) and COVID-19, including adults.
It also supported the national vaccination coverage survey, which made it possible to assess the coverage of all the antigens in the Vaccination Programme, and to assess the coverage of all the EPI target groups, as shown in the tables below:

![Vaccination coverage graph 1-2 years (%), 2023](image1)

<table>
<thead>
<tr>
<th></th>
<th>2023</th>
</tr>
</thead>
<tbody>
<tr>
<td>BCG</td>
<td>97.5</td>
</tr>
<tr>
<td>Pólio</td>
<td>85.9</td>
</tr>
<tr>
<td>PCV-13</td>
<td>86.8</td>
</tr>
<tr>
<td>Pentavalente</td>
<td>86.8</td>
</tr>
<tr>
<td>Rotavírus</td>
<td>83.4</td>
</tr>
<tr>
<td>Sarampo / Rubéola</td>
<td>83.7</td>
</tr>
</tbody>
</table>

![HPV vaccination coverage graph (%), 2023](image2)

<table>
<thead>
<tr>
<th></th>
<th>2023</th>
</tr>
</thead>
<tbody>
<tr>
<td>10-11 years</td>
<td>65.6</td>
</tr>
<tr>
<td>12-13 years</td>
<td>88.61</td>
</tr>
<tr>
<td>14-17 years</td>
<td>74.03</td>
</tr>
</tbody>
</table>

The WHO also supported the Department of Health Information Systems in drawing up strategies and micro-plans, strengthening the use of the DHIS2 tool to improve data quality, with a data validation component and developing strategies to overcome any shortcomings in the daily recording of health data in district health units and in the various central, district and regional services.

Also in the chapter on contributions, the organisation supported the Ministry of Health through the Expanded Vaccination Programme to reinforce vaccination in the districts with low vaccination coverage (Água-Grande, Mê-Zóchi, Lobata and Caué) in order to vaccinate children with zero doses and those whose vaccination schedule was incomplete.

The WHO found an innovative approach to improving coverage in these districts, involving the NGOs MARAPA and ADRA, which strongly encouraged families and communities to take up vaccination. A memorandum of co-operation (FENSA) was signed which has allowed us to work in collaboration with these two NGOs to date in the context of reinforcing vaccination in the districts.
Vaccination coverage against all antigens and in all districts is over 80 per cent, based on the National Vaccination Coverage Survey 2023 carried out by the WHO, which reflects better access to vaccination services and the use of services by the community. These high levels of vaccination coverage, recorded year after year, have made São Tomé and Príncipe an example of routine vaccination among the countries of the WHO African Region. The MICS study, carried out in 2019, highlighted that approximately 65.9 per cent of children had received all their vaccinations by the first year of age.

**Vaccination against COVID-19**

São Tomé and Príncipe was one of the first countries in the African region to receive COVID-19 vaccines, having started the vaccination process in March 2021. It achieved coverage of 81.2 per cent of people with a complete vaccination schedule considering the target population, and 52.3 per cent of people with a complete vaccination schedule considering the general population. The country is also, at regional level, the one with the best coverage for the primary programme and the booster dose, and one of the best at managing the vaccine doses received.

![COVID-19 coverage rate graph, 2023](image-url)
The events of the last 20 years in the health sector confirm São Tomé and Príncipe's vulnerability to public health emergencies of different natures and origins, including epidemics, emerging diseases, the effects of climate change, disasters or catastrophes, with a high impact on the population and repeatedly exceeding the capacities of the National Health System. Examples of such events include the cholera epidemic in 2005/2006, epidemic outbreaks of rotavirus diarrhoea in 2004, 2010 and 2012, the influenza B outbreak in 2011, the increase in the number of cases of necrotising cellulitis between 2016 and 2018 and, more recently, the COVID-19 pandemic and the dengue epidemic.
Since the beginning of the COVID-19 pandemic, the country has already overcome 5 waves of this disease, the last of which was in November 2023. By 31 December 2023, the total number of accumulated cases was 6745, with an attack rate of 3,016/100,000 inhabitants, 80 deaths and a lethality rate of 1.2%. During the last biennium, 2022-2023, approximately 2,833 cases and 23 deaths from COVID-19 were reported, with a wave at the beginning of 2022. During the rest of 2022 and 2023, the situation remained stable, with the exception of two small waves in March and November 2023.

Dengue Outbreak
At the end of December 2021 and beginning of March 2022, the country experienced torrential and long-lasting rains that caused floods and landslides. With high levels of insalubrity in most places of residence, this led to favourable conditions for the proliferation of mosquito vectors of communicable diseases such as malaria and dengue. As a result, the country has faced an epidemic outbreak of dengue fever for the first time since April 2022. As of 5 January 2024, a cumulative total of 1232 dengue cases and 11 deaths have been confirmed in all health districts. Effective control of the dengue epidemic was maintained, going from an average of 121 cases per week between weeks 21 and 26 of 2022 to an average of 16 cases per week between weeks 31 and 36 of 2022, and then to an average of around 1 case per week throughout 2023.
During the periods of preparation and response to the COVID-19 pandemic in the country, as well as dengue fever, the authorities and technical leaders noted some areas that needed priority development in the national health system. WHO has contributed to strengthening laboratory, case management and surveillance capacities, which are detailed in the following points emergency medical team and field epidemiology courses.

4.1 - São Tomé and Príncipe Emergency Medical Team (EMT)

Emergency medical teams are groups of health professionals from the government, non-governmental organisations, the army and international organisations who provide direct care to populations affected by public health emergencies, including natural disasters, epidemics and humanitarian emergencies.

With the support of the World Health Organisation, the São Toméan Ministry of Health organised training for 52 national staff who currently make up the Emergency Medical Team (EMT). The São Tomé and Príncipe team includes doctors, nurses, laboratory technicians, pharmacists, water and sanitation technicians, logisticians and firefighters. For six weeks they had theoretical and practical training sessions that involved simulation exercises in the classroom and in a hospital environment.

It has the capacity to respond promptly to emergency public health problems. It can also receive and manage countermeasures and be mobilised in accordance with the protocols and procedures adopted under the International Health Regulations (IHR). This is a team that must continue to consolidate and make progress in the following stages in order to improve its capacity to respond to multi-risk and multi-virus situations, so that it can become internationally certified to provide care in the country and abroad in case of need.

4.2 - Training field epidemiologists

In the 2022-2023 biennium, a total of three field epidemiology courses were completed in São Tomé and Príncipe (FETP), training 41 professionals in a single health framework (human, animal and environmental health) with the following objectives:

- Create a response network for outbreaks and public health emergencies;
- Train a group of local tutors;
- To improve the knowledge of central and local teams in health surveillance;
- Achieving the sustainability of the programme in the country;
Improve the country's score for human resources training within the framework of international health requirements.

The project to train epidemiologists is an initiative of the Ministry of Health under the organisation of the Brazilian Association of Field Epidemiology Professionals - ProEpi do Brasil, with the collaboration of the CDC-Atlanta of the United States of America, the WHO, the UNDP and the Government's Project Administration Trust Agency (AFAP) with funds from the World Bank.

Of the 41 field epidemiologists trained, 17 are in the district of Água-Grande, 4 in Cantagalo, the same number in the districts of Lembá and Caué, Lobata has 1, Mé-Zochi 5 and the Autonomous Region of Príncipe 6 epidemiologists. Six national tutors were also trained with a view to reducing costs, institutionalising the course and gradually making it sustainable.

5 - CELEBRATION OF THE 75TH ANNIVERSARY OF WHO AND HEALTH PROMOTION ACTIVITIES

Photo caption: Inauguration of the exhibition on the achievements in health at the WHO's 75th anniversary

5.1 - Celebration of World Health Day on 7 April 2023

The celebration of World Health Day and the 75th anniversary of the WHO under the theme "Health for All" was successfully organised in partnership with the Ministry of Health and the Ministry of Youth and Sports, through the Youth Institute and the Directorate-General for Sports. Three major nationwide events were held as part of this event:

- An exhibition on the history of the OMS, with notable international and national achievements;
• Inclusive march with the participation of children, teenagers, young people, the elderly and disabled people for a total of 500 participants;

• Health fairs at district level.

The health precincts and local communities, with support from the WHO, also organised health fairs where thousands of users received health care. The health fairs were held in the districts of Água-Grande and Caué, offering integrated services (vaccination, family planning, malaria screening, HIV/AIDS, Covid-19, blood glucose and blood pressure checks).

Also marking the 75th anniversary of the founding of the WHO, the ministries of health, youth and sports, with the sponsorship of the WHO, organised an inclusive health promotion walk in which just over 500 people took part, including children, adolescents, young people, the elderly and the disabled.

5.2 - Advocacy and raising awareness on alcohol abuse

São Tomé and Príncipe is described as a country where cardiovascular diseases, diabetes, chronic respiratory diseases, cancer and mental health problems are the biggest cause of morbidity, accounting for more than 60 per cent of deaths, according to national data. For this reason, the WHO has supported advocacy and awareness-raising activities on the risk factors of non-communicable diseases.
Advocacy with the President of the National Assembly and the leaders of the political parties with parliamentary seats on the abusive consumption of alcohol as a risk factor for non-communicable diseases and on the need to take up the Alcohol Consumption Reduction Bill with a view to its approval. Indeed, according to the WHO STEPs surveys of 2010, 2016 and 2020, alcohol consumption in São Tomé affects 85 per cent of the population who consume this product abusively, and this represents a greater risk factor for contracting non-communicable diseases.

5.3 - Promoting physical activity in collaboration with the Ministries of Youth and Sport and Women's Rights

The WHO has supported collective walks to raise public awareness about mental health, breast cancer screening as part of "Pink October", blood donation, gender-based violence, the fight against AIDS and other social scourges.

It is also important to emphasise the WHO's ongoing commitment to promoting physical activity, including group walks, gymnastics and, recently, the introduction of a yoga course for United Nations staff in São Tomé and Príncipe, in order to promote well-being and prevent non-communicable diseases.
Photo caption: WHO has supported the promotion of physical activity, including walking, gymnastics and yoga.