



Delegates at RC69 adopt a strategy to take countries' integrated disease surveillance and response to a much higher level

Hailing it as comprehensive, fit for purpose and well adapted to the African context, RC69 delegates adopted a new strategy for integrated disease surveillance and response and congratulated the Secretariat for its development.

In presenting the 10-year strategy, which will be launched in 2020, Dr Zabulon Yoti, acting Regional Emergency Director, explained that the previous approach, introduced in 1998, had become a cornerstone of disease surveillance, epidemic preparedness, detection and response. But conditions and contexts have changed, he said, and the region's strategy needed to keep up.

Worryingly, recent analysis by the World Health Organization (WHO) indicates that emerging and re-emerging infectious diseases and other public health emergencies are on the rise, predictably in certain areas and unpredictably in other places. This increase is largely attributed to the growth of cross-border movements and international travel, increasing human population density and informal settlements along with climate change impacts and changes in the way humans and wild animals interact.

An acute public health event is reported on an average of every four days on the continent. And more than 80% of the public health emergencies between 2016 and 2018 were due to infectious diseases. More than ever, Dr Yoti stressed, countries need to be as prepared as possible to respond to health emergencies.

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Interview with Dr Thaddée Ndikumana, Minister of Public Health and Fight Against AIDS in Burundi

“Burundi is ready to face a possible Ebola epidemic.”

Burundi's Minister of Public Health and Fight Against AIDS, Dr Thaddée Ndikumana, spoke to the RC69 Journal about his country's preparedness for transboundary transmission of the Ebola virus disease epidemic in the Democratic Republic of the Congo. He is optimistic that his country is ready to face a possible Ebola outbreak.

Listen to his interview



Interview with Dr Chitalu Chilufya, Minister of Health in Zambia

Zambia shows its engagement to consolidate universal health coverage.

Zambia's Minister of Health, Dr Chitalu Chilufya, explained his country's achievements to attain universal health coverage and facilitate access to quality health services for all. The institutionalization of universal health insurance by law is among the most important gains from the new public health policy.

Listen to his interview



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TB survivor urges Health Ministers to prevent catastrophic costs related to the disease



Tuberculosis was responsible for a quarter of all deaths in Africa in 2018, yet domestic financing on the continent provides only 26% of the funds needed to combat the disease.

At the launch of the 2018 Africa Continental Scorecard yesterday, the unanimous message from stakeholders – WHO, the African Union, Ministers of Health and NGOs – was that the Sustainable Development Goal target of reducing the incidence of TB by 80% by 2030 can only be achieved if drastic action is taken now.

The Minister of Health and Population of the Republic of the Congo, Hon Jacqueline Lydia Mikolo, invited her fellow Ministers to “work with us to obtain the necessary resources from our Ministers of

Finance to reduce the burden of this disease. It is time to turn the tide”.

“As a continent, we have made progress,” said Dr Magaran Bagayoko, acting Director for the Communicable Diseases Cluster of the WHO African Region, “but the delivery of services is not evenly distributed and is inadequate to meet the 2030 targets.”

“We have to scale up our responses,” he added. “We need a multisectoral approach that will result in innovative and evidence-based policies for combating TB.” He also urged increased collaboration with stakeholders and influencers who understand the culture of the communities in which they live. “They have the power to create awareness and promote ownership of TB eradication programmes,” he said.

Dr Joseph Cabore, who was standing in for the WHO Regional Director Dr Matshidiso Moeti at the meeting, said that 48% of the TB cases are being missed because patients are tested on equipment that is known to be inadequate and inaccurate.

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Africa is on the verge of an extraordinary public health achievement: Wild polio virus eradication



In a week of highlighting the many health challenges continuing and emerging on the continent, day three of RC69 brought a moment of celebration: Africa passed a milestone threshold – three years as of 21 August with no case of wild poliovirus detected.

Optimism took a front-row seat at the side event that Dr Matshidiso Moeti, WHO Regional Director for Africa, presided over. “I’m very confident that, together, we are on the verge of an extraordinary public health achievement, one which will be our legacy to our children and children’s children,” she said of the day when the wild poliovirus would have been eradicated from the continent.

This milestone sets in motion a comprehensive evaluation process by the Africa Regional Certification Commission to determine if the entire WHO African Region of 47 countries indeed can be declared free of wild polio. The certification is expected in early 2020.

In celebrating the milestone, Dr Moeti also acknowledged the countless professionals and community volunteers who had contributed to this historic achievement, many of them putting themselves in harm's way and some sacrificing their life for this work.

Joining her in recognizing the momentous achievement and the importance of celebrating, Steve Landry, Director of Multilateral Partnerships for the Bill and Melinda Gates Foundation, reminded the delegates that it is still “only one step on the journey”.

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Health Ministers discuss the double burden of malnutrition and obesity



A strategic plan to reduce the double burden of malnutrition in the African Region was adopted by Health Ministers at RC69 yesterday. “The plan outlines the urgent and accelerated action that we must take if we are to meet our goal of ending hunger and all forms of malnutrition by 2030,” said WHO Regional Director for Africa, Dr Matshidiso Moeti.

The plan was received with enthusiasm by all Member States, many of them having already initiated legislative action to protect the health and nutrition of their populations.

Nutrition is an important building block to enable countries to move into the ranks of the world's middle-income economies. But it is in this period of “nutrition transition” that the double burden of malnutrition is particularly prevalent. As populations move into the middle-income bracket, undernutrition and overweight or obesity coexist, often because of the increasing consumption of cheap, processed foods that are high in energy, fat and salt content but of poor nutritional quality.

This diet, which is common in Africa, fails to address chronic undernutrition and micronutrient deficiencies and contributes to increased obesity and diet-related noncommunicable diseases.

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Interview with Dr Sarah Achieng Opendi, State Minister of Health in Uganda

“In a state of emergency, everybody needs to be involved.”

We spoke to Dr Sarah Achieng Opendi, State Minister of Health in Uganda, about the country’s strong preparedness and International Health Regulations capacities due to its long-standing experience in responding to public health emergencies. She pointed out the importance of social mobilization at all levels in emergency response and called for joint external evaluations to search for undetected gaps in emergency preparedness and response plans.

Watch her interview here



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Interview with Dr Zweli Mkhize, Minister of Health in South Africa

“Comprehensive treatment and communities’ involvement are fundamental to fight TB.”

In an interview with the RC69 Journal, the South African Minister of Health, Dr Zweli Mkhize, summarized lessons learned and achievements in preventing and controlling tuberculosis, including treatment of TB-HIV co-infection in his country. He emphasized that the engagement of affected populations and stakeholders and the availability of comprehensive treatments are critical to ending the scourge.

Watch his interview here



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Interview with Moustafa Mijiyawa, Minister of Health and Public Hygiene in Togo

“Health contracting in Togo is a success.”

Moustafa Mijiyawa, Minister of Health and Public Hygiene in Togo, spoke to the RC69 Journal to emphasize that the health reforms put in place in his country, including health contracting, have produced extraordinary results after only two years.

[Watch his interview here](#)



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Neglected no more, 20 tropical diseases move closer to elimination



After eight years of driving through a global road map and four years through a regional strategy to eliminate neglected tropical diseases in Africa, delegates met in a RC69 evening side event to validate the work that had been done and agree on new directions.

Neglected tropical diseases earned their name because they were relatively unknown and overlooked for decades. They can be destructive nonetheless, remaining a health threat to almost 600 million people in Africa. Countries in the WHO African Region bear about half of the global burden of neglected tropical diseases.

As part of the road map, the Expanded Special Project for Elimination of Neglected Tropical Diseases (ESPEN) was established in 2016 to help coordinate the efforts of governments, health and development organizations, donors and private companies in stamping out the neglected tropical diseases.

The ESPEN Partnership is credited with producing tremendous results to accelerate elimination of neglected tropical diseases by reaching communities never reached before with mass drug administration through improved supply chain management.

The work has paid off. Togo announced elimination of lymphatic filariasis in 2017, while Ghana eliminated trachoma in 2018. Kenya became the 41st country in the WHO African Region to be certified free of Guinea worm disease. Leprosy has nearly been eliminated as a public health problem, and the continent is on track to eliminate human African trypanosomiasis by 2020.

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[Welcome to the world of Congolese music](#)



Congolese music is certainly known the continent over and coveted in many parts of the Western world. But back in the two Congos, Congolese music is different things to different people.

What is known as “traditional Congo music” covers a rhythm, repertoire and heritage particular to each ethnic group found on both sides of the Congo River. Congolese traditional music is defined by the ngoma or mbonda (drums), a five-stringed ngonfi (or lute) and maracas. In Congo’s ethnic groups, music is never without dance and both permeate all aspects of daily life – births, initiation rites, marriages, farm work, celebrations and ceremonies.

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Important contacts during RC69

- Regional Office reception:+242 05 770 02 02
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Transportation

Delegates will be transported from the recommended hotels to and from the venue of the meeting every morning. No shuttle service has been planned during lunch breaks; lunch will be served at the meeting venue.

Hospitals and clinics

In case of a health emergency, please call the WHO doctor (Roland Rizet) listed above. However, there are several hospitals that you can visit directly:

- Centre Hospitalier et Universitaire de Brazzaville (CHUB)::+ 242 22 282 61 49
- Hôpital Central des Armées Pierre Mobengo:+ 242 06 654 91 32

- Net Care (face SNDE, Avenue du Maréchal-Lyautey):+242 05 547 09 11
- COGEMO:+242 06 665 60 46

Recommended hotels

The list of recommended hotels is attached to the Information Bulletin. It is strongly encouraged that you book only a hotel on this list for your safety and security and to benefit from the shuttle service provided by the organizers.

Exhibitions

Delegates are invited to visit the various exhibitions in and outside the tents at the back of the Regional Office building. There are several showcases of WHO work on diverse themes, including polio eradication, the Regional Transformation Agenda, universal health coverage, communicable and noncommunicable diseases and maternal and child health. Inside the middle tent is a photo exhibition documenting the successful strategies that Nigeria has taken up towards eliminating AIDS. Outside the tent is a display of photographs featuring WHO in Action.

Internet connection

There is open access Wi-Fi network called RC69 that is available to all delegates.

Coffee and lunch breaks

Morning and afternoon refreshments and lunch will be served to all delegates free of charge in the tents near the exhibition hall from Monday to Friday.

Banks and currency

The monetary unit in Congo is the CFA franc. The exchange rate with the euro is 656 CFA and 589 CFA to the US dollar. An Ecobank ATM is located in the corridor leading to conference room No. 2 in the Regional Office. The machine accepts Ecobank and visa cards from other banks and is accessible 24 hours a day, seven days a week. Other ATMs that operate 24 hours are available in the city.

DAY 4: Thursday, 22 August 2019

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|--------------------|------------------------------|---|
| 07:20–08:45 | Breakfast meeting | <i>The New Global Digital Health Strategy: Member States Input Forum</i> |
| 09:00–09:05 | Agenda Item 4(cont) | Report of the Committee on Credentials |
| 09:05-09:30 | Agenda item 12 (cont) | Framework for provision of essential health services through strengthened district/local health systems to support UHC in the context of the SDGs (Document AFR/RC69/8) |
| 09:30-10:30 | Agenda item 13 | Framework for the implementation of the Global Vector Control Response in the WHO African Region (Document AFR/RC69/9) |
| 10:30–11:00 | Tea Break | |

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|-------------|-------------------------|---|
| 11:00–12:30 | Agenda item 14 | Accelerating the response to noncommunicable diseases in the African Region in line with the Political Declaration of the High-level Meeting of the General Assembly on the prevention and control of NCDs (Document AFR/RC69/10) |
| 12:30–14:30 | Lunch Break | |
| 13:00–14:15 | Side event | <i>Immunization for all by 2030 – Success and challenges towards reaching every child</i> |
| 14:30–16:00 | Agenda item 15 | Information Documents |
| | Agenda item 15.1 | Progress on the implementation of the Regional Strategy on Health Security and Emergencies (Document AFR/RC69/INF.DOC/1) |
| | Agenda item 15.2 | Progress report on the implementation of the Regional Strategic Plan for Immunization 2014–2020 (Document AFR/RC69/INF.DOC/2) |

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