



WORLD HEALTH ORGANIZATION 67th SESSION OF THE REGIONAL COMMITTEE FOR AFRICA

AFRICAN HEALTH MINISTERS ADOPT A STRATEGY TO MANAGE ENVIRONMENTAL DETERMINANTS OF HUMAN HEALTH

African health ministers meeting in Victoria Falls, Zimbabwe for the 67th Session of the World Health Organization (WHO) Regional Committee have adopted a Regional Strategy for the management of Environmental Determinants of Human Health in the African Region.

The strategy provides guidance to Member States on how to address health and environment linkages in order to achieve the Sustainable Development Goals (SDGs). In Africa currently, environmental determinants of human health such as air pollution, water, sanitation and hygiene account for 23% of the disease burden. They are the main drivers of vector-borne and cardiovascular diseases, as well as lower respiratory infections.

Therefore, the strategy seeks to promote closer working relationships between the health and environment sectors as elaborated in the Libreville Declaration on health and environment in Africa. It will also guide countries on the development and implementation of

RC 67 ADOPTS THE FRAMEWORK FOR THE IMPLEMENTATION OF THE HEALTH SECTOR STRATEGY ON SEXUALLY TRANSMITTED INFECTIONS (2016-2021) IN AFRICA

Members States of the WHO African Region have adopted the framework for the implementation of the Global Health Sector Strategy on Sexually Transmitted Infections (STI) 2016-2021 in Africa. This was at the ongoing 67th Session of the WHO Regional Committee for Africa in Victoria Falls, Zimbabwe.

Introducing the framework on day two of the meeting, the Director for Family and Reproductive Health in the WHO Regional Office, Dr Felicitas Zawaira noted that the implementation of the global strategy was behind schedule in the African Region and called for urgent actions to commence implementation. She emphasized that Africa bears the brunt of both curable STIs such as chlamydia, gonorrhoea, syphilis and trichomoniasis and the viral STIs such as herpes simplex type 2 and Human Papilloma Virus (HPV).

joint national plans on the management of environmental risk factors and help strengthen national and regional capacity on environmental determinants of health.

Priority actions to fully implement the strategy will involve strengthening national policy frameworks and institutional mechanisms for environmental and health interventions, baseline and risk capacity assessments, build national capacities and establishment of integrated health and environmental surveillance. Research, community awareness and mobilization as well as primary prevention interventions will also so be central actions for the strategy.

In the discussions, delegates agreed to provide stewardship, and to forge partnerships with donors, multilateral agencies, the private sector and civil society. They will also increase resource allocation and invest more in initiatives and programmes that have an impact on environment and health. In addition, they agreed to set the research agenda, document and share experiences and best practices on health and environment determinants.

WHO was requested to set and to disseminate norms and standards, offer guidance on policy and technical advice to countries. The organization will also facilitate capacity building, mobilise resources, promote stakeholder dialogue and advocate for increased commitment on environmental and health.



“The Management of Environmental Issues Requires Several Sectors” - Dr. Isaac Minani, Director General of health Services, Burundi

1. What is the situation of the malaria epidemic raging now in Burundi?

Dr Zawaira enumerated the impact of STIs on the lives and health of the people of Africa many of which are severe and could lead to other long term public health problems. These include fetal and neonatal mortality, risk of cervical cancer and infertility and facilitation of sexual transmission of HIV. She therefore called for effective implementation of the strategy as a means of preventing these complications. She identified inadequate data, poor implementation of preventive activities, inadequate access to services and inadequate financing as some of the obstacles to effective prevention and control of STIs in Africa.

The goal of the implementation framework is *“to contribute to the end STIs as major public health problems by 2030 in the African Region”*. While the specific objectives are to provide policy and programmatic guidance to member states and to outline the interventions required to achieve the global STI strategy milestones. The framework aims at ensuring that 30 out of 47 African Members States establish STI surveillance systems, provide annual reports of their STI situation and screen at least 95% of pregnant women for HIV and syphilis by 2021 among others.

The interventions proposed include establishing enabling policy environments for implementation of STI services; strengthening STI surveillance and integration them into national health information management and disease surveillance systems; mapping of affected populations to better understand the epidemiological trends and risk factors for transmission STIs; and screening all pregnant women for STIs and HIV. Others are to establish and strengthen the supply chain management systems for essential medicines for treatment STIs and commodities for prevention; enhance national capacity to monitor antimicrobial resistance; ensure equitable access to STI prevention and treatment services by all especially vulnerable groups such as adolescents and women as well as sustainable financing of STI services.

The delegate acknowledged the strides made by WHO in describing the current status of STIs. They however called for strengthened surveillance for evidence based prevention and control interventions.

They emphasized the importance of integrating STIs treatment into mainstream programmes such as reproductive, maternal and child health and targeting of interventions



Since the last quarter of 2016, Burundi has been experiencing malaria outbreak. At the beginning, we thought it was just a few cases, but later, it turned out to be an outbreak. For this reason, in March 2017, the country decided to declare a malaria epidemic and developed response plan. Since we started the

implementation of this plan, recently we noticed a decline in the number of cases.

However, we should remain vigilant because we have few cases in the dry season. We need to ensure that prevention and case management activities continue during the next rainy season.

2. What links are there between the current outbreak and the environmental determinants of health?

The links are very close. As you know, malaria transmission is due to mosquito bites. We know how these mosquitoes evolve. They thrive in stagnant water and in the swamps. In areas with adequate sanitation, there is no malaria. For example, Italy is one of the countries that suffered a lot from malaria in the past, but through better environmental sanitation facilities, they were able to eradicate the disease. But in our African countries, it is very difficult to eradicate malaria because of poor sanitation.

3. How does Burundi plan to deal with the environmental determinants of health in a comprehensive way?

Environmental issues are not a sole responsibility of the health sector. This is an issue that calls for multi-sectoral approach. In Burundi, ministries for environment, water, agriculture, and of course health need to work together to address water and sanitation related problems. It's a high public policy issue. We are putting in place mechanisms and steps to address the situation. For example, a code of public health has just been adopted in the Minister's Council. The code stresses the importance of environment and hygiene issues. In addition, we will also develop other activities aimed at improving the quality of life and the environment. I hope we'll get there. By saying that, I do not imply that the Department of Public Health will do it alone. We will involve other government departments to strengthen coordinated efforts.

4. What do you expect from WHO?

We have several expectations from WHO. WHO is a special partner compared to others. Others may be

to adolescents, high risk groups, the vulnerable and the youth. The delegates stressed the urgent need to address Antimicrobial resistance, implications for treatment failures, rising treatment costs and increasing disease burden as well as capacity for diagnostic laboratory. They highlighted the high cost of the HPV vaccine, stigmatization and lack of awareness as the major challenges encountered.

INTERVIEW WITH DR. MIGUEL OLIVEIRA, NATIONAL DIRECTOR OF PUBLIC HEALTH OF ANGOLA

1. How would you rate the burden of sexually transmitted infections (STIs) in Angola?



Like in other countries, STIs are a challenge for public health in Angola, although their full extent is unknown due to many factors, including cultural taboos. Unfortunately, we have no reliable data or systematic notification of cases, but partial sero-epidemiological studies have been conducted in some segments of the population in 2016. The prevalence of four key STIs in key populations (men who have sex with men and sex workers) vary from 1.3% to 3.6% for syphilis; from 7.1% to 15.4% for Chlamydia; 1.7% to 21.7% for gonorrhoea and 1.8% to 13.9% for Trichomonas.

2. What type of interventions do you recommend to answer STIs and what results do you expect with such measures?

Since 2014, Angola has reinforced the integration of prevention, STIs care with other programs and the provision of health services at the national level. We train health professionals, health development workers at the community level (ADECOS) and transfer the competencies at the municipal level. Interventions to control HIV and STIs are included in the current National Strategic Plan for STIs, HIV/AIDS and Viral Hepatitis.

One of the strategies for integration and improving access to support STIs services

financial partners. As for WHO, it is our financial and technical partner that always accompanies us. Currently for the management of this malaria epidemic, we have several consultants and advisors at our disposal for help. I would like to use this opportunity to thank WHO for the collaboration. Every time we have problems, we approach the WHO country office for help and solutions. The collaboration is good and welcome.

DELEGATES APPLAUD IMPLEMENTATION OF THE TRANSFORMATION AGENDA



Delegates from the WHO Member States attending the 67th Session of the WHO Regional Committee have applauded the WHO Regional Director (RD) on the commendable work done on the implementation

of the Transformation Agenda (TA) in 2016. The Transformation Agenda (2015-2020) is intended to make WHO in the African Region effective, responsive and accountable and is implemented in the Regional and country offices.

In her report to the Regional Committee, the RD informed delegates that the Regional Office was restructured. The functional review begun in five countries, i.e. Senegal, Sierra Leone, South Africa, South Sudan and Togo.

The delegates noted with satisfaction that the TA process was now bearing fruits and encouraged the RD to implement the next planned phase. The delegates commended the good work done on monitoring and evaluation of allocated funds for the biennium noting that it was in line with key priority areas of the TA and aligned to country specific needs.

In addition the delegates appreciated the response activities implemented for the Ebola, yellow fever and cholera and outbreaks that occurred in some countries last year. We can now rapidly, effectively and coherently respond to emergency outbreaks.

The delegates recommended that emphasis be put on results based approaches instead of processes adding that this will help in improving governance and accountability and also facilitated achievement of tangible responsive measures aligned to countries specific needs.

has been to promote combined intersectoral actions and community participation, facilitate the proximity of the health services for the population, to optimize human and financial resources and commitment policy.

We have developed plans of action and established agreements with different sectors of the Angolan Executive to implement interventions on equality of the sexes that enable women and girls to decide their sexuality. Interdepartmental projects have been implemented at the national level. They focus on the supply of service packages to meet the needs of adolescents, young people and girls. There are also plans at the local level on comprehensive sex education in schools and religious institutions.

Since 2016, Angola has prioritized interventions to strengthen the integrated information system. All specific STIs data collection instruments have been developed, reviewed and updated and a software to manage and standardize information (DHIS2) was adopted. Other current actions are: training health technicians on the syndromic approach and laboratory diagnosis, creation of awareness for prevention, diagnosis and treatment with community participation. The expansion of vaccination against hepatitis B as well as large-scale vaccination against HPV planned for 2018.

RC67 eJournal



The

RC67 Secretariat is pleased to announce the introduction of the Electronic Journal (eJournal) that replaces the printed version published in the previous RCs.

The easy to use eJournal will improve interactions with our readers and has new features such as embedded videos, photo galleries, audio recordings and much more. The eJournal can be accessed from all

Some delegations shared best practices and lessons learnt on similar reform processes in their countries and encouraged the RD to draw on them as she implements the TA to achieve desired results.

electronic devices, computers, laptops, iPads and all types of mobile devices by email and can be accessed at any time during the RC.

For those who wish to receive the electronic Journal, please send an email to Phyllis Jiri at jirip@who.int

THE ROLL BACK MALARIA (RBM) PARTNERSHIP

A side event will be held today (30 August 2017) from 19:00 to 20:00 hours on "The revitalized Roll Back Malaria Partnership".

The objectives of the event are to: (a) Discuss the new governance structure of the RBM Partnership; and how it relates to WHO and the member states; (b) Introduce the New RBM CEO; (c) Update delegates on the activities of the revitalized partnership; (d) Update delegates on the malaria elimination in the Sahel and (e) Agree on how to work together.

Programme:

- Introduction of the session, Dr Magaran Bagayoko, representing the Director of Communicable Diseases Cluster, WHO Regional Office for Africa
- Welcome and opening remarks, Dr Matshidiso Moeti, WHO Regional Director for Africa
- Overview of the new RBM Partnership structure, Dr Kesete Admasu, CEO RBM Secretariat
- Update on malaria elimination in the Sahel, Dr Magaran Bagayoko, representing the Director of Communicable Diseases Cluster, WHO Regional Office for Africa
- Discussion and next steps
- Closing remarks Dr Matshidiso Moeti, WHO Regional Director for Africa

WHO AWARDS CEREMONY

Every year, the WHO Regional Office for Africa recognizes staff members and team for their outstanding contribution to the work of the organization. The annual recognition and award ceremony is usually held during the Regional Committee meeting.

At the 67th Session of the Regional committee currently going on in Victoria Falls, Zimbabwe, seven awards (three global Director-General's and four Regional Director's awards) were granted to the following staff members and teams: Dr Peter Lasuba: Director-General's award for outstanding staff member

BANKING

An ATM, located in the Business Center of the Hotel on the first floor is available. Card payments are accepted almost everywhere.

HOTEL CONTACTS

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Victoria Falls Safari Lodge: +263 13 43211-20

MEALS

Coffee Breaks and Lunch will be served free of charge to participants during the meeting.

Further catering facilities are readily available for refreshments and meals in the 4 restaurants and 3 bars of the Elephant Hills Hotel. The Breakfast Buffet is open from 7:00-10:00 in the Hotel Restaurant. For dinner, WHO shuttles are available to drive you to town, at 19:00 on Saturday and Sunday.

Lunch shuttle departs from the reception at 12:30.

WHO CONTACT PERSONS

1. **Dr. David O. Okello**, WHO Representative, Tel: +263 772 273 043

- The DR Congo Health Emergency Team : Director-General's award for outstanding team
- The Nigeria Budget and Finance Team: Director-General's award for outstanding team
- Mrs Djenaba Ly : Regional Director's award for outstanding staff
- Mrs Chantal Nguimbi-Deboums: Regional Director's award for outstanding staff
- The Regional Polio Team : Regional Director's award for outstanding team
- The Sierra Leone Integrated Disease Surveillance and Response (IDSR) Team: Regional Director's award for outstanding team

The awards were presented to the winners by the Director-General Dr Tedros Adhanom Ghebreyesus and Regional Director Dr Matshidiso Moeti during a welcome reception held at the Elephant Hills Hotel.



EXHIBITION

The exhibition booths are located in the front of the Conference Center and will be open throughout the meeting. The exhibits include the following items: publications, medical literature, posters etc., provided by the Member States of the African Region, WHO Headquarters and the WHO Regional Office.

SECURITY CONTACT PERSONS

Mr Jairos Chivona, Chief of Police in Victoria Falls: Tel.: +263 712 879 953/ +263 712 879 953
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RC67 BADGES

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THE "MECTIZAN DONATION PROGRAM CELEBRATES 30TH THE ANNIVERSARY

The Mectizan Donation Programme (MDP) celebrated 30 years of service in Africa in a side event held at the ongoing 67th Session of the WHO Regional Committee for Africa. The function held at the Elephant Hills Resort Hotel in Victoria Falls (Zimbabwe) aimed at, among others, presenting progress on the implementation of the Roadmap for the elimination of Neglected Tropical Diseases (NTD).

It was attended by Dr Matshidiso Moeti, WHO Regional Director for Africa, several health

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Ministers and Heads of delegation from the Member States, as well as some partners committed to the fight against Neglected tropical diseases (GSK, MSD).

The various speakers congratulated MDP on the 30 years of successful free Ivermectin distribution which has contributed to the elimination of onchocerciasis in several countries in the WHO African Region.

The function also provided an opportunity for actors and partners in the fight against NTDs to congratulate Togo on the eliminating lymphatic filariasis for which the country received an award. Togo becomes the first African country to achieve this objective.

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