



# **THE NEW PARTNERSHIP FOR AFRICA'S DEVELOPMENT (NEPAD)**

## **HEALTH STRATEGY EXECUTIVE SUMMARY**

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## **A. Sector Strategies Within NEPAD**

1. The New Partnership for Africa's Development (NEPAD), adopted by the African Union as its development strategy, "is a pledge by African leaders, based on a common vision and a firm and shared conviction, that they have a pressing duty to eradicate poverty and to place their countries, both individually and collectively, on a path of sustainable growth and development". It is an African determined and driven programme, with core and sectoral strategies. Heads of State personally consider and collectively commit to its strategies and priorities and to striving for the achievement of stipulated objectives.
2. Human development, including health is one of the priorities of NEPAD, and the pillars of the health strategy have been adopted by the Heads of State. This report serves to build on and update the strategy after input from, amongst others, African Health Ministers at the WHO Regional Committee for Africa and an African Expert Consultative meeting held recently in Pretoria. The latter provided a forum for detailed peer review by identified African experts, Regional Economic Communities, United Nations Agencies and some civil society organizations.
3. Poverty cannot be eradicated, or indeed even substantially alleviated, as long as the high burden of disease, disability and death continues to plague the continent. The NEPAD Health Strategy recognises the multi-sectoral nature of the measures needed to reduce disease burden and therefore aligns itself with the overall development programme of NEPAD.

## **B. Africa Faces A Huge Burden Of Preventable Disease, Disability And Death**

4. Health is one of the most serious casualties consequent on the poverty, social exclusion, marginalisation and lack of sustainable development in Africa. Africa faces a huge burden of preventable disease and disability that not only causes unnecessary death and suffering, but also undermines economic development and damages the continent's social fabric. The burden is in spite of the availability of suitable tools and technology for prevention and treatment and is largely rooted in poverty and in weak health systems. Yet, where the necessary conditions have been created, there have been important successes.
5. The HIV/AIDS epidemic poses an unprecedented challenge, while malaria, tuberculosis, communicable diseases of childhood and non-communicable diseases all add to the untenable burden. Malnutrition underpins much ill-health and is linked to more than 50 per cent of all childhood deaths. Non-communicable diseases are a growing cause of both death and disability. Trypanosomiasis is resurging and non-communicable diseases result in substantial preventable death and disability. Women and adolescents face unique health challenges, while deaths from conditions related to pregnancy and childbirth are at horrendous levels.

### **C. The Reasons Behind the Huge Burden of Disease**

6. A number of goals and targets have been set for reduction of the disease burden in Africa. Although the balance of reasons vary from country to country, Africa is not on track to achieve these goals and targets, not because they are unattainable, but because:
  - a. Health systems and services are too weak to support targeted reduction in disease burden
  - b. Disease control programmes do not match the scale of the problem
  - c. Safety in pregnancy and childbirth has not been achieved
  - d. People are not sufficiently empowered to improve their own health
  - e. Insufficient resources
  - f. Widespread poverty, marginalisation and displacement on the continent

### **D. The NEPAD Health Vision**

7. The NEPAD health vision is an Africa rid of the heavy burden of avoidable ill-health, disability and premature death, especially for its poorest people.

### **E. NEPAD Health Strategic Directions**

8. Recognising that Africa is not on target to reach the reductions in disease burden agreed to at the United Nations and in other international and continental fora, a choice has to be made. The NEPAD approach seeksto truly impact on the burden of disease, disability and death.
9. The health sector strategy specifically seeks to impact on disease burden through:
  - a. Enhancing the stewardship role of Governments in mobilizing and harnessing the multi-sectoral effort required and in involving the resources of government, civil society, the private sector and regional and international partners for health development.
  - b. Strengthening health systems and services so that they can provide effective and equitable health care, built on evidence based public health practice, including incorporating the potential of traditional medicine
  - c. Scaling up communicable and non-communicable disease control programmes, especially recognising the unprecedented challenge posed by

HIV/AIDS and the burdens of tuberculosis, malaria, childhood diarrhoea and pneumonia, and malnutrition, the resurgence of trypanosomiasis and the burden of non-communicable health problems

- d. Strengthening and scaling up programmes to reduce disease burden due to conditions related to pregnancy and childbirth.
- e. Empowering individuals, families and communities to act to improve their health, achieve health literacy and integrate effective health interventions into existing community structures.
- f. Mobilising sufficient sustainable resources to enable health systems and disease control programmes to operate at the level required to reach health targets.

## **F. Institutional Arrangements**

- 10 NEPAD, through the actions of Heads of State and Government and managed by its Secretariat, facilitates, enables, focuses, leverages and co-ordinates efforts to achieve its strategies and promote priority projects, but is not itself an implementation agency. Core responsibility for implementation rests with individual countries, while the African Union and Regional Economic Communities (RECs) have been identified as key vehicles for regional action and co-ordination.
- 11 Successful implementation is also contingent on the achievement of innovative and effective partnerships development partners, donor organisations and the United Nations agencies and programmes. The UN has adopted NEPAD as the development strategy on which to base its support to Africa, while the capacity of the World Health Organisation and other agencies provides unique possibilities for support.

## **G. Monitoring and Evaluation**

- 12 At the country and regional level, African governments should regularly monitor and assess progress towards the strategic directions and programmes outlined in this Health Strategy. In line with the NEPAD commitment to peer review, it is envisaged that regular reports will be provided to the Heads of State assessing progress towards achieving the strategic directions set out in this report.

## **APPENDIX**

### **NEPAD HEALTH STRATEGY: INITIAL PROGRAMMES FOR ACTION**

1. Strengthening commitment, enabling stewardship and harnessing a multi- sectoral effort
  - 1.1 Create a NEPAD Presidential Advocacy for Health Group to mobilise commitment from Africa & from development partners to this Strategy
  - 1.2 Establish a health system observatory programme to provide the capacity to monitor and evaluate progress towards achieving this strategy, including reporting to the NEPAD Heads of State
  - 1.3 Institutionalise the preparation of National Health Accounts as a key tool for appropriate financial decision making in the health sector
  - 1.4 Reach an international agreement on migration to reach an ethical approach to the recruitment of health personnel from Africa, while putting in place mechanisms to address the adverse conditions of service for health professionals
2. **Securing health systems and building evidence based practice**
  - 2.1 Strengthen the technical capacity for policy making and budget linked planning in Ministries of Health
  - 2.2 Launch a sustainable health systems programme including the following elements:
    - 2.2.1 Operationalise effective local health systems through establishing demonstration districts in all countries that can test delivery strategies and provide a model for replication
    - 2.2.2 Create a fund to support innovations in health systems and the sharing of successful new approaches to encourage new developments and evidence based practice
    - 2.2.3 Provide rural clinics with the infrastructure required for effective operation, starting with tele, radio or satellite communication to reduce isolation and enable calls for emergency assistance
    - 2.2.4 Test new models for drug supply to rural clinics and hospitals to overcome supply system problems
    - 2.2.5 Strengthen and increase capacity of training programmes for multipurpose clinic staff
  - 2.3 Increase the capacity for public health training in Africa, so that the required cadre can be cost-effectively achieved

2.4 Increase funding for operations and health systems research, including community based interventions, to strengthen the evidence base for public health decisions and to enable health research to become integral to the health system

2.4.1 Build capacity in Africa for health research relevant to the challenges and needs of the continent and its health systems

2.5 Support the capacity for local production of essential drugs, including anti-retrovirals so as to make drugs more affordable

2.6 Advocate and leverage support for development of the new drugs and vaccines needed by Africa

2.7 Establish reference laboratories in each of the regions in Africa to support disease and drug resistance surveillance and provide training

### **3 Scaling up disease control**

3.1 Pro-actively provide support for programmes against the major burdens of disease whose practice coincides with the approach in this strategy, to enable them to deliver at the scale and build the capacity required

### **4 Reducing conditions associated with pregnancy and childbirth**

4.1 Support the establishment of an effective programme for the reduction of mortality from conditions associated with pregnancy and childbirth, and enable the effective integration of maternity services with the health system

### **5 Empowerment of people to improve their health**

5.1 Create a public communications for health literacy programme, using available capacity to cost-effectively empower people to take action to improve their health

5.2 Create a programme to enable countries to more effectively support and enable non-governmental and community organisations to make their unique contribution to prevention and care

### **6. Mobilise sufficient sustainable resources**

6.1 Seek commitments of countries to develop a timetable to reaching the agreed benchmark of allocating 15% of public spending to health

6.2 Seek commitment to and a timetable for development partner support of US\$22bn per annum in new health development aid for Africa