

Reigniting the health workforce debate

Conference called to provide fresh impetus to the stagnating African health workforce story. Francis Omaswa provides the background



The African Platform on Human Resources for Health will hold the 5th African HWF Forum in Kampala, Uganda, from Wednesday 19th to Friday 21st April 2017. The African Platform is the regional arm of the Global Health Workforce Network (GWN) that was launched in Geneva last December, 2016 as the successor the Global Health Workforce Alliance (GHWA).

Emerging evidence from the studies leading to the development of the new GHW Strategy shows that despite spirited advocacy and several interventions in Education and Training, health workforce (HWF) management and campaigns over the last decade, African HWF densities have stagnated and have worsened in some countries. At the same time there are several global developments such as the Sustainable Development Goals (SDGs), the new GHW Strategy, the UN Secretary General's High-Level Commission on Health Employment and Economic Growth, and the Five-Year Action Plan to implement its recommendations. The African Union Commission (AUC) has also launched a new Health Strategy during 2016.

Against this background, the governing Board of the African Platform and 3rd Congress of the African Health System Governance Network specifically requested the African Platform to convene the forum of member networks, African countries and partners. The congress further requested the African Platform to work with the Africa Regional Office of the World Health Organization (WHO/AFRO), and partners to urgently put in place an enhanced technical support programme for African countries with the aim:

- To strengthen country level HW leadership, development and management structures, especially at the ministries of health in member states. This will include mobilising other relevant sectors and actors at country level such as professional associations and civil society organisations.
- To support African Member States in translating for action key regional and global health policy developments as enumerated above.
- To fast track the strengthening of HW information systems in countries. This is needed to facilitate leadership, planning and management of HWF inflows, stocks and outflows as well as implementing the WHO Code on International Recruitment of Health Personnel. The result will be improved reporting on the code for the third round due next year in 2018.

What are the specific objectives of this forum?

- The forum will review the status of implementation

Francis Omaswa, CEO, African Centre for Global Health and Social Transformation (based from Kampala); Founding Executive Director of the Global Health Workforce Alliance.

of the 'Road map for scaling up human resources for health for improved health service delivery in the African Region 2012–2025' that was launched in 2012.

- The participants will gain a deep understanding of relevant recent developments such as the 'Global strategy on human resources for health: (Workforce 2030)'; the African Health Strategy; the Five-Year Action Plan to implement the recommendations of the High-Level Commission on Health Employment and Economic Growth.
- The implications for African countries of the establishment of the GHWN, at the WHO secretariat in Geneva will be discussed and management of the relationships will be agreed.
- The forum will prepare the African the HWF for their role in advancing the movement towards Universal Health Coverage (UHC), as a part of the means to attain the SDGs in Africa.
- Joint learning will take place and opportunities for collaboration at all levels will be facilitated resulting in vibrant exchange and sharing of regional experiences.
- The forum will provide the opportunity to build an informed African voice for active engagement and participation at the 4th Global Forum on Human Resources for Health, scheduled to be held in Dublin, Ireland from 13–17 November 2017.

The forum will be conducted through Plenary, Break out and Poster sessions under the following five thematic streams and at the end, a forum report and an action plan for renewed energy and accountability will be released:

- HWF education and training.
- Preparing the African HWF for UHC.
- HWF leadership, development, management and regulation.
- Nursing; as the backbone of the health system.
- HWF migration.

What profile of participants do we expect? Participation at this Congress is open to a broad range of stakeholders, especially from the African region to include, but not limited to: Country HRH leaders, Directors and other senior officials from relevant sectors; WHO Headquarters and WHO/AFRO, Members of the UN (UNICEF, UNFPA, UNDP), regional inter-government bodies, AUC, regional economic communities, the African Development Bank, international partners, Deans and Principals of health professional training institutions, health professional associations, civil society organisations, the media, and development partners.

I invite your advice, guidance and participation on this important event. Additional information can be found on the website of the African platform: www.aphrh.com

Realise Life's Potential – A global call to act on anemia

How can organisations get the tools they need to reduce anemia in women of reproductive age? Swedish company HemoCue has initiated a Global Call to Action to highlight the importance of screening and treatment of anemia in support of reaching the World Health Assembly's target of a 50 percent reduction in the condition by 2025. As important as it is to fight anemia in this target group, it is equally important to do so for pregnant women, for children and where anemia can be caused by a preexisting condition like malaria. No one should be left behind

Why is anemia so important?

It is important as it has immediate effect, and unless it is acted upon, it has long-term effects. Iron deficiency anemia is the most widespread nutritional disorder in the world, affecting over 1.6 billion people, with the highest rates being in South Asia and Central and West Africa. It disproportionately affects children and women of reproductive age with far-reaching health consequences such as cognitive dysfunction and an inability to reach their full potential. It may be because nutritious food or iron supplements are not available, but it can also be that malaria during pregnancy has not been detected and acted upon. Untreated anemia due to malaria may lead to the inability to fulfill a healthy pregnancy and deliver a healthy baby. For this reason the 1,000 days between a woman's pregnancy and her child's second birthday offers a unique window of opportunity to shape a healthier and better future. The right nutrition during this 1,000-day window can have a profound impact on a child's ability to grow, learn and rise out of poverty. Acting on anemia and reducing its prevalence can help drive progress against the other global nutrition targets; and to shape a



The 1,000 days between a woman's pregnancy and her child's second birthday offers a unique window of opportunity to shape a healthier and better future

WHA member states agreed that combatting anemia is vital for not only people's health but also for their nations' productivity and development

society's long-term health, stability and prosperity. Screening adolescent girls, pregnant women and newborn babies up to the age of 2 can make a real difference. "We need to act now," says Lena Wahlhed, Director Alliance Development at HemoCue. "For each

year we fail to act, we lose children, women, mothers – and they lose the ability to realise their life's potential."

What action is needed?

Improving nutrition and avoiding anemia is one of the best investments we can make to achieve lasting progress in global health and development. In order to know who is at most risk, screening for anemia is key. "We need the right indicators. We need to know not only if people are increasing their calorie intake, but whether their nutrition is improving," says Ana Lucía Márquez Escobedo from the Hunger Project Mexico. In recognizing this, in 2012 the World Health Assembly (WHA) endorsed six global targets for improving maternal, infant and child nutrition with the goal of achieving them by 2025. One of the WHA targets is a 50 percent reduction in anemia among women of reproductive age. Maternal anemia is associated with a higher risk of mortality and morbidity in expectant mothers, and low birth weight, prematurity and risk for impaired physical and cognitive development for the baby. Given that it is also associated with other global nutrition targets – including stunting and wasting – WHA member states agreed

that combatting anemia is vital for not only people's health but also for their nations' productivity and development.

Nutrition and the SDGs — and anemia?

The 17 Sustainable Development Goals and their associated 169 targets provide governments with a very clear picture of what they need to do, and what would serve as further value-added actions. According to target 2.2 in Global Goal 2 on Zero Hunger, the stated aim is to eradicate “all forms of malnutrition” and it mentions specific population subgroups including children under 5, adolescent girls, pregnant and lactating women, as well as older people. “We of course welcome that stunting, wasting and overweight are included, but these indicators will provide only a partial view of progress on the goal,” says José Manuel Roche, head of research at Save the Children UK, who has represented the organisation at multiple IAEG-SDG meetings. “Measuring anemia among adolescent girls, women of reproductive age and

especially among lactating women, is very important.” Despite an initial proposal to measure six indicators for target 2.2 including stunting, wasting, overweight, breast-feeding, anemia and mid-upper arm circumference (MUAC), the measurement has been limited to the three lagging indicators, leaving out the leading indicators: anemia, breast-feeding and MUAC.

How to diagnose anemia

Christian Hellqvist Herder, consultant to Business Sweden, says: “I'd really like to see that recommendations [to measure anemia] are given because anemia is so important when it comes to nutrition.” Hellqvist Herder says that developing a comprehensive global anemia-screening programme would be invaluable and advocated the measurement of hemoglobin — to detect anemia — using a solution where the results are delivered immediately and accurately. HemoCue develops and manufactures such measuring devices, which are already being used in more than 130 countries. The HemoCue Hb solution appears to be reaching those who need it most — whether that is in Asia, Africa or in Latin America.

Improve outcomes for the future

The early detection of anemia could have the potential to mitigate the long-term consequences of the disorder, says Dr. Jeffrey Griffiths, professor of public health and community medicine at Tufts University School of Medicine in Boston. “It used to be thought that so long as anemia was treated then, any earlier period of anemia could be wiped away,” he says. “However, studies from Central America show that children who had anemia treated were at a substantial disadvantage compared to children who had not had anemia. Early detection might mitigate these long-term consequences.”

According to Griffiths, that's why the early detection of anemia using HemoCue's hemoglobin measurement

device — which he describes as “a global gold standard” and “accurate and easy to use” — is so vital. The benefits of HemoCue solutions for anemia are also recognized by Save the Children, which believes it is the most effective instrument to assess anemia in the field. Save the Children UK's Manuel Roche says that while the Zero Hunger goal was aspirational, the way it was going to be measured should also “reflect the ambition expressed in the Agenda 2030 declaration.”

Lena Wahlhed adds: “In order to improve the outcomes for our future, we need to act now. The longer we wait; the longer it will take.”

The SDGs — leave no one behind

And looking ahead, given that every second pregnant woman and about 40 percent of pre-school children in developing countries are estimated to have anemia, the Hunger Project Mexico's Márquez comments that now is the time to move from the discourse of the SDGs towards concrete, practical action and implementation. “The SDGs are about not leaving anyone behind. We need to make sure the agenda is owned by rural poor communities,” says Márquez. Where resources are limited, addressing anemia does not need to be a separate programme: it is of profound importance and can be included in malaria, malnutrition and HIV/AIDS programmes — but also as a general health indicator and in capacity-building initiatives. Although women and children are most vulnerable, it is too important to leave anyone behind. The time to act is now. ■



“For each year we fail to act, we lose children, women, mothers — and they lose the ability to realise their life's potential”

Lena Wahlhed, Director Alliance Development at HemoCue

For further information, please contact
Lena Wahlhed: LWA@hemocue.se



This article first appeared on Devex