

A moment of truth



The July 2020 issue of the AHJ has captured the mood of the time. A global debate and self-searching reflection on social justice, racism and sectarianism was triggered by the killing of one black man, George Floyd, by a white policeman in Minneapolis, USA. There are several articles that make the link between health outcomes, social justice and equitable access to resources based on embedded prejudices and stratification of societies. Human history and how we came to be where we are now, our prosperity or lack of it, and our humanity are all being questioned. The direction in which human conduct is headed is under scrutiny.

The opinion piece discusses racism and sectarianism and their impact as social determinants of health and how these vices have become chronic and hard to eradicate. At the same time, it calls for perseverance and assured victory of the common good.

The piece on 'From fear to enlightenment' takes a look at the root causes of the global inequities, especially as they apply to Africa, and provocatively concludes that while African leaders can be blamed for poor leadership, bad governance and corruption, the main problem is that the global economic system was created to exclude and exploit Africa. This discussion links with the article on health workforce migration out of Africa. While the demography and epidemiology of ageing populations in rich countries are the pull factors for northbound migration of health workers, poor working conditions and poverty in Africa are the push factors, while Covid-19 is the trigger that exposed migration as a manifestation of the global health workforce

crisis. Hopefully migration will benefit from the WHO Code on the International Recruitment of Health Personnel, which has not yet received the attention that it deserves.

The role of e-learning during Covid-19 is highlighted in an article on the use of digital learning for continuous professional development. The WHO has been at the helm, producing training materials in several languages to train health workers all over the world.

The remaining three articles on Covid-19 describe the challenges of building capacity for testing in Africa and concludes that the only way to manage this difficult situation is by striking a workable balance between making SARS-CoV-2 testing available for those patients who most need it while avoiding any unnecessary testing by sticking to a clear strategy, adaptable as the pandemic spreads in communities. Another article presents a summary of how to navigate exit from lockdown, a strategy that has had serious side-effects for livelihoods and non Covid-19 morbidities. A third article draws attention to the mentally stressful plight of citizens who have been locked out of their countries during the global standstill that closed borders and airports around the world.

The AHJ has not forgotten other critical health needs. There are articles on a model for a midwife-led community programme on maternal health as part of the Nightingale Challenge, describing how the ubiquitous problem of teenage pregnancy can be tackled. The Nightingale Challenge has provided an opportunity to young nursing and midwifery leaders, giving them tools and skills that enable them to be change agents.

Neglected Tropical Diseases are still

a major cause of morbidity in Africa. An article on Cysticercosis in Mozambique describes the sharing of human resources to address mental health and central nervous system manifestations of this parasitic disease, including preventive and curative strategies at all primary health care units in one province.

An article on communicating HIV diagnosis to infected children describes how this subject has generated heated and repeated clinical and scholarly debate. The review appraises cartoon books and videos as emerging models for disclosure, involving 18 articles sourced from CINHAL Complete and MEDLINE.

On health financing, there is an article on 'Doing more with less' in which the authors explore the Nigerian health financing landscape. It concludes that given the present economic situation, Nigeria must innovate on health policies, adopt integrated health service delivery approach with respect to donor funds and vertical programmes, tackle corruption, and institute improved management practices and monitoring services to ensure that the available funds are used judiciously to improve health outcomes.

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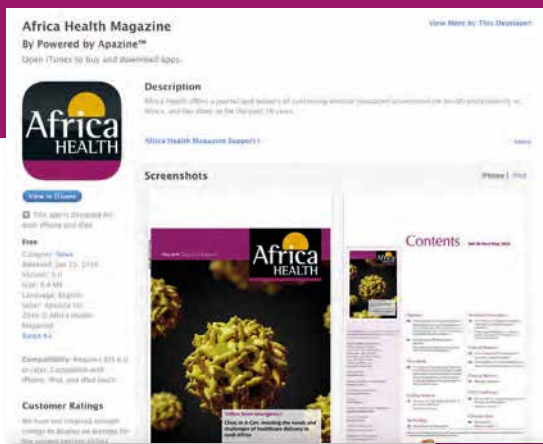
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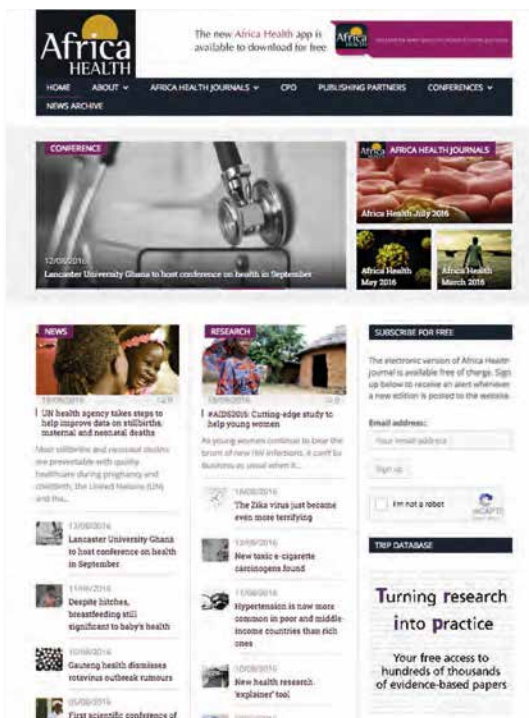
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