



Coordinating African Health Leadership

Francis Omaswa makes a call for cohesion, inclusivity and synergy in moving the African health agenda forward as a global public health good.

I participated at the 5th Global Forum on Human Resources for Health (HRH) convened by the World Health Organization (WHO) in Geneva, 3th to 5th April 2023. This is the top global HRH event that takes place every two to three years; hosted by different countries round the world. At this Geneva meeting, the African Regional Office of WHO (WHO Afro) presented a draft of the African Health Workforce Investment Charter that is being developed by that office. The following day, The African Centers for Disease Control (Africa CDC) presented another draft of the African Health Workforce Strategy being developed by the Africa CDC. Upon making inquiries, it became evident that these two African Health institutions efforts to develop Health Workforce plans for Africa are in parallel and not coordinated. This is the reason I am moved to write about the urgent need for coordination and harmony between the WHO Afro and the Africa CDC. There are likely to be other areas of work where parallel, uncoordinated and conflicted pieces of work in Africa are being undertaken by these two institutions that will result in duplication of efforts, undesirable competition and create more problems than solutions to Africa's health agenda.

According to the websites of the two organizations, "Africa CDC is a continental autonomous health agency of the African Union established to support public health initiatives of Member States and strengthen the capacity of their public health institutions to detect, prevent, control and respond quickly and effectively to disease threats. Africa CDC supports African Union Member States in providing coordinated and integrated solutions to the inadequacies in their public health infrastructure, human resource capacity, disease surveillance, laboratory diagnostics, and preparedness and response to health emergencies and disasters. It was established in January 2016 by the 26th Ordinary Assembly of Heads of State and Government and officially launched in January 2017. The institution serves as a platform for Member States to share and exchange knowledge and lessons from public health interventions".

On the other hand, "the mission of the WHO Afro is to enhance AFRO's technical support to countries for scaling up proven public health interventions; and strengthen partnerships with UN agencies, regional economic communities and other stakeholders". The World Health Organization (WHO) and its Member States have committed, within the framework of the International Health Regulations (2005) (IHR), to detect,

verify, assess and report events that may pose a risk to international public health.

I raised the matter of parallel efforts between Africa CDC and WHO Afro with Dr. Tedros Adhanom Ghebreyesus, the Director General of WHO. He confirmed his support for the Africa CDC and showed me a news item from Aljazeera in which Dr. Tedros, in 2013 as Ethiopian Minister of Foreign Affairs at the African Union Executive Council meeting in Abuja, Nigeria is quoted as follows "Ghebreyesus said Ethiopia is proposing to establish an African Center for Diseases Control and Prevention (Africa CDC) or Health Commission for Africa under the umbrella of the African Union." Dr. Tedros believes that WHO Afro and Africa CDC can work well side by side synergistically provided there is clear guidance and clarity of roles provided by the African Union and that there are leaders in these institutions who are willing to work collaboratively and in partnership.

I have personally been active in the African health space for some time and I remember how WHO and the African Union worked well together to adopt the first African HRH Strategy by Health Ministers, coordinated by NEPAD. I also remember Bience Gawanas, then Commissioner for Social Affairs at the African Union, co-chairing a WHO Task Force on Education and Training of Human Resources for Health (HRH).

It is critically important for the newly created Africa CDC to work harmoniously with the 75-year old WHO Afro. If this does not happen, the health of the people of Africa is in danger. Both organizations are overseen by the same Health Ministers who meet regularly and the structures for harmonization are available. The two organizations should also take note of the fact that there are other structures in Africa that have been created by the same authorities on health. Examples are the Health bodies of the Regional Economic Communities such as the West African Health Organization and the East, Central and Southern African Health Community. I have seen these two organizations effectively move many health programs in the countries. Along with these, are Civil Society organizations that have knowledge and expertise on various health topics. For example, we have the African Platform on HRH that has convened a number of consultations and has capacity to support the African HRH agenda.

This is a call for cohesion, inclusivity and synergy in moving the African health agenda forward as a global public health good. The development partners also known as donors and funders should keep this in mind as they support Africa's health development including the HRH programs.

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