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Newsletter: July 2021

Welcome to Issue #2 of the iAHO newsletter!

We are excited to share the second issue of our bi-monthly newsletter, which will keep you up to date with all the latest news from the integrated African Health Observatory (iAHO). We cover issues touching on health information, health systems and services development, and the work of the Observatory across the WHO African Region.

Visit the iAHO platform: <https://aho.afro.who.int/>

Read the [previous newsletter](#)

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Learn more about the iAHO



Emerging from a request from Ministers of Health from across the WHO African Region, the iAHO is a strategic health intelligence platform that provides a real-time view of what is happening in the health sector and with progress on the health and well-being of populations.

Hosted by the WHO Regional Office for Africa (WHO AFRO), the platform is a one-stop-shop that marshals harmonized high-quality data from the regional stage, together with the National Health Observatories (NHOs) of the 47 Member States of the WHO African Region. Besides offering easier access to high-quality data and statistics, the iAHO platform aims at increasing the visibility of key analytics and knowledge products useful for knowledge brokering and evidence-informed decision-making.

The iAHO is also home to multiple inter-connected regional platforms, allowing for cross-country comparison and learning across the different dimensions of the health system.

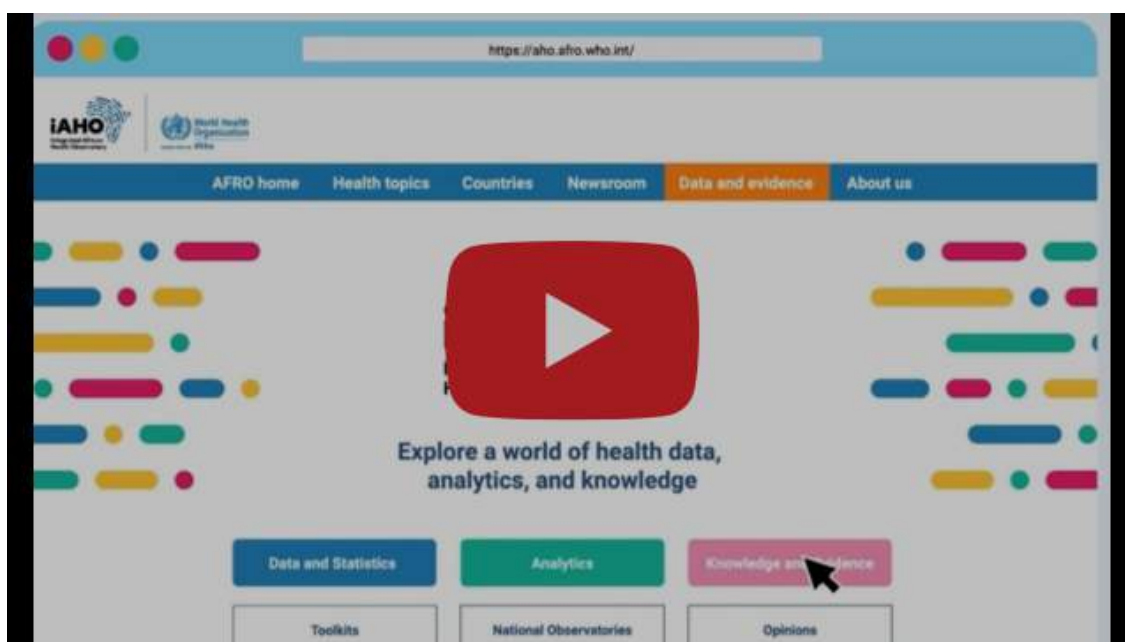
Bringing all this information together for use in planning, implementation, monitoring and evaluation of health interventions, the iAHO contributes to the overall effort to strengthen health systems and ultimately ensure better health and well-being for communities throughout the African Region.

In addition to the iAHO platform itself, the AFRO Observatory team

provides targeted technical support for the full ownership and strengthening of the embedded NHOs, as well as curating and populating key content as resources are generated and made available. Contact us at iAHO@who.int for any inquiries or support as needed.

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Explore the iAHO



This step by step video will introduce you to the use of the iAHO Platform.

iAHO embedded platform: The African Health Observatory Platform on Health Systems and Policies (AHOP).



Several platforms are hosted within the iAHO. In this issue, we introduce you to the [African Health Observatory Platform on Health Systems and Policies](#)

Hosted by WHO AFRO, AHOP is a regional partnership with [London School of Economics](#) (LSE), [European Observatory](#) (EURO OBS), and the [Bill and Melinda Gates](#) (BMGF) that aims to promote evidence-informed policy-making. The research is generated by the AHOP National Centres (NCs). These currently include national research institutions in [Ethiopia](#), [Kenya](#), [Nigeria](#), [Rwanda](#), and [Senegal](#), with further expansion planned.

As a major component of the integrated African Health Observatory, AHOP strengthens 'Knowledge and Evidence' within the Observatory. This is one of the three pillars of health information – Data/statistics and Analytics being the other two. AHOP supports and promotes the transfer of evidence and experience between countries to foster better policies and action for improved health and well-being. Efforts centre around comprehensive and rigorous health systems analysis, the generation of reliable and timely evidence in response to real policy needs, and the communication of that evidence in ways that are useful and usable by decision-makers. Concretely, this ranges from detailed reviews of country health system and services profiles to policy briefs, comparative and thematic studies and policy dialogues.

In addition to producing these in-depth health systems analyses, AHOP has developed guides to enable countries in the region to also produce these types of analyses.

The Platform works to improve the supply of, and demand for, health systems evidence, with the ultimate goal of strengthening health systems and enabling policy-makers to make evidence-informed decisions and for the public to gain an understanding of different health systems.

Watch the AHOP launch webinar again here: <https://www.youtube.com/watch?v=81iv8RHlwEc>

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Strong Institutions to produce data

Toward the creation of a National Health Observatory in Niger

Accurate and timely data are needed to enable countries to assess the health status of populations, set priorities accordingly and track progress towards goals and targets, including the Sustainable Development Goals

Africa (WHO/AFRO) through the [Integrated African Health Observatory](#) (iAHO) supports countries to establish their own National Health Observatories (NHOs), based on the model of iAHO including countries peculiarities.

Hosted by the Regional Office, the iAHO has become a flagship program to strengthen regional health information system through an integrated platform, capable of contributing to marshal and analyze data, as well as monitoring and evaluation, at both regional, national and subnational levels, while collaborating with national health observatories. Thanks to this online health intelligence portal, it is possible to have an extensive real-time overview of what is happening in the health sector and how the health of populations in the African Region is progressing.

For its part, the Republic of Niger is committed in the establishment of its National Health Observatory.

Indeed, since 2013, the establishment of an observatory has been included in the national reforms as a major objective to be achieved (e.g. through the reform of the health information system or through the 2017-2021 Health Development Plan).

It is in this view that the technical mission of iAHO team to the Republic of Niger took place from June 7th to 11th, 2021, to accompany and guide relevant stakeholders in the establishment of the National Health Observatory (NHO) and validate the roadmap for the next steps.



Colleagues from WHO Country Office, Ministry of Health Team, stakeholders and AFRO Mission Team.

The ultimate objective of this collaboration will be to setup the Niger National Health Observatory as part of health information infrastructure that will allow the availability and use of data in one stop shop. The country through the Ministry of health is fully committed to fulfil the objective that will strengthen the national information system.

The Observatory is intended to be an integral part of Niger's health system, which will be fully managed and owned by the country with the technical support of WHO AFRO including technical and financial partners, as well as a ready-to-use [digital platform for the Niger National Health Observatory](#). The next few months will therefore be decisive for NHO, stakeholders will be tasked with securing political and financial commitment. The effective implementation of the Nigerien National Health Observatory will also depend on the commitment and collaboration of other key stakeholders that produce and use of health data such as universities and research centres, national and international technical and financial partners or even the National Institute of Statistics. Finally, stakeholders in Niger will play an important role in the institutionalization of the Observatory. Indeed, it will be important that from the beginning, the Observatory be institutionalized in order to guarantee its sustainability and stability.

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WHO/AFRO supports the strengthening of health information management in Rwanda

From 21 May 2021 to 4 June 2021 a WHO Regional Office for Africa team was on mission in Rwanda to support the strengthening of health information management and use for decision-making in the country. The primary focus of this mission was institutionalization of the Rwanda NHO, one of the 47 observatories embedded in the iAHO.

To recall, iAHO is a regional health intelligence platform whose main functions are to marshal standardized data, promote the analysis and synthesis of information, foster exchanges, and disseminate evidence through an online web-based platform that provides an extensive real-time view of what is happening in the health sector and how the health of populations in the African Region is progressing. The mission provided an opportunity to re-introduce and advocate for the National Health Observatory to the key Health Management Information System (HMIS), Monitoring and Evaluation (M&E), policy, planning, and knowledge management players at the Ministry of Health of Rwanda – in and of itself and in the context of the integrated African Health Observatory. This mission also provided an opportunity to present the AHOP (African Health Observatory Platform on Health systems and Policies) program, which strengthens the knowledge generation component of the Observatory.

Indeed, during a meeting held at the Ministry of Health of Rwanda with the AFRO team, the WCO (WHO Country Office) and the African Health Observatory Platform (AHOP) National Centre (NC) Principal Investigator, AFRO team emphasized that the iAHO, NHO, and the AHOP partnership were intended to bring together strategic information while also bridging the gap between academia and the MOH. The team presented the iAHO to attendees, and the new model with the 47 NHOs, as well as a discussion on the importance of translating evidence into policy and policy into action. The three major axes of health information were discussed: data and statistics, analytics, knowledge and evidence. Data sources and technical architecture were also discussed.



WHO Country Office, AFRO Mission Team, and the University of Rwanda, School of Public Health Team

Another priority of this mission was the creation of a framework of collaboration between WHO (WCO Rwanda and AFRO), the Ministry of Health of Rwanda, and a National Centre contributing to research and the generation of knowledge for AHOP, which promotes the transfer of evidence and experience between countries to foster better policies and action for improved health and well-being. The NC – the University of Rwanda’s School of Public Health – is in the early process of production of the policy briefs, country health system and services profiles, comparative studies, and policy dialogue events that will ultimately emerge from the AHOP partnership.

To this end, a site visit to the University of Rwanda School of Public Health was conducted, during which AFRO and the WCO met with the AHOP National Centre team.

The School of Public Health has been a key partner to the Ministry of Health of Rwanda, and it was highlighted that seven of their Technical Working Groups (TWGs) include at least one of the School’s research/academic staff. Significantly, it was noted that in Rwanda, the evidence-to-policy path already exists. This is an advantage for the country, as there are clear relationships between academia and policy-makers.

There are mechanisms in place to ensure that the policy briefs (the AHOR knowledge product of initial focus) that are developed are useful - in terms of alignment with national priorities.

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COVID-19 cases and immunisation dashboard

The COVID-19 pandemic has put a strain on even the most robust health systems. More than a year after the discovery of the virus, many countries, including those in the African region, are struggling to put an end to the pandemic. The need for reliable data in real time is therefore paramount so that policy-makers, health professionals and the public can act accordingly.

The [WHO AFRO COVID-19 Dashboard](#) is a continuously updated source of data on COVID-19. The latest available data on cases, recoveries, deaths and vaccines roll-out are collected to help all actors in the African Region respond to the pandemic.

This dashboard provides an overview of the status of COVID 19 in the region, including the following highlights:

- Compared to the rest of the world, there are relatively few infections in the AFRO region, accounting for 2.4% of cases and 2.7% of deaths worldwide. This makes it one of the least-affected regions in the world in terms of infection.
- All 47 Member States are impacted by COVID-19, with South Africa being the most affected country. The country accounts for 50 % of all cases in the region and 62 % of pandemic-related deaths.
- Since the start of the pandemic, the cumulative number of confirmed COVID-19 cases is 4,967,979 (as of August 5, 2021), with over 4 million recoveries recorded, (i.e., a recovery rate of 89.0%).
- Since the start of the pandemic, 118,758 people have died from COVID-19 (as of August 5, 2021). This equates to a case fatality rate for the region of 2.4%, which is currently higher than the global average of 2.2%.

In terms of vaccination, although the WHO calls on Member States to fully vaccinate at least 10.0% of their population by September, and 30.0% by the end of 2021, there is no evidence that this goal will be met. As of August 5, 2021:

- Globally, approximately 4 billion doses of COVID-19 vaccine were administered, of which approximately 1.6% were administered in the African continent.
- Countries such as Burundi and Eritrea have not yet joined COVAX.

In addition to the available data on the evolution of the disease and the vaccine roll-out, several knowledge resources are available.

These include bi-weekly scientific updates prepared by WHO/AFRO and Africa CDC detailing the latest developments in science and public health policy, as well as updates on the latest guidelines from WHO/AFRO, Africa CDC and other agencies. These regular updates aim to ensure that Member States are informed of the most critical developments in these areas.

Also available on the dashboard are several links to COVID-19 knowledge products that can be found on the iAHO platform. For example, it is possible to access a wide range of briefs covering topics such as [the effect of COVID-19 on the provision of health care services for tuberculosis](#) as well as the [effects of BCG vaccination on COVID-19](#). These are included as part of a series of COVID-19 rapid policy briefs developed by WHO AFRO in collaboration with Cochrane Africa.

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Latest Data

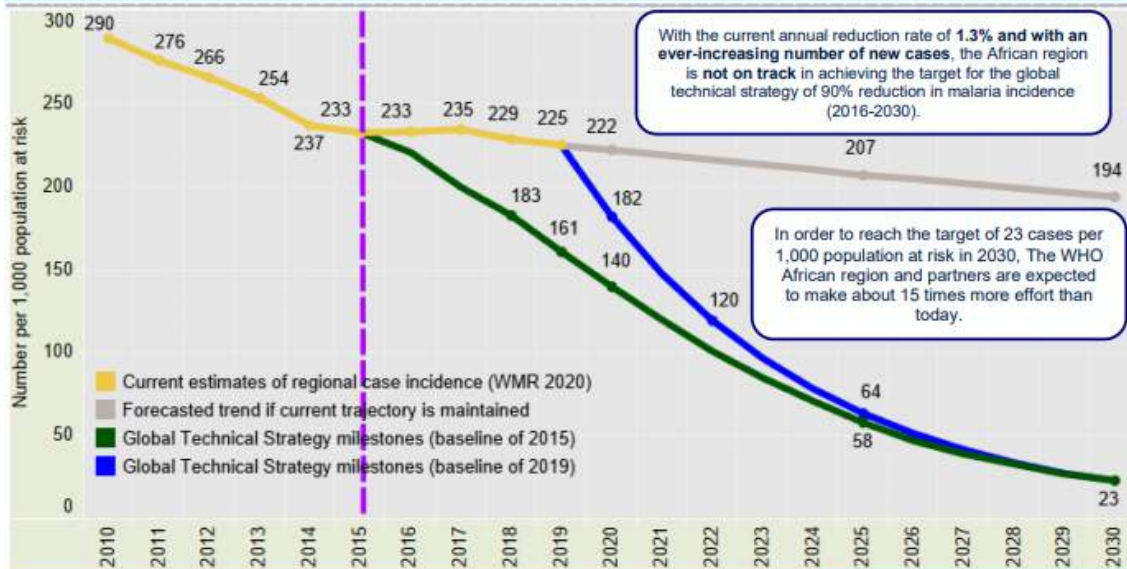
[Malaria Regional Factsheet](#)



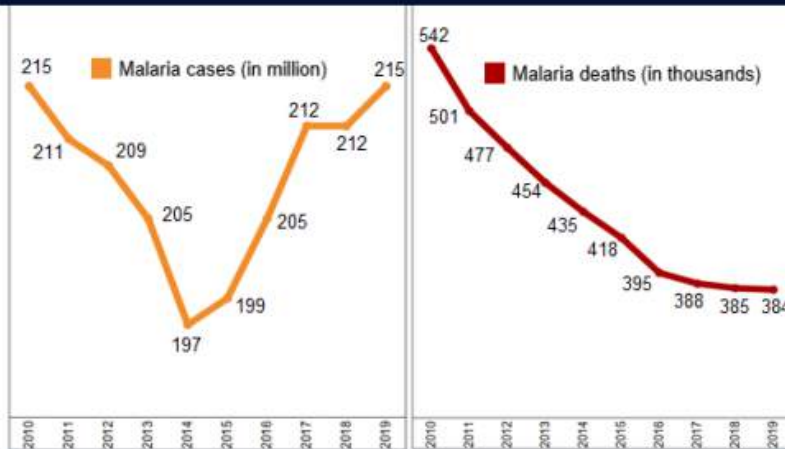
Factsheet

June 2021

1. Malaria: Cases and Deaths, WHO estimates, 2020



Trends in malaria number of cases and deaths



In the African Region, at the end of 2019, according to 2020 World Malaria Report (WMR), about 215 million people were infected with malaria; this represented 16 million more new cases compared to 2015. 384 000 people have died of Malaria.

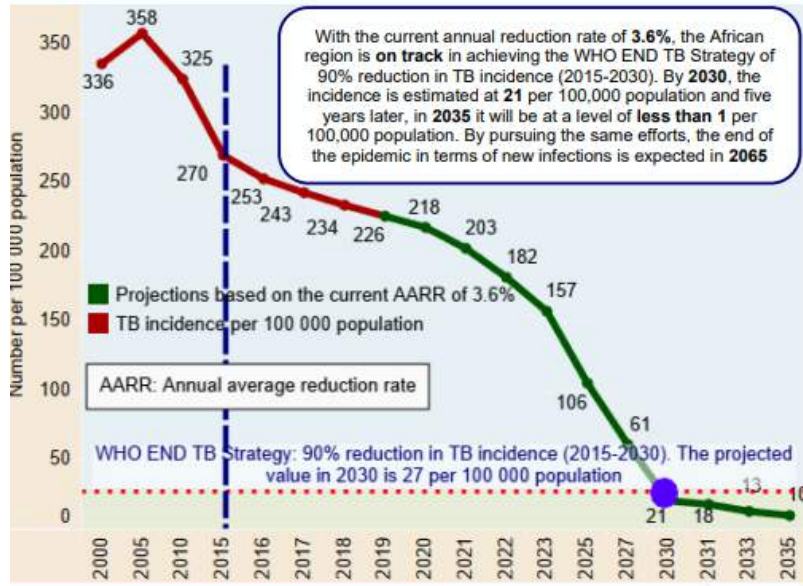
However, since 2015, the number of deaths has fallen by about 2% annually.

Even though mortality is declining over time, new malaria cases are on the rise since 2015.

aho.afro.who.int

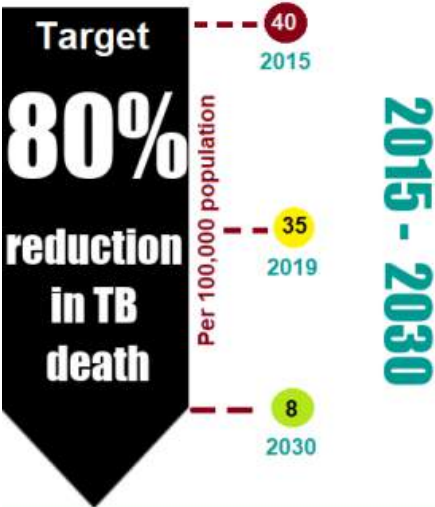
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1. Tuberculosis: Morbidity and Mortality, WHO estimates, 2020



In the African Region, since the beginning of the decade until 2019, **52 million people** have been infected with the TB bacteria and about **7.5 million people** have died of TB. There were approximately **2.5 million new people** becoming newly infected in 2019. Deaths in 2015 were estimated at **396,000** and **79,200 deaths** are expected in 2030. Until the end of 2019, the region had achieved only 7.2% reduction compared to 2015. In order to be able to reach that target by 2030, the Africa region would have to multiply its efforts by thirty, to go from the current annual reduction rate of 1% to 29% annual reduction rate needed.

WHO END TB Strategy: 80% reduction in TB mortality (2015-2030)

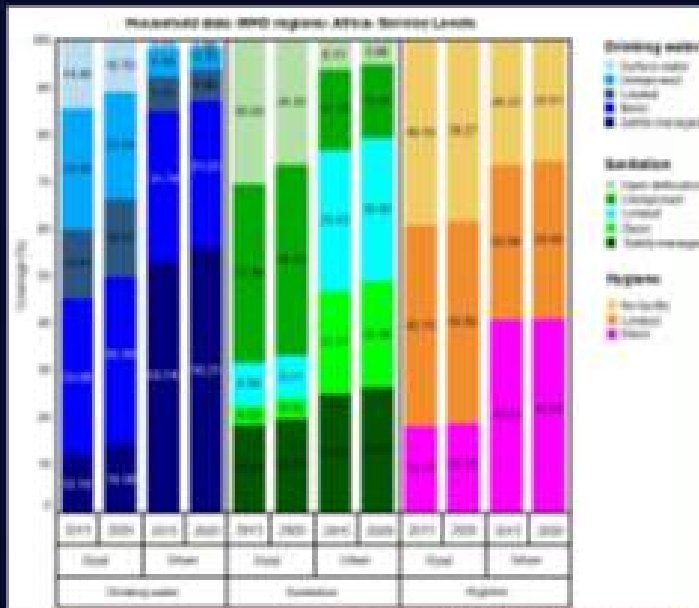


Regarding the current **TB case detection rate** of 61%, the African Region is **on track** to achieve the greater than 70% target set by the global TB control programme. However, the Region is still struggling to reduce TB deaths by 80% between 2015 and 2030.



Clean water and sanitation infographic





ALTHOUGH THERE IS A POSITIVE TREND BETWEEN 2015 AND 2020 IN THE ACHIEVEMENT OF SDG 6 GOAL TO "ENSURE THE AVAILABILITY AND SUSTAINABLE MANAGEMENT OF WATER AND SANITATION FOR ALL," RURAL AREAS HAVE LESS ACCESS TO SANITATION, HYGIENE AND WATER SERVICES WHEN COMPARED TO URBAN AREAS.

POPULATION USING IMPROVED WATER SUPPLY



IN THE WHO AFRICAN REGION, 78% OF THE POPULATION HAS ACCESS TO SAFE DRINKING WATER FROM AN IMPROVED SOURCE, BUT THE FIGURES VARY CONSIDERABLY BY PLACE OF RESIDENCE.



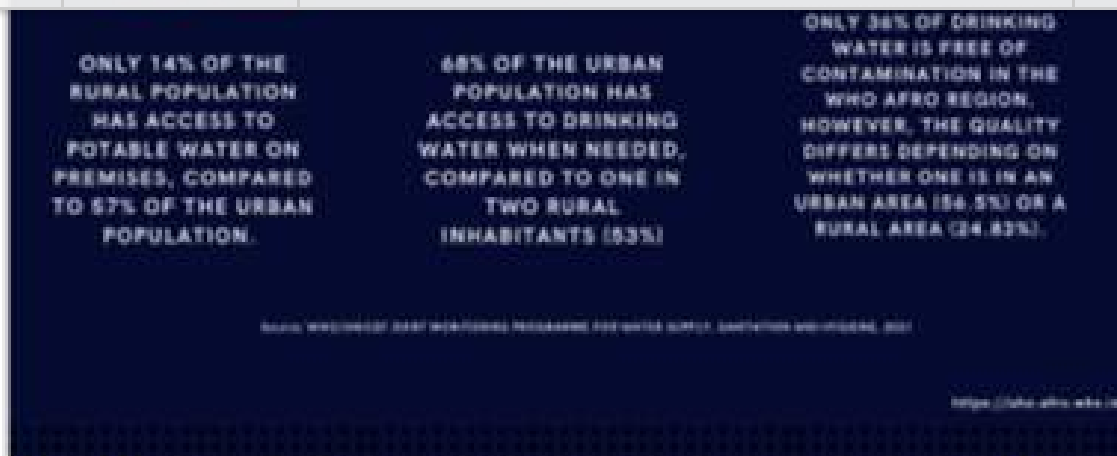
ALTHOUGH 66% OF THE RURAL POPULATION HAS ACCESS TO IMPROVED WATER, ONE-THIRD OF THE POPULATION DRINKS UNIMPROVED WATER. WORSE 11% OF THE RURAL POPULATION DRINK WATER DIRECTLY A RIVER, DAM, LAKE, POND, STREAM, CANAL OR IRRIGATION CANAL



IN URBAN AREAS, 94% OF THE POPULATION HAS ACCESS TO IMPROVED DRINKING WATER A SMALL MINORITY (4.7%) DRINK WATER FROM AN UNPROTECTED DUG WELL OR UNPROTECTED SPRING AND 1% OF THE URBAN POPULATION DRINK SURFACE WATER.

ACCESSIBILITY, AVAILABILITY AND QUALITY OF DRINKING WATER





Find out more on the iAHO platform: <https://aho.afro.who.int/uhc-briefcase/af>

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Blog posts from iAHO



[Better health information for better health](#)

COVID 19 has highlighted once again the importance of having timely reliable data and information to make decisions when time is of essence. Find out more on how the integrated Africa Health Observatory is improving decision making by giving a real time overview of the health sector in Africa



[More doses needed to curb the third wave of COVID 19 in Africa](#)

As cases of COVID 19 increase in Africa, vaccines are struggling to reach the continent. To allow the African region to produce and increase its access to vaccines, initiatives are being taken including the establishment of a technology transfer hub in South Africa.

[Communicating science during health emergencies](#)

at the right time
in the right format

lowers barriers for individuals
to take steps to
protect themselves,
their families
and communities
against COVID-19.

the pandemic in the African region from February to November 2020 alone, and the sheer number of posts circulating on social networks, it can be difficult for policy makers and the public to make sense of all that is going on. In this blog post, we discuss the importance of effective communication in times of emergency and the ideas for better communication that were discussed at the WHO conference on communicating sciences in times of emergencies.

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Views

Michel Sidibé/View: Why the creation of the African Medicines Agency is an urgent matter?

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