



## Newsletter: March 2022

### Welcome to Issue #5 of the iAHO newsletter!

We are excited to share the first issue of 2022 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 with all the embedded platforms across the WHO African Region.

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

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# People beyond data

## Mozambique NHO, an example of institutionalization

One of the missions of the iAHO is to support countries in the establishment and development of national health observatories in the Region. In this process, AFRO places great emphasis on the need for countries to institutionalize their observatories to ensure their sustainability. In the case of Mozambique, the [National Health Observatory](#) is anchored as an integral entity of the country's health system and is considered a technical component in the sector.



The image shows the top section of the ONS website. On the left is the logo for 'ONS Observatório Nacional de Saúde'. To the right are icons for location (Marracuene, EN1, Maputo – Moçambique), phone (+258 21430814/427131), and email (secretariadotecnico.ons@gmail.com). Below the logo is a navigation menu with items: 'Início', 'ONS', 'Plataformas', 'Publicações', 'Dados', 'Eventos', 'Notícias', 'Contactos', and a 'Dashboards' button. The main visual is a large photograph of a conference room filled with people seated at desks, with the text 'BEM-VINDO AO OBSERVATÓRIO NACIONAL DE SAÚDE' overlaid in white. Below the text are two buttons: 'Eventos' and 'Ver mais'.

In Mozambique, the creation of the NHO was approved by a Ministerial Diploma in 2015 and was followed a year later by the approval of the NHO's regulations. To date, the NHO is hosted within the National Institute of Health (NIH) and has its own governance structure. This governance is organized in two levels, headed by a Consultative Committee followed by the NHO's Technical Secretariat. Co-chaired by the Director General of the NIH and the National Director of Public Health, the consultative committee is composed of representatives from different ministries, government institutions, partners, and civil society that systematically and continuously oversee issues related to health, population welfare, and health systems in Mozambique. Among its many missions, the Consultative Committee's role is to evaluate and advise on the technical and scientific activities of the NHO, evaluate the NHO's annual

activity plan and report, and represent the NHO on committees, working groups, or activities in partnership with external organizations. At the operational level is the Technical Secretariat, which ensures the efficient day-to-day functioning of the NHO. This includes, for example, the drafting of plans and reports on NHO activities, the realization of technical and scientific activities, and the planning and coordination of the NHO's operational activities. This technical secretariat also supervises the activities of the various platforms integrated into the NHO.

In fact, the NHO in Mozambique has [seven different platforms](#) (HIV, Women and Child Health and Nutrition, Climate, Environment and Health, Mortality, Antimicrobial Resistance, Health Systems, PACE). These platforms constitute key actors that support the production and management of knowledge for evidence-based decision making. This is reflected in the generation of [analytical reports](#), [policy briefs](#), [maps](#), [dashboards](#), scientific publications or even [conferences](#).

For more information, visit the [Mozambique NHO](#) and/or find their [latest publications on the iAHO](#)

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## Knowledge Fact sheets

This year, we are launching a series of Knowledge Fact Sheets focusing on key health system concepts. The first batch of 5 Fact Sheets is already available on the iAHO. In these Fact Sheets, we introduce and unpack concepts such as [Universal Health Coverage](#), a [Human Analogy for the Health System](#), "The [Framework](#) for health systems strengthening towards UHC in the context of the [SDGs](#) in the African Region," [health system investments](#) and an infographic representation for a [health system](#).

## What is UHC?

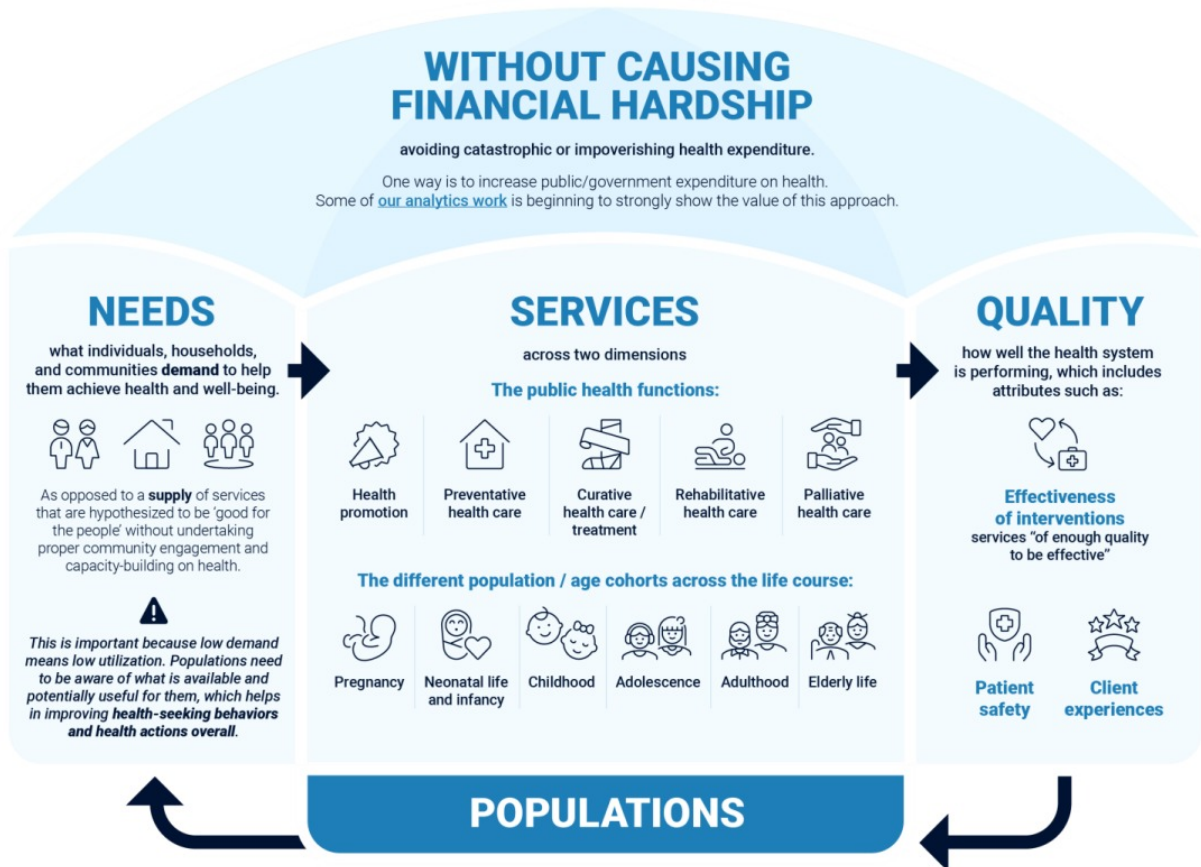
**“I receive quality care when I need it, without suffering financial hardship.”**



Rather than *complicated*, Universal Health Coverage (UHC) is *complex* – involving many working pieces. The concept is also adaptive and responsive to the [investments](#) and influences surrounding it. This includes the approaches used to make it happen, such as the Primary Health Care (PHC) approach.

UHC is one of the targets under SDG 3, specifically **target 3.8**.

In one sentence: UHC is attained when populations are able to obtain the health and health-related **services**, of enough **quality** to be effective, that they **need** to ensure their health and well-being **without causing financial hardship**.



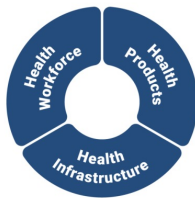
## Investments in the health system

**Health systems** integrate key building blocks that are also known as investments. The 7 investments as conceptualized by the WHO African Region include **hardware** and **software** elements.

### Tangible hardware

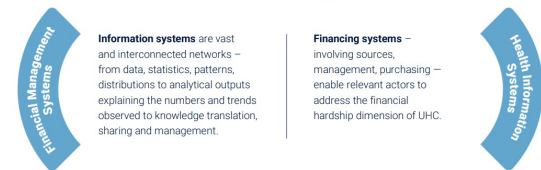
The hard **inputs** are the tangible hardware elements with which health-seekers interact directly.

"What I see as a client of the health system: providers, facilities, medicines."



### Tangible software

**Tangible software** elements facilitate the effective translation of the hardware actions into results. The **sub-systems** are structures that are built and strengthened to **support** the overall system.



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## What is a health system?

"The set of things working together to ensure I get the quality health care I need. I understand that the system in my country is probably different than the system in other countries."



A health system promotes, restores and maintains health. It is a complex whole made up of **all the actions, actors, resources, and mechanisms involved in delivering health care services to meet the health needs of populations.**

### Framing structure

The overall framing structure within which health operates in a particular setting, a health system is the foundation upon which health actions may be enacted and the central space where populations interact with the institutions, people and tools whose primary aim is to address concerns of health and well-being.

### Systems approach

A systems approach to health provides us with the opportunity to improve the health of populations in a comprehensive manner that cuts across **all** service areas (disease- or condition-specific programs), touches **all** age cohorts, and incorporate **all** categories of essential health services: health promotion, preventive care, curative care, rehabilitative care, and palliative care. This perspective places the person at the centre and examines their health-related needs throughout the life course and the range of interventions that could affect them.

### Multidimensional integration

Working to improve health outcomes through a horizontal **systems** lens (cross-cutting many areas as each health system building block caters to all service areas) that incorporates the needs of the more vertical **service interventions** (specifically focused, stand-alone programme areas) creates an all-inclusive architecture whereby health needs are addressed multi-dimensionally and the emphasis is placed on ensuring that health system investments are connected to health service outcomes.

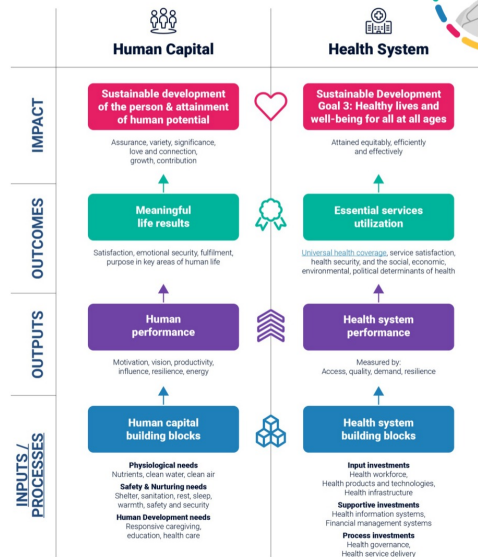
### Facilitating better health outcomes

Improving the performance of health systems is expected to facilitate the attainment of UHC in countries. At a basic level, a well-functioning health system results in better health outcomes and the achievement, for all at all ages, of the WHO definition of health: "a state of **complete physical, mental, and social well-being and not merely the absence of disease or infirmity**" (1948).

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## Human Analogy for the Health System

"Just like with a **health system**, the elements on which my life is built lead to my own performance, meaningful results, and the manifestation of my human potential!"



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## WHO AFRO Framework of Actions

The Framework for health systems strengthening towards **UHC** in the context of the SDGs in the African Region – also known as the Framework of Actions – is a reference results chain depicting the flow of action from the **health system pillar areas** to specific **outputs**, to health service **outcomes**, all the way to **impact** in the form of SDG 3 achievement: "healthy lives for all, at all ages."



Concrete actions underly the different dimensions of the framework and constitute a significant component of the WHO Regional Office for Africa's day-to-day technical support to countries. These are defined more specifically in Resolution 10 passed by the Regional Committee for Africa (RC67) of 2017. Since this resolution, Health Sector Directors of Policy and Planning from the 47 Member States have convened annually to share experiences, good practice and lessons learned pertaining to the different areas of the results chain – with each forum targeting a different lens of **health system** development.

### 1. INPUTS: Health System Investments

In the AFRO conceptualization, there are 7 health system building blocks. These inputs include **tangible hardware** (health workforce, health products and technologies, health infrastructure), **tangible software** in the form of **supportive sub-systems** (health information systems, financial management systems) and **overarching processes** (health governance, health service delivery), and **intangible software** such as values, organizational cultures, relationships, practices, networks, beliefs, interests and trust.

### 2. OUTPUTS: Functionality

Health system development efforts lead to the outputs depicted in the Framework of Actions. These outputs represent the dimensions of health system performance: access, quality, demand, resilience.

### 3. OUTCOMES: Service Utilization

Performance leads to essential services utilization in the form of critical outcomes, centering around UHC, other health-related SDG targets, service satisfaction, and health security.

### 4. IMPACT: Results

The next step in this logical framework is the maximal health impact that is ultimately sought through concrete HSS actions, namely health and well-being for all at all ages – attained equitably, efficiently and effectively. The 3 e's represent the measures of health sector performance.

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**iAHO embedded platform**

**The Africa Health Workforce Observatory**

The iAHO hosts several platforms, including the [Africa Health Workforce Observatory](#). This platform provides a wide range of information on the health workforce (HWF) in the African region. Indeed, it contains all data related to the human workforce in the region, various documents and guides related to HWF governance, policies or even training. The platform also allows the public to have an up-to-date list of all the training institutions across the 47 countries of the region and to keep you informed of news concerning health workers in the region (events, news, training, etc.).



## Africa Health Workforce Observatory



### HEALTH WORKFORCE DATA

The data are related to all people engaged in actions whose primary intent is to enhance health.

The health worker occupations are classified according to the latest version of the International Standard Classification of Occupations (ISCO - 08) within and across countries in the WHO

African region



### RESOURCES AND GUIDES

Various documents and guides related to HWF Policy and planning, HWF Governance, HWF education and training, Health Labour market analysis, National Health Workforce Accounts, National Health Workforce Observatories, Health occupational & safety, HWF Migration, HRH Resolutions, Country profiles and WHO fellowship guide



### TRAINING INSTITUTIONS

A Directory of the existing Education & Training Institutions in Health in the 47 countries in the WHO African region. This directory is under development and is not comprehensive. WHO does not endorse any of those institutions and assumes no responsibility or guarantees for the products or services provided by these institutions



### NURSING & MIDWIFERY

WHO and partners including key stakeholders support, monitor and evaluate nursing and midwifery accomplishments to ensure accessible, acceptable, quality, and safe nursing and midwifery interventions. On the occasion of the International year of the nurse and midwife 2020-21, WHO with other partners celebrate the importance of nurses and midwives in healthcare



### ANNOUNCEMENTS

The Types of announcements will be HWF related or of interest: events, job vacancies in HWF, consultations, news, training, new products from all levels of WHO

# Zoom in: AHOP Insights 2021

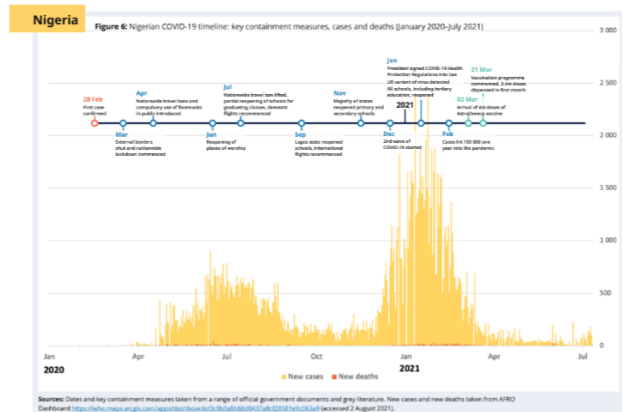
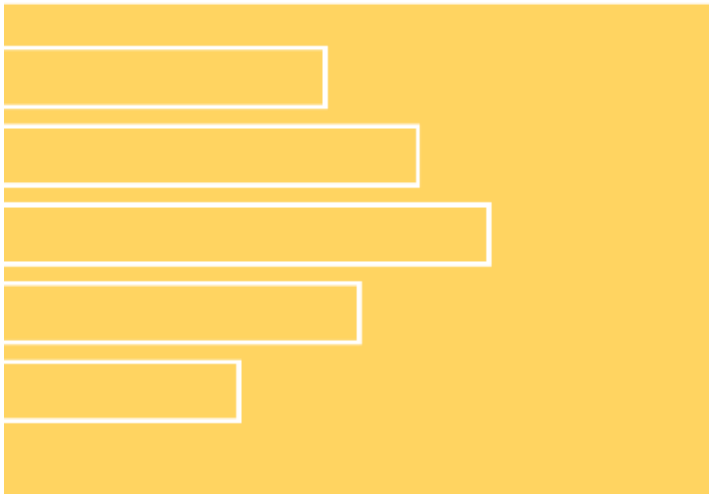
The impact of the pandemic in sub-Saharan Africa, to this date, remains markedly lower compared to other global regions such as the Americas, Europe, and Asia. Five National Centres (NCs) from the African Health Observatory Platform on Health Systems and Policies (AHOP), based in Ethiopia, Kenya, Nigeria, Rwanda, and Senegal, reflect on the containment strategies and coordination of responses in the initial phases of the pandemic.



## AHOP INSIGHTS

### Containment strategies: lessons from early COVID-19 responses in five African countries

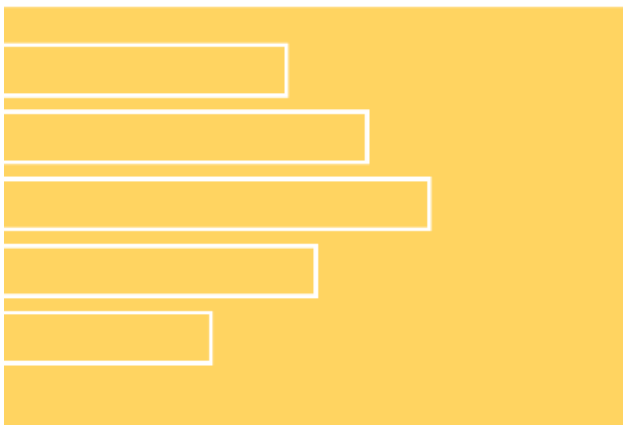
December 2021



In this report, the 5 National Centres (NCs) share experiences on the containment strategies in the early phases of the pandemic. They find that prompt implementation, respect for the fundamentals of public health, and a recognition that pandemic response must go beyond health all contributed to effective management of the pandemic

## Coordinating action: lessons from early COVID-19 response in five African countries

December 2021

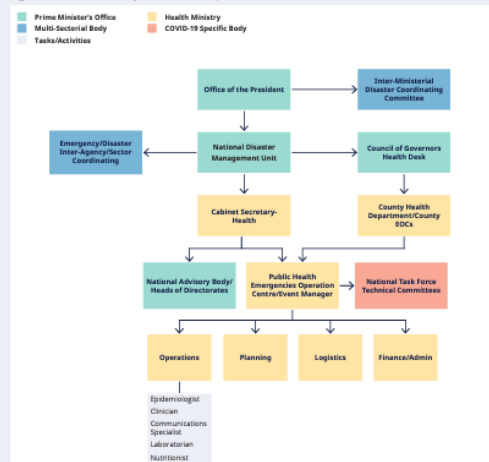


### Kenya

Kenya adopted a 'whole government' approach to the coordination of the COVID-19 response activities (Figure 3).

On 28 February 2020, the President instituted the National Emergency Response Committee (NERC) on COVID-19 through an Executive Order. The NERC is responsible for coordinating Kenya's preparedness and response to COVID-19.

Figure 3: Overview of Kenyan COVID-19 response



Sources: Executive Order No. 2 of 2020, National Emergency Response Committee on Coronavirus; Issues at State House, 28 February 2020. <https://www.health.go.ke/wp-content/uploads/2020/06/Executive-Order-No-2-of-2020-National-Emergency-Response-Committee-on-Coronavirus-28-2-20.pdf> (accessed 2 August 2021)  
The World Bank KENYA COVID-19 EMERGENCY RESPONSE PROJECT (P173820)  
<https://documents.worldbank.org/curated/en/146211582062143296/pdf/Project-Information-Document-KENYA-COVID-19-EMERGENCY-RESPONSE-PROJECT-P173820.pdf> (accessed 2 August 2021)  
ThinkWell Strategic Purchasing for Primary Health Care, 2020. "COVID 19 Summary Update for Kenya." Washington, DC: ThinkWell.

In this Insight, the 5 NCs reflect on how their national responses were coordinated and the extent to which these responses have evolved as the pandemic continues to pose a serious health threat. Regional considerations and cross-cutting insights are shared. Read [the full report](#)

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## Latest Data

### [UHC Data for WHO African region](#)

Data on Universal Health Coverage (UHC) can now be accessed on the iAHO platform. The platform offers data for all 47 member countries in the African region covering indicators such as the coverage of essential health services, service coverage on reproductive, maternal and new-born and child health or even service coverage on service capacity and access. To discover more, [visit the iAHO platform](#)

### [Health workforce indicators](#)

Visit the iAHO platform to learn more about the [latest data on health workforce](#) in the African Region. Covering a period of more than twenty years, these data will allow you to track the evolution of the density of health personnel in the

region as well as to choose more specifically the profession you are interested in monitoring (nurse, medical doctor, midwife, labortary health workers etc.)

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### [The IPCC Sixth Assessment Report: Climate Change 2022](#)

This [report](#) contains the collective views of an international group of experts, and does not necessarily represent the decisions or the stated policy of the World Health Organization. Find more about the report on Africa [here](#).

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## Blogs from AHOP National Centres & AFRO



Find out how the African region has responded to the COVID-19 pandemic with effective evidence-based decision making in this [blog article](#) post.

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## Events



African Health Economics and Policy Association  
Association Africaine d'Economie et Politique de la Santé

Virtual Conference

# 2022 African Health Economics and Policy Association Conference

**Date:** March 7-11, 2022

**Participation fees:** \$50

**Theme:** Towards Resilient Health Systems in Africa: The Role of Health Economics and Policy Research.

In case of any questions or need for clarification, kindly contact:  
Ms. Grace Njeri, AfHEA Secretary, at: [grace.njesh@gmail.com](mailto:grace.njesh@gmail.com) and  
cc: [afhea08@gmail.com](mailto:afhea08@gmail.com)

From 7 to 11 March 2022, the 6th African Health Economics & Policy Association (AfHEA) Biennial Scientific Conference will be held! AHOP will notably hold a panel discussion on March 9 entitled “Harnessing knowledge for health systems – the role of co-producing knowledge”. To find out more about how Africa can build resilient health systems in the face of the devastating impact of the COVID-19 pandemic [register here](#)

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