

HEALTH DEVELOPMENT IN THE SADC REGION: LESSONS FROM ANGOLA

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On 28 November 2023, Ministers of Health and those responsible for HIV/AIDS, together with senior government officials and health partners in the SADC region, met in Luanda, Angola, to discuss progress on the health agenda in the region. This annual forum is crucial for the SADC region, as it allows countries to learn from each other and develop common solutions to the challenges they face in the health sector.

This year's meeting was hosted by the Government of Angola, which has made significant progress that can be followed by other SADC countries. As highlighted on 16 October 2023 by the Head of State, His Excellency João Manuel Gonçalves Lourenço, during his State of the Nation Address, Angola has seen significant improvements in its capacity to provide essential health services. Since 2017, the country has undertaken the construction, expansion, and rehabilitation of more than 163 new health units, 155 of which are for primary care. In the same period, bed capacity has increased from a minimum of 13,426 to 37,808. At the national level, the capacity of specialized hemodialysis services is being

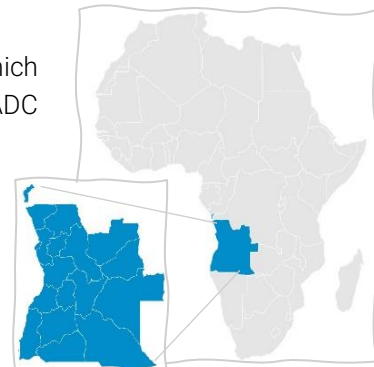


Figure 1: Map of Angola in Africa.

strengthened, currently available in 10 provinces, compared to only 3 provinces in 2017. In the last parliamentary term, the country also recruited 41,093 health professionals, including doctors, nurses, diagnostic and therapeutic technicians, and others, with 80% of the doctors recruited being placed in the municipalities of the provinces, increasing the capacity to provide health services at the deconcentrated level of the health sector. The results of this investment are already being demonstrated. For example, although malaria remains the leading cause of illness and death, the number of people dying from malaria has been falling since 2017, by around 15 percent. Furthermore, in this same period, there has been a 50 percent increase in diagnoses of non-communicable diseases in primary care.

This story is important because the country is achieving it with limited increases in the budget available for health. Between 2017 and 2020, WHO/World Bank estimates show that current health expenditure adjusted for purchasing power remained between 180 and 200 dollars per person, with constant values prevailing after adjusting for COVID-19 expenditure.

It is therefore possible for countries in the SADC region to significantly improve their health service delivery, even in situations of limited resources, by focusing succinctly and unwaveringly on a wide range of health outcomes.

The global health agenda is focused on achieving three outcomes: universal health coverage - access to and utilization of essential health services; health security - protection from unexpected disasters and emergency threats to health; health determinants - the protection of people against social, environmental, economic and security risks that may have an impact on their health. Angola is making considerable investments in the health sector and other sectors that are having an impact on all these results. I am highlighting here FOUR examples of areas where countries can focus to increase their capacity to address their health challenges within resource constraints. These examples are not exhaustive, but they serve to illustrate the lessons we can learn from each other.

Firstly, a global focus on the development of health service delivery systems. It is necessary to focus on the whole system and not make the different areas compete with each other. By way of example, Angola is targeting investment at the national, provincial, municipal, health center, and community levels simultaneously, without prioritizing one to the detriment of the other. At the primary care level, the country is focusing on the municipalization of health services, whereby the primary health care approach is built around a significantly stronger primary hospital in the municipality - one level lower than the province, which is the decentralized level of governance.

Secondly, we need to develop and capitalize on individual and community health actions as part of health services. Currently, a lot of personal care is at best tolerated but generally discouraged. However, it is an integral part of the care-seeking process that people begin and end their healthcare process with some form of personal care. Our community health workers should not just focus on bringing defined services to the community but should be seen as a means of harnessing and facilitating self-care actions that are beneficial to the population. This is even more crucial for populations where access to institutional health services is limited, and where local remedies and solutions are used.

Thirdly, we need to better integrate our health services into global and national priorities. The context in which health services are provided has a significant impact on the ability to respond to people's needs. Today, globalization, urbanization, and more informed communities are shaping the way individuals interact with health services. The Health Sector in Angola has undertaken initiatives to monitor and respond to health and well-being issues that arise on social media and other public platforms, which helps to address the operational challenges arising from the care delivery process.

Fourthly, we need to maximize the potential of digital health in the region. Many of the current initiatives cannot be scaled up, are too limited in scope, are centered on data extraction rather than service provision, and are externally oriented. We need to develop solutions adapted to the current needs of the region, centered on improving individuals' access to services that would otherwise not be available. For example, the current health infrastructure and the training carried out by the Angolan government have integrated digital telemedicine solutions to facilitate the exchange of knowledge and thus extend the availability of essential services that would not normally exist.

These are some examples we can see in Angola. Other SADC countries also have examples they can share, particularly in areas such as resilience, quality of care, and other areas for which solutions are being sought in the region. Although the health challenges are many and complex, there are solutions that, by working together, can be overcome.

