

PRESS RELEASE

AU Experts deliberate on priority actions to end AIDS, TB and Malaria as public health threats by 2030

Support initiative to recruit 2 million community health workers to improve community health delivery systems

Conakry, 17 May 2017- Ahead of the meeting of African Heads of State and Government on 3 July 2017, experts working in AIDS, TB and Malaria adopted the AIDS Watch Africa Strategic Framework last week. The new strategy will further strengthen AIDS Watch Africa as the Heads of State and Government level continental vehicle for joint action, advocacy and accountability towards ending AIDS, TB and Malaria.



The Heads of State will roll out this strategy within the framework of the Africa Health Strategy and the Catalytic Framework to End AIDS, TB and Eliminate Malaria in Africa by 2030 adopted by African leaders in July 2016 at the Kigali Summit. These frameworks provide a clear policy direction for strengthening health systems and achieve universal health coverage.

“We are now in a new era for global health and development where Africa is increasing commitments to transform health systems, build community resilience and contribute to better health outcomes through increased investments in health” said Hon. Abdourahmane Diallo, Minister of Health of Guinea.

Urgent need to accelerate efforts to end AIDS, TB and Malaria by 2030

While there has been significant progress in the reduction of deaths and new rates of HIV infection, the West and Central Africa region is lagging behind. An emergency plan is needed urgently to accelerate the HIV response. Furthermore, despite the progress made, deaths and new infection rates remain high among young people especially young girls and women and more concerted efforts and investments are needed to address their unmet needs. The situation is made worse by under investments in tuberculosis that have hampered efforts for increased coverage and access to services for detection and treatment. Furthermore, the gains against malaria are fragile and require additional investments for antimalarial drug and insecticide resistance monitoring, giving priority to surveillance, detection and response.

“Addressing the broader health agenda is a catalyst for inclusive economic growth and development. However under investments in health threaten Africa’s demographic dividend, an enabler for the achievement of Agenda 2063’s socio-economic development

and structural transformation aspirations” said Ambassador Olawale Maiyegun, the Director for Social Affairs at the African Union Commission.

The Africa Scorecard on Domestic Financing for Health adopted last year is a critical tool that countries have started using to track progress in health financing including monitoring progress towards meeting the ambitious 15% Abuja target and donor commitments. Efforts are currently ongoing to institutionalise regular, systematic and routine annual implementation of National Health Accounts that will improve the quality of data on health financing in Member States.

Enhancing improved delivery systems at the community level

With better diagnostics, medicines, information and systems there is need to mobilise community workers and train them to play an important role to end epidemics. The Ebola epidemic in West Africa and the recent resurgence of Malaria in Namibia and Mozambique, Lassa fever and Meningitis in Nigeria and Ebola in the Democratic Republic of the Congo demonstrates that new threats will continue to emerge. Engaging at the community level to prevent, manage and respond quickly to emergency disease outbreaks is thus a clear priority.

“We need to transform the interface between the last service provider and the community to better manage health risks. Creating a working sub-system of health with paid community health workers will transform our health architecture” said Michel Sidibé, the Executive Director of UNAIDS, “We cannot achieve set targets if we do not build strong and well trained human resources for health” he added.

UNAIDS and partners are driving an initiative to recruit 2 million paid community health workers to improve community health delivery systems.

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