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CHOICE OF SUBJECTS FOR THE ROUND TABLES AT THE FIFTY-FIRST SESSION OF THE REGIONAL COMMITTEE IN YEAR 2001

The Regional Director has proposed the following subjects for the Round Tables at the fifty-first session of the Regional Committee:

1. "HEALTH SYSTEMS: IMPROVING PERFORMANCE"

Health systems are a major health determinant in the African Region. They will have to be restructured and developed to enable them seriously pursue the defining goal of improving health and reducing health inequality while assuring fairness in health financing and enhancing responsiveness to the legitimate expectations of the people. Therefore the Regional Health for All Policy for the 21st century has identified *"undertaking health system reform by drawing upon primary health care principles"* as one of the four strategic directions that are likely to help achieve health for all in the 21st century.

Health system reforms as well as other change processes need to be geared towards improving the performance of health systems. The reforms need to be based on evidence from both local and international sources and should address the strengthening of key health systems functions.

The World Health Report 2000 defined the four key functions of health systems as: providing services, developing the human and physical resources and mobilizing and pooling the financial resources for health care and, most critically, assuming the function of stewardship which involves setting and enforcing the rules of the game and providing strategic direction for all the different actors involved. The World Health Report also provided a health system performance assessment framework which can be used by countries as well as evidence already generated on the various components of the framework.

To achieve better health, the primary goal of health systems, policy makers and health systems managers cannot only concentrate on the health sector. They will also have to adopt innovative strategies for fostering effective intersectoral action for health since most of the major determinants of health fall outside the direct control of the health sector.

The Technical Discussions at the fifty-first session of the Regional Committee will examine critical issues related to the improvement of health systems performance such as: current state of performance of health systems in the countries in the Region, with particular emphasis on the four key functions; fostering of intersectoral action for health; use of the performance assessment framework at country and local levels and use of the approaches for monitoring and evaluation of reforms and other processes aimed at improving performance.

2. "DISEASE CONTROL: THE ROLE OF SOCIAL MOBILISATION"
Rationale/Justification

The success of the Polio Eradication Initiative has demonstrated the benefits to be reaped when effective social mobilisation is employed to achieve a health goal. The Initiative secured the support and participation of all sectors of the society from Heads of State, international donor partners, religious organisations, government ministries, communities and individuals without which success would have been impossible. Through effective social mobilization, over 100% of children targeted were immunised ---many for the first time--- during the national immunisation days. Routine immunization programmes also demonstrated the indispensable role of social mobilization in achieving and sustaining high coverages in a number of countries in Southern and Eastern Africa.

Social mobilization, alongside other strategies, is demonstrably a key strategy for disease control. The other strategies include systems strengthening, planning, capacity building, provision of adequate logistics and supplies and other preventive care interventions.

More recently programmes for the control and prevention of communicable diseases, such as Roll Back Malaria (RBM), Integrated Management of Childhood Illnesses (IMCI), Tuberculosis and HIV/AIDS have acknowledged the role of social mobilization and are exploring ways to ensure greater involvement and participation of communities.

Countries with strong noncommunicable diseases programmes are utilising social mobilisation to educate communities on risks of tobacco, cardiovascular disease, diabetes mellitus, hypertension etc, and to educate the community on its role in understanding and caring for the mentally ill.

Consequently, the momentum and experience gained with the Polio Eradication Initiative is timely and could be emulated by other disease control programmes.

Role of social mobilization in disease control

Social mobilization is about building partnerships, in short bringing together all possible partners and allies at all levels to support disease control. Effective social mobilization will be needed to sustain and build new partnerships among the international community, private sector, media etc; to secure the commitment and support of policy and decision makers for the mobilization of needed resources; to bring about the full involvement of community leaders and members; and to ensure that the populace is well informed about health.

What is needed to strengthen social mobilization for disease control

The Round Tables at the fifty-first session of the Regional Committee will examine issues related to the strengthening of social mobilization in the African Region in order to accelerate disease control programmes. Priority areas include the following:

- Securing commitment to support social mobilization at the highest level;
- Providing adequate budget allocation and resources for social mobilization;
- Ensuring greater integration of social mobilization into overall primary health care;
- Ensuring that the basic structures are in place to support community-based interventions;
- Supporting capacity-building for social mobilisation at all levels;
- Mobilizing resources from the public sector such as free airtime on radio and television to ensure the widest possible reach for health information.

Effective social mobilization can help make a difference in health promotion in the African Region and African Ministers of Health need to ensure that social mobilization is high on the agenda of the priorities for this decade.

3. "POVERTY REDUCTION: THE ROLE OF THE HEALTH SECTOR"

Poverty is multi-dimensional. Its many dimensions include low levels of income, food deprivation, poor education, dis-empowerment, and ill health, among others. Poverty can only be reduced by attacking it on all fronts. Ill health is a very significant dimension of poverty. Ill health imposes a significant economic burden on the poor in terms of the proportion of their meagre income spent on health services and the greater vulnerability of poor households to sudden ill health, leading to loss of income and employment. In addition to further impoverishing the poor, ill health reduces the growth capacity of the poor and diminishes their likelihood of overcoming poverty. The recognition that good health is important in overcoming poverty is growing. This recognition by the international community and African countries has now led to efforts to link debt relief with health as a way to reduce poverty.

With the high prevalence of poverty in African countries, health strategy within the context of health policy reforms must address the interests of the poor. The main objective of health interventions must be to reduce the burden of diseases, particularly among the poor and other vulnerable groups, and thereby contribute to '*de-linking*' of poverty and ill health. The focus should be to increase access of the population to health services, improve the quality of the services targeted and increase their utilization, ensure that a significant proportion of the disbursed public health budget is for making the relevant services available to the poor and other vulnerable groups, and enhance intersectoral collaboration in order to address factors that are beyond the health sector in the effort to ensure improved health.

The Round Table will examine these critical issues and others related to the reduction of poverty through health interventions. The Round Table will also highlight the links between poverty and ill health, and underscore the urgent need for national authorities to better understand these linkages. In addition, the Round Table will design a framework for linking debt relief with poverty reduction and will determine the core health interventions likely to contribute to poverty reduction and elimination.