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SADC Takes Bold Step Towards Eradicating TB in Southern Africa’s Mining Sector: Integrating the Maputo Declaration and National Strategies

Lesotho Takes a Multisectoral Approach to End TB Epidemic

In a groundbreaking effort to tackle the devastating impact of Tuberculosis (TB), TB/HIV, and related occupational diseases in the mining sector, the Southern African Development Community (SADC) is making waves with its regional response. Born out of the 2012 Maputo Declaration and given life by the SADC Joint Ministerial Committee on Health and HIV and AIDS in November 2022, this initiative aims to create a coordinated and collaborative strategy to fight TB in the mining sector.

Between March 14-15, 2023, the SADC secretariat, in partnership with ECSA-HC, held a dynamic two-day workshop in Namibia to integrate the SADC declaration with national strategies. The event brought together key players from labour, mining, and health ministries, as well as ex-miners associations and women in mining groups. Together, they reviewed prioritized interventions in the national TB strategic plan and identified opportunities to enhance the implementation of TB-specific mining sector activities.

Participants discussed the operational plan, built national consensus for incorporating TB in mining sector (TIMS) interventions into national TB and other relevant strategic plans, and even developed a comprehensive national multi-sectoral operational plan to effectively implement the provisions outlined in the SADC Declaration.

During the meeting, stakeholders were briefed on the progress of the Namibia National Tuberculosis (TB) program, which revealed some concerning trends. The majority of TB cases were found to be concentrated in urban areas, and a startling 42% of TB patients have yet to be identified and treated. Among those diagnosed, 30% are also HIV-positive, highlighting the importance of addressing the intersection of these two health crises. Encouragingly, almost all TB patients are aware of their HIV status (99%) and are receiving antiretroviral therapy (ART) accordingly (99%). The program boasts an 88% treatment success rate, and a 75% drug resistance TB that exceeds both global and regional averages. The update underscored the need for continued efforts to tackle these issues and improve the overall effectiveness of the TB program in Namibia.

"Commitment to surveillance and tools standardization is key for successful SADC integration. Robust data mobilizes resources and drives a multi-sectoral approach, enhancing our collective health response." - Executive Director, Ministry of Health, Namibia

"Addressing the gap in identifying affected miners and ex-miners is crucial, as it contributes to the 42% of missing TB cases. Accurate data is vital for an effective and comprehensive response." Representative of Ex-miners

Kicked off by a Keynote from the Executive Director Mr. Ben Nangombe from the Ministry of Health, the workshop focused on promoting the SADC Heads of State and Government Declaration on TB in the mining sector throughout Southern Africa.

By Justin Mahimbo
The Kingdom of Lesotho, with a population of 2.3 million people, is among the 30 high TB/HIV burden countries in the world. Tuberculosis (TB) is a significant obstacle to the Kingdom’s human and economic development, causing poverty through increased out-of-pocket expenditure, high mortality rates, and high TB prevalence rates. It is also associated with poor socioeconomic development, and the actions required to tackle the socio-economic and structural determinants of TB lie beyond the purview of the health sector.

In response to this challenge, the Kingdom of Lesotho requested technical support from the SATBHSS Project under ECSA-HC to develop a Multisectoral Accountability Framework for addressing the TB epidemic. The objective was to engage and commit government sectors, private sectors, stakeholders, and communities to join efforts aiming at ending TB in Lesotho. The overarching goal is to strengthen Lesotho’s capacity for multisectoral response that facilitates the TB elimination by 2030.

The development of the Multisectoral Accountability Framework took place in a workshop from the 6-17 March 2023. Participants from various government ministries, private sectors, implementing partners, civil society organizations, and other stakeholders took part in the workshop. The activity began with presentations on the country’s TB epidemiological status, national TB response, and orientation on the development of the MAF-TB framework. This was followed by group discussions on the SWOT analysis of different sectors and stakeholders, resulting in a list of areas where commitments were required to respond through activities.

Furthermore, a monitoring framework was developed, which included current gaps identified, planned activities/actions to address the noted gaps, and indicators to track the performance of the planned activities. The different sections of the document were consolidated to have a zero draft of the framework ready to be fine-tuned.

The Multisectoral Accountability Framework aims to coordinate and foster engagement of all sectors (government and private) and stakeholders, communities involved in the national TB response with the objective of utilizing their core competencies, political, programmatic, and financial capabilities to ensure shared responsibilities and strengthened accountability towards achieving national objectives to end TB in the Kingdom of Lesotho.

The development of the Multisectoral Accountability Framework for TB response in the Kingdom of Lesotho is a significant step towards ending the TB epidemic by 2030. TB is not just a health issue but also an economic and social challenge that requires a whole-of-society approach. The Multisectoral Accountability Framework will ensure that all sectors and stakeholders are involved in the fight against TB, and each will contribute its core competencies to the TB response. The workshop was facilitated by WHO (virtually from Geneva) and ECSA-HC staff, and it was held in Maseru, Avani Lesotho Hotel. The participation of the government ministries, private sectors, implementing partners, civil society organizations, and other stakeholders shows the commitment of the Kingdom of Lesotho towards ending the TB epidemic.

By Justin Mahimbo
The global threat of antimicrobial resistance (AMR) has never been more pressing. As bacteria continue to develop resistance to a wide range of antimicrobials, countries around the world are racing against time to preserve the effectiveness of existing antibiotics.

Under the Strengthening Pandemic Preparedness Project, the East Central and Southern Africa Health Community (ECSA-HC) is supporting five countries, including Rwanda, in their efforts to strengthen multisectoral responses to AMR. The National Action Plan on AMR 2020-2024 identifies antimicrobial stewardship (AMS) as a key priority and calls for more specific guidance on how to establish, implement, and evaluate effective AMS programs and AMR surveillance systems at national and healthcare facility levels.

To address these needs, the Ministry of Health, through the Rwanda Biomedical Center and with support from ECSA-HC and the SPP project, recently conducted a baseline assessment of the country’s capacity to conduct AMR surveillance and establish antimicrobial stewardship programs. The assessment, which involved 17 laboratories, utilized the World Health Organization (WHO) AMS assessment tool and the Centers for Disease Control and Prevention (CDC) Laboratory Assessment of Antimicrobial Resistance Containment (LAARC) assessment tool. The findings have been crucial in informing the development of the National AMR Surveillance Strategy and the National Antimicrobial Stewardship Guidelines for healthcare settings in Rwanda.

From March 6th to 17th, 2023, a 10-day workshop was held in Nyamata, Rwanda, to develop these critical guidelines and strategies. The workshop, split into two tracks, brought together representatives from human health, animal health, and environmental sectors to adopt the One Health approach in combating AMR. In addition, the Rwanda FDA, Rwanda Pharmacy Council, University of Rwanda, and participants from the assessed facilities were also present to ensure multisectoral collaboration in shaping the National AMS guidelines and AMR Surveillance strategy. This groundbreaking initiative highlights Rwanda’s dedication to addressing the growing threat of AMR and serves as an inspiring example of how countries can come together across sectors to protect public health and preserve the effectiveness of life-saving antibiotics.
Through its Pandemic Preparedness Project, ECSA-HC successfully completed the development of contingency plans aimed at tackling major public health threats in Zambia. This achievement was marked during a five-day workshop held in Chongwe, Zambia.

At the workshop’s conclusion, Acting Director General of the Zambia National Public Health Institute (ZNPHI), Professor Nathan Kapata, emphasized the importance of rapidly implementing these contingency plans to efficiently counter potential disease outbreaks. He stated that such plans serve as vital, life-saving measures that must be brought to fruition without delay.

Kapata also stressed the need to prioritize health security across the region, ensuring the protection of its people from epidemics. As ZNPHI’s Director for Epidemic Preparedness and Response, he applauded health experts for their hard work and dedication throughout the development process.

Dr. Ali Muhammad, Senior Public Health Specialist for East Central and Southern Africa (ECSA), explained that these documents offer a clear roadmap to address potential health hazards. He added that the contingency plans play a crucial role not only in guiding disaster response efforts but also in resource mobilization and budgetary planning, among other aspects.
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