

SESSION 2: BUILDING RESILIENT  
HEALTH SYSTEMS THROUGH STRONGER  
INSTITUTIONS AND WORKFORCE TO  
DELIVER THE EPHFs

Moderated by Dr. Theresa Tam & Prof. Neil Squires

IANPHI  
**ANNUAL MEETING**  
FEBRUARY 7-8, 2024 | KIGALI, RWANDA

HOSTED BY  
**rbc** Rwanda  
Biomedical  
Centre  
Healthy People. Wealthy Nation

Dr. Sohel Saikat,  
Senior advisor, lead

Health Systems Resilience  
and Essential Public Health  
Functions,

Special Programme on  
Primary Health Care |  
UHC & Life Course  
Division,

World Health Organization

**Application of  
the essential public  
health functions**

an integrated and comprehensive  
approach to public health



World Health  
Organization

Public Health Institute of the World  
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EPHF<sub>s</sub> AS  
COMPREHENSIVE  
APPROACH TO  
STRENGTHENING  
PUBLIC HEALTH  
AND SERVICES

# Chronic under-investment / under-prioritization of public health

Example: a snapshot of situation of government expenditure on health in EU

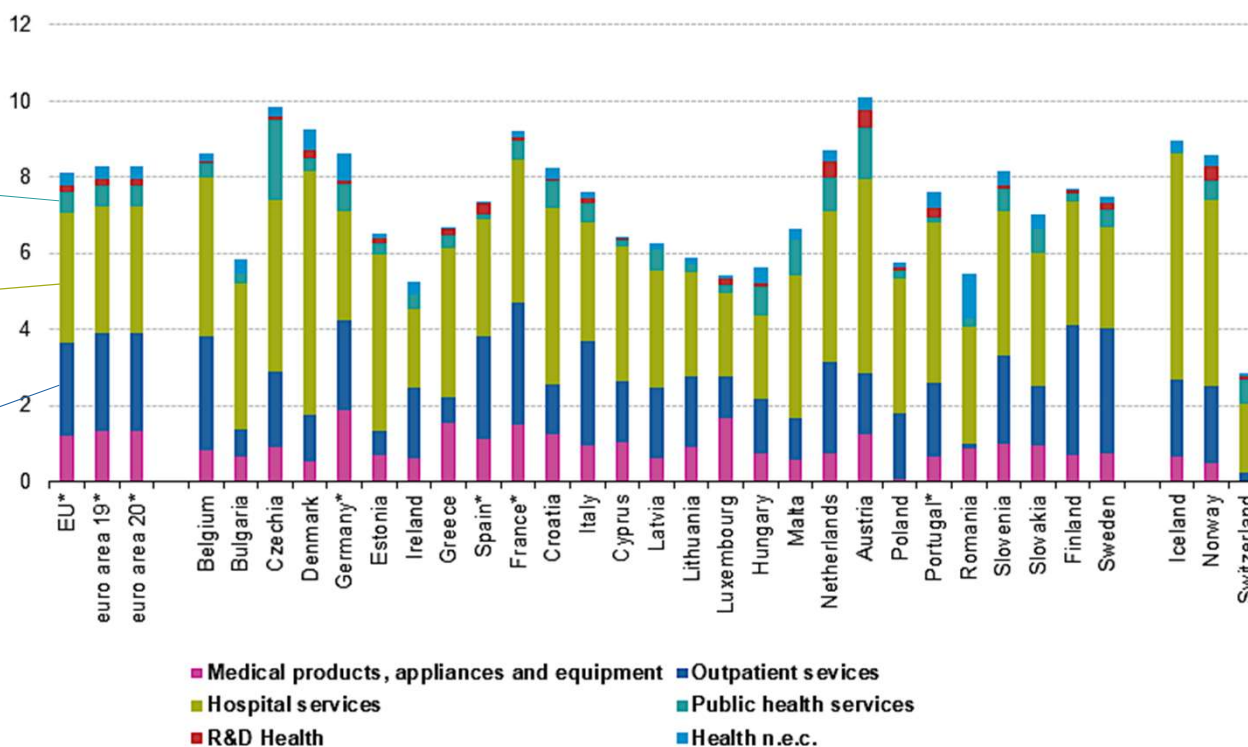
EU average:

public health services:  
~0.6% of GDP

hospital services:  
~3.4% of GDP

outpatient services:  
~2.5% of GDP

**Total general government expenditure on health, 2021 (% of GDP)**

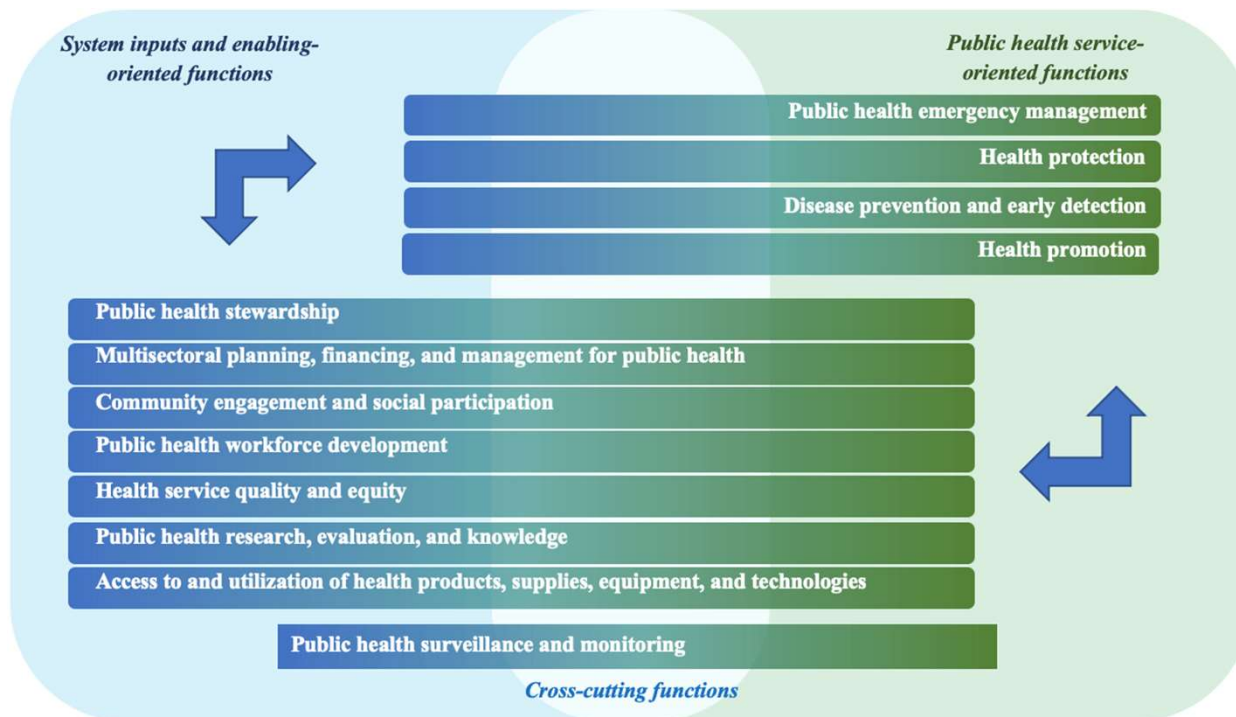


Source: Eurostat. [Government expenditure on health - Statistics Explained \(europa.eu\)](https://ec.europa.eu/eurostat/tgm/table.do?tab=table&init=1&language=en&plugin=1)

# Unified list of Essential Public Health Functions

The essential public health functions

- are a set of fundamental, interconnected and interdependent activities, that are required to ensure effective public health action
- prevent disease, promote and protect health and wellbeing, and address broad determinants of health

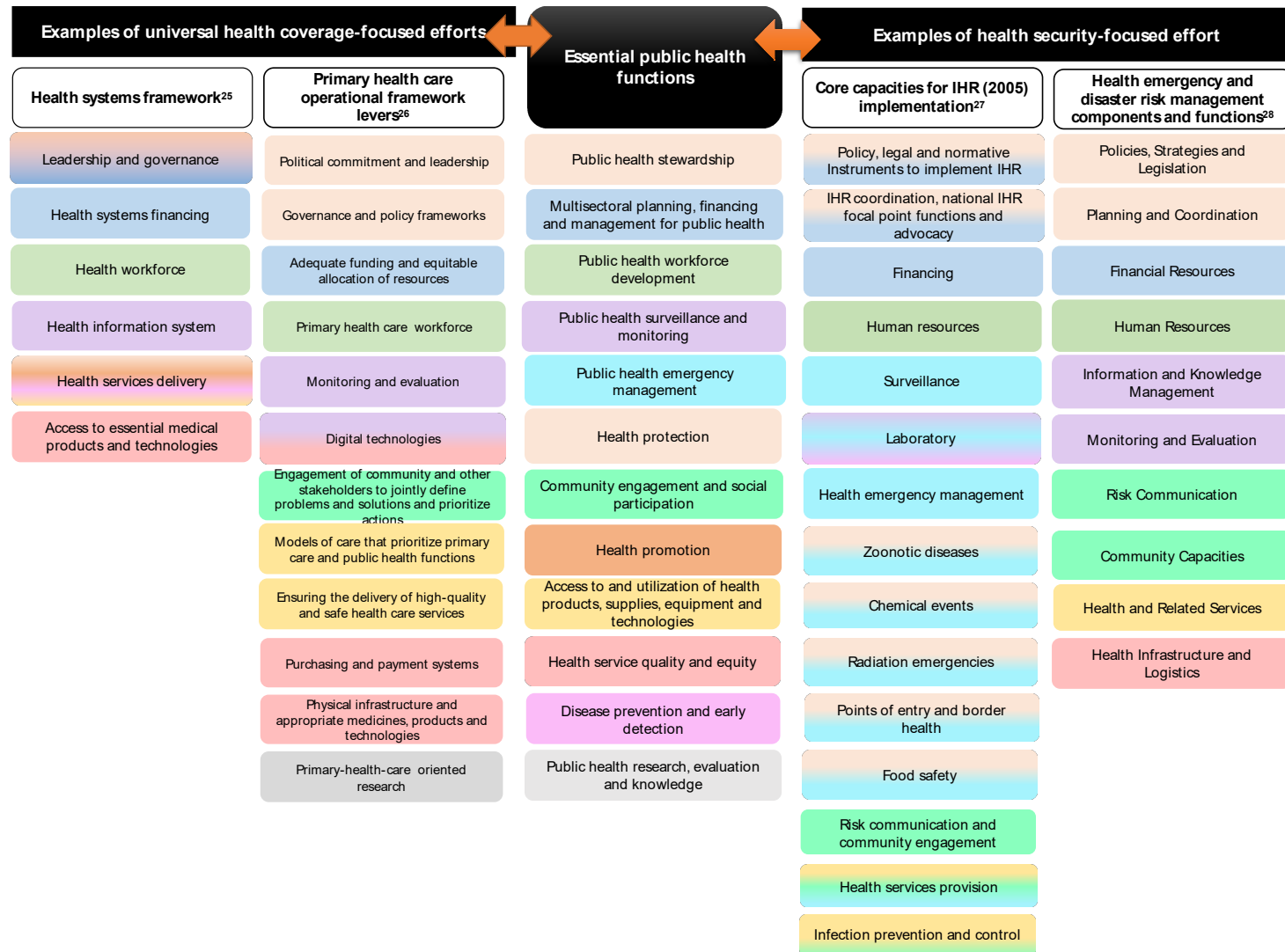


Key Characteristics:

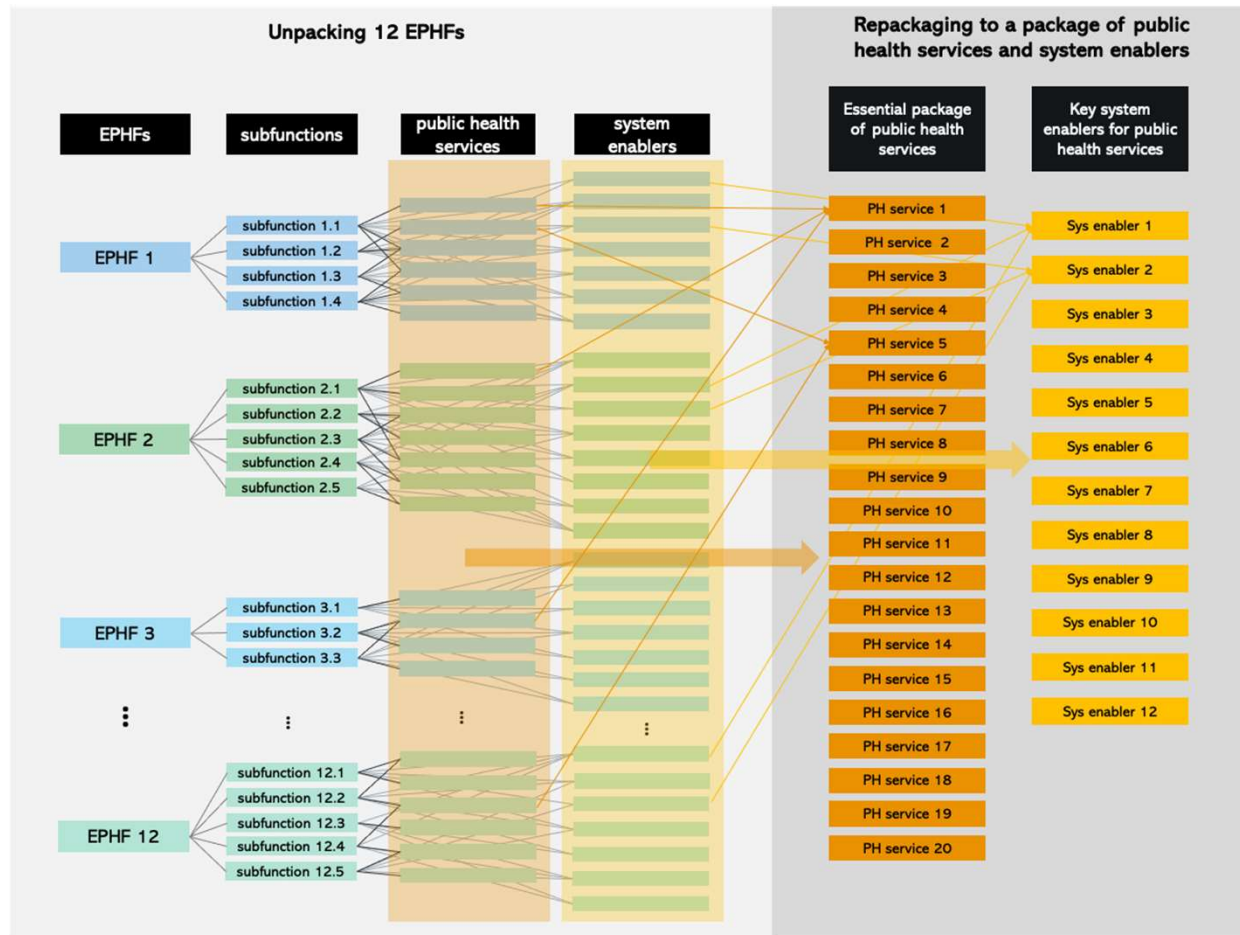
- Ensures a comprehensive approach to public health
- Adaptable to different contexts
- Includes service oriented and enabling functions
- Recognizes the need for intersectoral action
- Addresses wider determinants
- Promotes health systems resilience
- Aligned with UHC and health security efforts

## Conceptual complementarity of EPHFs to achieving UHC and health security

- Applying EPHFs is NOT a competing agenda.
- An integrated approach is needed to align efforts towards different objectives and make best use of often-limited resources.

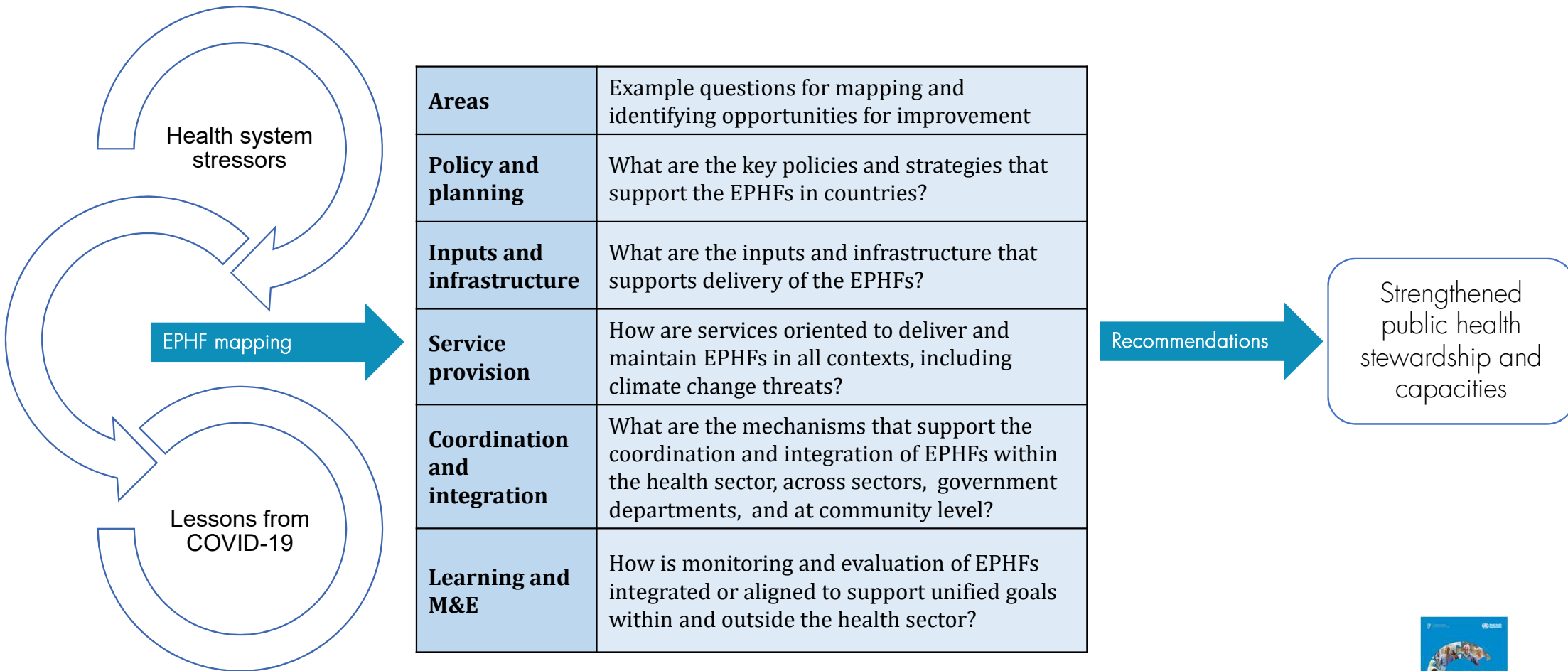


# Unpacking 12 EPHFs and defining public health services towards operationalization



Essential package of 20 public health service and 12 system enablers to support country level operationalization

# Country application: strategic review of EPHFs



*Essential public health functions in Ireland: Perspectives to strengthen public health capacities and stewardship*  
<https://iris.who.int/handle/10665/371252>

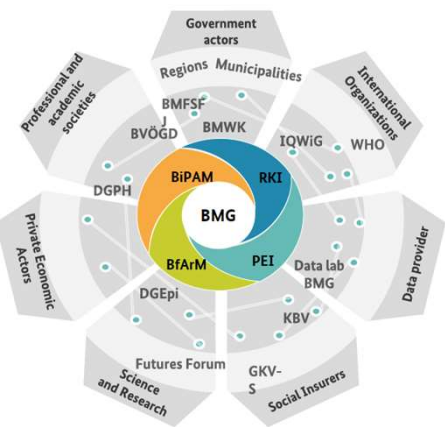


# Country focused EPHF work and dialogue in national public health reform



## Germany

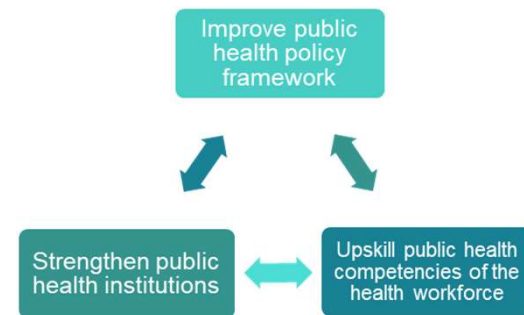
- Dialogue on institutional reform for public health
- fostering a comprehensive approach to public health ensuring linkages to relevant institutions in public health



## Azerbaijan

Azerbaijan Pandemic Response (APR) project with a focus on public health strengthening

- Underpinned by EPHF review
- A strategic plan and roadmap for "Strengthening the Public Health System"



## China

Seminar on building resilient public health and health care systems to inform policy development in support of high-level national goals

- 14th Five-year-plan for China's social and economic development
- Healthy China 2030 – *promoting health and development*

## Ireland

Strategic review of baseline capacities to deliver the EPHFs to inform public health reform.

Recommendations used to:

- Drive strategic shift to prioritize public health
- Solidify political commitment to strengthening public health stewardship
- Promote whole-of-society and government partnership for public health

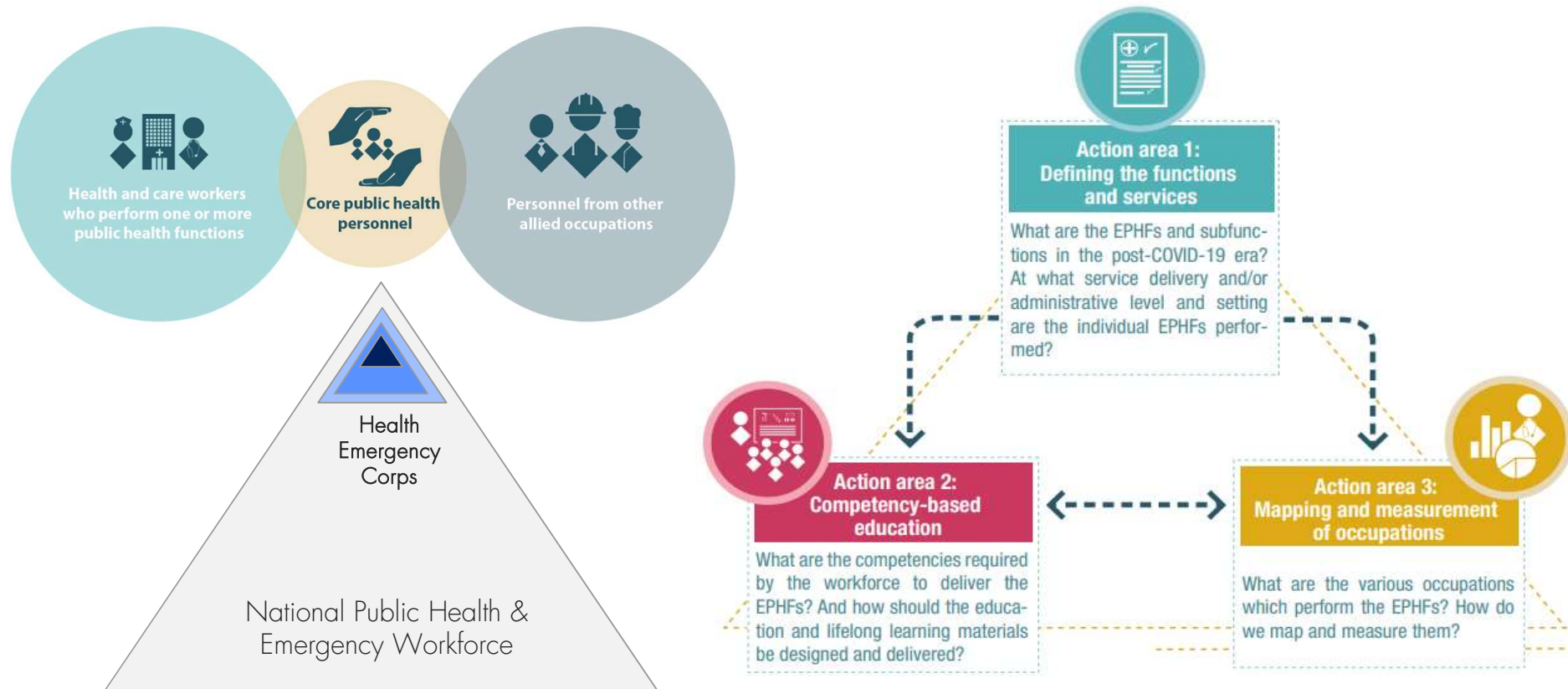
Table 1: Visual high-level summary of delivery of essential public health functions in Ireland

Themes	Technical areas	Essential public health functions <sup>a</sup>														
		1	2	3	4	5	6	7	8	9	10	11	12			
Policy & planning	Legislative instruments															
	Key policies & strategies															
	Engage & coordinate															
	Incorporation into planning															
Inputs & infrastructure	Inputs & infrastructure															
	Impact & influence															
Service delivery	Resource allocation process															
	Incorporation of prevention and promotion															
Coordination & integration	Stakeholder involvement															
	Mechanisms to support coordination															
Cross cutting	Monitoring & evaluation															
	Systematic learning															

<sup>a</sup> Limited consideration for EPHFs within specific technical areas  
<sup>b</sup> Some degree of consideration for EPHFs within specific technical areas  
<sup>c</sup> EPHFs strongly considered and integrated within technical areas



# Public health and emergency workforce roadmap



*Roadmap approach to defining the EPHFs and building capacity of the workforce that delivers the EPHFs*

Vision: A strengthened workforce in every country; delivering all the essential public health functions including emergency preparedness and response for universal health coverage, health security and improved health and wellbeing

## Questions for discussion

What is the role of NPHIs in championing a comprehensive approach to public health based on population health needs and risks?

What are the enablers and barriers for NPHIs to operationalize public health in an integrated and comprehensive way?

Can the unified list and package of essential services be used to strengthen the role of NPHIs in delivering comprehensive public health?

How can WHO, IANPHI and partners provide impactful advocacy to support countries in embracing comprehensive public health?



### ESSENTIAL PUBLIC HEALTH FUNCTIONS, HEALTH SYSTEMS, AND HEALTH SECURITY

Developing conceptual clarity and a WHO roadmap for action

### 21<sup>ST</sup> CENTURY HEALTH CHALLENGES Can the essential public health functions make a difference?

Discussion Paper



### Essential public health functions in Ireland



WHO POSITION PAPER

### Building health systems resilience for universal health coverage and health security during the COVID-19 pandemic and beyond



### Health service continuity planning for public health emergencies

A handbook for health facilities  
Interim version for field testing

# Thank you.



Contact: Sohel Saikat



### Fostering Resilience through Integrated Health Systems Strengthening



### Health systems resilience toolkit

A WHO global public health good to support building and strengthening of sustainable health systems resilience in countries with various contexts

### Regional landscape of national public health institutions in Africa and their role, scope and capacity in supporting health systems resilience

### Off-the-shelf exercise handbook

Health systems resilience exercises



### National workforce capacity to implement the essential public health functions including a focus on emergency preparedness and response

Roadmap for aligning WHO and partner contributions

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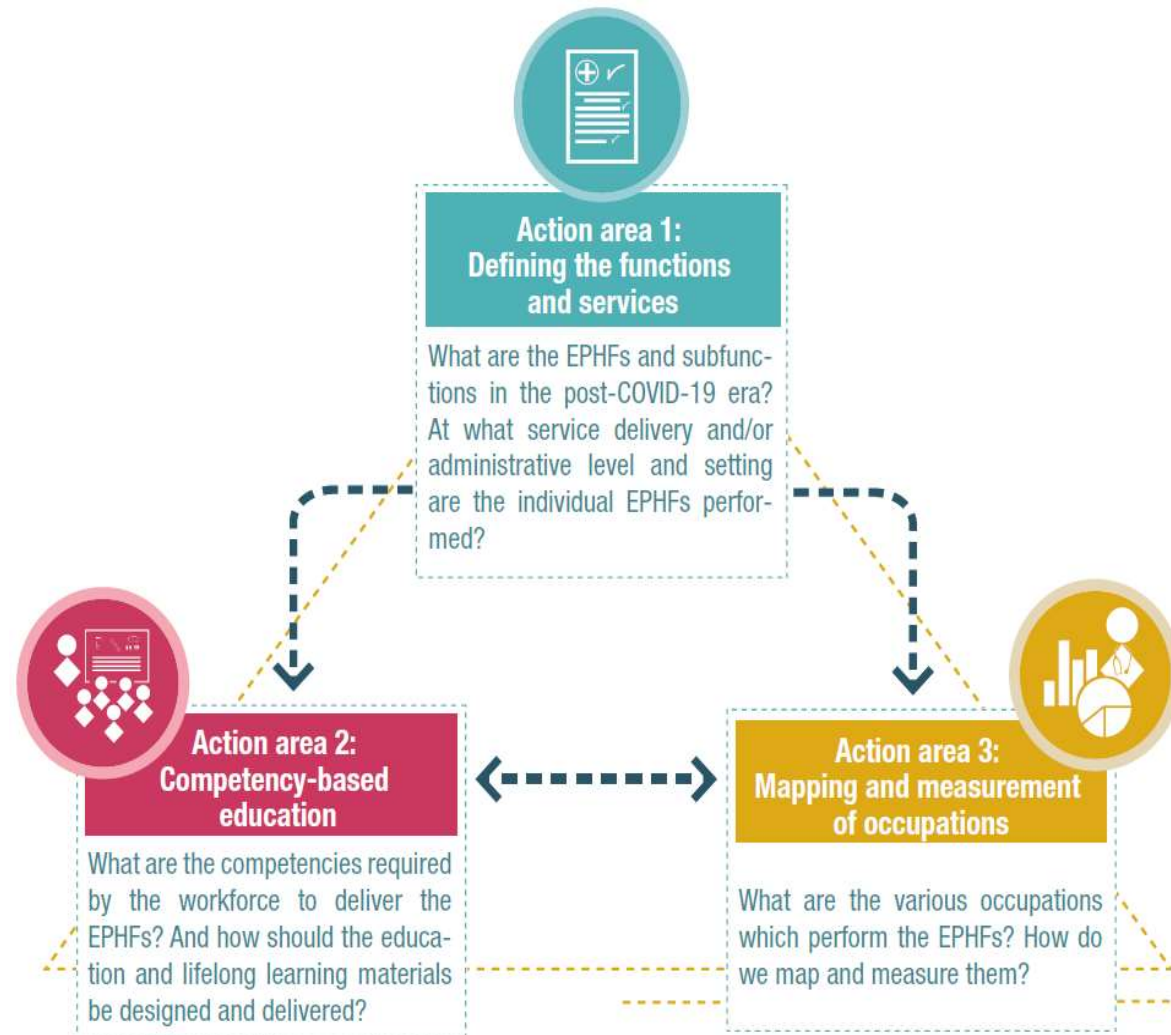


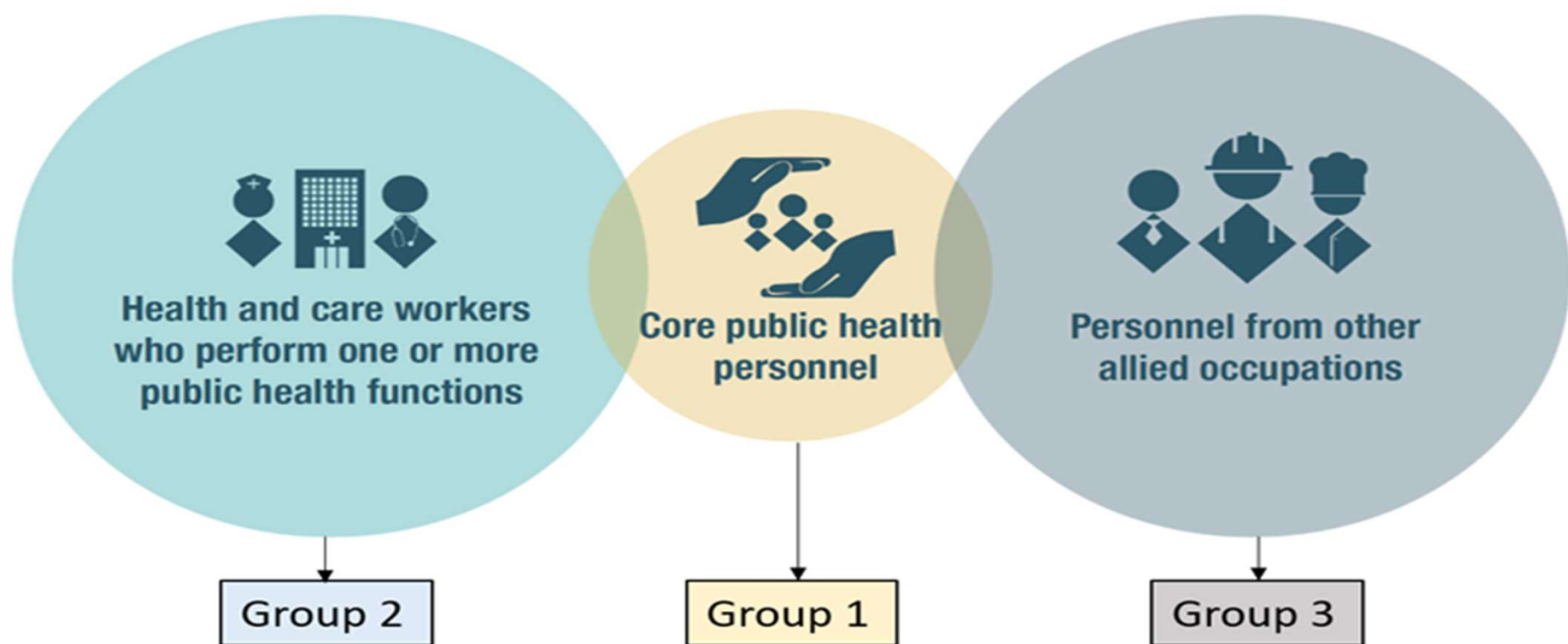
Dr. Khassoum Dialo,  
Coordinator for Data,  
Evidence and Knowledge  
Management, WHO

# SETTING OUT THE WHO ROADMAP TO BUILD THE PUBLIC HEALTH AND EMERGENCY WORKFORCE AND THE IMPORTANT ROLE THAT NPHIs PLAY

# About the Roadmap

- The Public Health and Emergency Workforce Roadmap is led by WHO in partnership with associations, institutions and schools of public health as represented by their respective national, regional and global bodies to bolster national workforce capacity to deliver the essential public health functions (EPHFs).
- > 60 partners with presence in > 123 countries across the world have endorsed the roadmap.
- Roadmap has 3 action areas which are interlinked





# Measures of Success, and the Results so far

1

Within one year from the finalization of this roadmap, the necessary tools and guidance are available for country contextualization and endorsed by the participating organizations.



2

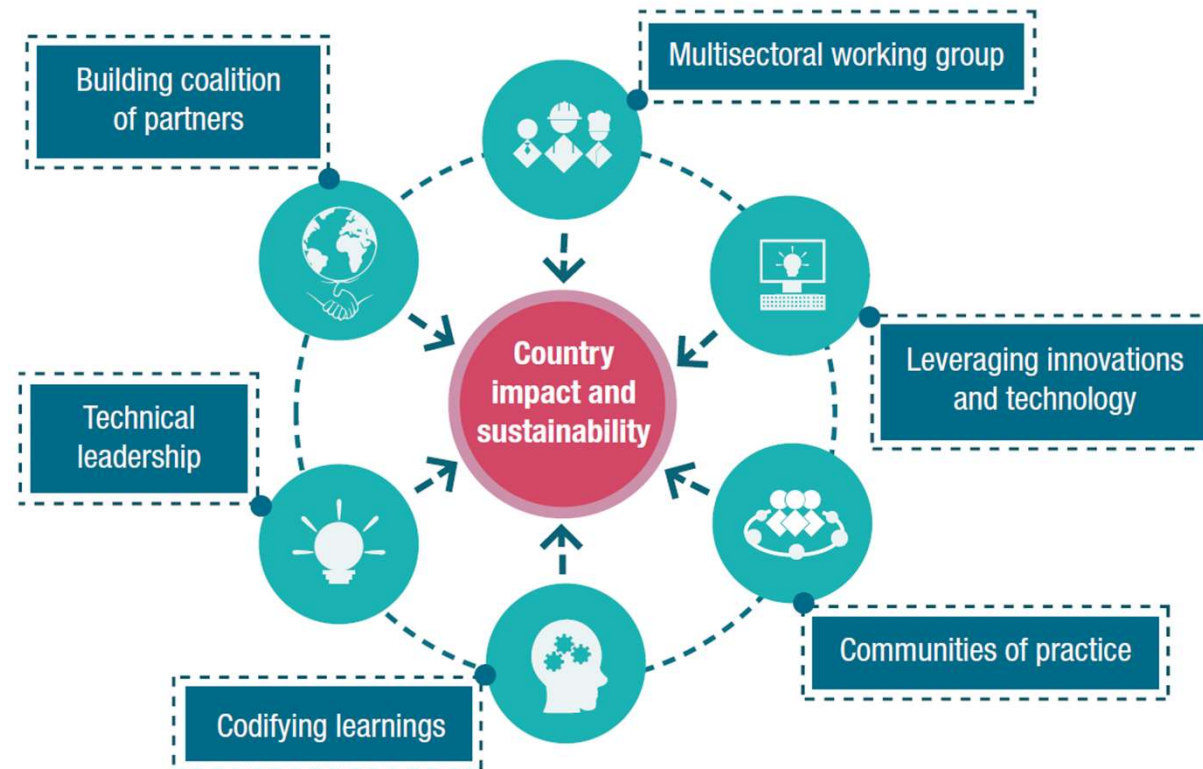
Two years from the finalization of this roadmap, at least 100 countries have benchmarked themselves on the three action areas and developed action plans for implementation.

3

Five years from the finalization of this roadmap, at least 50 new countries have achieved full implementation.

- Technical products developed for the 3 action areas in consultation with various partners
- Piloted in various countries
  - Azerbaijan, Colombia, England, Georgia, Ghana, Ireland, Kenya, Montserrat and Uganda.
- More than 60 countries territories and areas have expressed interest in implementing the Roadmap
  - China, India, South Africa, Germany, Portugal, Saudi Arabia, Senegal, Togo, Philippines, Seychelles, Papua New Guinea, Japan, Iran, Jordan, Mozambique, Zimbabwe, the Caribbean countries, the Pacific Island countries, and the UK Overseas Territories.

# Importance of partnerships for implementing the Roadmap





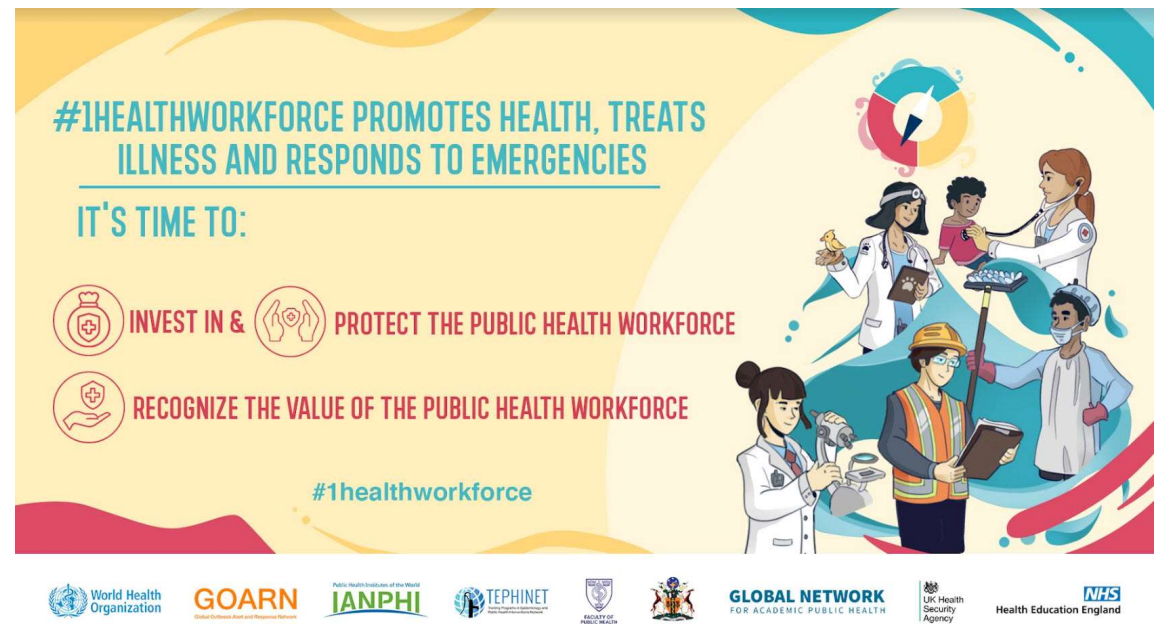
## How can NPHIs play a key role?

- Awareness generation and stewardship at national level
  - Convening multi-sectoral governance mechanism for public health workforce
- Implementation of the Roadmap
  - Contextualizing according to country needs and priorities
  - Adopting a phased implementation approach
    - Prioritizing a set of functions/subfunctions/services
    - Prioritizing a workforce group or selected occupations
    - Assessing and strengthening the NPHI's capacity
  - Using evidence to inform national planning, policymaking and reporting processes (eg – NAPHS, IHR, SPAR)
- Inform curriculum review/redesign for the public health workforce
  - pre-service education and in-service training

# THANK YOU

Contact us: [workforce2030@who.int](mailto:workforce2030@who.int)

[Show your support: Endorse the Roadmap](#)



**#1HEALTHWORKFORCE PROMOTES HEALTH, TREATS ILLNESS AND RESPONDS TO EMERGENCIES**

**IT'S TIME TO:**

- INVEST IN & PROTECT THE PUBLIC HEALTH WORKFORCE**
- RECOGNIZE THE VALUE OF THE PUBLIC HEALTH WORKFORCE**

**#1healthworkforce**

Logos at the bottom: World Health Organization, GOARN (Global Outbreak Alert and Response Network), IANPHI (Public Health Emergency of the Year), TEPHINET (The European Public Health Institute), Faculty of Public Health, Royal Society of Medicine, GLOBAL NETWORK FOR ACADEMIC PUBLIC HEALTH, UK Health Security Agency, Health Education England, and NHS.

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Dr. Laura Magaña,  
President and CEO,  
Association of Schools and  
Programs of Public Health  
(ASPPH) & Global Network  
for Academic Public Health  
(GNAPH), United States

# THE ROLE OF SCHOOLS OF PUBLIC HEALTH, WORKING WITH NPHIs TO TRAIN THE PUBLIC HEALTH WORKFORCE OF THE FUTURE



# GLOBAL NETWORK FOR ACADEMIC PUBLIC HEALTH

An Alliance of Regional Associations  
representing schools and programs of public health around the world

Alianza Latinoamericana de Salud Global  
Asia-Pacific Academic Consortium for Public Health  
Association of Schools of Public Health in Africa  
Association of Schools of Public Health in the European Region  
Association of Schools and Programs of Public Health  
Council of Academic Public Health Institutions Australasia  
South-East Asia Public Health Education Institutions Network



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FOR ACADEMIC PUBLIC HEALTH

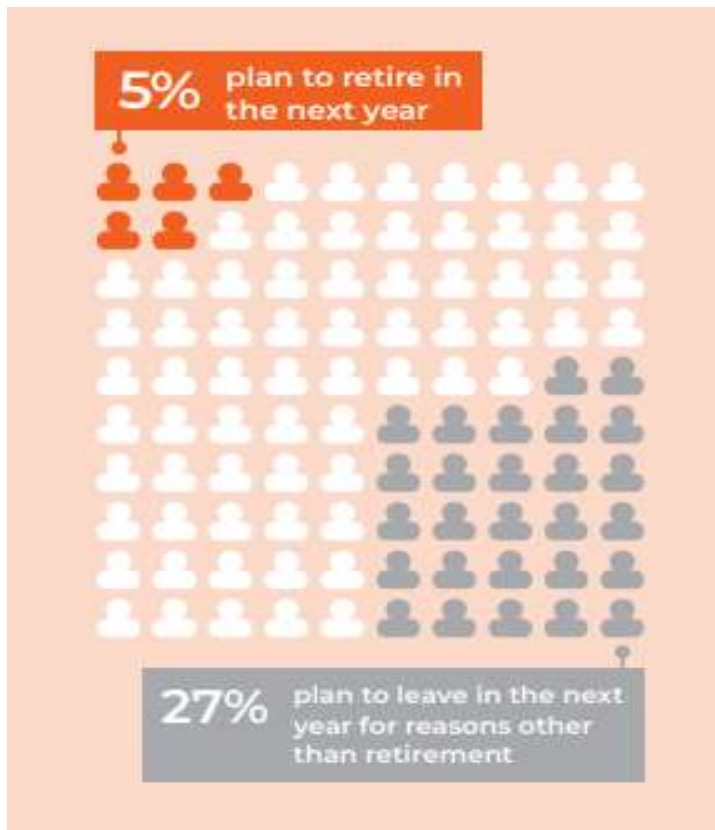
# Public Health Workforce Challenges

- Global health threats and violence
- Persistent underinvestment
- Lack of robust information systems
- Health emergencies and demographic trends
- Inequalities

# Supporting the Current Public Health Professionals' Workforce



# Exodus of Public Health Professionals in the U.S.





## Transforming Health Professionals Education

### Public Health Professionals

- Leadership
- Partnership and Collaboration
- Communication to different audiences
- Interdisciplinary and intersectoral networking
- Advocacy, law, ethics
- Global health
- Digital competency
- Equity and social justice
- Data analysis and modeling
- Core competency refreshers

### Decision-makers

- Public health values and ethics
- Epidemiology concepts
- Preparedness and response strategies
- Public health resources and authorities
- Global interconnectedness
- Health impacts from other fields
- Human/ animal/ environmental connections
- Evidence-based decision-making
- Communication
- Consensus building

A Lifetime of Learning  
Work/Learn/Live



A Knowledge Economy  
A Learning Society



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Dr. Fethiye Gulin Gedik,  
Coordinator Health  
Workforce, WHO  
Regional Office for the  
Eastern Mediterranean  
(WHO EMRO)

# WORKING WITH MINISTRIES OF HEALTH AND NPHTs TO BUILD CONSENSUS ON THE EPHTs

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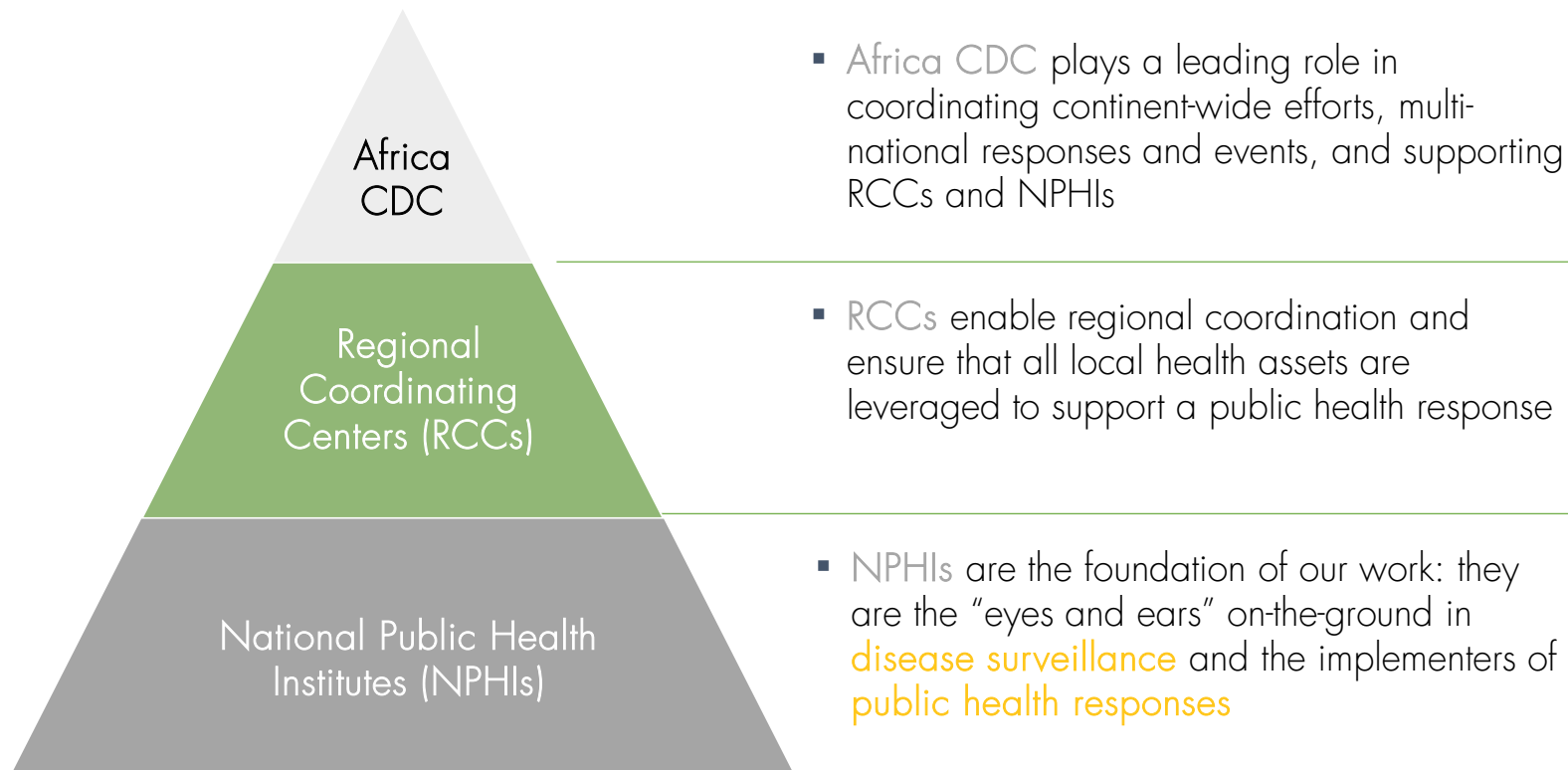
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Dr. Raji Tajudeen, MD,  
MPH, FWACP,  
Chatham House Fellow  
Head, Public Health  
Institutes & Research  
Africa CDC

# STRENGTHENING NPHIs AND EMERGENCY WORKFORCE CAPACITY IN AFRICA

# National Public Health Institutes are the foundations of Africa CDC



# Africa CDC Strategic Priorities for 2023 – 2027

## Vision

A safer, healthier, and prosperous Africa, in which Member States are prepared to timely prevent, detect, and respond effectively to public health threats and outbreaks

## Mission

Strengthen Africa's public health institutions and systems' capacities, capabilities, and partnerships to timely prevent, detect, and respond effectively to public health threats and outbreaks based on evidence-based policies, programmes, and interventions

## Aspiration

To become a world-class, self-sustaining, and agile institution that champions African health security, sets the African public health agenda, and leads and coordinates continental efforts driven by a One Health approach

## Priorities for 2023-2027

Strengthen integrated health systems to prevent and control high-burden diseases

1

Build up proactive surveillance, intelligence gathering, and early warning systems

2

Ensure robust emergency preparedness and response capabilities for all public health emergencies

3

Strengthen National Public Health Institutes

4

Expand clinical and public health laboratory systems and networks

5

Expand health product and technology innovation and manufacturing

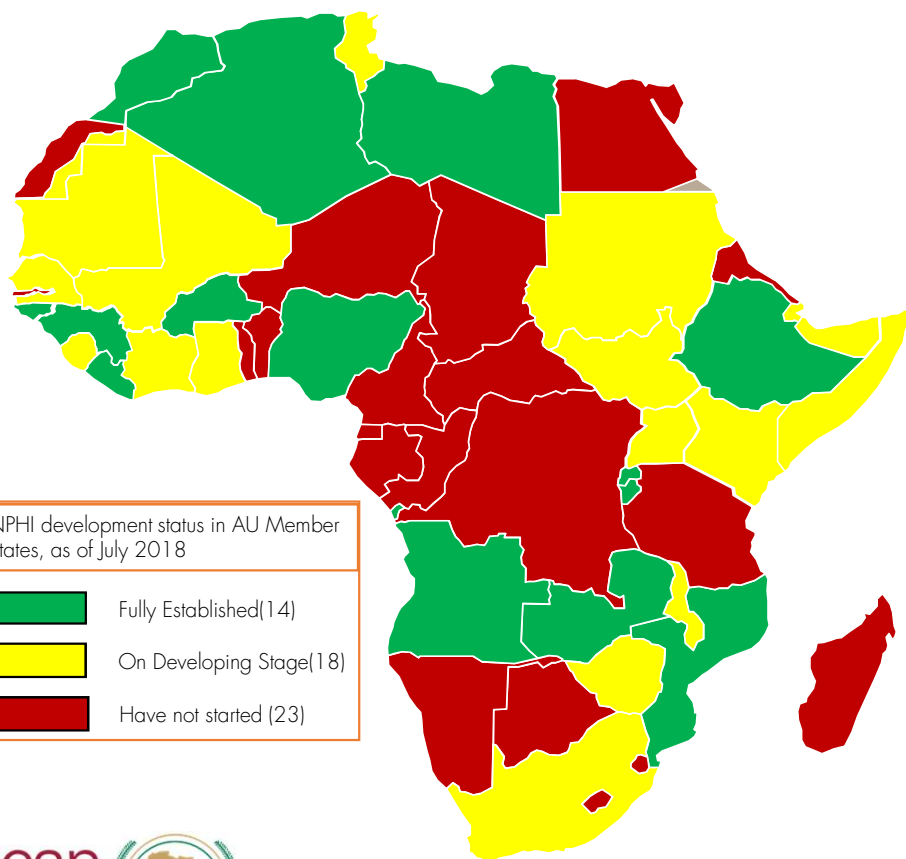
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## Enablers for 2023-2027

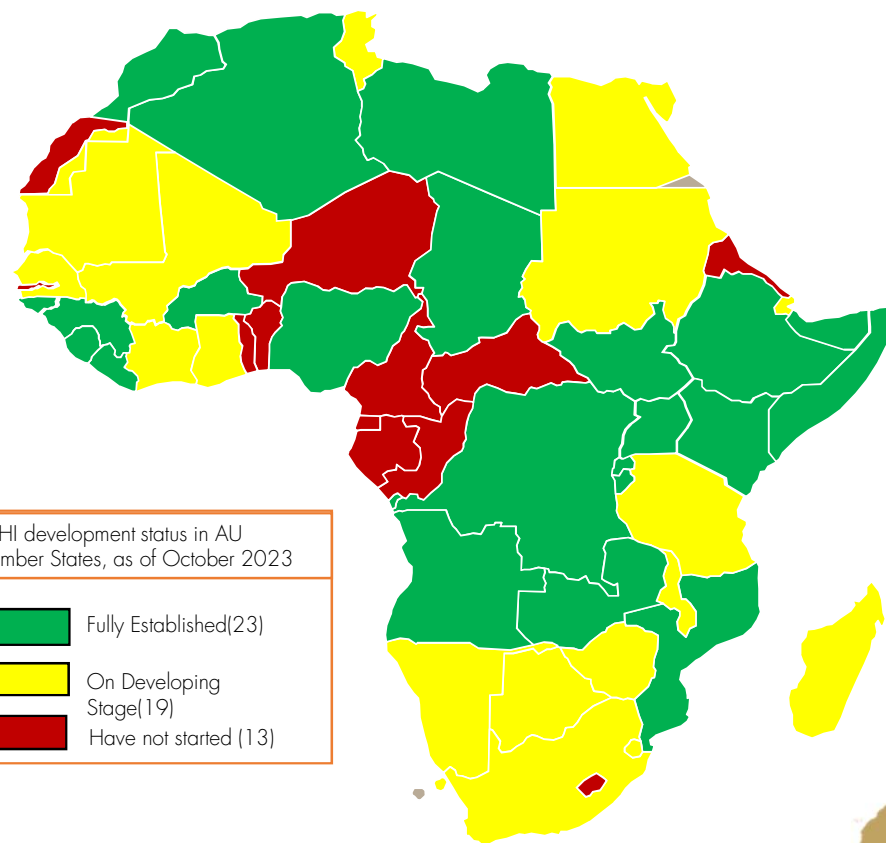
- A. Enhanced and integrated digital & analytics approaches to public health in Africa
- B. Scaled and best-in-class African public health workforce
- C. Secured and sustainable financing for public health in Africa
- D. Strengthened public health research and innovation to improve public health decision-making and practice
- E. Coordinated, respectful and action-oriented public health partnerships and strengthened engagements with communities on public health needs
- F. Strengthened engagement and support of Member States through RCCs and in-country presence
- G. Strengthened governance, internal structures, processes, and capacity, enabling Africa CDC to deliver on its mandate

# NPHI Establishment Progress in Africa

NPHI Development Status as of July 2018



NPHI Development Status as of January 2023





## Developed Framework Documents to Guide NPHIs Development in Africa

- NPHI development Framework
- NPHI establishment Legal framework
- NPHI Monitoring scorecard
- Framework for the operationalization of One Health
- Framework for public health workforce development



## Peer to Peer and Twinning Programmes

- 19 NPHIs were involved in peer-to-peer and twinning programmes
  - Comoros, Madagascar, Rwanda, Somalia, South Sudan, Tanzania, Lesotho, Botswana, Liberia, Zambia, Ethiopia, Burkina Faso, Chad, Central African Republic, Democratic Republic of Congo, Guinea, Togo, and Mauritania

## Annual and Regional NPHI Engagements

- CPHIA Pre-Meeting of National Public Health Institutes (NPHIS), 27 November 2023
- North Africa NPHI regional meeting, Tunis, Tunisia, 28-30 August 2023
- Central Africa NPHI regional meeting Bujumbura, Burundi, 19-21 July 2023

## Support Workforce Capacity of NPHIs

39

Trained on Kofi Annan Global Health Leadership programme, and 20 enrolled in cohort 3

63

Supported training on Advanced FETP from 13 Southern and Central African MS

44

Trained on Frontline FETP from member states in Central Africa Region

98

Trained on Global Burden of Disease from East, West, South, and Central Africa member states

15

In collaboration with the Harvard Global Leadership Program , graduated 15 Nurses from 11 African countries

## Build Institutional Capacity for Research

- Develop the African Health research prioritization framework document
- Drafted African centered ethics framework for research during epidemics and public health emergencies
- Trained Over 40 Africa CDC staff on Scientific manuscript authorship in collaboration with Euro-surveillance
- Work with Chatham House on One Health Research Capacity

Participants at the Stakeholder consultative workshop on priority setting for the African Continental Research Agenda Framework, 3<sup>rd</sup> to 5<sup>th</sup> April 2023 at the South African Medical Research Council

# Emergency Workforce Capacity

Goal: Ensure robust emergency preparedness and response capabilities for all public health emergencies

## Strategic

## Objectives:

1. Strengthen prevention and preparedness capacities and capabilities for public health emergencies at the continental, regional and Member State levels.
2. Strengthen robust emergency response and recovery capacities and capabilities to address public health emergencies at the continental, regional and Member State levels.
3. Build cross-border collaboration and coordination mechanisms for emergency preparedness and response.

# African Epidemic Service

Africa CDC has developed a continental African Epidemic Service (AES), an elite public health workforce programme hosted and directed by the African Union.

African Epidemic Service (AES) has three tracks, selected based on the need identified by Africa CDC's framework for public health workforce development.



Applied Epidemiology



Laboratory Leadership



Health Informatics

# Strengthen emergency workforce capacities

1. Legal instrument for Public Health Emergencies
  - Mechanisms in place to respond to PHEs with cross-border or regional implications
2. Support Member States' PHEOCs.
  - Support Member States to establish and manage functional PHEOCs in NPHIs
  - Build PHE Leaders through PHEM Fellowship program and short courses
3. AVoHC/ Regional RRT/ National RRT
  - Functional and operational **AVoHC RR and EMTs** with rapid deployment capacity
  - Regional and National RRT establishment and development
4. Knowledge Management
  - Support research during disease outbreaks



# Joint Emergency Preparedness and Response Action Plan (JEAP)

	Target for the year 2023-2027
Emergency Workforce Development	<ul style="list-style-type: none"><li>• Build a network of emergency health experts</li><li>• Expand roster of AVoHC, National and Regional RRT</li><li>• Build AVoHC EMTs</li></ul>
Response readiness and coordination	<ul style="list-style-type: none"><li>• Support at least 21 Member States to establish and operationalize PHEOC</li><li>• Target is to reach 90% of by the year 2026</li></ul>
Country assessment for preparedness	<ul style="list-style-type: none"><li>• Increase visibility on country's core capacities, key challenges and opportunities for intervention during PHE</li></ul>
Logistics, supply chain and stockpiling	<ul style="list-style-type: none"><li>• Stockpiling of Medical Countermeasures (MCM) for high priority pathogens</li><li>• Setting framework agreements for MCM supply chain management</li></ul>
Emergency Response Support	<ul style="list-style-type: none"><li>• Timely response to ALL Grade 3 and 80% of Grade 2 outbreaks and other health emergencies</li><li>• Support development and dissemination of technical tools and guidelines</li></ul>

## Key Africa CDC Priorities for NPHIs

1. Africa CDC Public Health Institutes Strategy
2. Development of investment plans for NPHIs
3. Bolster Africa CDC capacity to drive the NPHI agenda
4. Support the operationalization of six (6) newly established NPHIs: Chad, Sierra Leone, South Sudan, Kenya and DR Congo.
5. Support 10 NPHI regional Centers of Excellence for PHEM, Health Workforce, Operational Research, Pathogen Genomics, & Data and Analytics
6. Support the 32 Member States without established NPHIs to do so

## Key Africa CDC Priorities for Public Health Workforce

- I. Strengthening of Field Epidemiology Training Program in Africa
- II. African Epidemic Service: Applied Epidemiology, Health Informatics, and Laboratory Leadership tracks
- III. Primary Health Care Workforce
- IV. Development of a Health Workforce Observatory
- V. Healthcare Workers Protection

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Dr. Anders Tegnell,  
State Epidemiologist, Public  
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Diana Van Daele,  
Programme Officer,  
Directorate-General for  
International Partnerships,  
European Commission

# TEAM EUROPE INITIATIVE TO SUPPORT NATIONAL PUBLIC HEALTH INSTITUTES IN AFRICA

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Dr. Natalie Mayet,  
Deputy Director, National  
Institute for Communicable  
Diseases (NICD), South  
Africa

# SOUTH AFRICA'S EXPERIENCE – REFORM OF THE PUBLIC HEALTH SYSTEM AND BUILDING EPIDEMIOLOGY CAPACITIES