PIERRE M’PELÉ

Mercy Ships Ambassador for Africa and Africa Bureau Director

Brian A. GALLAGHER

Let me let Pierre jump in here and then we will go to all four. Pierre M’Pelé, so it is Mercy Ships, Mercy Hospital Ships, but you are an HIV advocate, you are a former WHO representative. You are the fourth, so that is either a great position or a horrible position. Your perspective on what you have heard so far?

Pierre M’PELÉ

Thank you very much, Brian. First of all, I recognize that the African continent over the past 20 years, has made significant progress in improving the health of the people despite the disparities between the regions, disparities between the countries and also within the countries.

The African continent carries 25% of the global burden of disease and is home to almost 20% of the world’s population with only 2% of the world’s doctors. There are so many challenges, but there is hope somewhere coming from some African countries, like Cabo Verde in West Africa, Rwanda in Central Africa, Botswana in the southern part of Africa and Ethiopia in East Africa.

I would like to highlight what happened in Ethiopia because it is a true success story in health sector strengthening because of political leadership, leadership for action and commitment for change, change for health.

Over the past 20 years, Ethiopia has made impressive progress in improving the health of the Ethiopian people. In 2015, Ethiopia concluded health sector development programs from 1997 to 2015, composed of four series of five years. This is an amazing work because Ethiopia achieved almost all related millennium development goals in 2015. The Health Sector Development Program was based on a very bold strategy, the Health Extension Program, putting health posts in place with two nurses “both women” per 5,000 people, so in a country of 100 million people, it is about 18,000 health posts. That is amazing.

Brian A. GALLAGHER

All the way down to the local level?

Pierre M’PELÉ

The Health Post provides is a package of key essential health services, health promotion and preventive activities with the use new technologies.

Brian A. GALLAGHER

Are they networked through digital technology, the 18,000?

Pierre M’PELÉ

Yes, to monitor pregnancy, to monitor the child immunization, so it is about promotion. It is about prevention. It is about care.

Brian A. GALLAGHER

That is fantastic.
Pierre M’PELÉ

The HIV testing is possible in the health post. You can monitor TB. There is a package of key essential health services at health post level.

Brian A. GALLAGHER

And at least two nurses in each post?

Pierre M’PELÉ

Nurses and Women Community Leaders of the “Women Health Development Army” have been at the center of the progress made in improving the health of the people in Ethiopia. The woman as a change agent for health in Ethiopia.

Yes, the two nurses are two women. That shows the very important place of the women, women for change in Ethiopia. Within the community, there is also in the village “the woreda” 25 to 45 women, leaders who belong to the “Women Development Army”. Talking to the Prime Minister of Ethiopia, I said, “you have the most powerful army in Africa”. He said, ‘Oh, no’ and I said, ‘Yes’ but it is not about the Military Armed Force. It is about the Women Health Development Army embedded in the community being the link between the two nurses and the community.

Brian A. GALLAGHER

So, let me ask you a question about that and then ask everybody to come in on this question. You have all talked about infrastructure at some level, whether it is human infrastructure, technology or resources, natural resources. What are the infrastructure requirements that you have seen in going to ground versus being centralized, and I wonder if all four of you would think about this: does the infrastructure have to be thought about nationally only? I mean should we be thinking about these approaches regionally, and even regionally outside of Africa? Robert, do you think about an axis from Paris to African countries that are focused on patients that then have to have infrastructure all along? How do you think about infrastructure in this case and as you think about scaling innovation how should we think about organizing infrastructure going forward? Why does it only have to be national or should it be beyond that?

Pierre M’PELÉ

Of course. Maybe Robert will say more on this. I do not think that the infrastructure of health facilities must make a difference. Of course we need it at all levels, at local, district, regional and national level, but I do not think this is the most important thing. It is the people. The human resources are key to making a difference to improve the health of the people.

You can have a beautiful hospital, what we call in French “éléphant blanc” big with everything, but if you do not have the right staff, the right doctors, the right nurses, the right midwives at the right place, the health of the people will not be improved. That is my understanding of what we should do in Africa, making sure that we have the people to do the job.