Universal Health and Preparedness Review

UHPR

Pilot in Central African Republic (CAR)

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Minister of Health and Population

14th December 2022
Central African Republic – Context

- Landlocked country with a population of 4.7 million
- Three decades of military-conflicts
- IDP: > 600 000 inhabitants
- Extreme poverty rate 71.4%

- Mortality Maternal-infantile rate 826/100.000
- Malaria mortality rate 72/100.000
CAR – Health Emergency and Health Security

- Protracted humanitarian health emergency Grade 3
- 8 ongoing epidemics: Covid-19, Measles, Rabies, Monkey Pox, Yellow fever, Guinean worm, whooping cough, meningitis
- Alerts: RVF
- High Risk: EVD
- Rainforest ecosystem

Joint External Evaluation (JEE)

<table>
<thead>
<tr>
<th>Capacities</th>
<th>Number of indicators</th>
<th>Scores</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevention</td>
<td>12</td>
<td>No Capacity</td>
</tr>
<tr>
<td>Detection</td>
<td>6</td>
<td>No Capacity</td>
</tr>
<tr>
<td>Response</td>
<td>10</td>
<td>No Capacity</td>
</tr>
<tr>
<td>Others (PoE, CRN)</td>
<td>6</td>
<td>No capacity</td>
</tr>
</tbody>
</table>

70% (34/49): No capacity
CAR – Health System and UHC

- UHC service Coverage Index: 32/100
- Human resources in health ratio 7.3 / 10,000 inhabitants (<23/10000)
- Household expenditure on health: 43.7% (>25% compared to WHO standards)
- Low geographic coverage of health care and services
- Inadequate health care infrastructure;
- Lack of a national supply and distribution mechanism for health
CAR-UHPR- added value

Unlike other national and partner health assessment mechanisms the UHPR in CAR sought to:

- **1st assessment** that aligned health systems, health security and UHC.
- High level political commitment with Head of State, Prime Minister, Parliamentarians.
- Seek high-level national and international commitment: enhance global solidarity for national capacity building.
- Strengthen the framework for coordination with partners, multi-sectoral collaboration and community engagement;
- Review the effectiveness of development assistance in the area of public health;
- Strengthen strategic planning for the implementation of the Health National Development Plans and Sustainable Development Goals.
CAR: UHPR Political leadership

- Crisis committee: Head of State
- Technical committee: Prime Minister
- Strategy and Methodology Group (MoH)
- UHPR National Secretariat (decree of the PM)
- Community dialogue

Opening of UHPR review with PM and ADG, Dec 2021

Community dialogue on UHPR, Dec 2021
Organization of 2 simulation exercises (national and subnational levels)
120 participants

Document review:
147 references

6 National Workshop
+260 participants

Advocacy meetings with national leaders and international authorities

Key informant interviews
28

Analysis of relevant indicators selected
86

Field visit 5 settings/sites

Community dialogue
312 participants

All this provided inputs and contributed to the Final Report
CAR- UHPR completion of existing information

- **AAR** (Nov ‘17)
- **COVID-19 IAR** (Nov ‘21)
- **STAR** (Dec ‘19)
- **JEE** (Dec ‘18)
- **SPAR 2021**
- **UHPR** (Dec ‘21)
- **HNDP 2022-2026** (Sep ‘21)
- **NAPHS 2022-2026** (Sep ‘21)

Two years operational plan and investment case
CAR - Lessons learnt from UHPR

- **Highest level commitment** – President’s and Prime Minister level engagement

- **Engagement of stakeholders** – private, CS, national & international

- UHPR took into account **vulnerabilities and other social determinants** of health (and outbreak too).

- **Simulation exercises are a powerful tool to measure health security readiness** ensuring a genuine involvement and ownership at political level.

- Addressing the unifying concept between **PH emergency risk mitigation, preparedness, response, recovery and development** – PHEM, Disaster Risk Management & Development Management

- Interlinkage between **health security and development & Health and peace**
CAR- UHPR way forward

- The UHPR process had **pushed to**:
  - Review of National Health development Plan 3\textsuperscript{rd} Generation and WHO CCS: integrate UHPR recommendations.
  - Facilitate programmatic operationalization of the “One health” and “Health in all policies” concepts, NAPHS and Investment Case for resource mobilization
  - Strengthening **transparency** and **mutual accountability**: National Committee of Health Sector.
  - Strengthening **crucial role of governance** in health: governance, leadership, coordination and stewardship.
  - Sustaining **High-level engagement**: regular report to national authorities.
  - Integration of health security projects: AFRO health emergency flagships.
The UHPR recommendation implementation:

- Exhaustive review of the report by Minister of Health: March-June 2022
- Health National Multisectoral Coordination: July 2022
- Frontline Field Epidemiology Training programme: August 2022
- PROSE, SURGE, TASS: September 2022
- Coordination mechanism with International NGO: November 2022
- Preparation of application to pandemic preparedness fund: Dec 2022
- Report signed by the Head of State and submitted to WHO: Dec 2022
SINGUILA MINGUI

High level advocacy meeting with Head of State, Dec 2021

UHPR: “A Game Changer in Health Security and UHC.”

Crisis committee meeting with Head of State, Approval of UHPR report, Jan 2022

UHPR Review team, Dec 2022