# THE DAR ES SALAAM AGENDA FOR ACTION ON PUBLIC HEALTH SYSTEMS STRENGTHENING FOR AFRICAN NATIONS THROUGH FIELD EPIDEMIOLOGY AND LABORATORY TRAINING PROGRAMMES

Issued at the Ministerial Roundtable during the 4<sup>th</sup> AFENET Scientific Conference
12 December 2011

Dar-es-Salaam, Tanzania

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### **Preamble**

This communiqué here-in after referred to as the 'Dar-es-Salaam Agenda for Action' is an output from a Ministerial Roundtable meeting that took place on 12<sup>th</sup> December 2011 in Dar-es-Salaam, Republic of Tanzania, during the 4<sup>th</sup> AFENET Scientific Conference. The meeting was chaired by Hon. Dr. Hadji Mponda, Minister of Health and Social Welfare, Republic of Tanzania. In attendance were Health Ministers and representatives from Democratic Republic of Congo, Ethiopia, Ghana, Mozambique, Nigeria, Rwanda, South Sudan, Uganda, and Zimbabwe.

The Ministers of Health in attendance noted that public health systems in Africa have for long been facing severe shortages of public health professionals. Noting that public health practitioners constitute a critical element of any health system and noting that health systems in Africa bear a significant proportion of the global burden of disease, the Ministers declared the Field Epidemiology and Laboratory Training Programme (FELTP) as an important strategy for strengthening public health capacity. Availability of well trained cadre of professionals is important now more than ever for the African continent because of its large burden of communicable diseases, the increasing burden of non-communicable diseases and the emerging threat of zoonotic infections.

The Hon. Ministers further noted that in the last decade, significant efforts have been made in addressing this critical shortage of public health professionals in Africa. The Ministers declared the need to leverage and strengthen these efforts to facilitate the attainment of our set objectives and the Millennium Development Goals (MDGs).

The establishment of a Field Epidemiology Training Programme (FETP) in 1993 in Zimbabwe which draws on lessons from the U.S. CDC's flagship Programme - the Epidemic Intelligence Service (EIS) and the subsequent progress on the continent along this line has made other countries in Africa recognize the unique and effective approach of training public health professionals through the FETP. The first FETP which introduced a Laboratory component (referred to as FELTP) on the continent was established in Kenya in the year 2004, and the second in South Africa in 2006.

Since 2006, the Africa Field Epidemiology Network (AFENET) working with, FELTPs, Ministries of Health, Universities and partners have supported the establishment of six new FELTPs. Countries without FELTPs have been linked to existing Programmes in order to help meet their capacity development needs through the Network. So far, over 300 public health professionals have undertaken short courses in the Network, and over 600 have graduated from the 2-year masters' level Programmes.

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As public health leaders, we recognize and appreciate the role of African Field Epidemiology and Laboratory Training Programmes (FELTPs) in contributing to public health workforce development through short and long term training. We believe in the ideals of the FELTP and endorse this Programme as a major strategy for attaining our Millennium Development Goals and other country specific public health goals and objectives.

The Ministers critically reviewed issues presented and reached a consensus on the way forward and resolved to adopt the costed action plan (attached herewith) for immediate implementation and support by our governments and partners.

We affirm our commitment to take necessary actions to support the implementation of FELTPs as a means of building stronger public health systems in Africa.

We pledge to collaborate with AFENET throughout the coming 5 years to strengthen the implementation of existing FELTPs, to establish new FELTPs and to partner with countries without FELTPs, towards achieving a 'healthier Africa'.

We hereby express our appreciation for the great contributions of our partners namely: United States Department of Health and Human Services (HSS), US Centres for Disease Control and Prevention (CDC), the World Health Organisation (WHO), US Agency for International Development (USAID), US Department of Defence (DOD), Bill and Melinda Gates Foundation (BMG), the European Union (EU) and others, and call for the strengthening of this collaboration through continued support and funding for all AFENET and country activities.

At the end of their deliberations the Ministerial Round Table Meeting hereby resolved as follow:

# 1. FELTP as a national strategy

All African nations shall adopt FELTP as a key national strategy for Health Systems Strengthening and develop career paths for FELTP graduates to ensure effective and efficient utilization of resources.

# 2. Countries to develop FELTPs or be affiliated with a regional one

Each African country shall work towards establishing an in-country FELTP or at least be affiliated with an existing one within the context of One Health.

#### 3. Each country creates a budget line for FELTPs

Health Ministers shall advocate for and ensure dedicated national funding for these Programmes in their respective national budgets, to ensure sustainability of FELTPs.

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# 4. Partners in the region to support implementation of FELTPs

Recognising the strength in partnerships, Ministers shall be ambassadors for FELTPs, soliciting support from our regional and international partners in health.

# 5. Costed Work plan

The attached costed work plan which today is endorsed by this meeting shall serve as the principal advocacy tool used for soliciting support and presented to our Governments and Partners for their consideration and support to enable full implementation of this plan, as a means to strengthen public health systems in Africa.

# 6. Mandate to AFENET

The African Field Epidemiology Network (AFENET) in addition to providing technical assistance to countries in implementing FELTPs is also hereby mandated to coordinate and monitor the implementation of African FELTPs.

NB: This document is available in English, French and Portuguese.

Signed:

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Ministry of Health and Social Welfare, United Republic of Tanzania

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Hon. Dr. Richard Nduhuura

Minister of State for Health

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