

ABC of Health

PROGRESS WITH HIV/AIDS

The management and control of HIV/AIDS has been a Commonwealth priority since the mid-1980s. Using World Health Organisation information, the Secretariat continues to monitor the implementation of national multi-sectoral AIDS programmes in member countries. This enables the Secretariat to provide advice where required, and to secure flows of support from relevant agencies to meet members' needs. A progress report presented to Commonwealth Health Ministers at their pre-WHA meeting in 1996 led to a request for the Secretariat to help member states to strengthen their health information systems. A workshop in Arusha, Tanzania, in April 1997 began this process.

The activities undertaken by ten young 'Ambassadors for Positive Living' (see page 79), who form part of the Commonwealth Youth Programme's HIV/AIDS Network in Africa, also help to increase HIV/AIDS awareness.

Concern remains about the high incidence of child deaths associated with preventable conditions

The health of people is interconnected with many other aspects of human resource development. The Secretariat works to meet the health needs of member governments while recognising the key roles played in the health field by other major international agencies.

By improving the skills of health workers – through workshops, seminars and information links – the Secretariat strengthens the ability of member countries to tackle key problem areas. The thrust of its work emphasises 'ABC', that is, the advocacy, brokerage and catalytic functions that the Secretariat can deliver on behalf of member states.

Women and Health

In previous years, the Secretariat's Health Programme has focused on two areas: Community Approaches to Health Promotion and Disease Prevention, and Environment and Health. In 1995, the focus turned to women – their health and long-standing role as informal health educators, trainers and carers.

At the Eleventh Triennial Meeting of Commonwealth Health Ministers in Cape Town, South Africa, in December 1995, where 'Women and Health' was the theme, ministers adopted a three-year action plan to enhance the health of women and enable them to play a more equitable role in decisions on health matters, including the development of national health policy and health planning. It dealt with two specific areas: women's experience of health (including sexual and reproductive health, violence against women and coping with HIV/AIDS), and women for health (improving women's representation at all levels of decision-making through legislation, quotas and targets).

Since then, the Secretariat has developed a set of criteria for evaluating models of good practice in women and health matters. These were incorporated into a Good Practice Kit and sent to member countries in August 1996 as part of an awards scheme to attract examples of model



projects. Some 108 applications were submitted and more than two-thirds of the projects met the criteria.

The Health Ministers also agreed to the setting up of a temporary Technical Support Group (TSG) for Women and Health financed by voluntary contributions from governments to help strengthen the Secretariat's capacity to deliver its Women and Health Programme. It began work in November 1996 to establish health databases and a print and electronic communications system to increase the flow of information from the Secretariat's Health Programme.

Child Survival

In its report to the 1995 CHOGM, the Secretariat described the progress that had been made by member countries towards reaching the mid-decade goals set out in Unicef's Plan of Action for child survival. It noted achievements, but expressed concern about the continuing high incidence of child deaths associated with preventable conditions in most regions.

In 1996, the Secretariat's attention shifted to monitoring the decade goals, using country data provided by Unicef. Following regional meetings of child health experts across the Commonwealth, a number of priority areas for action were identified. In February 1996, the Secretariat made a contribution of about £5,000 to the Regional Health Community Secretariat for East, Central and Southern Africa towards the development of a communicable disease surveillance system. In the South Pacific, it commissioned a consultant to assess child health training needs.

The Secretariat has continued collaboration with the Canadian Public Health Association to help sustain immunisation programmes by strengthening working relationships between governments and NGOs. A study in Asia and Africa, which received substantial funding from the Government of Canada, was designed and implemented to identify existing mechanisms which support or hinder effective NGO-government working relations and the critical success factors necessary for effective collaboration.

The Secretariat has brokered a new relationship with the South Pacific Commission (SPC) and the Pacific Public Health Surveillance Co-ordinating Network to strengthen health-information systems in child health in the Pacific. A four-day training workshop on health information systems, with special relevance to child survival, was convened by the Secretariat in February 1997 in Tonga. The Secretariat invited the SPC to participate in developing and implementing the workshop.

Human Resource Development for Health

Human resource development continues to be a priority focus for action in the Secretariat's Health Programme. Many activities in this area are implemented in consultation with Commonwealth professional associations such as the Commonwealth Nurses Federation (CNF) or the Commonwealth Association for Mental Handicap and Developmental Disabilities (CAMHADD). Under the umbrella of the Commonwealth Action Plan on Nursing and Midwifery, the Health Programme continues to enhance the involvement of nurses and midwives in the development and implementation of national health policies.

COMBATING SUBSTANCE ABUSE

The Secretariat responds to requests from member countries for assistance in the reduction of drug abuse and the control of illicit drugs. In recent years, a number of Commonwealth countries have also expressed concern over increasing levels of tobacco and alcohol use, and the Secretariat has played an advocacy role in sensitising member countries to the long-term health threats posed by the use of these two substances.

In 1996, Commonwealth Health Ministers, meeting before the World Health Assembly, adopted an action plan recommending practical steps to enhance the health of women, including ways to reduce tobacco use. While conscious of the economic role the tobacco industry plays in some Commonwealth countries, the ministers called on governments to develop 'comprehensive strategies' to reduce tobacco consumption, including measures such as raising taxation to increase the price of tobacco and its products, setting a minimum age limit on sales, and banning vending machines and smoking in public places.

With some £10,000 of financial assistance from the Secretariat, the Caribbean Community Secretariat (CARICOM) was able to establish a Caribbean network to collect preliminary data on substance abuse in 1995-96. This has attracted offers from other regional organisations to help CARICOM go one step further and establish a drug-monitoring system.

The Secretariat also collaborated with several international agencies, including the US State Bureau of International Narcotics, which provided technical assistance and co-funding for a substance abuse prevention programme. Other donors included the Colombo Plan Bureau and the UNDP.



Commonwealth Health Ministers adopted a three-year action plan to enhance the health of women

Among its recent human resource development projects, for example, the Secretariat organised jointly with the CNF a regional management training workshop for senior nurses in the Pacific in February 1997. In the current phase of its work, the Secretariat is collaborating with the CNF and the steering committee for the Commonwealth Action Plan to provide technical assistance to nursing/midwifery leaders to enable them to develop their national plans of action.

A number of health professionals in the Caribbean were trained in the use of research as a management tool in health programme planning, and a training manual was produced and distributed in that region. The training was carried out by the Commonwealth Caribbean Medical Research Council.

Environment and Health

Environment and Health, which was the major area of work for the Secretariat's Health Programme between 1992 and 1995, was concluded in early 1996. Health Ministers had identified the lack of adequate sanitation as a critical need in Africa and the Secretariat therefore commissioned the Robens Institute of the University of Surrey in Britain to undertake a study and develop a strategic action plan for sustainable urban sanitation. The study advocated flexible and progressive education for staff involved in the field, and strategies to support the development of policy-making and exchange of information.