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Executive Summary

This past year the West African Health Organisation (WAHO) continued to deliver on its mission to position itself as a proactive instrument of regional health integration that enables high-impact and cost-effective interventions and programmes.

Our goal in 2018 has been to focus our activities across the 13 program areas from the 2016-2020 Strategic Plan and this with the support of all our key partners. During the year, we have also initiated several programmes that aim to improve on our deliverables and we hope to expand this learning experience in 2019 and beyond.

This annual report documents the achievements and successes of programs implemented. We have used a three-pronged approach in documenting our achievements: 1) Where were we? 2) Where are we now? 3) Where are we going?

In 2019, WAHO will increasingly focus on five thematic areas with our 13 priority programs pursued within these themes or as enablers. We will focus on 5 key Thematic Areas namely (1) Maternal, Child & Adolescent Health; (2) Quality Standards & Centres of Excellence; (3) Pharmaceuticals (medicines & vaccines); (4) Prevention & Control of Communicable and non-Communicable Diseases; and (5) Health Information. During implementation in any of these thematic areas, we would ensure Capacity building, including Youth Development; Strengthened networks and Sustainability.

I would like to take this opportunity to thank the WAHO staff for their relentless enthusiasm and efforts in 2018. My appreciation also goes to our partners for keeping faith in WAHO. Finally, my thanks to our leaders for their support in ensuring that the vision set by our founding fathers remain achievable.

Together we will pursue our quest to improve health and healthcare delivery to our people.

Stanley Okolo, WAHO DG
Our Vision

As part of the overall vision of the Community to move from ECOWAS of States to ECOWAS of Peoples in 2020, WAHO’s vision is to be recognized by the Member States and the International Community as a proactive instrument of regional health integration that enables high-impact and cost-effective interventions and programmes.

Our Mission Statement

The attainment of the highest possible standard and protection of health of the peoples in the sub-region through the harmonisation of the policies of the Member States, pooling of resources, and cooperation with one another and with others for a collective and strategic combat against the health problems of the sub-region.
WHERE WERE WE?
Prog. 1: Health Information and Research for Health
- Development of the regional strategic plan for health research 2016-2020;
- Adoption of a Policy Document and Regional Strategies for Strengthening Health Information Management and Production Systems in the ECOWAS Region;
- Establishment of a Regional Data Warehouse based on District Health Information System 2 (DHIS2) to centralise all health information in the ECOWAS region.

Prog. 2: Disease Control
- Development of the regional mental health plan;
- Development of the regional plan for the control of Non-Communicable Diseases;
- Support to countries to conduct STEPS surveys;
- Organisation of mass treatment campaigns and hydrocoele surgery camps for neglected tropical diseases and seasonal malaria chemoprophylaxis in Niger, Mali and Burkina Faso.

Prog. 3: Epidemics and health emergencies
- Creation of the Regional Centre for Surveillance and Disease Control (RCSDC);
- Creation and training of a Regional Rapid Response Team;
- Designation of National Coordinating Institutions by all 15 ECOWAS countries;
- Implementation of the Regional Policy Coordination Platform for the “One Health” approach;
- Development of the regional strategic plan for laboratories and the plan to strengthen reference laboratories in ECOWAS member countries;
- Accreditation of Regional Reference Laboratories (RRL) according to ISO 15189 standards;
- Creation of ECOWAS Regional Biobank.

Prog. 4: Health promotion
- Development of a regional guide to guide national community-based intervention strategies (CBI);
- Production of brochures on Good Health Practices (GHPs) from the 2nd Forum.

WHERE WERE WE?
**Prog. 5: Medicines, Vaccines and other products**

- Elaboration of a regional pharmaceutical plan;
- WHO certification of five pharmaceutical industries;
- Development of a regional Good Manufacturing Practice roadmap;
- Establishment of a regional stockpile of drug safety and strategic inputs for the control of epidemics and health emergencies;
- Implementation of the ECOWAS/UEMOA Joint Technical Document (CTD) on Harmonisation of Drug Regulation;
- Strengthening of the capacities of the National Drug Quality Control Laboratories.

**Prog. 6: Traditional Medicine**

- Improved Traditional Medicine practices in several countries in the region, although the regulatory regime remains weak.

**Prog. 7: Maternal, child, adolescent, youth and elderly health**

- Very high maternal and child mortality and morbidity rates;
- No country was able to attain MDGs 4 & 5: only Cabo Verde for MDG 5, Niger & Liberia for MDG 4;
- A very high under-5 mortality and morbidity rate.

**Prog. 10: Human Resources for Health**

- Harmonisation of training curricula for medical, paramedical and other related disciplines;
- Harmonisation of the code of ethics for health professional categories and health-related disciplines;
- Development of trainers’ guides to the use of the training curriculum;
- Training of trainers in pedagogy and bibliographic research;
- Financial support to Learned Societies, Colleges and Orders.
**Prog. 11: Technical Assistance to Member States**

- Development and implementation of 19 projects in the field of Reproductive Health, Adolescent and Youth Health, Malaria and Neglected Tropical Diseases, Drugs, Health Research, Laboratory Strengthening, Health Security and Epidemic Control;
- Technical and financial support for the development and implementation of strategic documents (Policy, Plans);
- Technical support in medical equipment, medicines and rolling-stock;
- Capacities and skills of member countries’ human resources in different areas strengthened (about 1,500 managers per year).

**Prog. 12: Strategic Partnership and Policy Harmonisation**

- Development of the Strategic Plan 2016-2020;
- Development of 15 National and a regional reports on the profile of private sector;

**Prog. 13: WAHO Institutional Capacity Building**

- Development of a Regional Strategic Framework on Public-Private Partnership in Health;
- Development of Guidelines on Universal Health Coverage;
- Support to Member States in developing Universal Health Coverage Schemes and Health Accounts;
- Establishment of several regional consultation frameworks for dialogue and exchanges between different thematic actors (forum of best practices in health, nutrition forum, annual review of the different thematic programmes, researchers and decision-makers forum, etc.);
- Establishment of several regional networks of research institutions, national health research ethics committees, laboratories, documentation centres, adequate health funding, maternal health, etc.

- Capacity building of WAHO Staff;
- Improvement of the working environment and conditions of staff.
SO THAT IS WHERE WE WERE
WHERE ARE WE NOW?
WHERE ARE WE NOW?

Prog. 1: Health Information and Research for Health

- Capacity building in research methodology for 18 young researchers;
- Information on epidemic-prone diseases in the context of the One Health approach;
- 20 health information system managers from 10 ECOWAS countries (Benin, Burkina Faso, Cabo Verde, Côte d’Ivoire, The Gambia, Guinea, Guiné-Bissau, Mali, Niger, Senegal) on the new modules of the routine health information system;
- Training of 15 officials from the Ministry of Health of The Gambia in data quality review using the DHIS2 DQR module;
- Training of 24 national health data warehouse administrators in the management and deployment of DHIS2 servers to make countries independent in the management of integrated databases and to ensure that they are independent;
- Training of 31 database administrators in the integration and interoperability of different databases according to the “One Health” concept;
- Technical support to four countries (The Gambia, Guiné-Bissau, Guinea and Sierra Leone) on the use of the DHIS2 data quality assessment module;
- Provision of technical assistance to national HIS platforms on DHIS2 platform and server management (Benin, Burkina Faso, Nigeria, Togo);
- Technical and financial support to Cabo Verde for migration to the DHIS2 platform for the management of National Health Management Information System (NHMIS) data;
- Capacity building of 30 health policy researchers and analysts in data analysis and communication of reproductive, maternal, new-born and child health outcomes from demographic and health surveys;
- Technical and financial support to Burkina Faso for the implementation of a pilot telehealth site based on the Mobile Heath (MH);
- Capacity building for 12 managers to use videoconferencing equipment and, sharing of experiences on other innovative solutions such as Webex and, Cisco Telepresence;
- Capacity building of 50 Managers from Burkina Faso and Nigeria in knowledge transfer and research focused on identifying barriers and potential solutions.
in consultation with stakeholders to improve the implementation of health actions;

- Training of 40 researchers from Nigeria in the use of social media to share research results;

- Capacity building for nine young researchers from Benin, Côte d’Ivoire, Ghana, Gambia, Mali and Nigeria in writing research protocols;

- Development of a documentation policy and a Strategic Plan for the West African Health Documentation and Information Network (WAHDIN);

- Capacity building of 30 personnel in the resource units, including 23 lecturers and seven librarians, in documentation research, in the use of the Zotero software, in critical reading of scientific documents and in the use of the PMB documentary software;

- Financial support to countries to:
  - fund one PhD thesis of one student from Ghana, on Public Health, in Cape Town, South Africa;
  - establish a formal framework for dialogue between researchers and policy makers in Nigeria for the use of evidence in maternal and child health decision-making;
  - support the West African Health Research Network (WAHRN) in the implementation of its activities and facilitate collaboration between researchers and share research results.

**Prog. 2: Disease Control**

- Six mass-campaign rounds were organised in Niger, Burkina Faso & Mali to prevent the occurrence of seasonal malaria in children from 3-59 months. Six million children were treated in these 3 countries in 2018. A total of 114,352,306 children including 21,360,778 females were treated.

- WAHO supported the organisation of seven hydrocoele surgery camps, including 3 in Burkina Faso, 2 in Mali and 2 in Niger. These camps helped in treating a total of 1134 cases of hydrocoele and training of 12 doctors from the Health District on case management of hydrocoele.

- Adoption of the regional Mental Health Plan by the ECOWAS Assembly of Health Ministers.

**Prog. 3: Epidemics and health emergencies**

- Development and validation of a regional strategic plan for the preparation and response to epidemics and emergencies;

- Development and validation of the Regional Plan on Risk Communication;

- Development and validation of a Standard Operating
WHERE ARE WE NOW?

- Procedure (SOP) for deployment of the Rapid Response Teams;
- Organisation of a simulation exercise on support for the management of a yellow fever outbreak in Lagos;
- Training of 199 human and animal health staff from 13 countries (except Cabo Verde and Nigeria) on field epidemiology;
- Training of 77 Members of Emergency Medical Teams of Ghana, Senegal, Nigeria and Guinea;
- Continuation of the ISO 15189 accreditation process for the 12 regional reference laboratories in 2019;
- Training and certification of 27 Stepwise Laboratory Improvement Process towards Accreditation (SLIPTA) auditors to evaluate and assist laboratories in strengthening their quality system;
- Training and certification of 27 professionals from regional reference laboratories (Côte d’Ivoire, Nigeria, Ghana, Burkina Faso and Senegal) by the two accredited metrology laboratories in Africa (Accra and Tunis). These professionals are now able to calibrate their basic equipment (micropipettes, weighing scale, thermometer, etc.) and implement a metrology management policy that is essential for the accreditation of medical laboratories according to the ISO 15189 standard;
- Delivery of 12 calibration and maintenance kits to the LRRS for preventive maintenance of their devices and some calibration of their devices;
- Training of 15 officers from five countries (Guinea, Guiné-Bissau, Liberia, Sierra Leone and Togo / 3 per country) in the maintenance of biomedical equipment at the Cotonou Regional Training Centre;
- Training of 18 professionals from the national reference laboratories of eight ECOWAS member countries on techniques and procedures for the safe transport of biological substances according to IATA standards;
- Training of 20 staff members from the reference laboratories of five ECOWAS countries (Burkina Faso, Niger, Mali, Cabo Verde, The Gambia) by the experts of the WHO Collaborating Centre for Arboviruses and FHV on techniques and strategies for biological diagnosis of dangerous pathogens such as dengue, yellow fever, Zika, Lassa fever etc.;
- Strengthening of three national reference laboratories (Niger, Gambia and Cabo Verde) by the provision of serological diagnostic (ELISA) and molecular diagnostics (PCR) equipment as well as reagents and consumables;
WHERE ARE WE NOW?

- Support to three member countries (Mali, Burkina Faso and Niger) by the acquisition of mobile laboratories for early diagnosis and effective control of epidemic-prone diseases in the most remote households;
- Strengthening of 47 health district laboratories of 47 new epidemiological surveillance centres in five countries (Guinea, Guiné-Bissau, Liberia, Sierra Leone and Togo);
- Training of 10 national trainers and 160 laboratory technicians on the following modules: Biosecurity and transport of samples;
- Preventive maintenance of laboratory equipment; Laboratory data management; Diagnosis of epidemic-prone diseases.

Prog. 5: Medicines, vaccines and other products

- Adoption of the harmonised regional Common Technical Document (CTD) by the 19th Ordinary Session of the ECOWAS Assembly of Health Ministers held in the Gambia in June, 2018. This document is a reference for drug regulation for the 15 countries of ECOWAS. On this basis, WAEMU has incorporated the CTD into their legislation to enable the WAEMU countries to update the processes for the registration of medicines;
- Validation of 163 regional documents (guidelines, operational Procedures Manual and standardized) which cover the seven major medicines regulatory areas, to support implementation of the CTD and the medicines harmonisation process in the region;
- Training of 46 staff members of the National Medicines Regulatory Harmonisation Authorities (NMRAs) from the 15 Member States on Medicines Dossier Assessment for registration approval using the Harmonised CTD;
- Training of 23 experts from the 15 NMRAs on Good Manufacturing Practices (GMP) and Inspections. This training was followed by a joint inspection conducted by Expert Working Group for GMP/Inspection to the two (2) pharmaceutical industries that submitted their dossiers for the joint assessment;
- Assessment of 65 Local Pharmaceutical Manufacturers for GMP and Inspections across the region under the ECOWAS/UNIDO project; (25 Nigeria, 25 Ghana, 5 Cote d’Ivoire, 4 Senegal, 3 Togo, 1 Benin, 1 Mali, 1 Cabo Verde);
- Training of 34 Quality Control Managers and Technicians of the National Medicines Quality Control Laboratories (NMCQL) on Good Laboratory Practices for medicines quality control.
WHERE ARE WE NOW?

**Prog. 6: Traditional medicine**
- Finalisation and validation of the harmonized manual on the protection and utilization of indigenous medical knowledge in ECOWAS;
- Conduct of toxicity, microscopic, macroscopic, and phytochemical studies on 30 medicinal plants for the treatment of emerging diseases, identified for Volume 2 of the ECOWAS Herbal Pharmacopeia.

**Prog. 7: Maternal, child, adolescent, youth and elderly health**
- Financial support to seven countries (Benin, Burkina Faso, Guiné-Bissau, Niger, Sierra Leone and Mali) for the purchase of contraceptives, to meet 90% of the gap that existed in the two countries;
- HIV testing of 6,335 people, enrolment of 800 new users of Modern Contraceptive Methods (MMC) and 111,000 condoms distributed during the Cross-border Advocacy Campaign on Family Planning and Testing Niangoloko (Burkina Faso) - Ouangolodougou (Côte d'Ivoire);
- Financial support to seven countries (Benin, Burkina Faso, Ghana, Guiné-Bissau, Niger, Sierra Leone and Mali) to implement 111 capacity building activities in on sexual and reproductive health and family planning;
- Training of 67 actors from different ministries in Burkina Faso and Mali in IEC-CCC, Gender, Human Rights and Reproductive Health
- Award of 10 scholarships for vaccinology training at the “Université Nazi Boni de Bobo-Dioulasso”.

**Prog. 8: Health Infrastructure and Equipment**
- Construction of a Health Centre along the border of Liberia and Sierra Leone.

**Prog. 10: Human Resources for Health**
- Training of 50 trainers from basic schools and internship supervisors in the use of harmonised tools (internship journal and guide, care plan and partogramme) developed for learners from basic training schools (nurses and midwives) in Francophone ECOWAS countries;
● Training of 12 pharmacists from the Ministries of Health and Pharmaceutical Councils in pharmaceutical management and logistics in disaster situations;

● Development of a regional plan for basic and specialist training in the ECOWAS region;

● Establishment of three Centres of Excellence for Master’s degrees in Nursing and Obstetrics (Master’s degree in Health Sciences Pedagogy, at INFAS in Abidjan, Master’s degree in Reproductive Health, at INSP in Niamey and Master’s degree in Health Services Management, at INFSS in Bamako. For the first cohort, 104 scholarship recipients were selected in the six countries (Burkina Faso, Chad, Côte d’Ivoire, Mali, Niger, Mauritania, Niger).

**Prog. 11: Technical assistance to Member States**

● Provision of PPP technical assistance to Burkina Faso, Guinea, Niger and Togo to identify promising projects;

● Financial support to Nigeria to strengthen Lassa fever detection capacity;

● Technical and financial support to Liberia, Sierra Leone and Côte d’Ivoire for the revision and development of strategic plans and various health policies.

**Prog. 12: Strategic Partnership and Policy Harmonisation**

● Development of a roadmap to enhance Private Health Sector Regulation;

● Development of a roadmap to implement the Commitment by Parliamentarians of ECOWAS, Mauritania and Chad on Adequate Health Financing, Demographic Dividend and Population and Development Policies.

**Prog. 13: WAHO Institutional Capacity Building**

● Launch of a new WAHO website;

● Installation and configuration of about 20 virtual servers;

● Acquisition and installation of network equipment, storage and data security backup;

● Finalisation of DHIS2 dashboard as a web portal that will be integrated into the WAHO website for periodic publishing of select data from the regional data warehouse.
WHERE ARE WE NOW?

THIS IS OUR CURRENT STATUS
### 2018 Assembly of Health Ministers of ECOWAS (AHM) Recommendations Implementation Status

<table>
<thead>
<tr>
<th>Recommendations</th>
<th>Implementatus Status</th>
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<tbody>
<tr>
<td>1. Develop and make available to the Ministries of Health a report template to be used for the handover of Liaison Officers.</td>
<td>Template developed and will be presented at the various AHM meetings.</td>
</tr>
<tr>
<td>2. Prepare and submit to the next Assembly of Health Ministers a presentation on the public health problem of road traffic accidents in the region.</td>
<td>Presentation prepared and will be made at the next AHM.</td>
</tr>
<tr>
<td>3. Monitor the implementation by countries of all resolutions adopted by the Assembly of Health Ministers.</td>
<td>WAHO is considering developing a directory of resolutions to be sent to countries to review implementation.</td>
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WHERE ARE WE GOING?
The New Focus

WHERE ARE WE GOING?

Outputs, Research, Population Impact

Prof Stanley OKOLO - DG, WAHO-OOAS
Cross-cutting themes to address in 2019

- Leadership and Governance;
- Regional regulation such as the registration of medicines, food products; cross-border cooperation, maintenance, e-health, capacity building (for example, of biomedical engineers) and sharing of best practices;
- Strengthening community-based services, placing health workers close to community;
- Increasing health financing;
- Reducing financial barriers through provision of exemptions;
- Health promotion, Social mobilization and advocacy;
- Regulation of food products and medical practice; and
- Provision of centres of excellence.

THIS IS OUR VISION FOR 2019 AND BEYOND
HOW DID WE FARE IN FINANCE?
At the end of the year, a total of UA14,996,362 or 89% of budgeted community levy income had been received and UA16,032,867 or 53% expected from partners mobilized. Overall, UA 31,045,199 was received representing about 66% of the revenue budget.

In 2018, there were improvements in the amounts of community levy disbursed to WAHO.

A total expenditure of UA 25,573,650 or 54% of the budgeted amount was incurred of which UA 21,382,862 or 84% was disbursed on programmes and UA 4,190,788 or 16% was for governing bodies and administration. The expenditure constitutes 82% of funds received.

A burn rate of 54% recorded on allocated budget and 82% on implementation rates demonstrate WAHO strong commitments to program delivery and place new demands on resolving constraints to improve program delivery in the region.
The West African Health Organization (WAHO) is the specialized institution of the Economic Community of West African States (ECOWAS) for health issues. It was created in 1987 and its Headquarters is located in Bobo-Dioulasso in Burkina Faso.