



# Zambia National Public Health Institute Ministry of Health

Zambia Emergency Response and Health Systems Preparedness Project, Implementation Journey and Outcomes.

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ZNPHI is the specialized arm of government that is responsible for providing public health security through coordination of surveillance, preparedness and response by utilizing strong laboratory systems and strategic information underpinned with viable workforce in a multi-sectoral manner.





To compliment Ministry of Health in:

Promote Public Health Awareness.

Integration in Emergency Preparedness and Response.

Health System strengthening including telehealth, diagnostics, laboratory services.

Stakeholder coordination beyond health.

NCDs, Injuries and Mental Health surveillance systems.

**Antimicrobial Resistance** 

One Health, Impact of climate change on health service delivery.

# Lessons from COVID 19

#### **THREATS**

- Weakened logistics & supply chain systems
- Forecasting did not address some important aspects of the response e.g. surge capacity, financial resources.
- Concentration of expertise and response personnel at the national level resulting in uneven distribution at the subnational level.

#### **STRENGTHS**

- Engagement of multiple partners/sectors in the response
- Decision making at technical and policy level in synchronization
- IMS trainings subsequently implemented at various levels and for different outbreaks

#### **OPPORTUNITIES**

- Strengthened PHEOCs and now being disseminated to subnational levels.
- Expansion of Laboratory services, particularly genomic sequencing
- Africa CDC Regional Coordination Center is now in Zambia
- · Pandemic Fund for Preparedness

#### **WEAKNESS**

- Stalled delivery of essential health services
- Inadequate lab capacity at the time and testing challenges, comorbidities
- Inadequate M&E systems, EHRs
- Lack of Mental health services for patients and relatives
- · Limited involvement of communities and NHCs.

# Strengthening Capacity for Essential Services Continuity



Equipping of provincial-level specialised intrapartum care units and newborn special care units. Including 3 specially fitted ambulances for neonatal services

expansion of oxygen capacity and delivery

- Rehabilitation of Choma Kangaroo Mother Care unit and construction of 3 NICUS in Choma, Katete and Lusaka (Kanyama).
- Procurement of diagnostic equipment, medical equipment and supplies for treatment centres;
- Rehabiliation of Blood transfusion services for 3 provincial hubs
- Boreholes and handwashing services to increase institutional WASH
- Development of the staging environment for INRIS and Smartcare integration for Birth and Death Registration

# One Health Strategy AMR National Action Plan

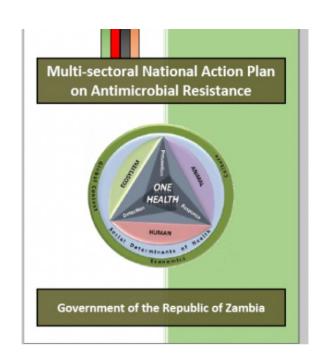
### Importance of One Health Strategy

- 73% of emerging pathogens have wild animal hosts as their original environment
- antibiotic abuse in the human, animal, food, and agricultural sectors, microbes threat to health, sustainable food production, and development.
- Landlocked country with high risk of becoming a hub for regional infectious disease concerns that arise from international travel



## **Antimicrobial Resistance**

Launched the National Antimicrobial Resistance Action
 Plan



Zambia has recognised the Public Health threat of antimicrobial resistance and its impact on morbidity and mortality, as well as the subsequent economic consequences.

# Telemedicine Implementation

Procurement of Telemedicine equipment - Phase 1 Telemedicine Implementation.

Procurement of Telemedicine Kits.

Procurement of Telemedicine ICT equipment.

Establishment of Telemedicine Innovation Centre (UTH Super Hub)

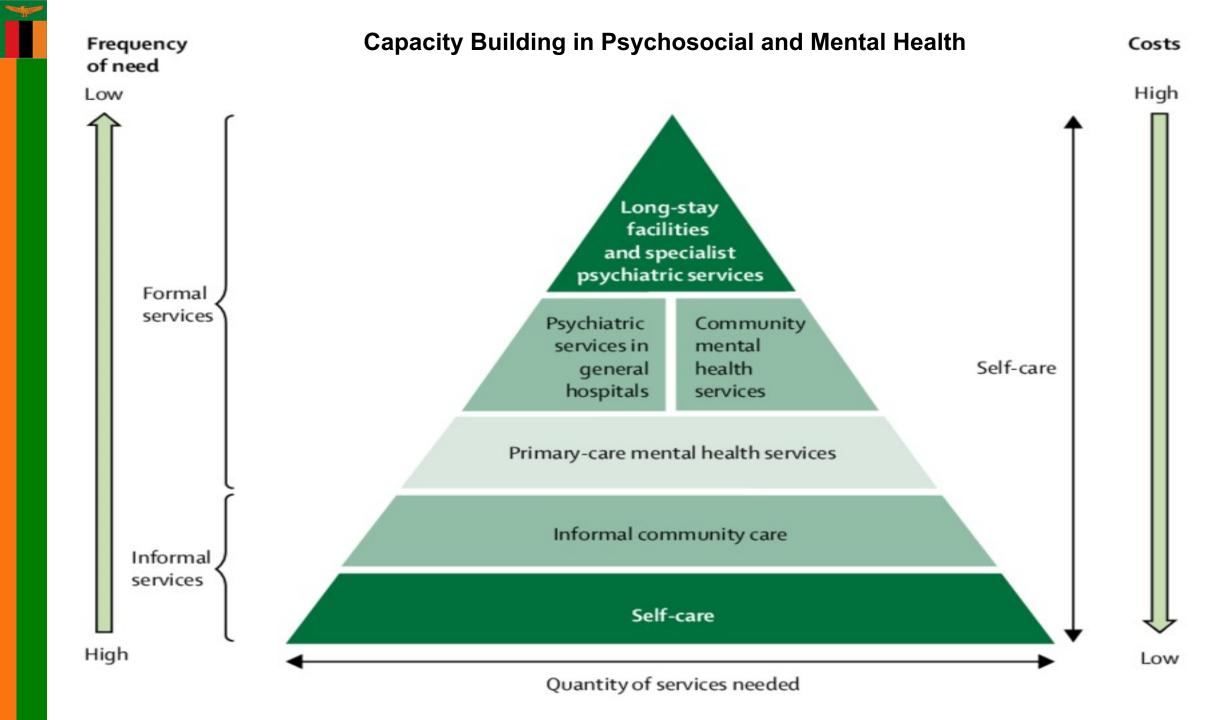
Procurement of Tele-surgery Equipment for Set-up in Specialized, Level 3, Level 2 and Level 1 Hospitals, respectively.

# Digital Health Innovations.



Working with Flying Doctors, ZAMSA, ZNBTS, ZCAA to develop a Zambian-centric model for the use of Unmanned Arial Devices

Goal is to fast-track health service delivery in hard to reach areas.









Mental Health Training Package.

- (a) Structuring of Mental Health Units at Provincial level.
- (d) Trainings for select health care workers as trainer of trainers using the mental health training package.
- (e) WHO mental health gap trainings.
- (f) Care for care providers training.
- (g) Suicide prevention and media reporting training.
- (h) Electroencephalogram training, EEG for epilepsy and neuropsychiatric manifestations.

Mental Healti

No. 6 of 2019

#### THE MENTAL HEALTH ACT, 2019

ARRANGEMENT OF SECTIONS

PART I

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- Interpretation
- 3. General principles for determination of condition of mental

PRELIMINARY PROVISIONS

PART II

LEGAL CAPACITY AND RIGHTS OF MENTAL PATIENTS

- Legal Capacity
- 5. Duty to respect and uphold rights and dignity of mental patients
- Prohibition of discrimination, degrading treatment and use of derogatory names
- 7. Promotion of mental health and preventive programmes

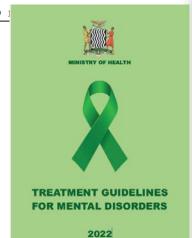
#### PART III

THE NATIONAL MENTAL HEALTH COUNCIL

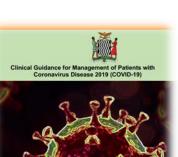
- 8. Establishment of National Mental Health Council
- Seal of Counc
- Functions of Council
- Board of Council
- 12. Functions of Board
- 13. Delegation of functions of Board
- 14. Executive Director and other staff

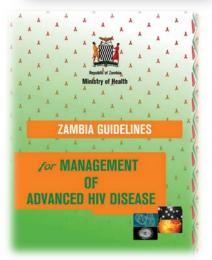
PART IV Mental Health Services

15. Access to mental health services









# Mainstreaming Gender as a Cross-cutting Theme

Enhancing capacity of one stop centers for SGBV in selected health facilities

Collaboration and linkages to MoE and social protection services / Stakeholder Consultation on Development of Strategy on Implementation of a Multisectoral Programme on SGBV

Implementation of SGBV prevention activities within the Zambia Safe Schools Framework

Strengthening prevention and treatment of Gender-Based Violence









# Multisector Approach



Figure 1: Determinants of NCDs and responsibilities for response

### Underlying determinants

- Poverty and poor living conditions
- Social exclusion
- Design of cities and towns
- Availability and marketing of goods

### Common risk factors

- Unhealthy diet
- Physical inactivity
- Tobacco
- Alcohol

### Clinical management and secondary prevention

Responsibility of Ministry of Health

### Intermediate risk factors

- Overweight/obesity
- Raised blood sugar
- High blood pressure
- Abnormal blood lipids

### Main NCD

- Heart disease
- Diabetes
- Stroke
- Cancer
- Chronic respiratory disease

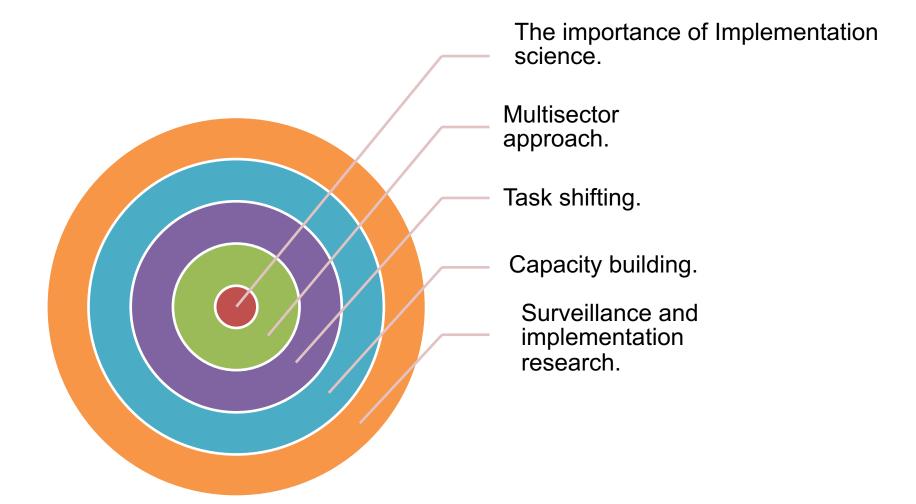
#### Prevention of NCD risk factors

Responsibility of all ministries, Ministry of Health and society

Source: Bonilla-Chacin, María Eugenia. 2014, modified to include responsibilities factors











- Needs analysis factoring a cross programmatic efficiency analysis.
- Implementation and roll out support
- Sustainable systems
- Reporting

Indicator to be met: How has access to services improved?

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