

Healthcare Capacity

Existing therapies for high-prevalence diseases such as HIV/AIDS, malaria and tuberculosis, cannot be provided safely without comprehensive care programmes. These support the monitoring of disease progression, ensure high levels of patient compliance with prescribed therapies, guard against the potential development of drug resistance and effectively treat opportunistic infections.

The UN's eight Millennium Development Goals (MDGs) range from halving extreme poverty to halting the spread of HIV/AIDS and providing universal primary education for all by 2015. Alongside the MDGs a number of other targets have recently been set, such as the "*Business Call To Action*" from the Prime Minister, Gordon Brown, at the UN and the Stop TB partnership challenge, which aims to treat 50 million tuberculosis patients and 1.6 million multi-drug resistant tuberculosis patients. Achieving such targets can only be done by addressing the healthcare issues in the world's poorest countries.

- HIV/AIDS and tuberculosis did not create the shortfall in healthcare capacity in the developing world. However, due to their long latency and high demands on resources, they have dramatically highlighted and exacerbated existing healthcare capacity constraints. Recognising this, members of the APG have shown their commitment to developing and maintaining healthcare systems in resource-restricted societies over many years.

For developing countries in Africa, the shortage of qualified nurses, along with the migration of qualified nurses out of the region, poses a serious threat to the provision of quality health care. With support from **Johnson & Johnson**, the Advanced Nursing Studies (ANS) programme and the Enrolled Nurses to Registered Nurses (EN-RN) programme at Aga Khan University (AKU) East Africa give nurses in Kenya, Tanzania, and Uganda the opportunity to broadly enhance their professional skills. ANS provides quality education to nurses and midwives through innovative needs-based programmes. EN-RN enables nurses to expand their core competencies through evidence-based practice, preparing them to become registered nurses.

In a region where qualified nurses are at a premium, such programmes allow nurses to earn higher professional qualifications without leaving the region for extended periods of time. Additionally, a distance-learning approach enables participants to continue their education in close proximity to

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their communities. Johnson & Johnson support has benefited 301 graduates of the AKU Nursing Programme, as well as 233 students who enrolled in the programme in 2006.

In 2003 **Lilly** launched a global partnership comprised of 14 public and private partners supporting a comprehensive, multi-pronged strategy to tackle multi-drug resistant tuberculosis (MDR-TB). Working primarily in the four countries hardest hit by MDR-TB, China, India, Russia and South Africa, the Partnership promotes community support and patient advocacy; implements MDR-TB healthcare treatment and training programmes and strengthens surveillance of drug resistance; transfers Lilly drug-manufacturing technology to local pharmaceutical companies and supplies medicines at concessionary prices; conducts research for new drug discovery; and works with policymakers to raise awareness and prevent the spread of MDR-TB.

As one attempt to try and address the problems of maternal health, over 100 leading experts from 21 different countries collaborated to produce the comprehensive *Textbook of*

Postpartum Haemorrhage, providing practical, up-to-date and authoritative guidance for effective management in difficult conditions applicable around the world. The World Health Organisation Regional Office for Africa, the Federation of International Gynaecology and Obstetrics and Princess Anne of the UK contributed to the book.

In addition to the textbook, a number of practical information tools were produced which target the problems of postpartum haemorrhage in practice, including a wall chart and a 21-page brochure providing simple, practical and easily understood guidance to birth assistants. Organon, a part of **Schering-Plough**, developed an initiative in 2007 to place the book, wall chart, brochure and surgical poster in the hands of health workers in the poorer parts of developing countries by using its internal network of colleagues and locations in these regions to distribute the materials. In order to ensure that the local health workers can make use of the materials, in particular the wall chart, brochure and surgical poster, the materials have been

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translated from English into locally understood languages, including French and Latin-American Spanish. In 2007, Schering-Plough provided support to establish the project and distribute books in Burkina Faso.

As part of their commitment to the Global Alliance for Vaccines and Immunisation Alliance, **Merck & Co., Inc.** initiated the Merck Vaccine Network-Africa (MVN-A) in 2003. A multi-year philanthropic initiative, MVN-A supports the development of sustainable immunisation training centres in Africa by providing mid-/high-level immunisation programme managers with hands-on training in vaccine management and immunisation services. To date, more than 350 health professionals in Kenya and Mali have completed MVN-training, and returned to their home medical facilities to share their expertise and knowledge with colleagues at the front line. In 2007, The Merck Company Foundation provided renewed funding to the two Centres, allowing them to expand training to additional health workers in Kenya and Mali and explore new, innovative training methods to address emerging immunisation management needs. In 2007, The Merck Company Foundation also announced a commitment to fund the establishment of two new immunisation training Centres in Uganda and Zambia.

Bristol-Myers Squibb's *Secure the Future* programme is a pioneering initiative, the first and largest corporate initiative of its kind to fight HIV/AIDS. Launched in May 1999 it now extends to 12 countries in Southern and West Africa. To date it has supported more than 200 projects in community education/outreach and in medical support. Partnering with the Baylor International Paediatric AIDS initiative, *Secure the Future* funded the first clinical centre in Africa – in Botswana – for children with HIV/AIDS and their families. Additional centres have been established in Lesotho, Swaziland, Burkina Faso and Uganda. *Secure the Future* has evolved from a broad-based grant-making initiative to providing significant investments in three areas: community-based support and care in severely resource limited settings; paediatric HIV care and treatment; and engaging civil society in new responses to the AIDS pandemic. The aim of *Secure the Future* from its very beginnings has been sustainability and capacity building. Its success is measured by the good that the organisations and groups it supports do in contributing to their villages and the people they help. It is measured by their ability to sustain their efforts and expand them – and eventually, indeed, by the public-private partnerships that will be created to begin to reverse and eventually help defeat the HIV/AIDS pandemic.

The **Abbott** Fund is modernising laboratories at all 23 regional hospitals across Tanzania. The first modernisation, at Mt. Mehru Regional Hospital in Arusha, was completed in June 2007. Abbott's improvements have tripled the capacity to serve 4 million people across the region. The countrywide improvements will allow all hospitals to apply for national and international funds aimed at providing access to HIV treatment. On the local level, hospital facilities, systems and HIV training have been upgraded at 90 sites throughout the country to improve voluntary counselling and testing services and to prepare for the initiation of treatment programmes.



The Infectious Diseases Institute (IDI) at Makerere University in Kampala, Uganda, is a state-of-the-art regional centre for treatment, training, research, laboratory and diagnostic services that meet the unique challenges of the African HIV/AIDS epidemic. The IDI is the result of a partnership between **Pfizer**, Makerere University, international infectious disease experts, the Ugandan government, and non-governmental organisations. Training health care professionals in the latest treatment options is an important component in fighting the HIV/AIDS crisis and infectious disease experts, based in the Institute, train doctors from multiple African countries in the prevention and treatment of HIV/AIDS.

The Institute has a significant impact in Africa, striking at the core of the AIDS epidemic by providing extensive training to healthcare providers and advanced treatment methods to patients, including:

- The provision of enhanced HIV care for adults, children and families, including anti-retrovirals and prophylaxis for opportunistic infections
- A state-of-the-art diagnostic laboratory to monitor HIV therapy and to support diagnosis of opportunistic infections, tropical diseases and sexually-transmitted diseases
- Education and training for African physicians and healthcare providers in HIV care and prevention
- Clinical research to identify the best approaches for patient care, including directly observed therapy and once-a-day treatment regimens.

The IDI currently provides care to approximately 10,000 patients. Since 2004, the centre has trained more than 1,700 healthcare providers from 26 African countries.

