The 13th World Congress on Public Health lasted from 23–27 April 2012 in Addis Ababa, concluded by issuing the Addis Ababa Declaration, a call on Global Health Equity that would serve as a reference for the design and implementation of health sector goals and help accelerate the numerous efforts taking place towards achieving goals set by the MDGs in the remaining three decisive years.

According to the Addis Ababa Declaration on Global Health Equity, the Congress re-affirmed the 2009 Istanbul Declaration on Health, the First Human Right as well as the 2011 Rio Political Declaration on the Social Determinants of Health and the 2012 Bangkok Statement on Universal Health Coverage.

The Declaration asserts that every individual has the right to dignity, freedom, equality, a basic standard of living that includes freedom from hunger and violence, and encourages tolerance and solidarity. Good health and environmental protection are also included as basic human rights in the declaration. The long anticipated 13th World Congress came to an end with the Addis Ababa declaration following various associated activities.

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Editor’s Note

The Long Journey of Effort Bears Fruit!!!

When EPHA was appointed to organize the 13th World Congress on Public Health three years back, it seemed to be a dream when considered how it was to happen as it was a new and huge responsibility for EPHA. With constant exchange of ideas, hard thinking were made on how to turn that dream into reality with determination and passion. Every step was a lesson that taught EPHA new ways of doing things. Today EPHA stands proud that its unyielding efforts were not in vain. Instead, EPHA as a strong professional association came out bold demonstrating to the world its capacity and strength.

In this, although it is now two months since the event of the 13th congress, its achievement remains fresh in the memory of those who participated in the event and beyond. The three-year relentless effort and hard work had apparently paid off thereby offering a glimmer of hope to the future of public health and accelerating the move towards achieving the MDGs. In short it was a success witnessed by the global community. The congress was indeed exiting and a source of satisfaction and pride for EPHA, its staff and members and the country at large all of whom were part of the long journey and its outcome.

Among others, however, the 13th congress proved EPHA’s capacity in handling a giant professionals’ group from around the world that of course deliberated on an international public health agenda, in this case, a destiny that belongs to the global health equity. On top of these, the congress was a cumulative effort of all round efforts wherein EPHA has acquired far more valuable experiences all through the process.

The successful accomplishment of the 13th congress without doubt marked a milestone landmark moment, but represents only one step to the accelerated growth of EPHA in enhancing public health situation in Ethiopia. It has stimulated and inspired EPHA to do more, strive hard and network itself with its affiliates, partners to bring more result in its future endeavors.

Congratulations all on the success of our collaborative efforts that marked the 13th world congress effective and fruitful!

Publications Unit, EPHA

AFPHA Secretariat Office Launched

The office of the African Federation of Public Health Association (AFPHA) was officially inaugurated on 24 April 2012 in the presence of Dr. Tedros Adhanom, Minister of Health of the FDRE, President of the AFPHA Dr. Mathias Some, Director General of AMREF, Dr. Teguest Guerma, and, the Executive Committee of the AFPHA, EPHA Board members and the Executive Director as well as other dignitaries and members of the AFPHA altogether.

EPHA has officially handed over the office of AFPHA located continued on page 7.....
The 13th World Congress on Public Health recently completed its five-day conference in Addis Ababa, Ethiopia. I was fortunate to be able to participate, representing Green Cross International, in a panel on “Global Security Engagement and Public Health,” and in a plenary session on “Models of Global Cooperation for Public Health.” This large meeting, with some 3,000 attendees from 120 countries, takes place every three years under auspices of the World Federation of Public Health Associations and of the national public health association, the Ethiopian Public Health Association in this case.

The Addis Ababa Congress, entitled “Towards Global Health Equity: Opportunities and Threats,” addressed many issues related to the interface between the environment, security, and public health. One of the main points of discussion revolved around the Millennium Development Goals (MDGs), eight global targets for human development, environmental protection, and public health established by the United Nations in 2000 in the “Millennium Declaration.”

Paul Walker, ESS Programme Director


**View from abroad: Time for US to learn from global public health community**

I spent last week attending the 13th World Congress on Public Health in Addis Ababa, Ethiopia, with colleagues from 116 countries around the world. Country and global public health leaders made many exciting presentations tied to the Congress’ theme — “Towards Global Health Equity: Opportunities and Threats.” At times, it has been a frustrating experience for me as an American, since many of the aspirations and goals of public health leaders and governments in Africa, Europe and other continents far outreach what we are doing in the U.S. Even though we spend more per capita in the world on health care, we do not meet the goals articulated by the global public health community.

http://www.publichealthnewswire.org/?p=3314

**Gabriel Scally on the 13th World Congress on Public Health**

This is a tough time for public health internationally. The global financial crisis has had a deleterious effect on the social determinants of health as some governments have pursued austerity programmes differentially, which has had the greatest effect on some of the least well off in society. Organisations of public health professionals have suffered as well. The UK Public Health Association dissolved after government support was withdrawn, and similar financial pressures are affecting other national public health associations in a number of countries. In contrast, public health professionals in some lesser-developed countries have been able to develop and strengthen their organisations. It is against this mixed background that the 13th World Congress on Public Health has opened in Addis Ababa on the theme of “Towards Global Health Equity: Opportunities and Threats.” This is only the second world public health congress to be held in Africa and comes only months after the landmark formation, by 27 countries, of the African Federation of Public Health Associations. Both events represent significant progress in building a strong global network.

Participants of the 13th WCPH Paid a Short Visit to Three Project Sites

Nearly 70 local and international participants of the 13th World Congress on Public Health visited three health project sites in Bishoftu, Se-lale, and Butajira towns on 28 of April 2012, a day after the official conclusion of the congress.

The visit was mainly aimed to show and exhibit services of the health extension program (HEP) packages being provided to the grassroots community with respect to accelerating disease prevention and basic health care promotion and thereby give visitors physical insight and observation on the continued on page 9...

Dr Mengistu Elected as Vice President and President Elect of WFPHA

Dr. Mengistu Asnake was elected as Vice President and President-Elect of WFPHA at the 46th session of the general assembly held on the occasion of the 13th world congress in Addis Ababa on April 25, 2012. Dr Mengistu was elected securing the majority vote over his contesting fellow candidate nominated from Uganda through a secret ballot box. As business usual, James Chauvin who had been serving as the Vice President and President Elect of WFPHA has taken over the presidency from Professor Ulrich Laasar who successfully completed his office term in April 2012.

Dr. Mengistu Asnake is a public health specialist with 25 years of experience in reproductive health, primary health care, child survival, community health services, program management, training, operational research, and clinical service delivery. Dr. Mengistu is currently the Deputy Country Representative for Pathfinder International in Ethiopia. In addition, he is the Chief of Party for the Integrated Family Health Program (IFHP), a USAID flagship FP/MNCH program led by Pathfinder International in Ethiopia. In a voluntary capacity, Dr. Mengistu served as President of the Ethiopian Public Health Association (EPHA) from 2006 to 2009 and as an Executive Board member of the World Federation of Public Health Associations (WFPHA). During this period, he played a major role in bringing the 13th world congress on public health to Africa where Ethiopia being the host for the congress. Dr. Mengistu has published over 20 scientific and technical papers in peer reviewed journals and technical publications.

James Chauvin
President of WFPHA

Professor Ulrich Laasar
Immediate past President of WFPHA
More than 3,000 delegates from approximately 120 countries assembled at the 13th World Congress on Public Health in Addis Ababa from the 23rd to 27th of April 2012. The World Federation of Public Health Associations (WFPHA) has listened to the many wise voices, the rich range of experiences, and the spectrum of viewpoints on many important issues. Although diverse, we spoke with a united voice. At our World Congress we collectively called for immediate action to not only promote, but to actually achieve health equity for all in the shortest time possible. The voices at the Congress re-affirmed the 2009 Istanbul Declaration on ‘Health, the First Human Right’ as well as the 2011 Rio Political Declaration on the Social Determinants of Health and the 2012 Bangkok Statement on Universal Health Coverage.

We recognize the ever-changing context within which we operate and the many acute challenges to the achievement of global health equity. In particular, we are cognizant of the global economic crisis and its impact on individuals, families, communities and countries. The WFPHA calls on all governments and stakeholders to safeguard and promote the essential values of public health. These include, but are not restricted to: good governance, solidarity, equity and fairness, empowerment and participation, and social justice to achieve the highest possible standards of health for all.

On behalf of its member associations, the WFPHA pledges to:

1. Promote and facilitate the linkage between the academic and public health association communities, in cooperation with WHO, for innovative research and the generation of evidence to expand the knowledge base about the social determinants of health and health equity;

2. Advocate for the utilization of evidence as the basis for formulating healthy public policy and informing practice to reduce health inequity;

3. Make health equity an integral part of local, national and global policy and development agendas and to ensure that structural issues such as food insecurity, rapid urbanization, migration, man-made environmental degradation, conflict and militarization, climate change and economic crisis are taken into consideration;

4. Advocate for equitable access to high quality health services;

5. Advocate for fair trade in all commodities that affect human health;

6. Advocate for and encourage linkages between public health actors and communities as a means of fully engaging people at the front line in our discussions and to be accountable to them in our actions;

7. Give a voice through its member associations to frontline health practitioners and community workers.

Continued on page 11.....
Professor Redda Tekle Haimanot Honored with Leavell Lectureship Award

On the particular occasion of the 13th World Congress held on 25 April 2012 with a topic “Towards Global Health Equity: Opportunities and Threats”, Professor Redda Tekle Haimanot, who is the founder of Grabet Tehadiso Mahiber and a man who published over 70 scientific papers under his name was honored with the Leavell Lectureship Award by the WFPHA. Professor Ulrich Laaser, president of the World Federation of Public Health Associations (WFPHA) handed over the 2012 Leavell Lectureship award to the Ethiopian Professor Redda in the presence of public health professionals who came from 116 countries as recognition for his outstanding contribution to the improvement of public health situation in Africa and Ethiopia in particular.

Delivering the leavell lecture presentation on the African Perspectives of Health Equity after receiving the award, Professor Redda said ‘no doubt that the provision of water and sanitation significantly contributes to health equity, which however is becoming evident in the African setting that Target 7C of the millennium development goal related to water and sanitation has not been given the emphasis that it deserves. Adding on this, he said that having the best health facility with all the essential drugs and the most competent health personnel but without adequate and sustainable access to potable drinking water and good sanitation can contribute little to the delivery of quality and equitable health care services to the community.

The professor highlighted in his presentation that diseases rooted from unsafe water and poor sanitation cause more child deaths than AIDS, malaria and measles combined. According to his presentation, other factors compounding the problem of health care inequalities in Africa include natural and manmade disasters such as drought and armed conflicts, conditions placing additional burden on the already limited resources allocated to health care. Over the last 20 years, Prof Redda has dedicated his professional life to the delivery of health and rehabilitation services to the physically challenged and visually impaired persons in rural Ethiopia.
AMREF Recognized ...

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In recognition of the incredible progress made in transforming communities from within to tackle daunting challenges regarding maternal mortality in Africa and the achievements it has scored in the field of public health in general, the African Medical and Research Foundation (AMREF) received the World Federation of Public Health Associations 2012 Organizational Award.

The award was presented to Dr Teguest Guerma, AMREF’s Director General, on the occasion of the 13th World congress. At a press conference she gave after receiving the honour, Dr Guerma said AMREF believes that the power to transform Africa’s health lies within its communities.

Dr Guerma noted that AMREF’s recognition in the public health arena also stems from the fact that AMREF strengthens health systems, particularly at community level, and develops human resources for health to alleviate the critical shortage of skilled health workers in Africa.

Thus, AMREF has trained over 500,000 community health workers, mid-level health workers, and leaders of health institutions from over 33 African countries, she said, adding that, E-Learning and ICT-based methodologies have been applied to rapidly and cost-effectively scale up training of the health workforce.

AMREF’s focus on women and children, who are central in transforming communities from within, has resulted in launching an international awareness campaign called Stand Up for African Mothers, said the Director General. She explained that the campaign aims to train 15,000 midwives by 2015, in order to contribute to reducing of maternal mortality in Africa by up to 25 percent.

AMREF is Africa’s largest international health NGO, founded in 1957 originally as the Flying Doctors of East Africa to provide critical health care to remote communities in this region.

AFPHA Secretariat Office Launched...

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adjacent to its Premise during the occasion of the 13th congress. In a similar development, the first meeting and general assembly of the African Federation of Public Health Associations (AFPHA) was convened on the eve of the 13th World Congress on 22 April 2012. In her special address to participants, Bience Philomina Gawanas, commissioner of Social Affairs at the African Union, stressed the importance of ensuring food security, nutrition, hygiene and environmental health as well as addressing communicable and non communicable diseases in the context of African public health challenges. The commissioner expressed the African Union’s commitment to support and work together with AFPHA to meet Africa’s Millennium Development Goals by tackling these challenges.

The establishment of AFPHA provides an excellent opportunity for Africa to have its own role in shaping the global public health agenda, Professor Ulrich Lasaraa, President of the World Federation of Public Health Associations remarked.

Dr Tewabech Bishaw, Secretary General of AFPHA, thanked Dr Luis Sambo, the WHO Director for AFRO office, for his immense role and commitment in the establishment of AFPHA. On the same day, the general assembly developed AFPHA’s three years strategy focusing on strengthening the association’s institutional capacity and advocacy role, creating partnerships and supporting member organizations.

AFPHA was first developed in 2004 with support from WHO/AFRO, the Canadian Public Health Association and the American Public Health Association. The association was then officially formed in September 2011 in Cote d’Ivoire with 25 founding members making Addis Ababa its secretariat seat.

The African Federation of Public Health Associations (AFPHA) is a non-profit federation composed of national associations of public health in Africa whose activities contribute to the strengthening of public health.
The 13th Congress

Continued from page 1

ties, events and extensive deliberations on important health topics of the century in relation to equity.

In this respect, in his opening speech, H.E Meles Zenawi, Prime Minister of the Federal Democratic Republic of Ethiopia, disclosed that the universally recognized massive income inequality within and among countries causes a major threat to macro-economic and social stability, often times resulting in inequality in accessing health services. Speaking about the Ethiopian case, he also said that the government has been trying to tackle the problem of inequality both from the income and health perspectives by providing free primary health care services to 90% of the population through the health extension program that the country initiated.

In discussing global health issues, Dr Luis Sambo, Director of WHO-Afro office on his part, said although major advances have been made in the health sector, more than a billion of the poor have not benefited. While developing countries especially those in sub-Saharan Africa suffer from both communicable and non-communicable diseases, some of the health inequalities witnessed could have been averted through the adoption of relevant health and economic policies, he added.

Dr Sambo recommended that achieving global health equity requires a new thinking of health system which is subject to social, political and economic issues and policies. The issues of maternal, newborn and child health were top on the agenda discussed by health experts of various nations in the congress identifying challenges and opportunities in relation to efforts that are being made towards meeting these particular MDG goals.

As the target year of 2015 is fast approaching, the achievement of the health Millennium Development Goals (MDGs) in general were high among the main topics debated and discussed at the Congress.

Talking about the Ethiopian case, Roman Tesfaye, Director General for Policy Planning and Financing in the Ministry of Health stated that Ethiopia is implementing a comprehensive, well integrated policy and strategy to increase access to primary health care services, which focuses on prevention, promotion and control of communicable diseases and is pro-poor and pro-rural in nature. To achieve the MDGs in the remaining three years, Roman underscored the need to excel service delivery; health governance and health infrastructure facilities, among others.

Overall, it was said that despite some encouraging results, a dramatic acceleration of investment and action is required if Ethiopia is to meet the MDG related to maternal and child health by 2015.

The congress is already being celebrated as a land marking success for Ethiopia and Africa having attracted more than 3500 health professional from around 116 countries,

Continued on page 10.....
Condolence

EPHA is deeply shocked and saddened by the sudden tragic death of Tewdros, Mekasha Mengistu, a dedicated public health professional as well as active member of EPHA, in a car accident that was happened on April 23, 2012 while he was traveling from Hawasa to Addis Ababa to attend the 13th World Congress on Public Health.

With this condolence message, EPHA would like to express its deepest sympathy to his family members, friends, colleagues and all those who know him closely.

Tewdros was married and a father of a baby boy.

Life is eternal, and love is immortal
And death is only a boundary line,
And a boundary line is nothing,
just the limit of our sight.

“The Congress addressed the enormous challenges and opportunities facing public health worldwide in making progress towards collectively attaining global health equity.”

Dr. Aizeldin Ibrahim, Dubai, United Arab Emirates

“The 13th World congress has been an amazing five days of hard work and reservoir of knowledge, experience and good practices.”

Mengistu Asnake, MD, MPH, Ethiopia

“I think that I may speak on behalf of my colleagues here in Geneva too: we had a great experience in Addis, both on the scientific and human side! Thanks to you all in Ethiopia!”

Bettina Prof. Bettina Borisch, MD, MPH, Genève

Feedbacks
Continued from page 3

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Participants of the 13th
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larger picture of the HEP taking place at the national level.

Among others, the visitors observed demonstration of the effect of the long-term insecticides, bed-net for malaria prevention, model for hazardous waste management and simple pit latrine system display, antenatal care, safe delivery and immunization units that are functional within the health posts and was followed by a meticulous discussion.

Along with the health posts instituted nearer to rural community, model families that have registered successful results from the health extension program were visited in Bishoftu and Selale towns as HEP is a community-based health service delivery program whose educational approach is based on the diffusion model family.

At the conclusion the tours, international visitors expressed that they were extremely impressed with the design, implementation process, and achievements of the health extension program packages (16) that are being delivered in four major components. Some also said that they got adequate insight on the current health preventive and promotional activities taking place within the sector in Ethiopia.

The field visit to the health posts was organized by EPHA in collaboration with the Federal Ministry of Health as part and parcel of the 13th World Congress on Public Health program. The group consisted of people coming from different corners of the world (Zambia, China, Austria, Canada, Australia, Japan, England, India, Nigeria, Slovakia, USA, and Netherland, among others) continued on page 10 . . .
During the visit, the ceaseless efforts being made by the Ethiopian government in collaboration with partner organizations in promoting primary health care services deep into the rural and semi-rural communities was reflected through the health extension program which has been regarded as the backbone of the Ethiopian disease prevention and health promotion program. Three of the health posts visited namely Denkeke (Bishoftu), Butajira and Anan Jiru (Selale) are 58, 130 and 155 km away from Addis Ababa respectively.

The Congress was able to harness the synergy and strengths of innovation and experience from the developing and developed parts of our worlds by addressing the enormous challenges and opportunities facing public health sector worldwide in making progress towards collectively attaining global health equity. During the five days long congress, a total of 40 scientific papers in special sessions, 134 oral, 550 poster and 16 panel presentations were deliberated for local and international participants who were in attendance of the event.

The 14th World Congress of Public Health will be organized in Calcutta, India under the theme “Healthy People, Healthy Environment” from 11-15 February 2015.
8. Strengthen partnerships with other international federations and organizations as a means of taking common action on global public health priorities;

9. Strengthen networking and collaboration among national and regional public health associations to facilitate the sharing of experience and the building of capacity to enhance both influence on policy and action on health equity; and,

10. Bring to the 14th World Congress on Public Health, to take place in Kolkata (India) in February 2015, a progress report on how the public health association movement has achieved these aforementioned actions and contributed to achieving Healthy People – Healthy Environments.

We, the WFPHA, call on the World Health Organization to take up its leadership role on global public health and to revisit all the MDGs from a public health perspective to ‘close the gap’. We, the WFPHA, call on all governments and all parties to recognize and live up to their responsibility for global health equity. This includes working across sectors and disciplines and in true partnership with communities to:

1. Promote and attain social justice and equity in health by acting through a ‘Social Determinants of Health’ approach;

2. Accelerate the attainment of national and international development goals by building and redistributing resources to strengthen international, national and local capacity and leadership in public health;

3. Ensure that better context-specific, comprehensive and equitable targets covering universal health coverage and health for all are integrated into and made more visible within the MDGs as soon as possible;

4. Enhance and strengthen, both numerically and in capability, the public health workforce, in addition to developing new and effective strategies to retain qualified health professionals;

5. Combat fraud and corruption, as these are major determinants of health that affect all, but especially the poor and vulnerable;

6. Recognize physical and mental disabilities and injury prevention as critical components of a public health approach to health equity; and,

7. Fulfill their financial pledges in respect of the MDGs and to, in addition, fulfill their pledges with respect to the Paris Declaration and to the political declarations on Non-Communicable Diseases and the Social Determinants of Health.

We, the WFPHA, call on the various communities represented at this 13th World Congress on Public Health to engage with their governments and other stakeholders, including their national public health associations, to formulate and put into place the conditions that support healthy environments and healthy communities, and the attainment of health equity.