



DIALOGUE

PRIORITIZING HEALTH: IMPOSSIBLE OR “NEGLIGIBLE”?

In the face of countless challenges on the global agenda – from conflicts and political and economic crises to fast-moving changes of every sort – Doctors with Africa CUAMM remains laser-focused on the most critical issues for vulnerable communities: health service access, equity and coverage.

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In an increasingly interconnected world where information travels at the speed of light and the global issues on political and media agendas pile up one on top of the other, health seems to have lost its place of honor. This phenomenon is especially pronounced in Africa, a continent grappling with an unprecedented combination of demographic, economic and health challenges. Despite the global rhetoric surrounding the importance of universal health coverage (UHC), the concept seems to have lost its meaning by now.

Yet the declining focus on the issue stands in cruel contrast to the reality on the ground. For decades dominated by infectious diseases such as HIV, malaria and tuberculosis, the epidemiological landscape in Africa has changed dramatically in recent years, with chronic noncommunicable diseases (NCDs) like diabetes, cardiovascular disease and cancer now emerging as major threats to public health. Africa's rapid population growth adds yet another layer to the crisis: the United Nations projects that the continent's population will rise from 1.4 billion in 2021 to about 2.5 billion by 2050¹, with more and more individuals living beyond the age of 60. This ageing population is already bringing about a new reality, with the growing numbers of people affected by age-related NCDs posing an unprecedented challenge to the continent's fragile health systems.

In this issue of *Health and Development*, we will primarily explore how NCDs are affecting countries in the world region we know best – Africa – but also their impact on other low- and middle-resource nations. We will delve into the crucial issue of UHC, and the specific needs and challenges of African countries in this context. We'll also take a look at the WHO's PEN-Plus strategy, which aims to expand access to care for those affected by NCDs by decentralizing it away from central hospitals to primary health care facilities, and take you with us into the field to survey our own work towards UHC.

In Tanzania's Tosamaganga hospital, CUAMM is working on both the optimal management of NCD patients and the prevention of diseases like diabetes and hypertension. In Mozambique, we've conducted research that will be key to improving our work on the ground: a study on the health costs of NCDs. Also in Mozambique, and highlighting the importance of good mental health, we will hear about the use by two young researchers of an innovative method to prevent and treat mental health disorders among adolescents. Last but not least, we will tell you about our work in Ukraine, a country at the gates of Europe that has been at war for two years, where we are helping to support a fragile and crisis-stricken health-care system.

Ours is a collective effort, one in which we are increasingly engaged in comprehensive health initiatives on a continent faced with multiple and unremitting challenges. Lack of funding, weak health infrastructure and a dearth of qualified personnel are just some of the factors that make UHC so difficult to achieve. Health cannot be seen as an exclusively technical or medical issue; it must also be viewed as a matter of global social justice: the *right* of people to access quality health services, which will vary from country to country, based on financial protection mechanisms to help prevent the most vulnerable populations from becoming impoverished through catastrophic health spending. The key to building resilient health systems capable of meeting the needs of a rapidly growing and ever-changing population? An inclusive and participatory approach that puts health back at the center.

NOTES

¹ ONU, *World Population Prospects 2024*
<https://population.un.org/wpp/>