

ACTION ON RECOMMENDATIONS OF THE FIFTH COMMONWEALTH MEDICAL CONFERENCE

Regional Action

Paper prepared by the Commonwealth Secretariat

The Wellington Medical Conference made a number of recommendations for regional action. The following paragraphs are mainly based on reports received from the Regional Secretary, Commonwealth Regional Health Secretariat for East, Central and Southern Africa (Arusha); the Executive Director, West African Health Community Secretariat (Lagos); and the chief of the Health Section, Caribbean Community Secretariat (Georgetown). Some additional information is included on action in the Pacific region, although this is not comprehensive.

BRAIN DRAIN

2. The conference recommended that:

- (a) regional or sub-regional groups should be established to consider health manpower planning problems and appropriate distribution of resources;
- (b) regional coordinators should be appointed to facilitate exchange of information between sub-regional groups and ensure a common approach;
- (c) studies undertaken by groups should include consideration of regional professional standards and systems of registration and the establishment of regional training centres; such studies could be extended to inter-regional and Commonwealth-wide levels.

3. In East, Central and Southern Africa brain drain to countries outside the region is not seen as a major problem, although there is a significant movement of doctors within the region. There is also movement of doctors, within countries, from rural to urban areas. The remedy would seem to lie with individual governments through the improvement of conditions of service and the re-orientation of doctors' and nurses' training to prepare them to serve in areas of need. Most governments are reported to be taking action accordingly.

4. In West Africa efforts to reduce the problem are being made through the West African Postgraduate Medical College; through the increase in the number of medical schools in the region; through training courses with a regional intake for such health professions as pharmacy, radiography, laboratory technology and specialist nursing; and through encouragement and support for such bodies as the West African Pharmaceutical Federation and the West African College of Nursing.

5. The West African College of Surgeons and the West African College of Physicians (constituent colleges of the West African Postgraduate Medical College) held their first professional examinations in October 1979 and April 1980, and the response of candidates from countries in the region has been encouraging. The West African College of Nursing has recommended five priority areas for post-basic training: community health nursing, maternity and child health and midwifery, mental health nursing, nursing education and administration, and higher nursing education for trainers of teachers. Many of the teachers required to train these cadres are already being trained in the region. The West African Pharmaceutical Federation is promoting the expansion of training for pharmacists in the region. Laboratory technicians, radiographers and hospital secretaries are also being trained in the region, and the possibility of establishing a regional centre for training trainers of primary health care supervisors is under consideration.

6. The Caribbean Community Secretariat plans to set up a special unit to deal with the provision of health manpower for the Community, giving special attention to attracting Caribbean professionals back from Britain and North America. Community medicine has become a definitive part of the medical curriculum at the University of the West Indies. The regional project for the education and training of allied health personnel has been comprehensively evaluated and the continuation phase has been approved by the Caribbean Health Ministers Conference. A Canadian grant was obtained for the regional examination of nurses' registration, and the second five-year plan of work for the Regional Nursing Body was completed. A multi-sectoral Caribbean Regional Training Project is in operation, with the health administrations utilising it to the full.

7. The regional University of the South Pacific does not have a medical faculty (although the establishment of one has been under discussion) and the qualifications awarded by the Fiji School of Medicine, a national institution with a regional intake, are not recognised internationally as full professional qualifications and thus do not constitute a take-off point for specialist medical training. There is consequently little brain drain, but most specialists working in the Pacific island countries are necessarily expatriates.

MAINTENANCE OF MEDICAL EQUIPMENT

8. The Medical Conference recommendation for regional action was that:

- (a) regional agencies should promote training of technical personnel on a regional basis, where appropriate in collaboration with WHO or other regional organisations;
- (b) regional agencies should study the possibility of purchasing expensive equipment from a common source on a regional basis, and should provide advice (e.g. model contracts) to assist countries in individual purchases.

9. The first two-year regional course for medical technicians from East, Central and Southern Africa, at the Swaziland College of Technology, ended in December 1979, the 19 students coming from nine countries

(including Zimbabwe), and a second course is in progress. Arrangements have been made for defective equipment from neighbouring countries to be sent to the college for repair by course participants. The desirability of standardising equipment is generally recognised but so far no progress with regional action in this direction is reported.

10. Students from several countries in eastern Africa, as well as from West Africa, have been trained at the WHO inter-country training project in Freetown. It is reported that 11 available places on the course have not been filled, however, because appropriate posts for returned trainees have yet to be created in some countries.

11. In the Caribbean, a multi-disciplinary team has visited all the countries to survey the extent and severity of the problem. The resulting regional project for the maintenance of hospital equipment and other health care facilities has been delayed by funding constraints, however, and the project is being reviewed.

12. In the South Pacific the first WHO regional course in maintenance and repair of medical equipment began in 1979. The course is located in New Zealand and trainees have been sent from most of the island countries of the region.

PHARMACEUTICALS

13. Regional action called for by the conference was that:

- (a) regional multi-disciplinary bodies should make recommendations on regional contracting for medicinal supplies, planning for manufacture within the region, the medical use of indigenous natural products, and the introduction of essential pharmaceuticals or a regional formulary;
- (b) these regional bodies should also make recommendations on the provision of pharmaceutical advice, the adoption of regional pharmaceutical standards, the establishment of regional testing laboratories, and the training of graduate and diploma pharmacists on a regional basis.

14. A regional investigation in East, Central and Southern Africa made by three experts (two from the region) resulted in recommendations on joint contracting, quality control and other pharmaceutical matters being submitted to governments. Auxiliary pharmacists have been in use in this region for many years. Training courses in pharmacy in Nairobi and Dar es Salaam have places available for non-nationals. Courses in medical storekeeping, with a regional intake, are planned. A standing regional advisory committee on drugs has recently been established to consider, and make recommendations on, importing policies, legislation, formularies, storage, licensing, quality control, training and indigenous medical resources.

15. Although bulk contracting for pharmaceutical supplies is considered impracticable in West Africa, it has been agreed that organisations in the region concerned with pharmaceuticals should liaise with each other on procurement and manufacture of medicinal supplies, on the exchange of market information, and on the development of indigenous

medicinal resources. It has also been agreed that testing laboratories in the region should exchange technical data, and that there should be cooperation in the training of pharmacists. The West African Pharmaceutical Federation has been given authority by the Assembly of Health Ministers to promote cooperation, and the chief pharmacist of each member country of the West African Health Community is a member of the Federation's governing council.

16. The West African Pharmaceutical Federation has established committees on education, quality control, professional practice and legislation, drug administration and registration, and research on traditional medicines, and training curricula are being harmonised. Training programmes are being undertaken and places at existing schools of pharmacy in Ghana and Nigeria are available for students from other member countries of the community. The Pharmaceutical Federation is formulating proposals for the development of centres for quality control and for research into herbal medicines. It has submitted to governments a paper on drug policy, and a booklet on malaria chemotherapy has been published. It is also promoting the compilation of national drug formularies based on the WHO essential list, the registration of drugs, the purchase of generic rather than proprietary drugs, the improvement of arrangements for storage and distribution, and international co-operation to combat drug trafficking. A regional conference on the control of pharmaceutical products was held in February 1980 and a series of short seminars on medical storekeeping began in August 1980.

17. Eight Caribbean countries are now participating in joint contracting for 80 medicinal products. Orders are placed by the Caribbean Community Secretariat Health Section. A seminar/workshop on pharmaceuticals, jointly organised by UNCTAD and the Caricom Secretariat, in August 1980 is expected to strengthen Caricom activities in this field. Funds are being sought for the first meeting of the regional advisory panel on pharmaceuticals, and also for the training of supply officers. A regional drug testing laboratory is being set up in Jamaica.

18. Progress is reported with the project for a South Pacific Pharmaceutical Service which it is hoped will be launched in 1980. Sponsored by the South Pacific Bureau for Economic Cooperation (SPEC) and WHO, the aims of the service are to operate a drug procurement, storage and distribution system which will ensure the supply of drugs of acceptable quality at reasonable cost, and to promote the use of drug lists and formularies containing non-proprietary essential drugs selected on the basis of local health needs. A list of essential drugs for use by all South Pacific governments has already been prepared and circulated.

19. Regional action in South East Asia, in which Commonwealth countries have been involved, has included a seminar on quality control of pharmaceuticals held in New Delhi under WHO auspices and another in Colombo on drug policies and management. The WHO Regional Committee for South East Asia is giving continuing attention to drug policies, including those involving traditional medicine.

OTHER RECOMMENDATIONS

20. Although other recommendations of the Medical Conference - concerning community participation, food and nutrition, the role of health ministries and medical schools, and changing health care delivery

systems - were not directed specifically towards regional action, there have been a number of regional developments in conformity with them.

21. Health Ministers of East, Central and Southern Africa have authorised the holding of a seminar for health educators. In the Caribbean a workshop on school life education and family life education was held in 1978 and a workshop on health and youth in 1979; a regional programme on occupational health and safety is being prepared. The Caribbean Community Secretariat is continuing to encourage the use of community health workers as an effective way of extending health care and promoting community participation. The South Pacific Commission (SPC) has a health education officer and the courses at its community education training centre have a strong health education component. SPC has also organised special seminars on health education and held a regional workshop in 1979 which drew up practical guidelines for the planning and implementation of health education activities in the Pacific islands.

22. A workshop on nutrition was held in East, Central and Southern Africa in 1979 to work out strategies for regional and national action. In West Africa training facilities for nutritionists at Ibadan have been made available for trainees from other countries in the region. The Caribbean Community Secretariat, working closely with the Caribbean Food and Nutrition Institute, is developing a comprehensive multi-sectoral regional food and nutrition strategy, and a nutrition element has been introduced into the Caribbean Food Plan. A draft food and nutrition strategy is to be presented at a regional workshop in Jamaica in November 1980. Technical meetings organised by the Caribbean Food and Nutrition Institute have produced guidelines for the development of food and nutrition councils and also on feeding the weaning age-group. The Institute continues its research and advice to governments on food and nutrition and on the prevention of nutritional diseases. The South Pacific Commission has organised nutrition seminars and nutrition is included in the curriculum for its community education courses.

23. A meeting of deans of medical schools was held in East, Central and Southern Africa in 1978. Health Ministers agreed in 1979 that countries should establish joint consultative committees of representatives of ministries of health and medical schools to harmonise planning, promote coordination and ensure the appropriateness of curricula. The relationship between ministries and medical schools is reported to be a priority interest of the West African Postgraduate Medical College, which is organically linked to the West African Health Community. In the Caribbean the Vice-Chancellor of the University of the West Indies has appointed a committee comprising representatives of ministries of health, the medical faculty and the practising medical profession to coordinate the activities of the University, which trains physicians, and the ministries, which employ them. Although the University of the South Pacific, which serves the Commonwealth island countries of the region, has no medical school, it provides public administration training in health management. It has been proposed that a third campus of the University should be located in the Solomon Islands, where courses designed to meet island governments' needs would be held for assistant health inspectors and health extension practitioners and there would be post-basic training for nurses.

24. Regional meetings of representatives of health planning units have been held in West Africa and further meetings are planned; the 1979 meeting examined the financing of health services. The West African Health Community has made grants to paramedical training centres

in all five of its member countries, and has started a scheme to assist The Gambia with short-term visits by specialists. The statement of regional health policy, adopted by the Caribbean Health Ministers Conference, takes into account recommendations of the Commonwealth Medical Conference concerning the need to ensure that health care delivery systems are determined by the assessed health needs of the people of the region.

25. The improvement of the administration of health services is being promoted in the regions. Annual health management courses are held in both African regions with support from the Commonwealth Secretariat (CFTC). In the Caribbean, under a three-year health management project mainly funded by USAID, about 1,000 health personnel at all levels are being trained in basic management skills. Under this project, technical assistance is also being provided in such areas as health planning, organisational analysis and the development of district health teams. Workshops in primary health care and in health information systems are also being conducted.