

Prof Graham Wright



SAHIA – EWG Chairperson
HELINA – EWG Member

Chairing tonight seminar

Welcome to you all

Some words about tonight's topic and
Speaker

The health of people in sub-Saharan Africa is a major global concern. However, data are weak, and little is known about how people in the region perceive their health or their health care.

In comparison to other regions of the world, sub-Saharan Africa has the lowest ratings for well-being and the lowest satisfaction with health care. It also has the second lowest perception of personal health, after only the former Soviet Union and its satellites.

Sub-Saharan Africa's health challenges are numerous and wide-ranging. Most sub-Saharan countries face a double burden of traditional, persisting health challenges, such as infectious diseases, malnutrition, and child and maternal mortality, and emerging challenges from an increasing prevalence of chronic conditions, mental health disorders, injuries, and health problems related to climate change and environmental degradation.

Although there has been real progress on many health indicators, life expectancy and most population health indicators remain behind most low-income and middle-income countries in other parts of the world.

HIV prevalence is positively correlated with perceived improvements in health care in countries with high prevalence. This is consistent with an improvement in at least some health care services as a result of the largely aid-funded rollout of antiretroviral treatment.

Aid to sub-Saharan African countries has increasingly been targeted toward health. The region experienced remarkable gains in life expectancy after 1950. However, in the countries that were most seriously affected by the HIV/AIDS epidemic, much or all of the gain was lost by 2000.

*Deaton Angus. The great escape: health, wealth, and the origins of inequality.
Princeton (NJ): Princeton University Press; 2013*

The average Gini coefficient in Africa stands at 0.43, constituting 1.1 times the coefficient for the rest of the developing economies (at 0.39), therefore depicting extreme inequality in income. Specifically, the Gini coefficient for countries such as Namibia, Botswana, South Africa, and Zambia lies above 0.55.

South Africa is the highest inequality in income distribution in the world at 0.65



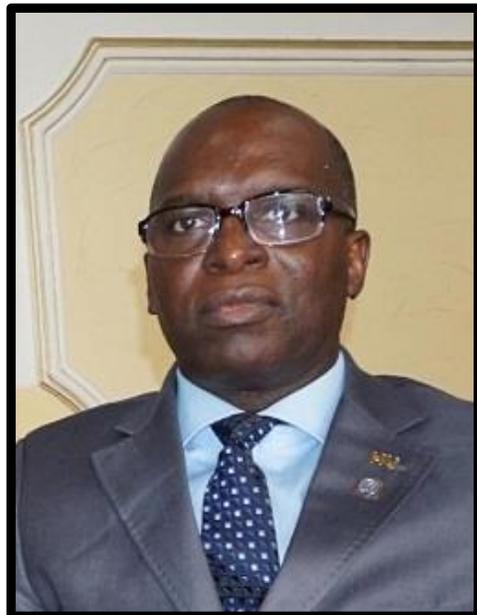
University of Liverpool

We both have an MBA

He gained his with University of Liverpool
I was born in the hospital next door

My son and daughter-in-law both completed their medical training at the university





Armand Mpassy-Nzoumba

Managing Director Blue Rose Projects

Msc in Electrical Engineering

MBA

GNU Health: *Building the 21st-century hospital with GNU Health. A case study in Africa*

Armand Mpassy-Nzoumba

is the managing director at Blue Rose Projects.

He has strong experience in implementing eHealth projects.

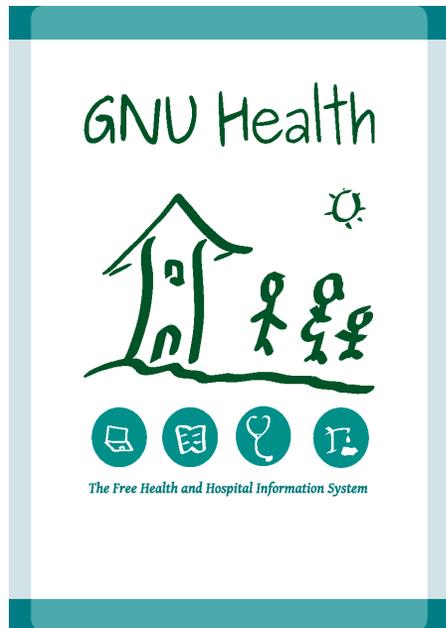
He worked for 20 years as IT manager and IT officer at WHO in Africa, a research worker at the Technological University of Berlin (Germany) and assistant lecturer in computer science at the University in Brazzaville (Congo)

He contributes to the GNU Health core team and is an activist in providing IT education for the youth in Africa.

Building the 21st-century Virtual Hospital with GNU Health

A case study in Africa

By Armand MPASSY NZOUMBA



GUIDING PRINCIPLE

- Health is a human right that must be accessible to all
- Health is a productive sector; investing in health brings positive economic returns
- Prevention is the most cost-effective way to reduce the burden of disease

THE REALITY

- A lot has been achieved
 - Immunization,
 - Malaria mortality
 - HIV/AIDS and TB

Africa still has the majority of countries with the worst indicators for maternal mortality, infant mortality, communicable disease morbidity and mortality.

Poor Health outcome -
Negative impact in the
development of AFRICA



Traditional Health Facilities

Through the Eyes of a few Africans

- A patient with a wound died two weeks later after being treated by different doctors in the same hospital (lack of follow up - lack of medical record)
- Diabetic patient dies after receiving an intravenous drip
- A patient who is suffering from high blood pressure cannot longer afford the rising costs of her treatment
- A cholera outbreak get unnoticed due to delayed statistics
- A good medical history could have prevented that
- A medical doctor who studied in France and return back to work in her home country is shocked to receive her first monthly salary:
- 400 USD
- Stock of HIV/AIDS medicine expire due to the lack of stock management system

THE VIRTUAL HOSPITAL

GNU Health



The Free Health and Hospital Information System

INTEGRATED PATIENT CARE



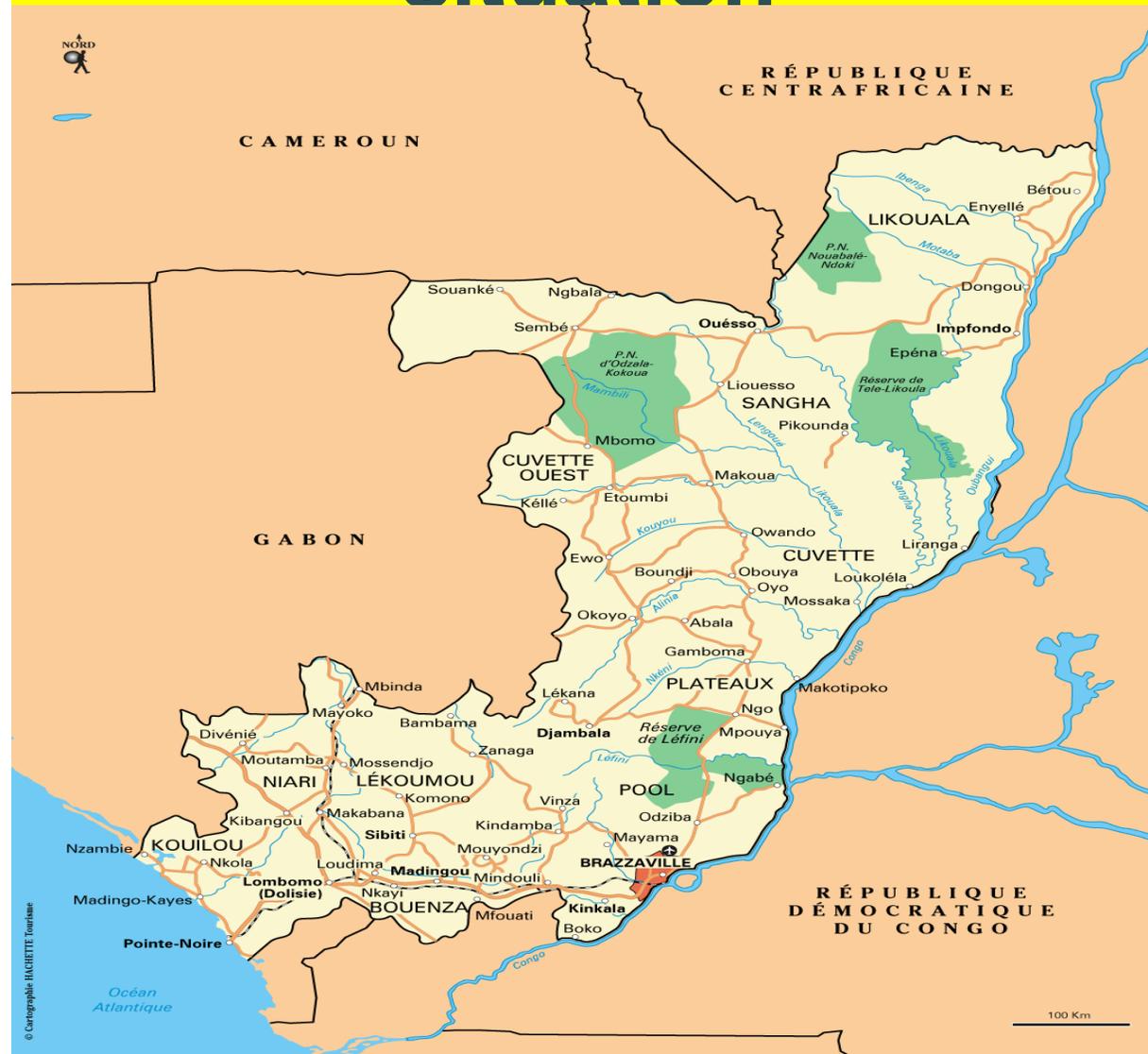
A single electronic patient record across the country



Tools for diagnosis and prescription



Real-time monitoring of the epidemiological situation



Reduction of the hospital's operational costs



Improved cash flow and hospital revenues



OUR ACHIEVEMENTS

Bikop Hospital in Cameroon



Bafia Hospital in Cameroon



Medical Research Centre Franceville - Gabon



In progress

Makélékélé Hospital - CONGO



Talangai HOSPITAL Brazzaville - CONGO



GNU Health Virtual Hospital

Through the Eyes of a few Africans

- A patient with a wound survived two weeks later after being treated by different doctors in the same hospital (thanks to a good electronic patient record)
- A patient avoid getting High Blood Pressure thanks to proper prevention
- A diabetic patient survives because the doctor avoids giving him an intravenous drip
- A cholera epidemic is avoided because the Director of the hospital gives the alert after looking at his dashboard
- The stock of HIV/AIDS medicine is dispensed on time thanks to the stock management functionality

CHALLENGES

- Funding issues
- Capacity of the implementation Team
- Resistance to change

OUTCOME

- Improved Hospital revenues by 100%
- Improved quality of care
- Lab results are issued in a timely manner
- Job creation
- Positive environmental impact thanks to reduction of paper consumption
- Low cost of ownership
- Low level of maintenance thanks to robust server and system
- `Developped new implementation approach – The Virtual hospital
- Cellphone adoption bridge to GNU Health adoption

**MERCI
THANK YOU
MATONDO**

