



# ACHAP QUARTERLY



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# FOREWORD

As we continue our journey towards stronger health systems, we reflect on the impactful strides ACHAP has made this year. Our focus on member engagement, empowerment, and support has not only strengthened individual organizations but also enhanced our collective ability to drive meaningful change in Africa's healthcare landscape.

ACHAP remains deeply committed to helping our members build their organizational capacity and improve overall performance. Through a series of tailored training programs, workshops, and hands-on technical support, we have enabled members to optimize their operations, leverage strategic resources, and create more sustainable approaches. These initiatives are designed to address the unique challenges and opportunities within each organization, fostering growth that aligns with ACHAP's broader vision for health equity and accessibility across the continent.

This collaborative journey would not be possible without the dedication of our members, partners, and supporters. Thank you for your ongoing commitment to our shared mission. We look forward to your continued engagement as we advance ACHAP's mission in the coming months.

*Dr. Djékadoum Ndilita,*  
ACHAP Board Chair.

## IN THIS ISSUE



### OUR LATEST PUBLICATION

**REPRESENTATION AT THE AIDS CONFERENCE, ELSEVIER VACCINE CONGRESS, AND UNGA JOINT CONSULTATION ON MPOX**

### HEALTH SYSTEMS STRENGTHENING

### UPDATES FROM OUR MEMBERS

# STRENGTHENING COMMUNITY SYSTEMS: OUR LATEST PUBLICATION

ACHAP is proud to be recognized by Medicus Mundi Switzerland for our unwavering commitment to enhancing pandemic preparedness across Africa. Through our work, we emphasize the importance of community-driven approaches to health security, particularly in partnership with faith-based organizations. As highlighted in the article, our initiatives focus on building local capacities, ensuring the availability of essential resources, and fostering resilience within healthcare systems.

Our work is not just about responding to crises but about proactively empowering communities to better manage and mitigate future health challenges. By working closely with grassroots organizations, we ensure that health interventions are context-specific and sustainable, directly addressing the unique needs of the populations we serve. The recognition by Medicus Mundi underscores the vital role we play in driving these efforts forward, ensuring that communities are not only prepared but also capable of leading the charge in safeguarding public health.

Read the paper [here](#).

## CONTINUOUS ENGAGEMENT WITH GLOBAL HEALTH ACTORS

### **25th International AIDS Conference- Munich, Germany.**

ACHAP made significant contributions to the global discourse on HIV/AIDS at this year's AIDS Conference in Munich. Our team actively engaged with a diverse group of experts, and stakeholders committed to advancing HIV/AIDS treatment, prevention, and community-driven solutions. Through participation in workshops, sessions, and key networking events, we gained valuable insights into the latest innovations in HIV/AIDS care and contributed to vital discussions around the UNAIDS framework, which highlights the essential role of community-led responses. ACHAP also brought attention to the impactful role faith-based organizations play in HIV prevention and care.

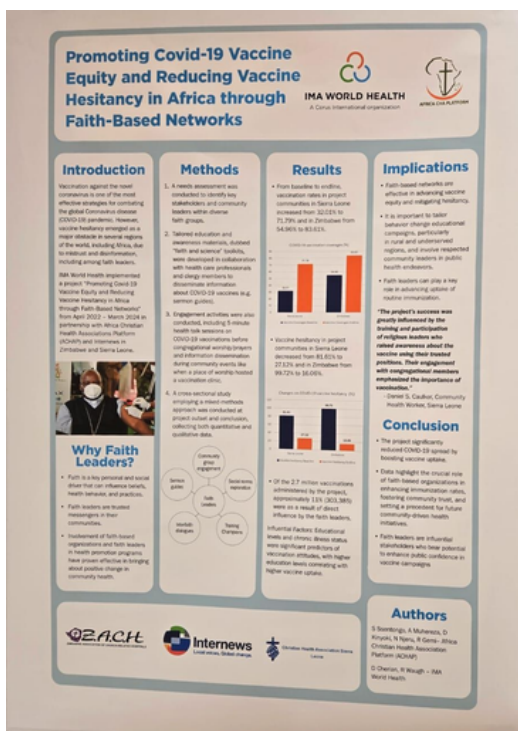
Our work in addressing HIV challenges, inequalities, stigma, and discrimination is aimed at educating religious leaders and healthcare workers and empowering them to provide respectful care to HIV patients across the continent.



ACHAP presentation at the AIDS conference.

## Elsevier Vaccine Congress- Lisbon, Portugal

ACHAP, through the CoV-FaB project in collaboration with IMA World Health, continues promoting COVID-19 vaccine access via faith-based networks across Africa. This year, we were represented at the Elsevier Vaccine congress, where we had the opportunity to showcase our engagement with faith leaders in vaccine advocacy towards vaccine equity in Africa.



ACHAP and IMA World Health at the Vaccine Congress.

Our work in vaccination extends to zero-dose mapping in the SAHEL region, through our partnership with GAVI. We continue to empower community health systems to locate zero-dose and under-immunized children in the hardest-to-reach parts of Africa to ensure that all children receive life saving vaccines.

At UNGA 2024, ACHAP joined the faith community discussions at the SDGs Roundtable 2024. The event provided an invaluable platform to highlight ACHAP's work, particularly in two key areas: In the first round, Interfaith Contributions to SDG Achievements, we underscored the impact of interfaith collaborations on health and wellness. We shared insights on how these partnerships help bridge healthcare disparities, promote access to quality care, and contribute to overall well-being.

In the second round, Civil Society Best Practices and Initiatives for the SDGs, we explored the pivotal role of faith communities as agents of change in addressing social, economic, and environmental challenges.

We are honored to have had this opportunity to exchange ideas with global health partners, united in our commitment to tackle the world's most pressing health issues together.

## JOINT CONSULTATION ON MPOX

Following the Mpox outbreak in numerous countries in Africa, faith-based organizations have proven instrumental in strengthening pandemic preparedness and response efforts. ACHAP, in collaboration with EPN and AACC, hosted a joint consultative webinar focused on fostering an in-depth understanding of Mpox, and looking into country-specific pandemic preparedness and response plans. This event featured valuable insights from Difam, Africa CDC, and frontline workers from Burundi, whose on-the-ground experiences highlighted the urgent need for cross-border collaboration and strategic responses.

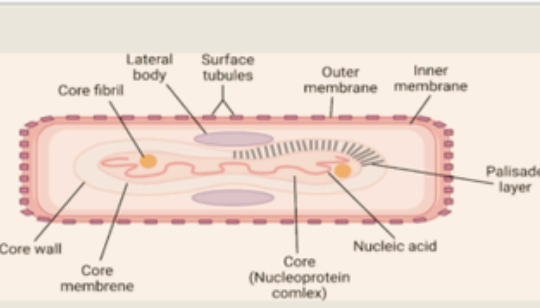
The Beyond Borders webinar emphasized the vital role of faith leaders in combating Mpox through effective risk communication, reducing stigma, dispelling misinformation, and promoting vaccine advocacy. The challenges in the Democratic Republic of Congo (DRC) highlighted how cultural practices, weak health systems, and stigma complicate Mpox response efforts, reinforcing the need for a One Health approach that addresses poverty and food insecurity to prevent zoonotic diseases. With over 60 faith leaders and healthcare professionals in attendance, the event underscored the importance of collaboration among faith-based organizations, governments, and international actors.

As we continue to monitor the Mpox situation in Africa, we are committed to support our members to conduct community-based surveillance, advocate for vaccine availability, and train healthcare workers on IPC and case management.

To find out more about our work in Mpox response, click [here](#).

# MPOX FAQ

Since the declaration of Mpox as a public health emergency, we have embarked on a mission to spread awareness and ensure that healthcare workers across Africa gain understanding of the disease as they work on response and mitigation. Here are some of the most frequently asked questions:



## WHAT ARE THE SIGNS AND SYMPTOMS OF MPOX?

Signs of mpox include:

- Fever.
- Rash.
- Swollen lymph nodes.
- Chills.
- Headache.
- Muscle aches.
- Fatigue.

After exposure, it may be several days to a few weeks before you develop symptoms.

## Visual examples of mpox rash



Photo Credit: NHS England High Consequence Infectious Diseases Network

## WHAT IS MPOX?

Mpox is an illness caused by the monkeypox virus. It is a viral infection which can spread between people, mainly through close contact, and occasionally from the environment to people via things and surfaces that have been touched by a person with mpox. In settings where the monkeypox virus is present among some wild animals, it can also be transmitted from infected animals to people who have contact with them.

## HOW IS MPOX SPREAD?

Mpox spreads when you come into contact with an animal or a person infected with the virus.

## IS MPOX CURABLE?

Mpox is usually a self-limited disease (gets better without treatment) with symptoms lasting from two to four weeks. Following diagnosis, your healthcare provider will monitor your condition and try to relieve your symptoms, prevent dehydration and give you antibiotics to treat secondary bacterial infections if they develop.

## SOME USEFUL RESOURCES:

<https://www.who.int/news-room/questions-and-answers/item/mpox>

<https://africacdc.org/news-item/africa-cdc-declares-mpox-a-public-health-emergency-of-continental-security-mobilizing-resources-across-the-continent/>

<https://www.afro.who.int/news/african-region-faces-unprecedented-surge-mpox-cases>

<https://africacdc.org/disease-outbreak/outbreak-brief-24-mpox-in-africa-union-member-states/>

## HOW DO YOU PREVENT MPOX?

If you are at risk for mpox, getting vaccinated helps stop the spread. Other forms of prevention include decreasing human contact with infected animals and limiting person-to-person spread by maintaining social distance and hand hygiene.



## HEALTH SYSTEMS STRENGTHENING

As part of our mission to strengthen health systems across Africa, ACHAP is actively leading implementation of the innovative Assess, Commit, Relate, and Deliver (ACORD) tool in our member organizations to drive transformation, sustainability, and resilience in healthcare delivery.

In Chad, ACHAP's team conducted a five-day assessment, providing targeted recommendations to help our members understand capacity holistically, adapt to changing needs, and explore partnerships for growth. Similarly, in Lesotho, ACHAP's efforts focused on fostering long-term partnerships and building lasting growth within organizations. These initiatives reflect our commitment to creating meaningful, sustainable engagement within and among our members.

## FROM OUR MEMBERS

### CHAD

In September 2024, the Ecumenical Diaconia Reference Group of the World Council of Churches (WCC) held its first in-person meeting in Yerevan, Armenia. ACHAP was represented by our Chad member, the Evangelical Association for Health in Chad (AEST), who contributed to critical discussions on today's global challenges, opportunities, and their impact on diaconal work. The Reference Group identified three core work streams for the upcoming year: climate justice and diakonia, diaconal collaboration and decolonization, and capacity sharing with a focus on diaconal formation and best practices. Each of these streams aims to empower communities and church bodies to build sustainable, resilient networks that support justice, equity, and unity. Together, the group called upon churches and communities to embrace a long-term perspective, encouraging sustainable relationships that recognize and mobilize God-given potential, strengthen mutual support, and advance the shared vision of a global "Pilgrimage of Justice, Reconciliation, and Unity."



*ACHAP Board Chair, Dr. Ndilta, at the meeting in Yerevan.*

### ZIMBABWE

Good data practices are essential for effective monitoring and evaluation, particularly in healthcare settings where accurate information can drive impactful decision-making. Recently, participants from the Zimbabwe Association of Church-Related Hospitals (ZACH) successfully completed the DHIS2 Tracker Data Capture and Analysis Training in Zanzibar, supported by ACHAP. This training aimed to enhance participants' skills in data capture and analysis, reinforcing their reporting practices to ensure the reliability and integrity of the data collected. With improved data handling techniques, healthcare organizations can better track patient outcomes, identify trends, and allocate resources more efficiently. Furthermore, robust data practices enable stakeholders to assess program effectiveness, make informed policy decisions, and ultimately improve health service delivery. By investing in training initiatives like this, organizations like ZACH can strengthen their capacity to monitor health interventions and contribute to more resilient health systems.



*Participants at the DHIS2 training in Zanzibar.*

## MALAWI

Our Malawi member, CHAM, has officially joined the Africa Clear Sight Partnership. The program kick-off began with a comprehensive training session for CHAM staff at the CHAM Secretariat in Lilongwe. Participants were equipped with skills to use simple screening charts to effectively identify presbyopia in patients. The training also covered tips on how to care for reading glasses, along with a session on data recording and reporting.

This program is a significant step towards improving vision health and enhancing the quality of life for underserved populations in Malawi.



*ACSP project kickoff and training in Lilongwe.*





*ACHAP board members at the 2024 board retreat in Mombasa, Kenya.*



*Support supervision for NCD project implementation in Malawi.*

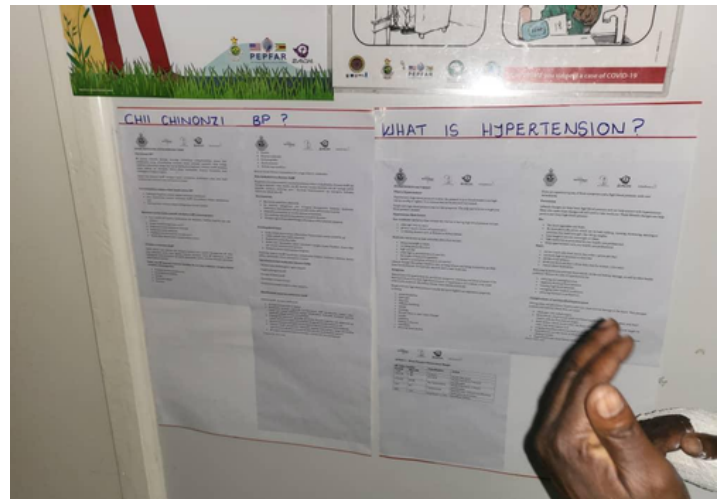


*NPI closeout exercise in Niamey, Niger*





*Capacity building on hypertension for Village Health Volunteers in Makonde district, Zimbabwe.*



*Community hypertension screening in Liberia.*



*Handing over a consignment of reading glasses, and presbyopia screening demonstration in Lilongwe, Malawi.*



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