Editorial Leaving no one behind

The African continent continues to be faced with myriad of challenges, particularly in the public health sector. A few figures exemplify the magnitude of the problem. Infant and maternal mortality remains stubbornly high, compared to other regions of the world. According to the Inter-agency Group for Child Mortality Estimation [1-2], the risk of a child dying before completing the first year of age was highest in the WHO African Region (55 per 1000 live births), over five times higher than that in the WHO European Region (10 per 1000 live births). Similarly, every day about 800 women die due to complications of pregnancy and child birth. Of the 800 daily maternal deaths, 500 occur in sub-Saharan Africa and 190 in Southern Asia, compared to 6 in developed countries. The risk of a woman in a developing country dying from a maternal-related cause during her lifetime is about 23 times higher compared to a woman living in a developed country [1-2].

Zooming-in, infant mortality in Namibia stand at 28 deaths per 1,000 live births in 2012, with an under-five mortality rate of 39 deaths per 1,000 live births. The maternal mortality rate in Namibia has almost doubled since 2000 and is now 200 deaths per 100 000 live births. The underlying causes of maternal and child deaths vary and include the lack of skilled personnel, as well as the long distances and delays in seeking care. In general, in Namibia and Africa, a weak health system is a major contributing factor.

In 2010, the number of doctors, in Namibia, was 910 with a density of 0.43 doctors per 1000 people. Nurses and midwives were 7 481, with a density of 3.51. About 81.5% number of births were attended by skilled birth attendants [3]. Although these numbers are relatively higher, compared to other countries in the region, not all places in Namibia are equally served. Rural and urban disparities are evident. On average, health facilities in urban area are available within 40 minutes travel time or a distance less than 5 kms [4]. However, about 60% of the rural population live further than 5 km from a health facility. Distance and travel time are the greatest impediments in the Northwest region. The San communities, for instance, live at an average distance of 80 km away from health facilities. Providing health care equitably may prove a challenge even in cases where there is abundance of resources.

African governments have identified the need to strengthen their health systems. Recently,



innovations through the use of mobile phones technologies, have been used to provide health care in remote and hard-to-reach rural communities. These mobile solutions are adaptable for any place and setting. This is what is called eHealth. The mission of eHealth is to build stronger health systems through the design and implementation of data-driven solutions that respond to local needs and provide under-served communities with tools to lead healthier lives. eHealth goal is to have tailored, tested and context appropriate programmes that should help health providers and partners to reach their goals of delivering better public health services for vulnerable communities. The overall goal is that health care should be enjoyed by all, where possible, thus leaving no one behind.

In this volume, Iyawa and Coleman have demonstrated how eHealth can be used in rural communities of Windhoek [5]. In their article they investigated how mobile phones can be used to improve health care delivery services in Windhoek rural health centres. The design and deployment of mobile solutions of eHealth, as exemplified by Iyawa and Coleman, depend on the theory of technology acceptance model (TAM). TAM is hinged on Perceived Usefulness (PU) and Perceived Ease of Use (PEU) of the technology for a specific purpose by the consumers. Added, roll-out of eHealth solutions require high coverage of mobile phone network. Moreover, with the proliferation of mobile phones in Africa and Namibia in particular, these solutions are here to stay. We must all embrace the advent of mobile technologies to provide innovative solutions to many ills Namibia is facing. To a large, extent this speaks to the poverty reduction theme of the current republic in Namibia.

References

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