



SHIELD in Africa, Inc.

"Strategic Healthcare Initiative Emphasizing Local Development"

Briefing on Congressional Actions for Global Health System Strengthening **Statement by Frank Glover, MD, MPH, DrPH, FACS**

CONGRESSIONAL AFRICAN STAFF ASSOCIATION

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My name is Dr. Frank Glover. I earned my MD degree from the Johns Hopkins School of Medicine. I also obtained my Doctor of Public Health in International Health (Health Systems) from the Johns Hopkins School of Hygiene and Public Health. I completed a research fellowship in epidemiology at The Johns Hopkins School of Medicine in the Department of Urology at which time I discovered the world's highest rate of prostate cancer in Jamaica. I am also a Board Certified Urologist and the Director of The Urology Institute & Continence Center in Albany, Georgia. I am president of SHIELD in Africa Inc., a US based NGO working to strengthen the health system in Liberia.

For the past three years I have spent four months per year working in various hospitals throughout Liberia. I have taken teams of up to fifty doctors and nurses several times per year. During this time period, we have taken care of thousands of medical and surgical patients. I have spent time rendering services of teaching, training, and patient care in most of the counties in Liberia. I have, therefore, had the opportunity to assess many of the hospitals and clinics throughout Liberia.

This current Ebola outbreak in West Africa according to the World Health Organization has over 25,000 reported cases and over 10,000 deaths. Ten thousand of these cases and over 4000 of these deaths occurred in Liberia alone. The WHO concedes that these figures are underestimates given the difficulty in collecting data. These numbers fail to illustrate the magnitude of the suffering and death from other diseases that has resulted from the weak health systems in the affected countries. The health system in Liberia is weak in four areas. The suffering and death that is likely to occur in the next nine months during the rainy season will make these numbers pale in comparison. The major areas of weakness include:

- 1) Lack of Facilities
- 2) Lack of Health Care Personnel
- 3) Economic Collapse
- 4) Community Unrest

When Ebola entered Liberia a year ago, every hospital in the country shut down. The hospitals were lacking in clean water, sanitation, and electricity. Medical supplies, equipment, and pharmaceuticals were also in short supply. Ambulances and other vehicles were nonexistent. As a result, we saw patients dying from common diseases such as malaria, typhoid, and pneumonia as well as from complications of hypertension and diabetes. Sadly, pregnant mothers were in labor for days and without medical personnel to perform C-sections. Many women suffered rupture of the uterus, resulting in the deaths of both the mother and the child. The maternal mortality rate in Liberia was recently published to be over 1000 per 100,000 births. This is in comparison to the maternal mortality rate in the U.S. and other developed countries which is less than 25 deaths per 100,000 births. These women simply died in the streets or in taxi cabs because there were no open health facilities. Even today the majority of health facilities in Liberia are still closed.

Prior to Ebola, Liberia only had 150 doctors in a country of over 4.5 million people. When Ebola struck, this number plummeted to only 50 doctors owing to the exodus of 95% of the expatriate doctors. Ebola claimed the lives of 11 of the Liberian doctors leaving only 39 Liberian doctors in the country currently. In addition, Ebola has killed 200 health workers in Liberia due in part to lack personal protective equipment and training. During the outbreak there were also labor disputes between the healthcare workers and the Liberian government resulting in strikes. During these strikes patients were abandoned in Ebola Treatment Units (ETU's) and had no food or water contributing to high mortality rates in the ETU's. The workers were complaining that they had not been paid in several months and engaged in peaceful protests. This situation negatively impacted the morale of the healthcare workers and exists to this day.

The economic impact of Ebola on the healthcare system cannot be over-stated. SHIELD's work was greatly impacted when several airlines cancelled flights to Liberia. Currently, there are only two airlines that fly from the US to Monrovia. This greatly impacts the ability of healthcare workers to get into and out of Liberia. This has made the cost of shipping supplies, equipment, and pharmaceuticals to Liberia prohibitive in many cases. Food shortages owing to inflationary pressures have caused widespread malnutrition and starvation in Liberia. This has had the direct effect of making common diseases more deadly as people have weakened immune systems and reserve. With most of the international companies suspending their operations in Liberia, 85 percent of those living in the country now survive on less than \$1.25 per day.

The fourteen- year brutal civil war that raged until 2003 led to Liberia's weakened healthcare system. When I was in Liberia in 1988, Liberia exemplified one of the strongest healthcare delivery systems in all of West Africa. People came from surrounding West African countries to seek excellent healthcare at the JFK Hospital in Monrovia. During the civil war, all of the hospitals were burned and looted. Doctors fled for their lives. Most of the eight thousand UN peacekeepers that came in to maintain the peace in 2003 are still in Liberia today. During this Ebola outbreak, people began to feel under siege again and began to compare this epidemic with the civil war. They believe that this Ebola outbreak is worse than the civil war because this enemy cannot be seen and kills indiscriminately. Early in the outbreak, a state-of-emergency had to be declared by President Ellen Johnson Sirleaf and a curfew enforced to combat lawlessness and criminal behavior. Due to the population's lack of formal education and cultural burial practices, getting the message out about the dangers of Ebola and preventive measures was difficult. Engagement at the community level was inadequate initially to counteract the population's mistrust and complacency. In this environment, immunization programs were halted, and we are now seeing outbreaks of measles and other preventable childhood diseases that were once under control.

SHIELD in partnership with The Sullivan Alliance to Transform the Health Professions, Inc. has put forth a proposal to address many of these issues in each of the aforementioned areas. While in Liberia three weeks ago SHIELD engaged with the local community in Grand

Bassa. This centrally-located, coastal county in Liberia represents 20% of the country's population. This is one of the poorest of the 15 counties in Liberia. Fifty three percent of the adult population suffers from disability and chronic disease. The people of Grand Bassa from the township of Tubmanville have deeded 500 acres of their tribal land to SHIELD, to develop a medical complex. This public-private partnership will include the construction of a medical school and a 400-bed teaching hospital in the first phase. Students and workers will come from all regions of Liberia. This project will create consistent, good paying jobs in the areas of healthcare, construction, maintenance, and services. In addition, this endeavor will promote tourism and encourage the location of other unrelated businesses to this economically depressed region of Liberia. This project has the formal approval and written endorsement of the President of Liberia, her administration, as well as the people of Liberia.

A major strength of this project is its transparency and accountability.

- Budgets and funding will be managed by a joint project governance structure utilizing the US banking system
- This public private partnership mechanism will develop an independent private institution
- This project directly addresses the Liberian brain drain and reliance on foreign doctors and health personnel

Subsequent phases will include schools of hygiene and public health, nursing, and allied health. Liberians of all tribes and counties will benefit which will promote conflict resolution and a sense of shared prosperity. We look forward to a Liberian nation that is both healthier and wealthier.

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