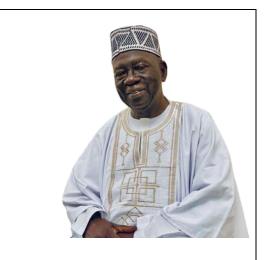
CURRICULUM VITAE DR MOHAMED LAMINE DRAMÉ -GUINEA CANDIDATE FOR THE POSITION OF REGIONAL DIRECTOR WHO AFRICAN REGION

General information

Family name (surname): **DRAME**

First/Other names: MOHAMED LAMINE



Gender: MALE

Place and country of birth: KINDIA, REPUBLIC OF

GUINEA

Date of Birth (Day/Month/Year)

13/08/1953

Citizenship: **GUINEA**

If you have ever been found guilty of violation of any law (except minor traffic violations)

give full details: NO

Civil status: MARRIED

Statement of vision, priorities and strategies

Vision Statement:

Health for All of Africa, from Crises to Resilience

My vision for Africa is of a Region where all populations, in each country, can attain the highest possible level of health and access to quality care, and where WHO support adds concrete value in terms of policies, resources, and operations, to country efforts in promoting health, keeping the world safe and serving the vulnerable.

I will work with Members States to design and drive transformative health solutions that prioritize prevention, strengthen health systems, and address the health impacts of climate change and the multiple complex crises that affect our continent. I am confident that by fostering collaborations and partnerships across governments, regional organizations, and local communities, we can deal with current health threats while at the same time laying the foundation for sustainable health and well-being for the future generations. We can and should better respond to the legitimate expectations of Africa's peoples for progress towards Universal Health Coverage through a renewed and upgraded Primary Health Care.

This diverse and challenging continent is at a moment in history that requires fast and strategic responses to changing opportunities and threats. I will pay particular attention to the political, programmatic and institutional dimensions of the great responsibilities that come with AFROs leadership.

Priorities:

Politically Afro's focus will be on:

Coming to grips with underinvestment: the rapidly changing global architecture has exacerbated long standing problems of unpredictability of strategic investments in the health sector. This requires a new deal for international solidarity, together with a new African commitment to harness domestic health expenditure and investment, both public and private. New mechanisms, instruments and alliances are needed to bring this about – not the least being the political acknowledgement, beyond the health sector, that health expenditure is not a cost, but an investment.

Sharing responsibilities for health across all policies: incorporating health concerns in income, housing-, education- and climate policies has untapped potential for dealing with the root causes of poor population health and well-being. This requires capacity building and political efforts, in parallel to those for mobilising resources for investment in the health sector, whilst avoiding inter-sector turf wars and competition for scarce resources.

Focalising on inclusive policy development and dialogue: The support of national and multicountry processes for policy dialogue, mutual learning, and exchange, particularly regarding national health plans, PHC reviews and acceleration of UHC can to bring about better alignment with international frameworks and documented good practice; it can create opportunities to channel country inputs and experience into the design of such frameworks; and it can instil a sense of purpose in the health sector.

Programmatically AFRO's focus will be on:

Accelerating UHC through PHC: The renewal and visible upgrading of PHC (with universal access to quality primary care and disease control as well as essential hospital and specialist care) is the core strategy to accelerate progress towards UHC. It builds on the wealth of experience on PHC across Africa that remains underexploited. It yields enhanced health results, but, critically, also builds social trust and responds to what people can rightly expect health authorities to put in place. Accelerating UHC through PHC reinstates a sense of optimism and purpose in the health sector.

Ensuring continuity of service and preparedness: Robust, resilient, and well-prepared health systems help to prevent and mitigate crisis situations and to respond to a range of emergencies, from natural disasters and epidemic threats, to climate-related disasters and complex humanitarian crises. A crucial consideration, for reasons of health and of social cohesion, is building-in the planning and operational capacities to sustain regularly functioning health services, even in difficult contexts. A related issue of particular concern is that of building a social and political consensus on protecting the safety of the health workforce in crisis contexts.

Producing the health workforce for the future: The Region's focus will be on operationalizing the African consensus on the need for smarter and sustainable investments in the health workforce. Such investments have to make up for the existing workforce shortfall and underinvestment as well as to anticipate on how the expectations of Africa's modernizing societies shape the profiles of the future health workforce.

Institutionally AFRO's focus will be on:

Enhancing contextualized support to Member States: A core priority, contextualized country support builds on the potential for inter-country peer exchange and collaboration. A key function is that of enhanced mobilization and quality control of technical support (from CO and RO, as well as from HQ, regional and global organizations, partnerships and networks of technical expertise) to Member State ministries, health organizations and policy formation processes.

Improving workplace efficiency: Ongoing review and modernization of the functioning of AFRO, at regional, sub-regional and country office levels aims for a working environment, a management style and processes that enhance staff motivation, accountability and responsiveness to country needs and circumstances.

Proactively engaging in health diplomacy: Africa's health needs require a proactive African health diplomacy, leveraging WHO's collaborations and partnerships with regional and global organizations. The aim is to mobilise contextualized and quality-controlled support and access to investment and technical resources, but also to harness AI, big data and political networks to assist countries in anticipating vulnerabilities and identifying opportunities for investment and sustainable resourcing.

Degrees/Certificates obtained:

Degrees

- 1. Doctor in Public Health (PhD), 2015, in health Policy and Global Health, University of Lisbon (Nova Universidade de Lisboa)
- 2. Master in Public Health (MPH), 1993, Institute of Tropical Medicine, Antwerp Belgium
- 3. Master in Epidemiology bio-statistic (DSSP), 1988, Catholic University of Louvain in Brussels Belgium
- 4. Doctor in Medicine (MD), 1980, University of Havana, Cuba

Certificates

- Certificate in Communication with focus on "Diplomacy for Development" (2000)
 Cork Communication Centre Republic of Ireland
- 2. Community Health with emphasis on Community Diagnosis and Participation, WHO School of Public Health in Lomé, Togo March June 1984

Knowledge of languages

		Mother Tongue	Speak	Read	Write
Code 1: Limited conversation, reading newspapers, routine conversation.	French		3	3	3
	English		3	3	3
Code 2: Engage freely in discussions; read and write more difficult materials.					
Code 3: Fluent (nearly) as in mother tongue.	Portuguese		3	3	2
	Spanish		3	3	2

Positions held

Since September 2018 (based in Guinea):

- ➤ Independent International Consultant, Managing Director of 'SUCCESS IN AFRICA' consultancy firm based in Conakry with antennas in other African countries and providing technical services to African governments and their development partners.
- > President of the NGO 'GUINÉE SUCCESS'.
- ➤ Researcher and Visiting Professor at the Universities of Heidelberg (Germany) and associated lecturer at the University of Gamal Abdel N. of Conakry (Guinea).

01/2015-08/2017: Belgium Agency for Development (Enabel) Health Programme Coordinator in Benin: Adviser to the Minister of Health and the Permanent Secretary for country's health policy, strategic planning process, the Universal Health Coverage

07/2010-12/2014 WHO/HQ « Heath Governance & Financing » department: Health policy advisor/Health System Expert with focus on: Technical advice and support to Ministries of Health in Member States for strategic planning process, policy dialogue for health, Support the implementation of various global initiatives: Health Systems Financing Platform (HSFP), IHP+, GAVI-WHO/HSS

01/2009-30/072010: Head of Enabel "Health Institutional Support Programme" in Benin: for the institutional development of the Ministry of Health (MOH)

- 11/2003-12/2008: Programme Coordinator (7th,8th EDF) for the German Technical Cooperation and European Commission in Mozambique: support the whole sector reform processes
- 09/2002-10/2003: health policy advisor to the Minister of Health and director of a GIZ three-project with support to the development of the health district concept and setting up of a network of mutual health organisations
- **01/1999-07/2002: HIV/AIDS Regional Program Team Leader** for GIZ in Ghana for 26 countries in Central and West Africa

09/1996-12/1998: Scientist & Researcher Heidelberg University Public Health Institute Germany: teaching/research, design and evaluation of projects in Africa for different donors

02/1987-01/1996 Guinea Health District and later Regional Health Director: Management of district/regional health teams, planning process, management of Liberian and Sierra Leonean over 500,000 refugees' health programme

02/1981-01/1987 Guinea: Director of a Regional Mother & Child services, Head of the regional hospital pediatric services

Short Term consulting assignments in all continents, mainly in Africa: Dozens of short-term technical consultancy assignments

Membership of technical committees

- 1. Member of the Guinean National Association of Public Health (since 06/2005)
- 2. Member of the Guinean Medical Association (since 02/1985)
- 3. Member of the Association of Health Experts of the German Cooperation (since 01/1999)
- 4. Member of the ITM/Antwerp Alumni Association Belgium since 1993
- 5. Member of the French Speaking Association of Epidemiologist (since 2000)
- 6. Member and manager of the Alumni Association of Cuba (all universities)

Overview of most relevant academic publications

I have dozens of relevant scientific publications in health system strengthening, Chronic Disease Control, health care quality assurance (available if necessary)

List of hobbies, sports and skills

1. Hobbies: Traveling, discovering new cultures, reading books

2. Sports: Football

3. Skills: Moderating teams