



Manifesto

Dr Ibrahima Socé Fall

Candidate for the position of WHO Regional Director for Africa

Presented by the Republic of Senegal

Endorsed by the African Union

Health for All, All for Health

A Regional Agenda to promote and protect health,
and provide quality care to unlock prosperity in Africa



International

CPHIA | 2023

Conference on Public Health in Africa

ING AFRICA
ECTURE



Hosted by:



Republic of Zambia



Delivering Health for All in Africa

This is Africa's Century!

**It is time to aim high, dream big,
act bold and deliver impact.**

In all spheres, and in all the challenges facing the region, Africa is also blessed with great opportunities for prosperity to deliver health for all, by all. An Africa that claims its proper place in global leadership, and an operationally competent and trusted WHO in the region, will be critical to realizing this ambition.

Our task is to leverage the leadership of Member States and good governance, to drive community health priorities, and to build resilient people-centred health systems where innovation is central, and where collective impact is achieved through real collaboration – between local, regional and international partners, thereby unlocking the potential of Africa's population, and its youth in particular.



Opportunities for prosperity in Africa



People & partnership

Africa is a young, increasingly educated continent and local innovation is expanding and developing rapidly.

Africa also has high population growth and the combination of population momentum and opportunities for progress will likely yield strong dividends.

Donors and partners are increasingly aware of the need to tap into this human capital. This is leading to increased calls for localization and greater investment in local capacity.



Resources

Africa has enormous natural resources and its economies have shown remarkable adaptability. Despite high levels of debt, countries are registering good levels of growth.

Africa is emerging as an economic powerhouse, with connectivity, information production and consumption as key catalysts.

Africa's Research & Development output, while still low, is increasing rapidly.



Leadership & institutions

Despite lingering challenges, Africa's governance and institutional leadership are improving.

Regional leadership has led to the establishment of Africa CDC and AMA. The Africa Continental Free Trade Agreement will lead to greater economic growth and mobility.

There is increasing high-level recognition that data and information are integral to Africa's development.



Demonstrated success

Despite the many health challenges Africa faces, it has already demonstrated that progress can be made.

Since the turn of the century, the burden of many infectious diseases has declined, life expectancy has increased by 15%, and under-five mortality rates have fallen by over 50%¹.

Considerable domestic investment and strong donor support and partnership have led to a nearly 10-fold increase in health expenditure since 2000.



Technology & innovation

Investment in research, science and innovation is increasing across all sectors.

African innovation hubs are also emerging at a rapid rate, and the continent is playing an increasingly important role in global technology and enterprise innovation.

As connectivity, internet infrastructure, and rates of information and technical literacy develop, the continent will be an increasingly important global actor in this field.

¹ <https://www.who.int/data/gho/publications/world-health-statistics>



With over USD 500 billion in expenditure on health,

the first two decades of the 21st century have seen unprecedented progress in health and socioeconomic sectors across the continent.

Effective interventions against malaria, HIV, tuberculosis (TB), neglected tropical diseases (NTDs) and vaccine-preventable diseases have brought about important reductions in neonatal, child, and maternal mortality rates. More Africans than ever before are now living longer, healthier, more productive, and more prosperous lives. African governments demonstrated admirable leadership during the COVID-19 pandemic, while the continent's health systems have shown considerable resilience.

However, we still face a huge, unfinished agenda.

The African continent continues to grapple with massive infectious disease burdens in HIV, malaria, NTDs and TB and its contribution to global disease totals is still disproportionately and unacceptably high. Maternal, newborn and under-five child mortality rates remain alarmingly high across many parts of Africa with health system indicators remaining weak, especially in the key areas of access and quality.

These challenging circumstances are further compounded by the rising prevalence of non-communicable diseases, resulting from lifestyle change and increased unplanned urbanization, and by the frequent health emergencies that beset healthcare systems, not to mention the increasing threat of climate change and deforestation. As a result, the African continent accounts for nearly 25% of the global burden of disease².

It is estimated that, in Africa, there were 12.7 million children who did not receive one or more routine vaccines over a three year period, of which nearly 70% (8.7 million) were zero-vaccine-dose children, that is children who did not receive a single dose of vaccine³. Routine immunization programmes are still weak, increasing the frequency of preventable epidemics and deaths.

² <https://www.who.int/data/gho/publications/world-health-statistics>

³ <https://www.unicef.org/esa/press-releases/new-unicef-report-shows-127-million-children-africa-missed-out-one-or-more>

My commitment

As a dedicated public health leader with experience spanning rural medical practice and global health policy and action, I am deeply committed to WHO's mission of promoting good health for all and serving vulnerable communities. My comprehensive experience at all three levels of WHO, including roles in the executive management teams at both the Regional Office and Headquarters, has equipped me with the skills necessary to manage large-scale changes and to make difficult decisions that ensure necessary reforms.

I am committed to demonstrating tangible impacts in WHO's initiatives and maintaining full transparency in all operations and interactions with Member States and partners. My leadership experience extends through tackling communicable diseases, health emergencies, health system strengthening, contributing to the Sustainable Development Goals, and addressing both existing and emerging health challenges in resource-limited settings. We must consistently challenge the status quo, continually review performance, and relentlessly pursue excellence in service delivery.

I am dedicated to accelerating performance by optimizing strategic, technical and partnership opportunities, while also actively fostering innovation. Having spent my career as a catalyst for change, I am resolved to continue driving positive transformations across global health landscapes. I am committed to building a strong, proud, and accountable workforce that prioritizes gender equity and nurtures the next generation, ensuring a diverse and inclusive environment where every member can thrive.



*A calm, committed
presence in
uncertain times*

My vision – ambitious, optimistic, pragmatic

***Health for all, all for health:
towards a healthier, more
prosperous and self-reliant Africa.***

I am committed to a vision of a healthier, stronger, more resilient and self-reliant Africa; a vision that is aligned with the Fourteenth WHO Global Programme of Work and its ambition to deliver universal health coverage (UHC) and primary health care (PHC). This will constitute a robust response to the socioeconomic determinants of health.

I will support Member States in the African Region to consistently deliver comprehensive quality healthcare to all their citizens, unlocking wellbeing and prosperity for all.

I want to see a WHO African Regional Office that is reliable, accountable, trusted, diverse, and inclusive; an organization capable of delivering high quality evidence-informed support to Member States.

I will strive to reposition Africa at the centre of the global health architecture, both in terms of leadership and decision-making, in close collaboration with Africa CDC, the African Union, the Regional Economic Communities, partners, civil society organisations and the private sector.



I pledge to work tirelessly with all relevant parties to advance the health and prosperity of the African continent and beyond, fostering an environment of shared responsibility, accountability, and collective action towards global health security and equity.

I am committed, and will do all in my power, to promote adaptable, resilient health systems.

I believe absolutely in the power of collaboration and leveraging complementary strengths for improved public health at the highest political level.

With effective collaboration between our regional institutions, global partners, and the leadership of Member States, we can address Africa's health challenges effectively.

I believe that country leadership and strong partnerships, that listen to and learn from local contexts, will be at the forefront of a transformative era in health and socioeconomic development for the African region.

My strategic priorities

Rooted in the core principles of the World Health Organization’s approach, and with a deep commitment to universal health coverage (UHC), primary health care (PHC), and to ensuring health, safety, and service for everyone, *Health for All, All for Health* presents a strategic vision for the WHO African Region. This comprehensive plan aims to bolster health equity and resilience, addressing the unique challenges faced across the diverse landscapes of the region.

My five strategic priorities are presented in Fig. 1, alongside five strategic enablers and seven special initiatives that will provide the necessary foundations and resources to ensure success.

My strategic priorities aim to integrate health with all sectoral policies, to strengthen health systems, to accelerate the reduction of key health disparities, accelerate reductions in maternal, newborn and child mortality, to combat communicable and non-communicable diseases, to enhance emergency preparedness and response, and to improve health intelligence.

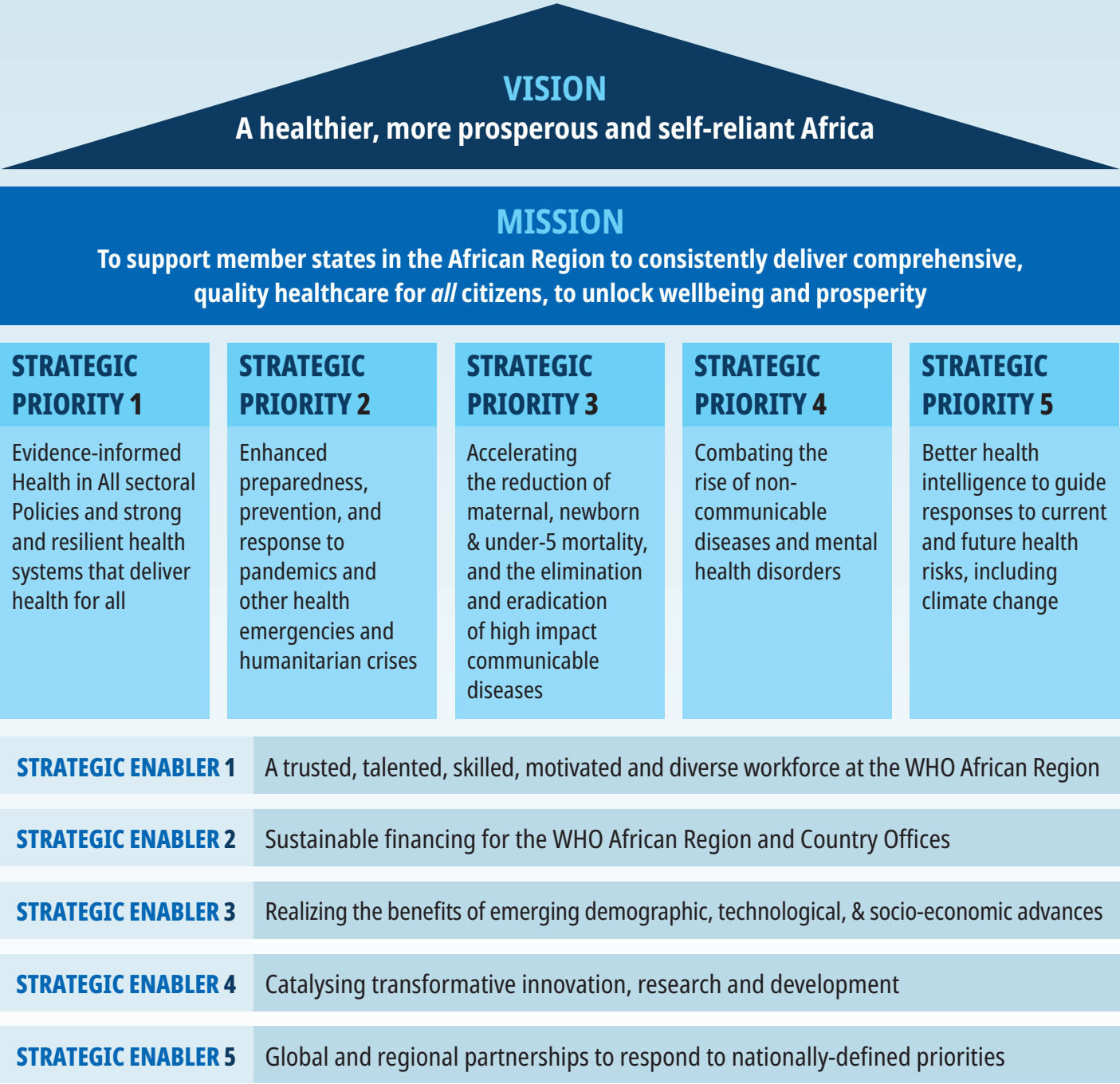


Fig. 1 – A *Health for All, All for Health* Strategy for the WHO African Region

SP1-A: Evidence-informed Health in All-sectoral Policies (HiAP)

This priority emphasizes the integration of health considerations across all policy domains, acknowledging the wide-ranging determinants of health that encompass economic, social, and environmental factors. Our goal is to forge synergistic policies that not only promote public health and equity but also adhere to a unified One Health approach. A strong focus on innovative and sustainable financing will be prioritized in WHO support.

To enhance support for Member States, WHO will adopt a tailored strategy that is specifically crafted to meet the unique needs, demands, and capacities of individual countries. This evidence-informed approach will take into account the specific vulnerabilities of each country and the level of partner support, utilizing the comparative advantages of WHO programs that best address these needs. This differentiated strategy will ensure that WHO's efforts are both efficient and effective, and that they are tailored closely to particular health landscapes and the requirements of each Member State.

If elected to the post of Director of the WHO African Regional Office, I will commit to supporting countries in the establishment of Health in All Policies (HiAP) frameworks at both regional and national levels, enhancing capacity for data and analysis, policy translation and regulatory frameworks, increasing community and civil society engagement while simultaneously strengthening research and development.

WHO will dedicate significant effort to ensure that countries receive comprehensive support to develop these policies, and align national health strategic plans, disease-specific plans, and other essential national frameworks such as the medium-term expenditure framework and district operational plans. This approach will enhance coherence, integration, harmonization, and alignment across all levels, improving both the technical effectiveness and the efficiency of partner support. We will move away from HiAP that is focused on health only, to make the case for intersection with security, economic development, education, agriculture and other social sectors.

SP1-B: Strong and resilient health systems that deliver health for all

Building health systems that are robust and centred around the needs of the population, this priority seeks to deliver UHC and PHC with particular attention to quality of care, including in key areas such as infection prevention and control (IPC), antimicrobial resistance (AMR) and social determinants of health. Such health systems would be able to respond effectively to public health emergencies while still delivering comprehensive, high quality, and integrated health services for maternal, newborn and child health, communicable and non-communicable diseases, and mental health disorders.

In line with the WHO Regional Committee for Africa's 2023-2030 framework, I commit to helping countries implement measures to ensure that health systems are adaptable, inclusive, and capable of facing current and future challenges efficiently.

This will include:

- » adopting a primary healthcare approach to transform health systems
- » fostering whole-of-society public health engagement and health promotion
- » utilizing lessons from pandemic responses to fortify health systems
- » addressing inequities, including those impacting marginalized and vulnerable groups
- » integrating climate change mitigation and adaptation strategies into health planning
- » applying advanced health technologies effectively.

WHO's Regional Office for Africa will provide tailored support to countries based on their economic, social and other contexts, in line with the level of their health system's maturity.

SP2: Enhanced preparedness, prevention, and response to pandemics and other health emergencies

Africa's unique environmental and human dynamics make the continent particularly vulnerable to Public Health Events of International Concern (PHEICs). To address

this threat, we will strengthen national core capacities at the intersection of health security, primary healthcare, health intelligence, and health promotion, thus supporting more efficient and effective responses.

Improving our capacity to manage health emergencies involves enhancing preparedness, mitigation strategies, effective response mechanisms, and building resilient health systems capable of withstanding public health threats.

The strategy I present emphasizes reducing the risk of health emergencies from all hazards, including antimicrobial resistance. It aims to mitigate the impacts of health emergencies by enhancing preparedness, readiness, prevention, and resilience; ensuring rapid and effective detection and response to health threats; and maintaining sustained and equitable access to essential health services during emergencies. There will be a particular focus on integrated service delivery in fragile settings, covering maternal, newborn and child health services, communicable and non-communicable diseases, and mental health.

Building upon WHO guidance and the frameworks established by the Global and National Health Emergency Corps, I will support Member States to develop and enhance emergency workforces, collaborative surveillance systems, community protection measures, safe and scalable care, access to countermeasures, and robust emergency coordination. These efforts will be intensified across three key phases: preparedness, response, and phase-out.

Having been directly involved in the design and implementation of the WHO Health Emergencies (WHE) program, I am committed to reinstating the One WHE approach. This will involve a comprehensive review and strengthening of the health emergency teams in country offices, paying particular attention to those teams in countries dealing with prolonged humanitarian crises. Leadership positions in WHO offices in larger countries with ongoing crises will be subject to rigorous selection processes to ensure the most effective response to, and management of, health emergencies.

WHO will support countries to strengthen national public health institutions and their

health emergency workforces in collaboration with Africa CDC and other partners. WHO will strengthen the response to humanitarian crises and disasters by increasing human resources capacity in the region, building strong partnerships with partners under IASC, strengthening essential health service delivery, including PHC, immunization, mental health services and others, while also addressing cross-cutting issues such as gender disparity, nutrition and water, sanitation, and hygiene (WASH).



SP3: Accelerating the reduction of maternal, newborn and under-five mortality, and the elimination and eradication of high impact communicable diseases

Over 70% of maternal deaths during pregnancy and 58% of child deaths before the age of five occur in the WHO African Region⁴, underscoring the critical challenges posed by inequitable health systems and the high burden of infectious diseases. Addressing this will require ensuring equitable access to quality healthcare services throughout all stages of life, encompassing maternal, newborn and child health services, sexual and reproductive health, mental health, nutrition, and immunization services.

A major priority of my leadership will be to rapidly reduce maternal and child mortality rates and to combat high-impact communicable diseases, with the ultimate goal being elimination and/or eradication, according to the disease profile. The definition of “high impact communicable diseases” should not be limited

⁴WHO African Region. Integrated African Health Observatory: <https://aho.afro.who.int>

to the number of cases and deaths alone but should include also the social and economic consequences of diseases such as neglected tropical diseases (NTDs).

Aligned with the Sustainable Development Goals and the African Union's Agenda 2063, I am committed to accelerating impactful health initiatives that significantly enhance the health of women and girls across Africa. This commitment includes expanding access to comprehensive reproductive health services and scaling up HPV vaccination as part of the WHO's cervical cancer elimination strategy. Additionally, we will prioritize nutritional programs that enhance human and economic development and improve WASH practices, which are essential for disease prevention and health promotion, seeking also to narrow the gaps in malaria prevention and care.

Aligned with the SDGs, priority high-burden diseases to be targeted include malaria, tuberculosis, HIV (mother-to-child transmission), viral hepatitis B, vaccine-preventable diseases, and NTDs. With regard to NTDs specifically, we are dedicated to meeting the African Union's 2030 elimination targets as stipulated in the WHO's road map document. Our efforts will not only aim to bolster health systems but also to secure the health rights of women and girls throughout the continent, enabling them to lead healthier, more productive lives.

We will also launch a multi-disease elimination initiative that adopts a harmonized approach to regional or global elimination targets across various diseases, conditions, and risk factors. This initiative will utilize a comprehensive, people-centred strategy that leverages common delivery platforms within the health system, across different sectors, and within communities, to provide multi-disease services and interventions. A critical focus of this initiative will be to reduce the number of zero-vaccine-dose children, initially targeting the 11 most affected countries, simultaneously bolstering immunization services to enhance coverage and impact.

In consultation with the WHO Director-General, programmes to eliminate diseases that are prevalent only in Africa, such as onchocerciasis, human African trypanosomiasis and guinea worm disease, will be managed from the WHO African Regional Office. The regional malaria

control programme will be revitalized and strengthened, given that 94% of cases and 95% of deaths occur in Africa⁵.

SP4: Combating non-communicable diseases and mental health disorders

This priority seeks to address the rising prevalence of non-communicable diseases (NCDs) and mental health disorders through comprehensive strategies that encompass prevention, treatment, and the strengthening of health systems to manage such diseases effectively.

Africa is experiencing the fastest growth in NCDs globally, with the NCD burden expected to exceed that of communicable diseases in the coming decades. In order to support Member States in adapting governance structures, as well as health system and community factors, so that they continue their progress towards WHO's Global Action Plan for the Control and Prevention of NCDs, 2013-2020, I will work with countries to develop policies and frameworks, and to develop capacity for prevention, cure and wellbeing at the community, health system and societal levels.

Urgent attention will be given to:

- » prioritizing NCDs in regional and national agendas
- » ensuring strengthened national capacity, leadership, and governance
- » multisectoral action and partnerships to accelerate country NCD responses
- » health promotion; strengthening and orienting health systems through people-centred primary health care and universal health coverage
- » monitoring determinants and health outcomes.

Urban health, equity and sustainable development – through innovation and multisectoral action – will also be championed, aligned with the principles and strategies of the Healthy Cities initiative.

SP5: Advancing health intelligence

Health intelligence is a crucial component in the analysis of, and response to, current and future health risks, including climate change.

In the incredibly diverse and dynamic African context, such intelligence is key to developing effective, timely healthcare strategies. Integrated collaborative systems, including surveillance, enhanced analytical capabilities, and the integration of advanced tools and techniques like Artificial Intelligence, can ensure significant gains for resource-limited settings and bring about healthcare interventions that are timely, targeted, and cost-effective.

I will support countries to ensure that data are ethical, equitable, reliable, accessible, interoperable, and reusable, by strengthening data standards and principles and data governance, building integrated data infrastructure, improving the use of data for decision-making, assessing systems performance, scaling up platforms to track threats while driving and utilizing innovation.

Africa can and must make significant gains in technology, data and other health innovations. I will launch a special initiative that focuses on technology, data and innovation in health in the African region, in line with the WHO Global eHealth Strategy and Big Data Revolution for the SDGs, and in partnership with Africa CDC, Member States, the private sector, and regional and global partners. In so doing, I will support countries to:

- » Champion evidence-informed priority setting for health
- » Catalyse innovations in digital solutions for point-of-care diagnostics, telemedicine and surveillance, geographic information systems and data analytics
- » Institutionalize and strategically integrate digital health within national health systems
- » Develop frameworks for the ethical use of digital health and artificial intelligence
- » Strengthen data and analytical capacity across all levels of health policy and implementation.

Special initiatives

As well as these priorities and enablers, a number of special initiatives will be designed and implemented in collaboration with Member States and partners:

- » **Enhancing female leadership within WHO** through deliberate efforts to ensure emerging leadership positions target qualified women. A Women in Leadership platform named after iconic female African public health leaders will be launched to promote women in public health through targeted placement in WHO. This initiative will also invest in building managerial capacity to foster a truly equitable future workforce.
- » **Enhancing emergency leadership and workforce capacity** through the large-scale intensive training of a cadre of qualified health emergency experts from National Public Health Institutes (NPHIs) and/or other nationally authorized entities, to prevent, prepare for, detect, and rapidly contain new health threats.
- » **Protecting the health of girls, women, mothers, and marginalized groups** in alignment with existing global strategies, via a multisectoral approach, ensuring access to quality care.
- » **Reaching zero-vaccine-dose children** through detailed stratification, identification, and implementation of national zero-dose vaccine reduction strategies, including addressing vaccine hesitancy.
- » **Multi-disease elimination (MDE)**, in collaboration with Africa CDC, AU and the RECs, developing – for the first time – an overarching approach to ending all diseases, conditions, and risk factors, establishing global elimination or eradication targets.
- » **Healthy Cities initiative**, in collaboration with governments, mayors, UN-Habitat, the African Union, RECs and other partners, to promote health, equity, and sustainable development through innovation and multisectoral action to enable healthy living in African cities.
- » **Africa health technology, data and innovation leap**, to address technological inequity on the African continent, in line with the WHO Global eHealth Strategy and Big Data Revolution for the SDGs. This will include catalysing innovations in digital solutions for point of care diagnostics, telemedicine, surveillance, and analytics, and the strategic integration of digital health in national health systems.

Building a stronger WHO Africa Regional Office

A trusted, talented, skilled, motivated, and diverse workforce at the WHO Africa Regional Office will be the primary asset through which my leadership will support Member States to deliver on the strategic vision I have presented in this manifesto.

The WHO Values charter provides guiding principles for the WHO Africa Regional Office, aiming to ensure that a trusted, dedicated team is able to serve public health at all times. These values encompass such pillars as “professionals committed to excellence in health”, “persons of integrity”, “collaborative colleagues and partners”, and “people caring about people”. I have zero tolerance for abuse and will ensure a positive workspace by means of respectful, inclusive leadership based on effective prevention and response to abusive conduct.

WHO AFRO has been implementing a transformation agenda since 2015. In 2017, WHO’s Director-General led the organization through a process of intense and throughgoing transformation. Throughout this process, Member States were consulted and provided detailed feedback.

My focus as Regional Director will be on building on gains so far to ensure that the transformation process is completed, while also adapting to dynamics that have emerged since the transformation process was initiated.

In the WHO Africa Region, the aim is to ensure that our organization is fit for purpose and able to deliver on behalf of the world region most affected by disease. This will require adequate resources, talent reviews – including attracting and retaining key talent – appropriate professional development, diversity, equity and inclusion, and the fostering of a collaborative mindset both internally and externally. The role of WHO collaborating centres will be optimized to strengthen country support. The country focus initiative will be accelerated for greater impact. WHO country offices will work more closely with Member States on policies, strategies and plans, and also on leadership and accountability in addressing health priorities. Selection for leadership and managerial positions will be more competitive and rigorous with a focus on gender equity in all levels, including in executive managerial positions.

To specifically address gender disparities in health leadership, I will launch a special initiative focused on Women in Leadership, named after iconic female African public health leaders. This initiative will invest in building managerial capacity to foster a truly equitable future workforce. By empowering more women to thrive in leadership positions, we aim to bring diverse perspectives to the heart of health decision-making; this will be crucial for inclusive and comprehensive healthcare delivery and policy formulation.



The Africa Regional Office's commitment to Preventing and Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH) is non-negotiable, and reflects our collective dedication to the health and safety of all individuals involved in or affected by WHO's activities. This commitment not only protects individuals but also fundamentally strengthens the quality and impact of our health initiatives across the African region. By fostering an ethical, secure, and respectful environment, we pave the way for more effective public health strategies and interventions.

I am committed to identifying, strengthening, and fostering strategic partnerships to enhance the impact of our health initiatives. Prominent examples include the collaboration between WHO and Africa CDC, which aims to align efforts, share resources, and optimize public health strategies at the highest political levels across the continent. Additionally, we will bolster the WHO liaison offices at the African Union and the Economic Commission for Africa. By co-convening Member States with key partners like Africa CDC and the African Union, we aim to maximize resources, avoid duplicating efforts, and significantly enhance the collective impact of our initiatives. To strengthen this strategic imperative, I will establish a high level Strategic Advisory Group that will leverage African expertise and will have representatives from across the continent, other WHO regions, as well as key partners.



Working together towards a better Africa

The manifesto I present here is both a vision and, more urgently, a clarion call for a healthier, more prosperous, and self-reliant Africa.

As Africa lifts off, the strategies and priorities outlined in this document are designed to leverage the immense potential of our continent and its people.

From combating the burden of infectious and non-communicable diseases and reducing maternal, newborn and child mortality, to enhancing our preparedness and response to health emergencies, from ensuring equitable access to health services for all, especially the most vulnerable, to harnessing the power of innovation and technology in healthcare,

*each element of
this strategic
vision is aimed
at unlocking the
prosperity of
Africa.*

Our commitment to building a strong, proud, and accountable WHO workforce, prioritizing gender equity, and fostering next-generation leaders underscores our dedication to creating an inclusive and comprehensive healthcare landscape. By strengthening and fostering strategic partnerships, including with Africa CDC and the African Union, our aim is to maximize resources, and significantly enhance the collective impact of our health initiatives.

As we move forward, it is imperative that we embrace collaboration, innovation, and a relentless pursuit of excellence. Together, with unwavering resolve and shared responsibility, we will navigate the challenges ahead, advancing the health and prosperity of the African continent and beyond.

“Health for All, All for Health” is a pathway to achieving global health security and equity. It is built on the most solid foundations: our collective resolve to elevate Africa to its rightful place on the global stage, and to drive positive change for generations to come.



Dr Ibrahima Socé Fall, PhD, MD, MPH, MSc (Int Dev), FFPH (UK)

| Key professional experience (selection) | Date |
|---|-------------------|
| Director, Global NTD Programme, WHO | Dec 2022–present |
| WHO Assistant Director-General for Emergency Response at UN Assistant-Secretary-General level | Mar 2019–Dec 2022 |
| Regional Emergency Director, Director for Health Security & Emergencies in the WHO Africa Region | Apr 2015–Mar 2019 |
| WHO Country Representative – Mali | Nov 2012–Apr 2015 |
| Head of United Nations Ebola Mission in Mali | Nov 2014–Apr 2015 |
| Regional Adviser for malaria strategic planning, WHO AFRO Region | Feb 2007–Nov 2012 |
| Inter-country Malaria Team Coordinator for the WHO Africa Region | Jan 2004–Feb 2007 |
| Assistant Professor, Faculty of Public Health, Cheikh Anta Diop University, Dakar | Jan 2001–2004 |
| Head of Planning and Control Division, Health Department, Ministry of Defence, Senegal | Jan 2001–Dec 2003 |
| Chief Medical Officer and Managing Director, Elisabeth Diouf Hospital, Diamniadio, Senegal | 1997–2001 |
| Chief Medical Officer (Podor district) and Head of Communicable Disease Control (Saint Louis region), Senegal | 1995–1997 |
| Member of the Steering Committee of the National Malaria Control Program in Senegal | 1997–2003 |
| Chief Medical Officer and frontline physician with the 5th Battalion of the Senegalese Army | 1992–1994 |
| Resident in emergency medicine and surgery at the Dakar Military Teaching Hospital | 1990–1992 |

Awards & Honours

| Award | Date |
|---|------------|
| WHO Director-General's Award for Excellence | 2017, 2022 |
| Commander of the National Order of the Lion, Senegal | 2023 |
| Officer of the Malian National Order | 2015 |
| Elected Fellow of the Royal College of Physicians, UK (by distinction) | 2017 |
| African Heroes Award, Department of African Studies & African Student Association, Ohio University, USA | 2017 |
| Medal of Honour of the Senegalese Military Health Services | 2002 |

Education

| Degree | Topics | School | Year(s) |
|--|--|--|---------------------|
| Fellow of the Royal College of Physicians by distinction | Global Health, Epidemiology | Royal College of Physicians, Faculty of Public Health, United Kingdom | 2017 |
| Doctorate (PhD) | Epidemiology and International Health | Tulane University (Payson Center for International Development), USA and Cheikh Anta Diop University, Dakar | 2015 (2009–2014) |
| Diploma | Executive Certificate of Global Health Diplomacy | Graduate Institute for International and Development Studies, Geneva | 2014 |
| Master of Science | Sustainable Development with majors in: Economic Development, Leadership & Strategic Planning for Non-profit Organizations | Tulane University (Payson Center for International Development), USA | 2003 (2002–2003) |
| Master of Public Health | Public Health | Cheikh Anta Diop University, Institute for Health and Development, Dakar | 1999 (1996–1998) |
| Malariology Certificate | Malaria epidemiology analysis, prevention, and control | Federation of French Institutes of Tropical Medicine (Belgium & France), OCEAC Cameroon during WHO international training course | 1996 |
| Diploma (DTM&H) | Tropical Medicine and Epidemiology | French Army Institute of Tropical Medicine, Marseille (IMTSSA) & Aix Marseille University | 1995 (1994–1995) |
| Doctorate in Medicine (Dr Med) | General medicine and surgery with dissertation | Cheikh Anta Diop University & The Military Academy for Health (EMS), Dakar | 1992 (1985–1992) |

