

## LETTER

### Letter from Guinea Bissau: Follow up to the Article by Binder *et al.* and Accompanying Articles

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To the Editor:

I read with great interest the recent commentary about national public health institutes (NPHIs) in the *Journal (J Public Health Policy, 2008; 29: 3–21)*. Since 1995, we in Guinea Bissau have been considering the idea of creating an NPHI. In 2007, with the help of the International Association of National Public Health Institutes (IANPHI), our NPHI creation effort started in earnest. We are particularly grateful to the staff of FIOCRUZ, the NPHI in Brazil, and part of a sub-network of Portuguese-speaking NPHIs, for their assistance.

As is true in many countries, since 1978, 4 years after independence from Portugal, the Ministry of Public Health of Guinea Bissau in cooperation with SIDA, (Sweden) created the National Public Health Laboratory (LNSP) and with DANIDA (Denmark) the Bandim Health Project (PSB). Later on in 1989, with the support of the Instituto de Higiene e Medicina Tropical of Portugal, the Centro de Medicina Tropical has been created and inaugurated by the President of Guinea Bissau and the Prime Minister of Portugal (today's President of Portugal). The last element of the public health system to be created was the National School of Public Health in 1997. These essential elements of a strong public health system conduct field epidemiology, medical research, and training of health personnel. However, these were separate entities with their own budgets, priorities, and infrastructures. These

institutions have had enormous limitations in carrying out essential public health functions, including:

- Weaknesses in laboratory capacity
- Inadequate human and material resources
- Existence of vertical disease surveillance programmes
- Poor linkage to relevant programmes in the Ministry of Public Health
- Lack of institutional research policy
- Poor coordination of the programmes for disease control, health prevention and promotion, and public health epidemiology.

As part of our planning, we identified major health problems in our country and how we could best address them. Through this process, we developed a strategic plan that calls for combining much of our current capacity into the Guinea Bissau National Institute of Public Health (INASA), not only organizationally, but also by placing the components together physically in a central location. We believe that the proposed changes will allow us to meet existing public health challenges as well as new ones in a much more efficient and effective manner.

Implementation of the strategic plan will be funded by IANPHI, which will also help us to secure support from other donors. Our new NPHI will include Core Public Health Functions such as surveillance and laboratory capacity, monitoring and evaluation, and research. We think it will enable us to make rapid advancement as a nation both in terms of our public health infrastructure and the health of our people.

In our country, as is the case in many places in the world, armed conflict and its adverse impact on the economic and social development of our people has been a tremendous challenge. We are pleased that we now have the opportunity to build a national public health infrastructure that will efficiently and effectively protect the health of our population. We encourage others, mainly in the African Region, to take advantage of opportunities to work with IANPHI and other NPHIs to build strong public health systems through integrated national public health institutes.