

Harare Declaration
on
Preparedness and response to the Influenza A (H1N1) Pandemic

As members of the humanitarian community, we are committed to ensuring all people have access to the highest possible standard of health care. In this spirit, we declare our commitment to strengthening Zimbabwe's health system at all levels so it can better prepare for, and respond to, the public health and socioeconomic impacts of the Pandemic H1N1 2009 and all other health threats.

We embrace the global "Call to Action" initiative that aims to strengthen national capacities to respond to the pandemic. This initiative is a product of key health partners, including the World Health Organization, International Federation of the Red Cross and Red Crescent Societies, OCHA and UNICEF.

We commit to applying, where appropriate, the "Call to Action's" key principles and measures within the Zimbabwe Influenza A (H1N1) Preparedness and Response Plan of the Ministry of Health and Child Welfare.

For the first time at country level, the "Call to Action" has been applied in Harare, Zimbabwe, at a 29-30 September, 2009 workshop. Zimbabwe's pandemic plan and the "Call to Action" offer a set of public health measures to reduce the threat posed by this new disease on the country's population.

We believe Zimbabwe is well placed to achieve this goal. Its handling of the unprecedented 2008-09 cholera outbreak led to the development of a flexible operational platform that has enhanced national management of epidemics. The Cholera Command and Control Centre (C4) has helped put Zimbabwe on its strongest-ever footing to prevent further outbreaks of such scale.

The C4 model also provides a mechanism to implement effectively Zimbabwe's plan to prepare and respond to the Pandemic H1N1 2009.

We commit to contribute to the strengthening of the national health system in line with the Primary Health Care approach as reiterated by the Ouagadougou Declaration. To reduce the impact of the pandemic in Zimbabwe, we urge partners to:

- Enhance surveillance and case management.
- Identify high-risk groups and vulnerable populations for delivering treatment and reducing transmission.
- Strengthen the existing mechanisms of collaboration and coordination with different partners and stakeholders.
- Contribute for the capacity building of health professionals, community health workers as well as improving community involvement.

- Implement communications and advocacy strategies within all levels of the community to ensure as wide as possible awareness of prevention measures.
- Support resource mobilization efforts to enable adequate preparedness and response and mitigate the public health and socioeconomic impacts of the Pandemic H1N1 2009.

