



Robert Kezaala, MB ChB, MPH

Global Health and Disease Control Expert

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Date of Birth 24 December, 1960.
Nationality Swiss / Ugandan
Profession Medical doctor; Epidemiologist; Freelance global health and disease control expert
Languages English, French, Swahili, and Luganda as mother tongue

Most recent engagement

Coordinator Disease Control, World Health Organisation
Philippines Country Office, Retired January 2025

Brief overview of work experience

I have over 30 years of professional career in global health policy and practice, health diplomacy, communicable disease control and health emergencies. More recently, this has included 2 years leading the revitalisation of one of the Philippines National Immunisation Programme; 3 years in China—including WHO's response to the Covid-19 pandemic and the certification of Malaria elimination in China; 7 years in UNICEF New York as global team lead for the accelerated immunisation initiatives (cholera, measles, yellow fever, epidemic meningitis); 7 years in Immunisation, Vaccines and Biologicals (IVB), WHO - Geneva; 5 years in WHO - Africa Region; 2 years in WHO - Ethiopia country office; 6 years in refugee health and emergency response with the International Red Cross in Eastern and Southern Africa. I have benefited from the experience of being at the table when many regional and global initiatives and interventions have been designed and managed. I have had the privilege of leading multi-cultural teams across the globe, as well as representational roles for WHO and UNICEF in many international forums.

Detailed employment history /work experience

June 2022 to January 2025

Team Lead – Vaccine Preventable Diseases and Immunisation

With the Philippines among the ten worst immunisation performing countries in the world and a moribund National Immunisation Programme, I was given the task of turning this around. Launched the 8-pronged 2022-2024 revitalisation plan that is widely credited to have arrested the decline. I manage 26% of WHO Country Office annual budget a staff of 8 and 6-14 international consultants at a time.

June 2019 to June 2022

Coordinator, Communicable Disease Control World Health Organisation (WHO) China

Overseeing the Country Office Immunisation and Vaccine Development, TB/HIV/AIDS, Malaria Elimination portfolios in the support to the China National Health Commission. In-country coordination of the technical support in the development of Chinese Covid-19 vaccines, Injectable Polio Vaccine towards WHO prequalification. As SitRep manager for China's Covid-19 outbreak, served as the principle manager for knowledge and learning regarding China's response: control measures and experiences in vaccine roll out, impact on health service delivery and sharing of experiences with the rest of the world. Played a key in-country role in getting China to join Covax Facility [reuters.com/article/us-health-coronavirus-china-covax-idUSKBN26U027](https://www.reuters.com/article/us-health-coronavirus-china-covax-idUSKBN26U027)—a landmark achievement. Supported the Malaria Elimination Certification Panel in their field assessment culminating in China's Malaria free certification. Managed the highly acclaimed WHO session on China-Africa collaboration on malaria elimination of the Global Health Forum. Successfully served as business continuity manager for United Nations Country Team (over 2000 UN people) China in the context of Covid-19 pandemic.

June 2012 to June 2019

Senior Health Advisor – UNICEF Headquarters New York

Team Lead – Accelerated Immunisation Initiatives

Global responsibility for epidemic prone vaccine preventable diseases, measles and rubella, yellow fever, cholera and meningitis, immunisation data monitoring. Managed a team of 4 international staff in New York and a budget of \$20million annually. Acted as Officer-in Charge – Immunisation Unit (26 staff) on numerous occasions. Notable achievements: Published the very first 2015-2020 global Financial Resource Requirements for Measles and Rubella elimination in the 62 highest burden countries. Represented UNICEF on the Measles and Rubella Initiative (M&RI) Management Team. Managed UNICEF support to the Georgia Tech - CDC R&D for the Measles micro-needle patch mode of vaccine delivery. Represented UNICEF on the International Coordinating Group (ICG for Meningitis, Yellow Fever, Cholera. Represented UNICEF on the International Task Force on Disease Eradication at the Carter Centre. Successfully led the mobilisation of USD 50 million collaboration with Al Waleed Philanthropies. In 2016, served 2 months as UNICEF liaison to WHO-WHE Geneva for the urban type yellow fever outbreak in Angola and DR Congo—which was acknowledged as a best practice.

July 2005 to June 2012

Medical Officer, Strategy and monitoring, Global Polio Eradication Initiative, Immunisation Vaccines and Biologicals - WHO Geneva

Country support for the Horn of Africa, Chad and Pakistan. Outbreak response support for the 2010 polio outbreak in WHO-EURO: Tajikistan, Uzbekistan, Russia, Kazakhstan. Co-developed the Short Interval Additional Dose (SIAD) (polioeradication.org/wp-content/uploads/2017/05/SIAD_Implementation_Guide.pdf) approach, a tactical response to Polio Virus importations now a GPEI standard in outbreak response. WHO liaison to CDC in setting up the Emergency Operations Centre for Polio Eradication for 1 month - 2012.

January 2001 to June 2005

WHO-AFRO Regional Office. Coordinator Accelerated Immunisation Initiatives

Managed the landmark measles programme which reduced measles mortality in the African region by 78% (pubmed.ncbi.nlm.nih.gov/16139658/). Oversaw the Africa Regional Laboratory Surveillance networks. Served as Secretary to the Africa Task Force on Immunisation (TFI) for 2 years.

April 1999 to December 2000

Epidemiologist/Team Leader, WHO-EPI Ethiopia

Technical and managerial responsibility for WHO's support to Government of Ethiopia on vaccines, immunisation monitoring, surveys and disease surveillance. Served as OIC on many occasions.

1993-1998

Regional Health Coordinator - Eastern Africa (14 countries)

and later - Southern Africa (10 countries), International Federation of Red Cross (IFRC)

Responsible for emergency health assessment and response. Supervised the emergency health response and refugee nutrition operations in Rwanda, Somalia; Sudan; Kenya, Mozambique, Djibouti and DR Congo. Participated in developing the Sphere Project for minimum standards in core humanitarian assistance (health care, water and sanitation, nutrition) following the 1994 Rwanda Operation.

1989-1993 (including 1year break for MPH study in Amsterdam)

National co-ordination and policy making; multi-sectoral AIDS control with NGO and UNDP Uganda.

1985-1988

District Medical Officer, Moroto District, Karamoja, Uganda

Oversaw District health services. Managed a model Tuberculosis programme that served as pilot for introducing the short course Tb treatment in Uganda in the challenging Karamoja sub-region.

Education

- Master's Degree in Public Health (MPH). Koninklijk Instituut voor de Tropen (KIT, Royal Tropical Institute), Amsterdam. Major in Health Planning and Epidemiology. Thesis: Epidemiological evaluation of a TB control programme (July 1990 to September 1991)
- UNDP/UNOPS Certificate in Project Management (1992)
- Swedish Red Cross/IFRC Certificate in international humanitarian assessment and response (1993)
- Degree in Medicine and Surgery (MB ChB). Makerere University Kampala (1980–1985); one year residency in the Uganda Cancer Institute (1984–1985)

REFERENCES AVAILABLE UPON REQUEST

Selected professional publications

1. Reducing the global burden of congenital rubella syndrome. The Lancet September 2012; 380(9848):1145-6. Susan E. Reef, Susan Y. Chu, Stephen L. Cochi, Robert Kezaala, et al.
2. Measles outbreak in South Africa, 2003-2005. South Africa Medical Journal May 2009; 99(5):314-9. Meredith L. McMorrow, Goitom Gebremedhin, Johann van den Heever, Robert Kezaala, et al.
3. Public-health impact of accelerated measles control in the WHO African Region 2000-2003: The Lancet September 2005; 366(9488): 832-9. Otten M., Kezaala R. et al.
4. Migration as a risk factor for measles after a mass vaccination campaign, Burkina Faso, 2002. International Journal of Epidemiology 19 June 2005; 34(3):556-64. Epub 19 January 2005. K. Robert Yaméogo, Robert T. Perry, André Yaméogo, Chantal Kambiré, M. Kader Kondé, Déogratias Nshimirimana, Robert Kezaala, et al.
5. Impact of alternative approaches to accelerated measles control: experience in the African region, 1996-2002. The Journal of Infectious Diseases May 2003; 187 (Supplementary Issue 1):S36-43. Mac W. Otten, Jean-Marie Okwo-Bele, Robert Kezaala, et al.
6. Cost benefit evaluation: Outreach Home Care Versus In-patient Terminal AIDS Care in Uganda – The Example of Nsambya Hospital. (Poster presentation at the VIII International AIDS Conference, Amsterdam, The Netherlands).
7. An Epidemiological Impact Evaluation of the Matany Hospital Tuberculosis Control Programme – Karamoja. MPH thesis, Koninklijk Instituut voor de Tropen (KIT, Royal Tropical Institute): Amsterdam, The Netherlands, June 1991.
8. Pattern and Trends – Measles in Karamoja. MOH Health Information Quarterly (HIQ) No. 4, December 1988.
9. Spinal Anaesthesia as a Necessary Armamentarium in Rural Hospitals; MOH Health Information Quarterly, Vol. 5 No. 1 & 2, June 1989.