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# Resolutions

## Regional Meeting of Parliamentary Committees on Health in East and Southern Africa: Health Equity and Primary Health Care: Responding to the Challenges and Opportunities

Munyonyo, Uganda, September 16-18, 2008



*Hosted by: Southern and East African Parliamentary Alliance of Committees On Health (SEAPACOH), Partners in Population and Development, Africa Regional Office, Regional Network on Equity in Health in East and Southern Africa (EQUINET), African Population and Health Research Centre (APHRC), United Nations Population Fund (UNFPA), Venture Strategies for Health and Development, DSW (German Foundation for World Population).*



The Regional Meeting of Parliamentary Committees on Health in East and Southern Africa, Munyonyo Uganda September 16-18 2008, gathered members of parliamentary committees responsible for health from twelve countries in East and Southern Africa, with sixteen technical, government and civil society and regional partners to promote information exchange, facilitate policy dialogue and identify key areas of follow up action to advance health equity and sexual and reproductive health in the region.



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### Noting:

- National, regional and international commitments made to protect and advance the right to health and the commitment to equity in health, primary health care and sexual and reproductive health rights (SRHR) at all levels in East and Southern Africa; the 1999 Southern African Development Community (SADC) Protocol on Health, the 2003 Maseru Declaration on HIV and AIDS, the 2000 African Union Heads of state 'Abuja declaration and plan of action, the East Central and Southern African (ECSA) Regional Health Ministers Conference resolutions, the Maputo Plan of Action, the NEPAD Health Strategy and 2007 African Union Health Strategy 2007-2015 within the framework of the commitments and plans made in relation to the Millennium Development Goals and the International Conference on Population and Development (ICPD);
- That reducing socio-economic and health inequality is essential to achieving the Millennium Development Goals (MDGs) and to reducing absolute poverty;
- The key role of Primary Health Care oriented and public sector systems in addressing health equity, as expressed in the April 2008 Ouagadougou declaration on "Primary health care and health systems in Africa: achieving better health for Africa in the new millennium"
- The importance of implementing the Maputo Plan of Action to enhance SRHR to enable governments to achieve population goals to provide the necessary conditions for economic and social empowerment and development;
- That parliaments have a central role in health in ensuring ratification of treaties and in overseeing implementation of agreements, enactment of laws, oversight and promotion of rights, policies and programmes and ensuring resources and budget allocations to priorities; in association with other arms of central and local government, civil society, communities, university and research institutions and development partners;





- That regional intergovernmental, parliamentary and civil society forums provide opportunities for building co-ordinated policy, law and action and for exchange of experience;

## Resolve to:

- Raise the profile of health in all our parliaments, and strengthen our own leadership, roles, capacities in and evidence for promoting, monitoring and advancing equity in health and health care;
- Promote implementation of the Abuja commitment and fair financing in health through progressive tax funding, social health insurance, and abolition of user fees;
- Fight corruption at all levels;
- Promote and ensure the allocation of resources for the empowerment and awareness of communities at all levels, for communities to know and demand their entitlements and involvement in health, for resources be allocated to their health needs;
- Mobilize political will at highest level on issues of SRHR and for adequate resources to implement the Maputo Plan of Action and country roadmaps to provide comprehensive SRHR services;
- Ensure that such comprehensive SRHR services include Reproductive Health supplies (for commodity security), government funding for antiretrovirals (ARV) for adults and children, community mobilization on SRHR that involves men, especially in vulnerable communities and for adolescents and youth and education of girl children.
- Protect policy space, government authorities and indigenous resources, knowledge and medicines within global trade, and promote investment in community knowledge and in local production of medicines, including traditional medicines;
- Protect health in trade agreements, including the Economic Partnership agreements, ensure our laws include all Trade Related Aspects of Intellectual Property Rights (TRIPs) flexibilities, and resist committing our health services within the World Trade Organisation General Agreement on Trade in Services (GATS);
- Advocate for the Executive branch to include members of parliament (MPs) in delegations to meetings on treaties and to report to parliaments on the outcomes of these meetings;
- Encourage public debate on and inclusion in law of provisions addressing stigma and discrimination and the rights of people living with HIV - including to HIV education and information, equality and non-discrimination, ethical and accessible HIV testing, disclosure and partner notification – and on attention to women, children, youth and other vulnerable groups and their access to appropriate prevention, treatment, care and support.

## Commit ourselves to:

Work together as organisations within the region towards advancing these resolutions, including:

### Within the next two months to:

- i. Report back on the deliberations and resolutions of the meeting to relevant parliament and executive committees and partners;
- ii. Move a motion on Primary Health Care (PHC) in our parliaments in September - noting the 30 year anniversary of the Alma Ata Declaration on PHC endorsed on 12 September 1978 - and raise public awareness on PHC, particularly in relation to its role in addressing equity in health, in strengthening community empowerment and SRHR, and the need for establishment, support and resourcing of competent health workers and of Community Health Workers (CHWs) and available, accessible and affordable health care services.



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- iii. Raise the option of establishing a parliamentary committee or task force to look into, monitor and oversee action on socio-economic inequalities, including inequality in health and access to health care;
- iv. Sensitise fellow members of parliament (MPs) and communicate with the Ministers of Health and Finance on implementation of the Abuja commitment; and thereafter as relevant, move a motion for the Executive to report to parliament on progress made in attaining the Abuja commitment to 15% government domestic funding to health, supported in addition by debt cancellation and overseas development aid;



Delegates, Source: PPD APO 2008

- v. Establish and enact in law – where this does not exist - a process whereby health committees are involved early in the budget process and in the planning within the Medium Term Expenditure Framework.
- vi. Ensure that all key documents on international and regional commitments and national laws relevant to health, including SRHR, are provided to the health committee;
- vii. Petition the Minister to inform the committee on the status of public health laws, including those that are outdated, and those that need review, and take up the identified gaps with the Attorney General and the Law review committee of parliament;
- viii. Set up a workplan for parliamentary clerks, co-operating with researchers in and outside parliament, to produce information briefs to make issues more accessible to committees;

### Within the coming year, to:

- i. Obtain and publicly disseminate key documents, including the Abuja declaration and the Maputo Plan of Action
- ii. Monitor progress in health equity and primary health care at country level and regional level through an 'equity watch' in co-operation with technical and civil society partners.
- iii. Ensure committee workplans include actions to promote and engage with mechanisms for community empowerment in health, in partnership with CBOs and CSOs, including through constituency meetings, to provide information to communities on health policies, laws and budget resources, and for community input to budget priorities;
- iv. Ensure the Executive branch reports to the committee on the level of and distribution of spending on the health budget, and monitor the impact on health and health care performance associated with the increased spending on health, where the Abuja commitment of 15% government spending on health is achieved;
- v. Prepare and make budget submissions that
  - Promote equity in the allocation of health resources (ie allocations to health needs; district distributions using allocation formulae that integrate equity)
  - Ensure adequate budgets for PHC outreach to all, including vulnerable groups;
  - Promote removal of user fees
  - Include necessary resource allocations for SRHR and for RH supplies (for commodity security);
  - Provide for incentives for rural health workers and for community health workers.
  - Balance allocations to infrastructure, personnel and services
- vi. Promote and oversee the mainstreaming of community health workers in the formal health system, with support for their training
- vii. Obtain national population and reproductive health policies and national action plans and request report on progress in their funding and implementation





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- viii. Propose a review of the commitments related to health that government is signatory to and their application in law, including trade agreements, audit their protection of public health to raise gaps, promote public awareness and establish a procedure for effective parliamentary involvement in negotiation of and report back on international engagements and commitments related to health;
- ix. Initiate a process for review, update and harmonisation of public health related laws, to take into account international commitments, policies for equity in health and health care, PHC and SRHR, regulation of public- private roles and outlaw of negative cultural practices affecting health;
- x. Strengthen the capacities and effectiveness of parliamentary committees nationally through
  - Increasing research capacities/staff
  - Building consistent partnerships with CSOs, universities and research institutions/ networks and development agencies.
  - District outreach and MP involvement in finance committees of their districts
- xi. Strengthen regional networking of parliamentary committees on health in East and Southern Africa through
  - Monitoring, reporting on and reviewing progress in implementing these resolutions and commitments.
  - Building SEAPACOH, its database of membership of parliaments, sharing of relevant reports for tabling in select committees and national parliaments.
  - Building South-South cooperation to share good practices and experiences within the region, including with regional partners.



## Call on the international community including parliaments to:

Recognise and support these commitments, rights to health and health care and national and regional roles, responsibilities and initiatives through

- Joining our call for a reduction of global inequality in health; for debt cancellation; and fair trade;
- Recognising and engaging parliaments in the development of treaties and conventions;
- Ensuring ethical human resource policies at international level, backed by investments to redress regressive south-north subsidies incurred through health personnel migration;
- Matching our efforts to meet the commitment to 15% of government domestic financing to health by meeting their commitments to debt cancellation and to the official development aid (ODA) target of 0.7 per cent of gross national product (GNP);
- Aligning their financial and technical assistance and cooperation plans to national policies and plans, and to meet international obligations and commitments in health, PHC, HIV and AIDS and SRHR.
- Promoting transparency and accountability, including to parliaments, in this support;
- Taking up these resolutions through international and regional parliamentary forums, including the African Union Parliamentary Forum, The Association of European Parliamentarians for Africa (AWEPA), the Commonwealth Parliamentary Forum, the East African Legislative Assembly and the Southern African Development Community Parliamentary Forum.



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