Regional Meeting of Southern and Eastern Africa
Alliance of Parliamentary Committees on Health
(SEAPACOH)

With Partners in Population and Development – Africa Region [PPD - ARO]
Repositioning Family Planning and Reproductive Health in Africa: Lessons Learnt, Challenges and Opportunities

Imperial Royale Hotel, Kampala, Uganda
September 27-29, 2011

Opening Remarks by:

HON. Blessing Chebundo
SEAPACOH Chairman
SALUTATION

Rt. Hon. Rebecca Kadaga
Speaker, Parliament of Uganda

HON Chairperson of the session

The Members of the Steering Committee of SEAPACOH,

HON Chairpersons of the National Parliamentary Committees
responsible for health and Honourable Members of SEAPACOH

Regional Director of PPD – Dr Jotham Musinguzi

Executive Director PPD Uganda Mr Harry Jooseery

Representative from USAID/Uganda

Distinguished Guests

Ladies and Gentlemen
It is with distinct honour for me to stand before you honourable members for opening remarks as we hold this important SEAPACOH seminar hosted by PPD ARO.

On behalf of SEAPACOH, I wish to express our appreciation, and THANKS, to all of us here present, for making it to this important meeting. The fact that we have come all the way from our different and far-away countries is a clear testimony of our individual, and institutional commitment to the causes for which we, and our Parliamentary institutions exists and stand for, and for which this meeting is meant to achieve.

We gather here today, for the 4th consecutive SEAPACOH regional meeting, hosted by our partners, PPD ARO, and with the assistance of its development partners. Colleagues will recall that since September 2008, we have been meeting here in Uganda, under different “Themes” with the assistance of our ‘Technical Partner PPD and others’ to strengthen the CAUSE for which SEAPACOH was founded.

The THEME of this year’s meeting is ‘Repositioning Family Planning and Reproductive Health in Africa: Lessons learnt, Challenges and Opportunities’.

Madam Speaker, HON Colleagues, Sexual and Reproductive health is key feature on the agenda of SEAPACOH. We are committed to continue to put a strong ‘ADVOCACY’ agenda for a health system that is responsive to the needs of our mothers, newborns and children. Saving women’s and children’s lives and ensuring universal access to reproductive health should remain a pillar of SEAPACOH’s Universal Health Care Advocacy Agenda. And thus SEAPACOH will continue to advocate for the full implementation by our nations, of the MAPUTO Plan of Action on Sexual
and Reproductive Health and Rights, and other policies. We undertake, and strive to advocate for policies that facilitates for effective live-saving health services available and accessible to Africa’s women and children as a matter on urgency.

Madam Speaker, HON Colleagues, as SEAPACOH, and in the main, we continue to note that the deterioration and potential collapse of health sectors remains one of the greatest challenges facing the nations of Africa in general, and Sub-Saharan Africa in particular. This will continue to exacerbate the rising mortality and morbidity brought on by HIV/AIDS among the poor and vulnerable sections of the populations in various countries. The situation therefore places a major challenge for elected representatives and Parliaments within the Southern and East African Regions to champion the need for improved health systems through insistence, and formulation of correct and coordinated national and regional policies and to direct resource allocation that benefit the poor and high risk groups.

As Parliamentary Committees responsible for health, there is need for us to continue to remind ourselves that Governments, [Executive, Legislature] have an obligatory role to play in ensuring that citizens have a right to access health services, and that this has to be done within the context, and under the principles of separation of powers where there is clarity of the roles meant to provide for checks and balances to ensure accountability and effective health policies.

One of the key roles of the Legislature [Parliament] in the chain of responsibility, accountability and governance is that of providing link between the executive arm of the government and the citizens in addressing issues that includes; law making, financial management, oversight on the implementation of public programmes on social and
economic matters, and on other various national policies that have a bearing on the lives of the citizens.

Whilst, in the majority of cases, the Executive will 'set the tone' for new policies, and public programmes, Parliament, on behalf of the people, will process the policies/laws, and provide oversight on programme implementation. Thus, Parliaments would not seek to govern, but to exercise its mandate to ensure that governing is done within the confines of the agreed standards and norms, for the good of nations and their citizenry.

It is also within the above context, and realization that the coordination of the Parliamentary Portfolio Committees responsible for health in Southern and East Africa [SEAPACOH] was initiated in collaboration with civic society organizations [CSO] for health, and health professionals with a view to enhance, and make more effective the role of parliament in health, with more emphasis on addressing the 'Inequity' in national resource allocations for the health sector and the devastating impact of the HIV/AIDS pandemic on the populations of countries in Sub-Saharan Africa.

However, Madam Speaker, Distinguish Colleagues, we fully realize that Parliamentary Committees for health would not be as effective, if they were to walk the journey alone, but through their representative and facilitative role, teaming up, and collaborating with relevant stakeholders, not only will it enhance effectiveness, but will also fulfils the right of citizens to be heard in matters that affect their lives.

This is why, within the reforms introduced by majority of our countries, Parliaments sought to strengthen the role and functions of its [Technical organs] Committees and to increase public participation in parliamentary processes and in other related Governance processes.
It is now generally agreed that, in Parliamentary democracy; Parliament work; and Governance in general; must be grounded in communities/citizens if it is to have any hope of success. To this end, Parliament serve as the “Citizens Forum” in which citizens, and their groups, organizations and professionals can publicly air grievances, concerns, offer expertise, and make recommendations that improves the lives of the people. Specific citizen forums are, therefore, facilitated by sector specific Parliamentary Committees

It is now six years since August 2003 when the idea to network parliamentary portfolio committees on health in ESA was conceived, during a workshop on 'Parliamentary Alliances for Health Equity' held in Gauteng, SA and organized jointly by EQUINET, GEGA, IDASA and SADC PF and attended by representatives of six Parliamentary Committees on Health, civil bodies and health professionals from ESA countries. SEAPACOH have continued to soldier on, albeit with some 'stop-start' due to a number of challenges, chief amongst them;

. Inadequate Commitment by some of the representatives of the national committee members,
  • Changes in national committee membership due to internal arrangements, elections etc [new members will not have the SEAPACOH know-how/appreciation],
  • Non participation by national committee clerks/officers who should act as 'bridging gaps',
  • Lack of appreciation/support by Presiding Officers and other mattering leadership/designations of parliaments of the member committees,
  • Cumbersome/restrictive administrative protocols that some of the committees have to go through to facilitate participation.
  • Financial constraints for SEAPACOH as a network.
On the positive side, it is pleasing to note that PPD ARO, EQUINET and other partners have played a pivotal role assisting SEAPACOH, through the various activities; capacity building meetings, profiling through participation by SEAPACOH in events at national, regional and international levels. It is also important to note that other partners at national level have consistently provided technical and other supportive assistance to Committee members that are enabling SEAPACOH to be able to pursue its goals and objectives. Today, the network has brought in almost all the committees of the ESA regions to participate as members of the network.

The broader values and aspirations of SEAPACOH are enshrined in its Charter, and the subsequent ‘5 year Strategic Framework Plan’ produced in April 2009 with the assistance of PPD ARO. Member committees are always urged to use these as our compass.

Once more Madam Speaker, and Mr. Chairman of the session, allow me to express that SEAPACOH is tremendously impressed with the valuable, and professional work our partners ‘PPD-ARO, EQUINET’ and other National based partners, is doing in assisting SEAPACOH and its member Committees. Without this collaboration and assistance, the Committees would not be at the level of efficiency and effectiveness that we are experiencing.

Finally, I hope, and am convinced that ‘collectively’ and with team spirit, vigour and commitment; we will be able to achieve the objectives of this meeting, and of SEAPACOH, for the sake of good Sexual and Reproductive health, and health equity for our great regions.
I wish ourselves a most productive meeting and encourage sharing of our experiences.

I THANK YOU.