

15th NETWORK OF AFRICAN PARLIAMENTARY COMMITTEES OF HEALTH (NEAPACOH) MEETING

“Towards ICPD30 and achievement of UHC: Imperatives for accelerated implementation and the role of Parliamentarians”

Avani Lesotho Hotel, Maseru, Lesotho

MASERU CALL TO ACTION

The 15th meeting of the Network of African Parliamentary Committees of Health (NEAPACOH) was held on February 28 – 29, 2024. The meeting convened delegates and members of Parliamentary Committees responsible for health, finance, budget, natural resources and environment from 16 countries (Benin, Chad, Côte d'Ivoire, Eswatini, Kenya, Lesotho, Malawi, Mali, Namibia, Nigeria, Senegal, Tanzania, The Gambia, Uganda, Zambia and Zimbabwe) as well as representatives of international organizations, development and technical partners, national population councils, health champions, researchers and academics, Civil Society Organizations, and other stakeholders engaged in programmes on HIV, TB, NCDs, health security and integration of population, health and environment in Africa; under the theme: ***“Towards ICPD 30 and achievement of UHC: Imperatives for accelerated implementation and the role of Parliamentarians”***.

The meeting provided a platform for regional Parliamentarians to get acquainted with the status of implementation of the ICPD PoA in the Africa region. It provided space for engaging, reflection and constructive discussions on priority policy interventions, built momentum for political will, national ownership and support towards consolidating the gains made towards achieving the ICPD agenda and Universal Health Coverage. The parliamentarians actively deliberated on improving Reproductive, Maternal, Neonatal, Child and Adolescent Health (RMNCAH) including HIV/TB outcomes in Africa. Emphasis was put on some of the critical imperatives to the achievement of UHC, such as increasing domestic financing for health with a focus on Primary Health Care (PHC); integrating population, health and the environment; increasing access to sexual reproductive health services and

information to the young people; health security, pandemic preparedness and response; HIV/TB financing; non-communicable disease management including immunization and addressing the social and commercial determinants of health through the strengthening of a multi-sectoral approach among others.

The meeting was hosted by the National Assembly of Lesotho and Partners in Population and Development Africa Regional Office (PPD ARO) with support from the African Institute for Development Policy (AFIDEP), AIDS Health Care Foundation (AHF), Amref Health Africa, Center for Health, Human Rights and Development (CEHURD), Faith to Action Network and PATH. The 15th NEAPACOH Meeting ended with adoption of the Maseru Call to Action (2024).

Preamble:

At the conclusion of the 15th NEAPACOH Meeting, we, the participants:

Cognizant that the health status of the people of Africa continues to be a matter of concern with unacceptable high morbidity and mortality levels, especially among children, youth and women with low access to quality health services, with consequences such as teenage and unplanned pregnancies coupled with inadequate birth spacing and child marriages;

Appreciating that Universal Health Coverage (UHC) means that all people should access and utilize the health services they need without suffering social exclusion, financial hardship and other barriers while accessing and utilizing the health services;

Recognizing that health is an investment in human capital and social and economic development, towards the full realization of human potential, and significantly contributes to the promotion and protection of human rights and dignity as well as the empowerment of all people.

Realizing that UHC implies that all people have access, without any form of discrimination, to nationally determined sets of the needed promotive, preventive, curative, rehabilitative and palliative essential health services, and essential, safe, affordable, effective and quality medicines and vaccines, while ensuring that the use of these services does not expose the users to financial hardship;

Recalling that primary health care (PHC) brings people into first contact with the health system and is the most inclusive, effective and efficient approach to enhance people's physical and mental health, as well as social well-being, and that PHC is the cornerstone of a sustainable health system for the attainment of UHC and health-related SDGs targets;

Underscoring the need for strong, people centered health systems that are resilient, functional, well-governed, adolescent and gender-responsive, accountable, integrated, and capable of quality service delivery, supported by a competent health workforce, adequate health infrastructure, enabling legislative and regulatory frameworks as well as sufficient and sustainable domestic funding;

Mindful of the need to tackle health inequities and inequalities within and among countries through political commitment, policies and international cooperation, with emphasis on social, economic and environmental and other determinants of health.

Noting that whereas African countries often have strong policies that advance access to quality reproductive health information and services for women, girls, young people and adolescents, the implementation of these/such policies remains weak largely due to under-investments and low prioritization in national planning frameworks;

Cognizant of the fact that Africa is the epicenter of many disease outbreaks and emergencies annually;

Concerned that family planning and reproductive, maternal, newborn, child, adolescent health and NCDs are among the essential health services most seriously affected by inadequate funding;

Aware that environment and climate change are influenced by human activity, including rapidly growing population, hence the need to integrate and prioritize Population, Health and Environment (PHE) in the policies and financing;

Noting the critical role of sharing of experiences and innovative practices in the context of South-South Cooperation for the achievement of UHC and SDGs;

Acknowledging the vital role of representation, legislation, appropriation and oversight by the parliamentarians towards the achievement of national, regional and global development goals, including UHC and SDGs;

Recognizing that there are financing and human resource bottlenecks in the manufacture of key medicines, vaccines and other key supplies at individual country level;

Re-affirming that health is a precondition for and an outcome and indicator of the social, economic and environmental dimensions of sustainable development and the implementation of the 2030 Agenda for Sustainable Development;

Appreciating that evidence-based policy advocacy should guide and inform Africa's policies on ASRH, that will respond to actual issues and stand the test of time.

Hereby adopt and bind ourselves to this Maseru Call to Action on this 29th Day of February, 2024, with the following commitments:

1. To put health at the core of the development agenda, and ensure that health priorities, including emergency preparedness and Universal Health Coverage, are adequately reflected in national agenda and budgets
2. To strongly work with the Inter-Parliamentary Union (IPU) to ratify International Health Regulations (IHR) on health security preparedness in Africa.
3. To increase domestic financing for health with a special focus towards primary health care systems to meet the needs and priorities of communities and countries towards achievement of the ICPD, 2030 Agenda for sustainable Development, the SDGs and Africa Agenda 2063.

We commit to increase allocation of resources to;

- a. Primary Health Care
- b. RMNCAH
- c. TB
- d. HIV/AIDS
- e. NCDs
- f. Immunization

- g. Adolescent and youth Sexual reproductive health
4. To provide oversight and accountability on how health-related funds in other sectors are being spent (ie in Education, Agriculture, Water, Transport, Environment, etc) through multi-sectoral engagement and collaboration in all matters health, including stronger emergency preparedness, readiness and response mechanisms within resilient health systems.
 5. To strengthen scrutiny and tracking of health budgets to reduce the many wastages & inefficiencies in health budget spending
 6. To strengthen South-South Cooperation, enhance parliamentary awareness on, and contribute to the ongoing negotiations and development of important global instruments for health security, including the Pandemic Accord and the IHR 2005 (as amended), and other negotiation platforms including Climate change Conference of Parties (COP)/UNFCCC and facilitate the sharing of knowledge, lessons learned and good practices in the field of population, health, environment and development.
 7. To prioritize and advocate for digitization of the establishment and maintenance of robust data collection systems to ensure the collection and securement of quality demographic data.
 8. To review, develop and pass appropriate laws and policies that ensure universal access to health including nutrition, sexual and reproductive health, addressing teenage pregnancies, family planning services, and post-abortion care
 9. To champion and spearhead legal and other reforms to provide conducive environments for private sector investments and promote PPPs that promote equity in access to quality healthcare services.
 10. To develop and strengthen Africa's Research and Development and manufacturing capacity through harmonized regulatory frameworks and investments to promote self-reliance, and unfettered equitable access to health commodities, products and pharmaceuticals.
 11. To mobilize domestic funds for HIV/TB to aid in co-financing global HIV/TB initiatives, fostering equitable and robust health systems rooted in a people-centric approach and unified health services, tailored to individuals' requirements and disease prevalence.
 12. To address financial and operational deficiencies in health systems strengthening, pandemic readiness and response, and community health systems

13. To establish and strengthen Local/Sub national capacity building amongst, communities including young people in the effort to let communities lead.
14. To address the social and commercial determinants of health, such as gender equality, quality education, zero hunger and poverty, among others.
15. To strengthen NEAPACOH through expanded partnerships and undertaking peer review, resource mobilization activities to support the implementation of the NEAPACOH commitments and ensure sustainability of the network.

In the same spirit, the 15th NEAPACOH meeting participants collectively and individually convey their sincere appreciation and gratitude to the People and Government of the Kingdom of Lesotho, especially the National Assembly of Lesotho, Partners in Population and Development Africa Regional Office (PPD-ARO) and the partners, for the successful organization and hosting of the 2024 NEAPACOH meeting.

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