

Introduction:

The last few years have witnessed an acceleration of progress in many African countries towards achieving the health MDGs. Despite rapid economic growth in many countries, sub-Saharan Africa still accounts for 49% of maternal deaths, 50% of under-five infant deaths, 67% of HIV/AIDS cases¹ and 85% of HIV-associated TB deaths among woman. Now is the time to take advantage of Africa's rapid economic growth to improve human capital in general, and achieve better health in particular.

Both the investment case of the Harmonization for Health in Africa² and the *Tunis Declaration on Value for Money, Sustainability and Accountability in the Health Sector*³ have highlighted the importance of **sustainable domestic health financing systems** that build on and coordinate the diversity of sources of finance.

Central to this objective are:

- Increasing domestic resources for health through enhanced revenue collection and allocation, re-prioritisation where relevant and innovative financing, giving priority to immunisation, non-communicable diseases, AIDS, Tuberculosis and malaria, as well as reproductive, maternal and child health in national budgets.
- Better coordination and predictability of external resources to ensure that all have access to good quality essential health services
- Strengthening accountability mechanisms that align all relevant partners, build on the growing citizens' voice and ensure the highest possible level of results for the money spent .

¹ http://www.afdb.org/fileadmin/uploads/afdb/Documents/Generic-

Documents/Session%201%20VFM%20Towards%20and%20beyond%20MDGs%2002-07-2012.pdf

² Harmonisation for Health in Africa (2010) *Investing in Health for Africa: The Case for Strengthening Systems for Better Health Outcomes*

 $[\]label{eq:statistical} {}^3\ {\rm Tunis\ Declaration\ on\ Value\ for\ Money,\ Sustainability\ and\ Accountability\ in\ the\ Health\ Sector\ (July\ 2012)\ \underline{http://www.hha-online.org/hso/conference/knowledge/doc/3933/tunis-declaration-value-money-sustainability-and-accountability-health}\ {}^3\ {\rm Tunis\ Declaration\ on\ Value\ for\ Money,\ Sustainability\ and\ Accountability\ in\ the\ Health\ Sector\ (July\ 2012)\ \underline{http://www.hha-online.org/hso/conference/knowledge/doc/3933/tunis-declaration-value-money-sustainability-and-accountability-health}\ {}^3\ {\rm Sustainability\ balance}\ {}^3\ {\rm Sustainability\ balance}\ {\rm$

A landmark event:

With the spirit of better coordination across all health MDGs, Africa Civil Society requested Global Health Partnerships to a joint meeting.

Following a series of conference calls since August 2012, nine major global health partnerships⁴ joined Africa Civil Society representatives on 19 and 20 February in a landmark meeting *- More money for health, more health for the money -* at the offices of the GAVI Alliance in Geneva on **February 19-20, 2013**.



Objectives of the meeting were:

- Identify potential opportunities and mechanisms for advancing regional and national coordination in support of broader and more effective civil society advocacy for increased domestic financing for health in Africa, recognising the importance of coordinated advocacy among sectors (e.g. health, nutrition, education, gender, agriculture, trade, etc.) for greater results
- To promote greater efficiency and reduce duplication among GHPs in supporting regional and national advocacy for health financing in Africa.

At a lunchtime session -A conversation with Heads of Global Health Partnerships on Resource Mobilization for Health: Doing things differently in the Post 2015 Environment- Seth Berkley, CEO of GAVI; Lucica Ditiu, Executive Secretary of the Stop TB Partnership; Philippe Duneton, Deputy Executive Director of UNITAID; Luiz Loures, Deputy Executive Director of UNAIDS; Linda Mafu, Head, Political and Civil Society Department at the Global Fund; and Thomas Teuscher, Deputy Executive Director of the Roll Back Malaria Partnership agreed with the assembled civil society organizations on a common objective: *joint efforts for domestic resource mobilization for health in Africa must be harmonized*.

The leaders of these global health partnerships highlighted the importance of speaking with one voice for a unified approach to achieving better health in Africa. Representatives of African civil society health platforms called for an end to fragmented action by agencies working on one specific disease or health issue.

⁴ PMNCH, GAVI, Global Fund, UNAIDS, RBM, STOP TB, UNITAID, World Bank, and the IHP+



Selection of Civil Society Representatives to this meeting:

Each of the nine Global Health partnerships sponsored two Africa CS representatives working collaboratively on strengthening health platforms towards increased domestic resource mobilization in Africa. In addition partners from ICSS, OSF-NY and UNFoundation joined the meeting as observers.

Outcomes of the meeting:

- i) African civil society agreed to:
 - map what is needed and what is already present at country and regional levels
 - articulate the value added and mandate of this health initiative toward civil society coordination.
- ii) The assembled global health partnerships agreed to:
 - share mapping/analysis of partners they work with in Africa on health and start harmonizing efforts
 - provide technical support to improve Africa civil society tools to be able to advocate more effectively for domestic resource mobilization for health
 - speak in one voice speak the same language.

There was also overall agreement to develop a draft mechanism to drive this initiative forward and produce a best practice document on how national civil society health platforms function.

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