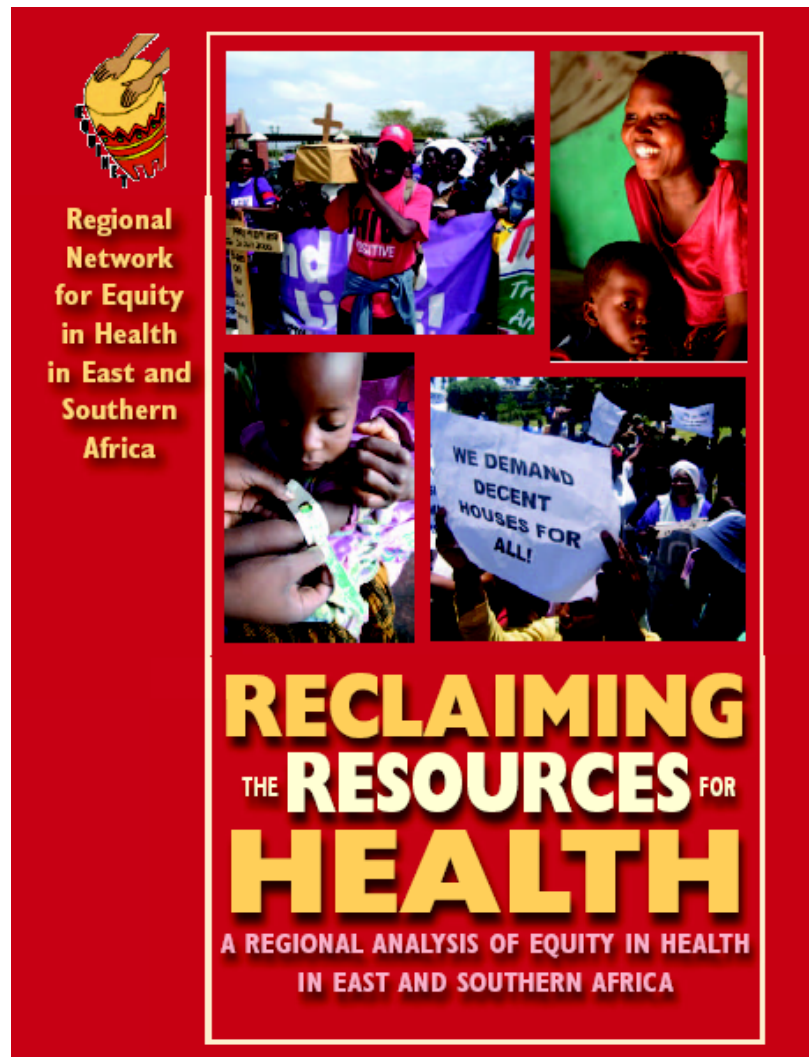


# **RECLAIMING THE RESOURCES FOR HEALTH**

## **Regional analysis of equity in health in east and southern Africa**

**Report of the launch of the book by the  
Regional Network for Equity in Health in East and  
Southern Africa (EQUINET)**



**Tuesday 23 October 2007, 3pm  
Lilongwe hotel, Lilongwe, Malawi  
With local hosts  
REACH Trust Malawi and  
Malawi Health Equity Network**

*Why is life expectancy in some countries in our region 40 years longer than others?*

*How well are we meeting commitments made by leaders to spend 15% of government budgets on health?*

*What can we do about the loss of health workers due to migration?*

A new book published by EQUINET "Reclaiming The Resources For Health: A Regional analysis of equity in health in east and southern Africa" discusses these and other aspects of how our economic policies and health systems can improve health in east and southern Africa, particularly for the most disadvantaged people with greatest health needs.

The book was launched in the region in Lilongwe Malawi on October 23<sup>rd</sup> 2007 at an event locally hosted by REACH Trust Malawi and Malawi Health Equity Network, two EQUINET steering committee member institutions. The book was officially launched by the Principal Secretary for Health, Mr Chris Kang'ombe, with the Chair of the Parliamentary Committee for Health, Honourable Austin Mtukula and speakers from the region, followed by dance and drama presenting health challenges in communities. Hastings Banda from REACH Trust chaired the session, attended by people working in health in Malawi and delegates from seven of the 16 countries in east and southern Africa.

*"I would like to congratulate EQUINET for coming up with the report which will be used by government to further advance the initiatives in the thematic areas highlighted. I would like to encourage and urge each and every one of us working in the health sector and beyond to make sure that we have a copy of this report".*

Mr Chris Kang'ombe, Permanent Secretary for Health, Ministry of Health, Malawi

Bertha Simwaka the Acting Executive Director of REACH Trust welcomed those attending the launch. As a member of the EQUINET steering committee, she pointed to EQUINET's mission in fostering a forum for dialogue, learning, sharing of information and experience and critical analysis of equity and health, to address differences in health status that are unnecessary, avoidable and unfair. She called for sensitivity to local conditions and potentials for progress in meeting global goals, particularly in reducing gaps between north and south.

*"Reclaiming the resource for health" unpacks the health systems issues, trade, investment and production policies and measures that have strong public health impact and offer options to address outflows and promote access to food, health care and medicines. Also the analysis shows some best practices in implementing people-centered and publicly led health systems that have been found to improve health outcomes."*

Bertha Simwaka, Acting Executive Director of REACH Trust

Rene Loewenson, TARSC and EQUINET programme manager introduced the key messages from the book on behalf of the EQUINET steering committee. In a "tour" of the book she pointed to avoidable gaps that could be closed in the region to improve health-between economic growth and human development, in health status and access to health care across communities within countries and between countries in the region, and most profoundly in access to the resources for health globally between north and

south. Within the region inequality is proving a brake to resource inflows reducing poverty. Health systems in the region have played a key role in redistributing resources towards poor communities, especially primary health care oriented health systems. The book explores how to strengthen these positive approaches.

*“The evidence in the analysis points to 3 ways in which reclaiming the resources for health can strengthen health equity*

- *For poor people to claim a greater share of national resources to improve their health*
- *For a more just return for east and southern African countries from the global economy*
- *For a larger share of global and national resources to be invested in redistributive health systems to overcome the impoverishing effects of ill health”*

Rene Loewenson, TARSC/ EQUINET programme manager

Rene highlighted the measures to stem resource outflows from the region, increase investment in redistributive health systems, value and retain health workers and invest in the central role of people to health systems. For example, EQUINET calls for *Abuja plus* – for governments to meet their commitments to \$15 government spending on health, for debt cancellation, increased international transfers and equitable resource allocation to the areas and services most used by disadvantaged communities. The book shows how equity oriented health systems have been achieved through strong public alliances and leadership and through social empowerment, and argues that health systems can build this. This is why the book sets progress markers for equity that relate not only to levels of inequality in health, but to how policies are made and implemented.

*“Equity in health also means having the power to influence decisions over how resources for health are shared and allocated”*

EQUINET steering committee

Moses Mulumba, a lawyer with the Law Faculty, Makerere University, Uganda explored further the Ugandan experience of the way in which trade agreements and policies have challenged the right to health.

*“Policy makers have engaged in trade negotiations without taking into consideration the impacts of trade on health”*

Moses Mulumba, Law Faculty, Makerere University, Uganda

A number of international human rights agreements expressly make governments responsible for enabling citizens to realise the right to health and for protecting health rights in all agreements and legislation, including in trade negotiations. As these rights are often not respected in economic and trade policies, explicit efforts are underway in Uganda to influence negotiations on Economic Partnership Agreements, sensitise trade officials, set human rights guidelines for practices of pharmaceutical companies in relation to access to medicines and assess the health impact of agreements before signing them.

Bona Chitah from the University of Zambia described Zambia’s attempts to achieve a *“dream and up our standards for the good of the people”*. He said this process began in 1991 as Zambia experienced increasing infant and maternal mortality with weak immunisation coverage and declining health expenditures. Recognising that Zambians have a right to better health, there was recognition of the need to redistribute health



resources, improve access to health services and essential drugs, equipment and human resources and ensure a holistic, horizontally integrated health system. While government provided essential services, cost sharing policies and the growth in private insurance led to poor people paying a greater share of their incomes for health care. More recently, Zambia has thus abolished user fees and sought increased financial resources from international sources for health.

*"We are awakening to the reality that we are in it for the long haul .. to let the dream live and begin to bridge between the current and the dream ....."*

Bona Chitah University of Zambia

Kathne Hofnie-Hoebes from University of Namibia described her experience of working with communities and health workers through participatory reflection and action approaches in an informal settlement in Namibia. These processes build respect between communities and health workers, build confidence, instill feelings of value in communities since their voices are being heard. She described how as communities gain confidence they participate in planning health systems and health interventions, taking action to improve their health.

*"The most important lesson I learned was when we came up with our own four health needs, the community also came up with wonderful different four health needs. So I learned that if we were implementing partners, and have to implement these health needs of ours, without consulting the community, we could have been wrong. So it is really important that community members must always be involved when something about the community needs to be done"*

Kathne Hofnie-Hoebes University of Namibia



These experiences from the region highlighted different aspects of the learning from the region that are captured in diverse case studies and evidence in the EQUINET book.

Hon Austin Mtuluka, MP and Chair of the Malawi Parliamentary Committee on Health, described the important role that participation in the network had played in supporting this exchange of information and experience between MPs in the region and in providing evidence for EQUINET's work. MPs in Malawi had raised advocacy on key areas for health equity. Malawi made a major move towards meeting the Abuja target in 2007, with a rise from 8% of the total budget to 14% of the total for 2007/8. Malawi was drafting a new HIV and AIDS law, drawing experience from the region. Parliamentarians in the region involved in parliamentary committees on health had formed an association to support such exchange of experience and information, and had drawn support from the researchers in EQUINET. This was strengthening capacity in the region for tackling health inequity.

The final words were those of the Permanent Secretary for Health from the Ministry of Health Malawi, Mr Chris Kang'ombe, who officially launched the book. He welcomed all those present on behalf also of the Deputy Minister, who was not able to attend. He recognised the value of the event in creating an opportunity for us to *"reflect on the health needs of our nation, understand the challenges we face to provide equitable health services and innovatively strategise for reclaiming resources for health"*. While there are global Millennium Development goals, Africa, particularly east and southern Africa faces some of the biggest challenges to achieving these goals, with low life expectancy, high maternal and child mortality, widening inequalities in wealth and substantial resource outflows from Africa, leaving most people in poverty. He commended EQUINET for its work in networking researchers, policy makers, officials and civil society members towards promoting health equity and regional co-operation.

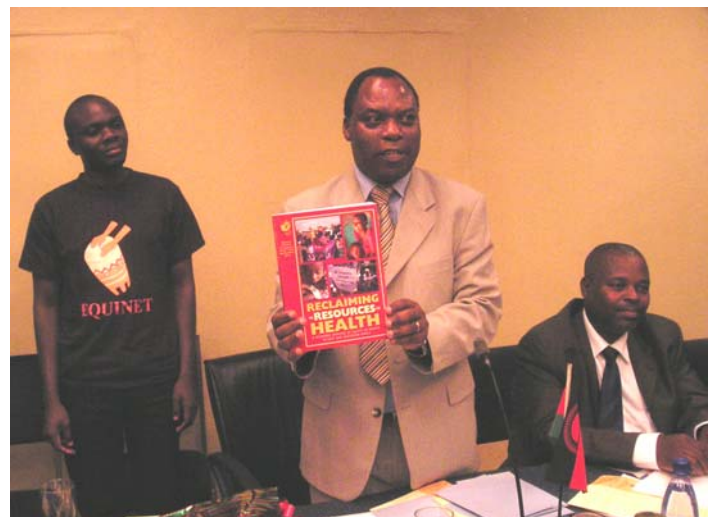
*"The perspective that guides the report being launched today is based on shared values of equity and social justice in health and a spirit of self determination."*

Mr Chris Kang'ombe, Permanent Secretary for Health Malawi

He outlined the usefulness of the book, *Reclaiming the Resources for Health: A regional equity analysis*, as a source book of evidence and analysis around relevant themes, and expressed his satisfaction that the launch was taking place in Malawi. He noted that the thematic areas addressed in the book are in line with the focus areas for development according to the Malawi Growth and Development Strategy, whose overall theme is 'From poverty to prosperity. In exploring the provision of the essential health package and the development of health infrastructure and the themes it presents, he noted that the book has relevance to this strategy.

*"Let it be our reference book in our daily work. Let us participate in implementing the activities and recommendations set out in this report to reduce the health inequalities which currently exist in Malawi and in the east and southern Africa region."*

Mr Chris Kang'ombe, Permanent Secretary for Health Malawi





With these words the permanent secretary opened a wrapped copy of the book and officially declared the launch of the book.

At this stage the chairperson, Hastings Banda invited all to join the cultural events, review the materials displayed by EQUINET, MHEN and REACH Trust and to enjoy some refreshments. Drumming and singing marked the entry of the Paradiso Home Based Care dance group, who sang songs celebrating the publication of the book and its messages, and participants joined in dancing. The Tipya Drama Group presented a play that showed the what poor communities expect of their community care, and the importance of open dialogue between communities and health workers and planners in addressing these needs. Their play was prepared with support from Patnice Nkhonjera of REACH Trust.



The launch in Malawi was the first step to disseminating the evidence and experience on health equity from and about the region contained in the book. The health equity challenges in Malawi, as in other countries in the region, are significant. The launch sent clear signals, however, of the affirmative intention and options to act on these challenges from within the region.

# **Reclaiming the Resources for Health**

## **Launch of the regional analysis of equity in health in east and southern Africa**

Regional Network for Equity in Health in East and Southern Africa (EQUINET)  
with local hosts, REACH Trust Malawi and Malawi Health Equity Network

Lilongwe Hotel, Lilongwe, Malawi  
23 October 2007, 3pm to 7pm

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| 1500: | Tea/ coffee<br>Welcome remarks<br>Bertha Simwaka, Acting Executive Director, REACH Trust, Malawi   |
| 1530: | Reclaiming the resources for health – the analysis<br>Rene Loewenson, EQUINET steering committee   |
| 1550: | Discussants from the network: <ul style="list-style-type: none"><li>• Protecting health in trade and economic policies<br/>Mulumba Moses, Centre for law Development Uganda</li><li>• Adequately and fairly financing health systems<br/>Bonah Chita, University of Zambia, Zambia</li><li>• Participatory methods for building meaningful community roles in health systems<br/>Kathe Hofnie-Hoebes, University of Namibia, Namibia</li></ul> |
| 1620: | Parliamentary alliances for advancing health equity<br>Hon Austin Mtukula, Chair Parliamentary Committee on Health, National Assembly of Malawi  |
| 1640: | Official launch speech<br>Hon Felton Mulli, Deputy Minister, Ministry of Health, Malawi  |
| 1710: | Closure of the formal proceedings  |
| 1715: | Reception<br>Dance group: Paradiso Home Based Care group, Malawi.<br>Drama group: Tipya Drama Group, Malawi, with support from Patnice Nkhonjera, REACH Trust  |
| 1900: | Closing  |
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