



Resolutions of the 71st Health Ministers Conference

8th - 9th February 2023

Theme: Stronger Health Systems Post COVID-19 for the attainment of Universal Health Coverage in the ECSA region

Introduction

The East, Central and Southern Africa Health Community 71st Health Ministers Conference was held at Avani Lesotho Hotel, Maseru, in the Kingdom of Lesotho. The Conference was attended by Honourable Ministers, Heads of Delegations, senior officials from ECSA Health Community Member States, partner organizations, research institutions, civil society organizations and other key stakeholders. The Conference was organized under the theme: ***“Stronger Health Systems Post COVID-19 for the attainment of Universal Health Coverage in the ECSA region.”***

The 71st Health Ministers Conference was opened by Her Excellency the Deputy Prime Minister (DPM) Justice Nthomeng Majara, on behalf of His Excellency, the Right Honourable Sam Matekane MP, Prime Minister of the Kingdom of Lesotho. In her address, the Guest of Honour reiterated that the theme of the Conference, was timely and appropriate.

The Deputy Prime Minister stated that the COVID-19 pandemic challenged health systems globally, regardless of economic status, and that it demonstrated the need to strengthen health systems in the face of any unforeseen health threats. She further emphasized the imperative for countries in the ECSA region to increasingly rely on domestic resources since external funding was uncertain and not sustainable in the long term.

The Guest of Honour also made an appeal to partners to support the Kingdom of Lesotho to establish its own medical school, a vision that was previously articulated by the late Right Honourable Prime Minister Leabua Jonathan in his address to the Health Ministers Conference held in the Kingdom of Lesotho in 1976.

Subsequent deliberations at the Conference proceeded under the following sub-themes:

- **Country and Regional Response to COVID-19: Challenges, lessons and opportunities**
- **Strengthening health systems for prevention, preparedness, detection of and response to emerging and re-emerging infectious diseases.**

- **Consolidating sustainable local solutions for Human Resources for Health**
- **Accelerating interventions and gender inclusiveness towards better health outcomes**
- **Innovative approaches towards sustainable financing of health care**

At the end of the conference, the Ministers considered and passed the following resolutions.

ECSA/HMC71/R1	Strengthening systems for the prevention, preparedness, detection and response to emerging and re-emerging infectious diseases including COVID-19.
ECSA/HMC71/R2	Consolidating Sustainable Local Solutions for Human Resources for Health (HRH)
ECSA/HMC71/R3:	Accelerating Interventions and Gender Inclusiveness Towards Better Health Outcomes in RMNCAH
ECSA/HMC71/R4	Innovative Approaches Towards Sustainable Financing of Healthcare
ECSA/HMC71/R5	Application of implementation research to inform policy and practice in ECSA-Region
ECSA/HMC71/R6	Expression of Gratitude to Partners of the ECSA Health Community
ECSA/HMC71/R7	Expression of Gratitude to the Government and People of the Kingdom of Lesotho

ECSA/HMC71/R1: Strengthening systems for the prevention, preparedness, detection and response to emerging and re-emerging infectious diseases including COVID-19.

The 71st Conference of Health Ministers:

Noting with concern the threat to human health, safety and well-being that was imposed by the coronavirus disease 2019 (COVID-19) pandemic, which spread all around the globe, as well as the unprecedented and multifaceted effects of the pandemic, including the severe disruption to societies, economies, global trade and travel and the devastating impact on the livelihoods of people;

Recognizing that the COVID-19 global pandemic as well as other emerging and re-emerging pandemics require a global response based on unity, solidarity and multilateral cooperation;

Noting with concern the difficulties Member States experienced in accessing the required medical technologies and supplies for combating COVID-19, occasioned by weak manufacturing capacities in the region;

Noting that regional and global health security depends on timely actions to rapidly detect, report, confirm and respond to epidemic alerts;

Appreciating the effort and investments made by the various Member States, regional and international partners to respond to the pandemic by expanding health and other relevant infrastructure, human resources for health, medicines and commodities, and in enhancing community and health system surveillance and response systems, among other interventions;

Concerned that gaps in preparedness and response to emerging and re-emerging public health threats still exist and that further investments are needed to build resilient systems that are epidemic ready;

Recognizing the critical role that communities play in detection, prevention, preparedness and response to health emergencies; and

Recalling:

- Past resolutions urging member states to strengthen laboratory diagnostic capacity (as in **HMC34/R4, RHMC/48/R, HMC56/R3**),
- Past resolutions urging member states to strengthen surveillance systems, enhance capacity for disease surveillance and emergency preparedness to effectively manage events of public health concern and to promote Multi-sectoral and Cross-border Coordination and Collaboration in disease control (**HMC58/R3, HMC60/R4, HMC62/R4, HMC65/R2, HMC69/R6**);

Now therefore

Urges Member States to:-

1. Foster collaboration for local production of medicines, diagnostics, vaccines and other health technologies to improve access in the ECSA region, *inter alia*, through
 - Establishing regional centers of excellence for production of health products;
 - Establishing or strengthening and making accessible health innovation funds;
 - Developing and sharing regionally domestic information and regulatory capacities;
 - Strengthening national agencies to regulate the safety of these products.
2. Support pooled procurement initiatives of medical supplies and vaccines in order to benefit from economies of scale.
3. Establish and/or strengthen National Public Health Institutes.
4. Establish mechanisms for providing expedited approvals of research activities, including clinical trials, for solutions aimed at saving lives during public health emergencies.

5. Invest in modern technologies for prevention, detection, preparedness, response and management of pandemics/epidemics in the region including roll out of genomic sequencing surveillance technologies.
6. Assess and develop strategies to address the health impact of the African Continental Free Trade Agreement.
7. Revitalize the Global Health Diplomacy in order to better prepare and position the region during global dialogues on health and trade amongst others.
8. Establish and implement strategies for sustainable investment in community health, including community health workers.
9. Accelerate and track the implementation of the past resolutions.

Directs the Secretariat to:

1. Support Member States in the implementation of the above resolutions.
2. Enhance resource mobilization strategies and foster collaborations with other partners in order to support the Member States to implement the above resolutions.
3. Support the Member States to track implementation of past resolutions and report accordingly during the 73rd HMC.

ECSA/HMC71/R2: Consolidating Sustainable Local Solutions for Human Resources for Health (HRH)

The 71st Conference of Health Ministers:

Cognizant of the critical role of HRH in ensuring resilient, sustainable and responsive health systems including in pandemic preparedness and response;

Aware of disturbing phenomenon where qualified health workers are not absorbed into the national health systems (both public and private sectors) after completion of training yet the numbers of health workers at the health facilities remain below the WHO recommended standards;

Further aware that trainings in most of the ECSA member states are under the mandate of Ministries responsible for Education and that education services are also undertaken by the private sector who may be driven primarily by the profit motive;

Encouraged that approaches and strategies for sustainable solutions for HRH quality and numbers such as the ECSA collegiate model have been tested and found to work for the region;

Noting with concern the limited Member States' recognition of the ECSA CHS affiliate professional colleges' trainees which delays their registration and practice;

Further aware of the need to improve the quality of paediatric and child health services;

Noting the efforts made by Paediatricians towards establishing the ECSA College of Paediatrics and Child Health;

Concerned about limited responsiveness of the health systems and health care workers to citizens legitimate expectations;

Aware of the limited support provided to health workers wishing to undertake specialization in Dermatology;

Recognizing the ongoing efforts of WHO AFRO in developing the African Health workforce Investment Charter;

Aware that the custodians of medical services and practices are the National health regulatory bodies;

Considering the submission for the establishment of the ECSA College of Paediatrics and Child Health;

Recalling:-

- Past resolutions urging the establishment of regional professional colleges for training of specialist health care workers, harmonization of training curricula, mutual intercountry recognition of qualifications (**HMC25/R4, HMC26/R8 and HMC62/R5**)
- Past resolutions urging the defining of human resource needs and standards of staffing per health service delivery level; development of context specific HRH policies and strategies; incentivizing and motivation of health workers, and human resources information system (**HMC40/R3, HMC67/R1 and HMC42/R4**)

Noting that progress has been made on the past resolutions, however gaps remain;

Aware that addressing these gaps requires full and accelerated implementation of past resolution.

Now therefore

Approve for the establishment of the **ECSA College of Paediatrics and Child Health (ECSAPACH)** to operate under the auspices of ECSA College of Health Sciences.

Urges Member States to: -

1. Strengthen the HRH planning and policy by working closely with the respective ministries responsible for finance, education and employment to ensure production of optimal numbers of health workers that can be absorbed into established streams, including public health service, private health services, other relevant sectors and context appropriate labour export.
2. Support the draft WHO AFRO African Health workforce Investment Charter.

3. Introduce Values Clarification and Attitudes Transformation (VCAT) modules in all health workers pre-service training curricula and in-services training programs to improve health systems responsiveness.
4. Support qualified health workers, including providing scholarships to undertake specialist training at regional centres of excellence, such as dermatological training at Regional Centres of Excellence on Dermatology, and facilitate their proper placement up on completion.
5. Promote co-existence of the collegiate model of training and the traditional academic programmes at universities or similar institutions.
6. Increase investment in paediatrics surgical services including supporting the establishment of Centres of Excellence for paediatric surgery as feasible.

Directs the Secretariat to:-

1. Accelerate the process of facilitating the harmonization of standards for different health professions in the region.
2. Facilitate collaboration of ECSA colleges with other professional, regional and national regulatory bodies and authorities.
3. Support member states in the in the implementation of the above resolutions.

ECSA/HMC71/R3: Accelerating Interventions and Gender Inclusiveness Towards Better Health Outcomes in RMNCAH

The 71st Conference of Health Ministers:

Aware of importance of gender equality and empowerment towards achieving the Sustainable Development Goals;

Concerned with the increased incidences of violence against children and the long-term consequences thereof that threaten to undermine investments in children's health and well-being;

Further concerned that more than 5 million women, children and adolescents globally die from preventable health conditions every year;

Mindful of disruptions of the Sexual and Reproductive Health and Rights (SRHR) and Maternal Neonatal Child and Adolescent Health (MNCAH) services during COVID-19;

Appreciative of the collaborative efforts by ECSA-HC and its partners towards strengthening child protection and inclusion of gender aspects towards better adolescent health and nutrition in the region;

Determined to accelerate gender equality in health status and health development through research, policies, and programs;

Informed by recent regional studies that found Violence Against Children (VAC) to be prevalent in the ECSA region;

Recalling past resolutions on tackling Gender Based Violence (GBV) and Child Sexual Abuse (CSA) with interventions that target both men and women to ensure constructive male involvement, and adoption and implementation of a Regional Prototype Policy on GBV and CSA (e.g., **HMC52/R4 and HMC46/R4**).

Now therefore

Urges Member States to:-

1. Advocate for the use of context specific Violence Against Children (VAC) data to inform and drive systems-based actions within the health and other key sectors, including integration of VAC Survey indicators into national surveys and data collection efforts.
2. Strengthen capacity of frontline workers to screen and care for victims and survivors of childhood violence and respond to violence against children.
3. Establish and/or strengthen mechanisms to monitor, track and report on the maternal near miss cases in maternal perinatal death surveillance and review programs.
4. Incorporate comprehensive package of Sexual and Reproductive Health services in the Universal Health Coverage policies and programs.
5. Prioritize adoption of the Regional Adolescent Nutrition Advocacy Strategy and its dissemination plans.

Directs the Secretariat to:-

1. Track the implementation of the past resolutions on Gender Based Violence and Child Sexual Abuse and implementation the ECSA Regional Prototype Policy on Gender Based Violence and Child Sexual Abuse, and provide an update to the 73rd HMC.
2. Facilitate the sharing of country experiences and lessons learnt on impact of integration of gender for better health outcomes.
3. Establish and support an accountability mechanism to measure progress in implementation of the Adolescent Nutrition Advocacy Strategy.

ECSA/HMC71/R4: Innovative Approaches Towards Sustainable Financing of Healthcare

The 71st Conference of Health Ministers:

Concerned with the increasing healthcare demands that overstretch available health resources;

Cognizant of the high levels of out-of-pocket expenditure, including indirect costs incurred by citizens in accessing healthcare services;

Noting the various innovative mechanisms for raising domestic funds for health;

Further noting the progress made by member states in developing Roadmaps for improving health financing systems;

Concerned that the roadmaps on health financing have remained largely unimplemented;

Concerned with the generally low spending on health, which falls below the minimum recommended threshold;

Appreciating the financial support of external partners through various mechanisms, in the full awareness that this support is not sustainable;

Recalling past resolution urging member states to identify health financing approaches that are relevant and appropriate for scaling up (e.g., HMC 34/R1);

Aware that the share of budgetary allocation to health in most member states still falls below the Abuja Declaration targets;

Encouraged by the renewed commitment of the Heads of State and Government of the African Union, to increase investments in health, through the African Leadership Meeting (ALM) Declaration;

Further Encouraged by the December 2022 resolution of the United Nations on the promotion of inclusive and effective international tax cooperation;

Now therefore

Urges Member States to: -

1. Accelerate the implementation of past HMC Resolutions on Health Financing
2. Build the capacities to gather evidence, plan and negotiate for domestic health financing, for contracting effective partnerships and performance agreements, and for making clear the cost of delivering the benefit package for Universal Health Coverage.
3. Assess and engage ministries responsible for finance on measures to expand tax financing options for achievement of Universal Health Coverage and social protection.
4. Ensure that out-of-pocket financing does not expose citizens to catastrophic and impoverishing expenditure by moving from roadmaps to implementation of mandatory pre-payment mechanisms for healthcare, including implementing approaches such as progressive tax initiatives and National Health Insurance schemes that pool different funding sources for income and risk cross-subsidisation.
5. Address factors that undermine effective use of existing budget resources, including delayed disbursements and lack of retention of surpluses in the Health Ministry.
6. Adopt and promote the use of WHO Health Financing Progress Matrix (HFPM) in the assessment of national health financing system to inform decision making and policy development.

Directs the Secretariat to: -

1. Facilitate the engagement between Ministries of Health and Finance and other expertise towards the implementation of these resolutions.
2. Establish links with the African Union and partners to provide health evidence to support initiatives towards a fairer global tax system.
3. Facilitate capacity building for health economics and health financing in the region.

ECSA/HMC71/R5: Application of implementation research to inform policy and practice in ECSA-Region

The 71st Conference of Health Ministers:

Cognizant of the vital role health research plays in addressing global health challenges, such as Tuberculosis (TB), Covid-19 and other infectious disease surveillance and Occupational health;

Acknowledging the operational research studies that have been undertaken under the Southern Africa Tuberculosis and Health Systems Support (SATBHSS) project in the thematic areas of *Surveillance and Private Sector Engagement in TB Control, Occupational Health, Covid 19 surveillance and Disease surveillance, Community TB Management, and Economics of TB*;

Noting the gaps in TB surveillance systems resulting into under-reporting of TB cases and underestimation of the true burden of the disease with implications on TB case management and reaching the end TB by 2030 goal;

Further noting limited engagement of private and other public sectors in responding to TB and other diseases which leads to under notification of TB patients;

Concerned about gaps on implementation of policy and legislation on mines health and occupational hygiene and control of employees' exposure to respirable silica dust;

Recalling past resolutions calling for the strengthening laboratory services for monitoring MDR and XDR TB, promotion of Multi-sectoral and Cross-border Coordination and Collaboration in Disease Prevention and Control, and identification of appropriate health financing approaches (e.g., HMC48/R7, HMC58/R3, HMC34/R1);

Now therefore

Urges member states to: -

1. Strengthen TB surveillance systems including use of real time reporting (electronic reporting at all levels) and introduce case-based management of TB patients.
2. Engage all relevant sectors, civil societies and affected communities to respond to TB under the multisectoral accountability framework for TB to facilitate the attainment of the UNHLM targets and End TB strategy.

3. Implement policy and legislation which mandates mines operating within the country to perform mandatory occupational hygiene monitoring and control of employees' exposure to respirable silica dust.
4. Prioritize investment in health research to inform policy and programming.

Directs the Secretariat to: -

1. Provide technical guidance, training, coaching and mentorship of Occupational Health Inspectors
2. Provide technical guidance on best practice for disease surveillance and associated systems.
3. Continue mobilizing resources to support countries to implement above resolution.
4. Strengthen the M&E system to facilitate tracking of implementation of past HMC resolutions in this regard.

ECSA/HMC71/R6: Expression of Gratitude to Partners of the ECSA Health Community

The 71st Conference of Health Ministers:

Recognizing the contribution of Partners to gains in the health sector in the region;

Appreciating partners' commitment in strengthening health systems in the region through provision of technical and financial support;

Reiterating its appreciation for the continued support from Partners to Member States and the ECSA Secretariat towards the implementation of Resolutions and Commitments of the Health Ministers' Conferences, and regional and national health programmes:

Now therefore: -

1. Expresses its profound gratitude to all Partners for their support to the health sector in the region.
2. Renews its commitment to continued collaboration and genuine partnership in the implementation of agreed projects/programmes of work with partners; and
3. Recommits to strengthen the coordination of partners at regional and country level in the spirit of innovation and mutual accountability to achieve Universal Health Coverage.

ECSA/HMC71/R7: Expression of Gratitude to the Government and People of the Kingdom of Lesotho

The 71st Health Ministers Conference:

Humbled by the readiness of the Government of the Kingdom of Lesotho, through the Ministry of Health, to host the 71st Health Ministers Conference;

Recognizing the excellent planning and preparation of this 71st Health Ministers Conference;

Appreciative of the warm hospitality extended by the Government and the people of the Kingdom of Lesotho to Ministers and Delegations of ECSA-HC Member States, their partners, members of the secretariat and all participants of 71st Health Ministers Conference;

Now therefore: -

1. Wishes to express profound gratitude to His Majesty King Letsie III, His Excellency the Right Honourable Prime Minister, MP Sam Matekane, the Government and the people of the Kingdom of Lesotho for hosting the 71st ECSA Health Ministers Conference,
2. Humbly request the Minister of Health of the Kingdom of Lesotho to convey the individual and collective gratitude of the Health Ministers and all delegates to her Excellency the Right Honourable Deputy Prime Minister, Justice Nthomeng Majara for officiating at the Opening Ceremony of the Conference; and
3. Reaffirms its commitment to achieving Universal Health Coverage with renewed vigour and a focus on innovation and accountability through multi-sectoral collaboration.