

EAST AFRICAN COMMUNITY

**3RD MEETING OF THE EAC EXPERT WORKING GROUP
ON SUSTAINABLE FINANCING**

KAMPALA, REPUBLIC OF UGANDA

14TH to 16TH SEPTEMBER 2016

MEETING REPORT

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1. Background

1.1 Introduction

The EAC Secretariat, working with the Expert Working Group (EWG) on Sustainable Financing for health and HIV in collaboration with UNAIDS Regional Support Team for Eastern and Southern Africa, successfully undertook a study on *Sustainable Financing Analysis of Universal Health and HIV Coverage in the East Africa Community*. The report of the study was used to develop an Issue Paper on Health and HIV/AIDS sustainable financing options for the EAC Region, and proposed a Framework of Action (FoA) on sustainable financing that was adopted during the High Level Ministerial Dialogue (HLMD) on Sustainable Financing that was held on 24th June 2016 in Arusha, United Republic of Tanzania.

Following this High Level Ministerial Dialogue, the EAC Secretariat convened the 3rd meeting of the Expert working Group (EWG) on Sustainable Financing from 14th to 16th September 2016 in Kampala, Uganda to develop strategies and tools for operationalizing the recommendations of the HLMD.

1.2 Constitution of the Bureau

The meeting was chaired by **Ms. Mariam Ally**, the Ag. Director Policy and Planning, Ministry of Health, Community Development, Gender, Elderly and Children, United Republic of Tanzania, and **Ms. Sarah Khanakwa**, Head of Resource Mobilization at the Uganda AIDS Commission, Republic of Uganda was the rapporteur assisted by the EAC Secretariat staff. The meeting was attended by members of the EWG on sustainable financing from the EAC Partner States, representatives of the Civil Society Organizations, and Development Partners.

The detailed list of participants is attached **Annex I**.

1.3 Adoption of the Agenda and the Programme of the meeting

The meeting reviewed the agenda and programme for the 3rd meeting of the EAC expert working group (EWG) on sustainable financing and adopted it with minor amendments.

The agenda and programme are hereto attached as **Annex II** and **Annex III** respectively.





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1.4 Remarks by the Chairperson

The Chairperson welcomed the Experts to the meeting and urged them to focus on the meeting's expected outputs, and implored them to be innovative so as to achieve the objectives of the meeting. She encouraged them to be active and keep time since the work to be accomplished is relatively much. She went on to thank the EAC Secretariat for the hard work in coordinating the efforts of Partner States towards sustainable financing for health and HIV. In a special way she thanked the representatives of UNAIDS and EANASO for the technical and financial support towards the agenda of sustainable financing for health and HIV&AIDS.

She concluded by wishing all the delegates fruitful deliberations.

1.5 Remarks by the EAC Secretariat

Dr. Michael J. Katende, the EAC Principal HIV and AIDS Officer welcomed the experts and thanked participants for their dedication to the sustainable financing agenda for health and HIV/AIDS. He informed members that a successful HLMD was held in Arusha, 23rd June, 2016 where the EAC Partner States Ministers responsible for Finance and Health made and adopted a number of commitments towards sustainable financing for health and HIV/AIDS for the EAC region. He acknowledged Sida, UNAIDS and the Eastern Africa National Network of AIDS Service Organizations (EANNASO) for the financial and technical support in planning and executing the HLMD. Dr. Katende also thanked the Partner States' experts and members of the EWG on Sustainable Financing for their relentless technical support before, during and after the HLMD. He concluded his remarks by urging Partner States to implement the recommendations of the HLDM.

1.6 Objectives of the meeting

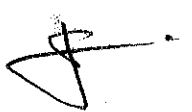
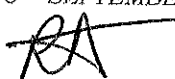
The main objective of this meeting was to follow up on the adopted commitments of the HLMD and to develop strategies and tools for operationalizing the recommendations from the HLMD on sustainable financing for Health and HIV&AIDS. The meeting was also aimed at mapping out means and ways of bringing on board other partners to support the sustainable financing efforts at country and regional levels.

Specifically the meeting aimed at;

- i. Reviewing the progress made by Partner States in implementing innovative health and HIV&AIDS sustainable financing interventions;



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- ii. Developing an action plan to operationalize the Ministers' recommendations from the HLMD meeting held in June 2016;
- iii. Developing a framework for monitoring the implementation of the Framework of Action (FoA) on sustainable financing as adopted by the Ministers of Health and Ministers of Finance;
- iv. Developing a resource mobilization strategy to support implementation of activities for the EWG on Sustainable Financing and other interventions.

2. Consideration of the various agenda items

2.1 Partner States' Updates on progress in the implementation of innovative Sustainable financing for health and HIV&AIDS

2.1.1 Republic of Burundi

The meeting was informed that Burundi has a draft financial strategy for health and HIV&AIDS in accordance with the sectorial regulations and in respect of healthcare delivery. This Financing strategy has been costed based on contributions of all stakeholders.

The detailed presentation is hereto attached as **Annex IV**.

2.1.2 Republic of Kenya

During the presentation, the meeting was informed that Kenya has evaluated various funding sources and that the top seven sources recommended by stakeholders include Government of Kenya Revenue, AIDS lottery, Health bonds, Tobacco levy, Dormant funds, Corporate Social Responsibility (CSR) levy, and Informal sector contributions. The experts were further informed that Kenya is currently undertaking the following actions to ensure sustainable financing for Health and HIV&AIDS:

- i. Follow-up on approval of Cabinet Memorandum given in December 2012 containing key proposals on setting up of the HIV Fund;
- ii. An on-going study on allocative efficiency to inform the country on efficiency gains in HIV&AIDS service delivery;
- iii. Frontloading investments for health and HIV through the National Social Insurance Scheme;
- iv. Study on Feasibility of Infrastructure Resources for HIV Response for the country's key infrastructural capital projects;
- v. Using the country's investment case to undertake Return on Investment Analysis for Health and HIV programmes with the aim of

- using the analysis to get private sector players contribute to financing HIV from a business case scenario; and
- vi. Expansion of the KNASA Resource Tracking Survey to cover spending at county levels for use in county engagement in mobilizing more resources for Health and HIV from the national treasury

The detailed presentation is hereto attached as **Annex V**.

2.1.3 Republic of Rwanda

The Experts were informed that Rwanda's Health and HIV sustainable financing strategies are hinged on three pillars of efficiency, increase of Domestic Resources, and Risks Pooling anchored on institutional environment for Social Health Financing and Accountability. In Rwanda, just like in the other Partner States, external funds have continued to decline, despite an increased need for quality health services and changing epidemics landscape.

The meeting was further updated that Rwanda;

- Has developed and validated a Health financing policy
- Is currently conducting a health services sustainability study
- Is currently reviewing the health sector needs of Health Sector Strategic Plan III

The full presentation is hereto attached as **Annex VI**.

2.1.4 The United Republic of Tanzania

The meeting was informed that URT has developed the Health and HIV&AIDS financing strategy which is ready for approval and adoption by February 2017. The experts were further updated on the key features of the current health financing system in Tanzania, which include;

- User fees which are widely present in the public health system, except for specifically defined services such as MCH and HIV&AIDS
- Different population groups are covered by different schemes with highly unequal entitlements
- Total health Insurance coverage is only 28 %
- High dependence on external funding (48% of total health expenditures)
- Per capita Health Expenditure is 50 USD below the internationally recommended rate of 86 USD

- There is still a significant level of dependence on external partners: currently donors contribute 49% of the total health Expenditure

The full presentation is hereto attached as **Annex VII**.

2.1.5 Republic of Uganda

The meeting was informed that while the health sector allocations and releases have increased in absolute terms over the five years in Uganda, the sector allocations as a proportion of the national budget have kept dropping over the last 5 years and have averaged at 8.5%. The country has developed the Health Financing Strategy and is in final stages of developing the HIV&AIDS financing strategy. Uganda has also a law to establish an AIDS Trust Fund and has embarked on institutionalization of AIDS resource tracking.

The full presentation is hereto attached as **Annex VIII**.

During the discussions of the presentations, the following observations were made by the Partner States Experts:

- There is a sharp decline in external resources for Health and HIV in all the Partner States.
- All Partner States had achieved various interventions to ensure for sustainable financing for Health and HIV&AIDS;
- Some Partner States had not integrated health and HIV&AIDS in their financing strategies
- Some Partner States had developed long term strategies for sustainable financing with little emphasis on short term remedies for the gaps caused by the sharp decline in resources.
- There is no mechanism for partner states to share best practices in sustainable financing.
- Some Partner States had not institutionalized the NHA to include all the components of HIV&AIDS resource tracking and this has hampered technical and allocative efficiency savings as an option for financing
- There exists an opportunity in the Partner States to tap into resources allocated to health in capital projects such as road construction

Following the above observations, the meeting recommends that:

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- a) **The EAC Secretariat facilitates exchange programs for cross learning and sharing of best practices in sustainable financing among the Partner States;**
- b) **Partner States should target various sources to raise funds to establish and implement insurance schemes; and**
- c) **Partner States to institutionalize their NHAs/NASA to include all the components of HIV&AIDS**
- d) **The EAC Partner States to endeavour to strengthen the private sector role in financing the health sector**

2.2 Overview on the outcomes of the High Level Ministerial Dialogue

The meeting was informed that HLMD was successfully held in June, 2016 in Arusha, United Republic of Tanzania with representation from the Ministries responsible for Finance and Health from all the EAC Partner States. Also present were Development Partners as well as representatives of Civil Society and Private Sector. A keynote address on efficiency gains was made by Prof. Kama Rogo highlighting the key areas where Partner States can make efficiency gains. Partner State representatives outlined the various ways in which they were implementing sustainable financing initiatives and their upcoming plans for strengthening this agenda. A number of recommendations and commitments were made in regard to sustainable financing for health and HIV&AIDS.

A Communiqué of the HLMD outlining the various commitments by the Partner States was shared with the experts and is hereto attached as **Annex IX**.

The meeting recommends to the EAC Secretariat in collaboration with the Partner States to fast track the signing of the Communiqué and circulate the signed copy by 15th October 2016.

2.3 Plenary discussion on operationalizing the Ministers' recommendations from the HLD meeting held in June 2016

Experts were divided into their respective Partner States and assigned to develop action plans for operationalizing the Ministers' recommendations from the HLMD held in June 2016. Each Partner State developed and

presented their action plans to plenary and these were discussed by the Experts.

The Partner State Action Plans are hereto attached as **Annexes X to XIV**.

Following the discussions in plenary, the meeting highlighted the pertinent issues as being: development of Health Financing Strategies, strengthening health insurance schemes, promoting efficiencies, promoting innovative financing e.g. Trust Funds, conducting comprehensive resource tracking and efficiency studies, and facilitating Partner States to tap into capital projects.

The experts therefore observed the following:

- i. It is imperative to include advocacy an component in all the proposed Partner State Action Plans
- ii. Partner States should also plan on how to address short term financing needs alongside the long term ones
- iii. Partner States are at different points in finalizing and operationalizing their health financing strategies
- iv. There are various infrastructural projects in which the Partner states can tap into finance health programmes

The meeting recommends to:

- a) **The EAC Secretariat to develop policy briefs using the sustainable financing analysis report to address identified country specific advocacy issues;**
- b) **EAC Partner States' on Sustainable Financing to finalize the development of their Action Plans operationalizing recommendations of the HLDM by 15th October 2016, and submit to the EAC Secretariat for compilation;**
- c) **EAC Secretariat to submit the consolidated Action Plan operationalizing recommendations of the HLDM to the 19th TWG on HIV and AIDS, TB and STIs and other relevant TWGs for consideration;**
- d) **EAC Partner States to finalize and operationalize their respective health financing strategies by December 2017;**
- e) **EAC Partner States to explore mechanisms to assess and utilise funds allocated for health, Gender and HIV interventions under infrastructure projects being undertaken by the countries; and**

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- f) **The EAC Secretariat to facilitate the dissemination of the report of the study on *Sustainable financing Analysis of Universal Health and HIV Coverage in the East Africa Community.***

2.4 Development of Resource Mobilization Strategy and Dissemination plan for the products of the HLDM

In addition the experts sat in two groups, one to develop a Resource Mobilization Strategy to support implementation of activities for the EWG and other interventions and a Dissemination Plan for the products of the HLMD on Sustainable Financing.

Following the presentations the experts made the following observations

- i. There is need for the region to mobilise resources to implement the sustainable financing agenda
- ii. The EAC Secretariat should lobby Partner States to adopt the sustainable financing options proposed by the HLDM

The meeting recommends to the EAC Secretariat to:

- a) **Mobilise resources and technical support to finalise the resource mobilisation strategy to support the implementation of the sustainable financing agenda for the region as per the Framework of Action; and**
- b) **To finalise the development of the Dissemination Plan; and**

3. A.O.B

The UNAIDS representative pointed out that EAC Secretariat should endeavour to include the Ministries responsible for Finance in the Partner States in the sustainable financing discussions for it to be successful. She further noted the importance of aligning the HIV and AIDS agenda to the broader global health priorities.

There being no other business the meeting adjourned at 1730hrs.

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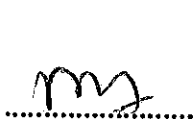
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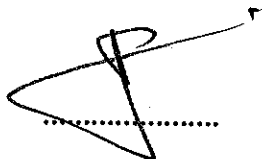
Signed on this 16th day of September 2016



Mariam Ally Juma

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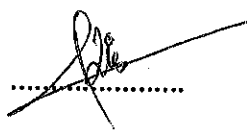
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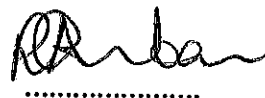
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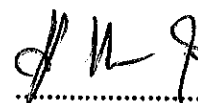
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