

## CSOs Statement Joint Annual Health Sector Review 2009

07 - 9 October 2009, Kunduchi Beach Hotel

Honorable Minister, Officials from MoHSW, MoF, PMO-RALG, Heads of Diplomatic Missions, all participants, Ladies and Gentlemen, good morning.

Honorable Minister, we are pleased with this opportunity for the Civil Society Organizations to be among the opening speakers. It is our hope that this collaboration will continue for strengthening our health system as well as health service delivery.

Honorable Minister, this statement was prepared by Youth Action Volunteers, a strong member of Policy Forum (PF). Policy Forum, as you may be aware, is a focused member-led network which is striving to increase informed civil society participation in decisions and actions that determine how policies affect ordinary Tanzanians, particularly the most disadvantaged. This network currently comprises of more than 90 Non Governmental Organizations.

Honorable Minister, we recognize that a lot has been achieved in the health sector and Civil Society Organizations have been working with the health sector in various processes including development of various strategies and policies such as HSSP III, monitoring the performance of health sector such as tracking deployment of health workers. We also share with the health sector critical analysis of sector budget and expenditures.

Civil Society Organizations are also working with the Parliament in the process for formulation of various health related laws. Our inputs have been accommodated, for example, in the Human DNA Regulation Act 2009. Mental Health Act and the Public Health Act 2008.

Honorable Minister, while we have no intention of underrating the many achievements celebrated in the health sector, CSOs are calling for urgent and collective action on key persistent challenges facing the health sector year in year out.

Current trends suggest that Tanzania may not achieve the MDG targets for maternal and child mortality. However, we commend the government for all efforts to address maternal and child health. For example, the government allocated 17 billion in the financial years 2008/09 and 2009/10<sup>1</sup> to support the reduction of maternal mortality. We therefore would like to see the health sector utilize this budget to effectively reverse maternal and child mortality.

Honorable Minister, CSOs are pleased with the government efforts to put in place policies for free health care by vulnerable groups such as children under five years, pregnant women, older people and individual with disabilities. We also commend your efforts in the parliament to insist on the implementation of this policy. However, as we all know, many individuals in these groups are not getting free health care services due to systemic and administrative challenges. CSOs call for the health sector to find lasting solution to this problem through working together with both health providers and users at facility level

Honorable Minister, the continuing human resource crisis has a devastating effect on provision of quality health care, especially maternal and child health. The existing strategies to recruit and deploy new health workers are commendable. The tracking study on the deployment of health workers which was conducted by YAV in collaboration with MoHSW gives evidence that attraction and retention of health workers in remote and underserved districts remains a challenge. CSOs call for the government to urgently address this problem.

Honorable Minister, this year Parliamentarians continued to complain about continued shortages and stock-outs of essential supplies and drugs at health facility level. Like human resource for health, this has remained to be the area of weakness by the health sector for many years now. This means that current strategies and system are not working, and many people continue to suffer as a result. We urgently call for the government to use bottom-up approaches in finding solution to this problem.

Honorable Minister, the CCHP review reports have indicated low participation of citizens in the formulation of annual plans. Research has also documented that health governing committees are not truly accountable to service users and not functioning as expected. The MoHSW in collaboration with PMORALG should ensure that health facility users and Community Based Organizations participate in developing Council Health Plans.

Honorable Minister, to achieve accountability we have to be transparent with public budgets and plans. Budget documents are increasingly becoming difficult to access both at central and health facility level. This has been a cry from CSOs in this review every year. We therefore continue to demand that financial allocations and information on the use of money at any level is timely and publicly available.

<sup>&</sup>lt;sup>1</sup> Sub vote 2001 of Volume IV of Budget book for Public Expenditure –Development votes.

Honorable Minister, we are very much encouraged that your ministry has expanded care and treatment program in Tanzania and that all district hospitals are providing ART. We, however, would like to point out the need to improve the quality of services, notably retention of patients on treatment from the current 54% at the period of 24 months to at least 90%.

Honorable Minister, only 5% of exposed infants to HIV and AIDS receive early diagnosis and their treatment; Infant formulation are also cumbersome, leaving along their potential to malnutrition as their mothers opt for alternative feeding. We recommend that the ministry consider the improvement of access to early infant diagnosis, nutrition and access to fixed dose combination to HIV positive infants.

Honorable Minister, we want to leave you with this final thought. We know it is possible to register achievements in the Health Sector because you have demonstrated that to us. The challenge is now building from past gains as you continue to have an honest dialogue with stakeholders about what is not working and how to overcome such setbacks

We thank you

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