

**Joint Annual Health Sector Review Policy Meeting (24.01.2018)**

Speech on behalf of Development Partners in Health

***Honourable Minister of the Ministry of Health, Community Development, Gender, Elderly and Children, Ummy Mwalimu***

***Honourable Minister of the President's Office Regional Administration and local Government, Selemani Said Jafo***

***Honourable Permanent Secretaries and government officials from the***

- *Ministry of Health, Community Development, Gender, Elderly and Children,*
- *the President's Office Regional Administration and local Government,*
- *the Prime Minister's Office,*
- *The President's Office Public Service Management and Good Governance,*
- *the Ministry of Finance and Planning*
- *the Ministry of Education, Science and Technology and*
- *the Ministry of Water and Irrigation,*

***Chief Medical Officer,***

***Representatives of civil society and the private sector***

***Fellow Development Partners,***

***Invited guests,***

***Dear Ladies and Gentlemen,***

Habari za Asubuhi

It is a pleasure for me to stand before all of you today for the **opening of the Joint Annual Health Sector Policy Meeting** on behalf of the Development Partners in Health.

We are convening here today as Development Partners, as Government, as civil society and other stakeholders to re-affirm our **commitment** to the health sector and to advance **priority policy issues** that are **most pressing** to improve the health care of all Tanzanians. All our **efforts** will be **measured** against the policy recommendations we are discussing and will be signing here today.

We have seen **progress** in some areas in the past years: a decline in infant mortality, under-five mortality and a growing number of women who deliver in health facilities. These are **encouraging developments** and we **commend** the Tanzanian government for these **achievements**.

Obviously, many goals have yet to be achieved: newborn and especially **maternal mortality** are still high. Due to the importance of this issue, the **theme** of the 2017 Joint Annual Health Sector Review has been **Maternal and Reproductive Health** – an area which is rightfully at the top of the Tanzanian government's health agenda.

Maternal and Reproductive Health is not only an important health issue but an issue that **cuts across** many **sectors** including education, energy, water and infrastructure. As we all understand, to achieve sustainable results and ensure effective public health services delivery we must join our efforts and together pursue a holistic, multisectoral approach. We therefore call upon the Tanzanian Government to ensure all relevant sectors and policies take the health issues into account and we work jointly to overcome the many

challenges in the health sector in order to improve health services for all citizens in Tanzania.

One of the three key pillars to reduce maternal mortality is **family planning**. **Availability of commodities** for voluntary family planning and contraception is crucial to advancing **sexual and reproductive health and rights**. We are faced with a severe contraceptives gap in Tanzania that needs to be addressed. An increased allocation for commodities in the budget and release of allocated funds for procurement of these life-saving commodities are needed. Furthermore, we see the urgent need to address challenges surrounding **sexual and reproductive health of adolescent boys and girls** with measures that promote **non-discrimination and equality**.

The **Joint Field Visit** by the Ministry of Health, PORALG, DPs and other stakeholders in October last year highlighted the importance of the recruitment, distribution, training and retaining of **qualified staff**, the urgency for well-trained **midwives** and Community Health Workers as well as the improved availability of **medicines** and technical **equipment**. The inequitable distribution of medical specialists and qualified health workers continue to pose a great challenge. This means – also with a view to the policy recommendations – that about **assessing needs** and **prioritizing** the use of medical staff is required to maximise coverage with the available resources.

The findings of the Joint Field Visit also underlined the still great need for **community mobilization** and ensuring utilization of available services such as antenatal care and skilled birth attendance including midwives.

Another major challenge that remains is **health financing**. This includes the need for increased domestic resources for the health sector, the timely disbursement of available funds to secure adequate service delivery as well as

the necessity for innovative mechanisms in promoting alternative sources to finance health care, including from the private sector. We Development Partners see a great need to finalize the **Health Financing Strategy** in order to provide a clear direction for implementation and alignment of activities in this area. It is critical in order to push forward the long awaited **Mandatory Health Insurance** and allocate specific funds to allow enrollment particularly of those who are not able to contribute, the poor and the vulnerable population.

With regards to **health commodities**, there has been a great increase in budget allocation for medical supplies and services in the past two years from Tsh 60 billion in FY 2015/16 to Tsh 260 Billion in 2017/18. This marks one important step to improve the delivery of health services. However, this budget was also covering the mounting debts to the Medical Stores Department (MSD) and – as in most areas - there is a constant challenge of bridging the gap between budget allocation and actual disbursement and utilization.

What now needs to be advanced more strongly is the supply of essential medicines to **rural areas** and **hard to reach places**, payment of the remaining MSD debt, the strengthening the supply chain and operationalization of the prime vendor system. **Timely disbursement** of funds for procurement of essential medicines and health commodities at all levels is still a pressing task and as is the need to track essential medicines and health commodities management and their use at all levels.

As mentioned before, **human capital** is a very important element for development. Commendably, the ratio of Medical Officers to population has seen an increase. However, the findings of the Joint Field Visit indicate that we nevertheless have a **huge shortage** of human resource for health as a result of the previous existing shortage which was aggravated due to the laying off over

3000 staff because of the issue of false certificates. As we are all aware, there is a **gap** of approximately 50% (!) of the minimum number of health workers required to provide quality health services in the facilities at the various levels. We therefore call for **strong leadership and adequate resources** to address the shortage of human resources for health particularly on the issue of permits, quality of training, placement, retention, and performance management of various cadres of human resource.

We therefore call upon the *Ministry of Health, Community Development, Gender, Elderly and Children*, the *President's Office Regional Administration and Local Government* and the *President's Office Public Service Management and Good Governance* to **invest more on new permits for qualified personnel** in the priority health facilities beginning with the (334) facilities staffed by medical attendants and the more than 1.500 facilities that are currently headed by Nurse Midwives with no Clinical Officers.

In regards to the recruitment, availability, retention and training of core specialist cadres who are urgently needed at all regional referral hospitals, there needs to be a focus – from DPs' point of view – on obstetrics, pediatrics', internal medicine, general surgery, orthopedics and trauma and anesthesiology.

With regards to **health infrastructure**, the Joint Annual Health Sector Review indicates that Tsh 167.2 Billion from Development Partners and Tsh 73 billion from the Tanzanian Government (FY 2017/18) have been committed to building and renovating health facilities. This is highly commendable. It is important now to have a clear prioritization on the basis of a sound needs analysis when deciding on which infrastructure to prioritise and assure that adequate human resource are put in place to operate the

infrastructure once completed. It would be a disservice to all if we end up with freshly renovated and well equipped facilities that do not have the required personnel to staff them.

After saying these few words I – on behalf of the Development Partners in the health sector – would like to extend our **gratitude** to the *Ministry of Health, Community Development, Gender, Elderly and Children* as well as the *President's Office Regional Administration and Local Government* for the very good cooperation we Development Partners enjoy with you. We hope to continue and even improve further our cooperation in 2018.

I thank you all for your kind attention.

Asanteni kwa kunisikiliza.