



Minutes, DPG Health meeting Wednesday, 13th March 2019, UNICEF Conference room

Present

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| 1. Meaghan Byers | Canada | DPG H Chair |
| 2. Kyaw Aung | UNICEF | DPG H Incoming Chair |
| 3. Leticia Rweyemamu | WHO | DPG H Secretariat |
| 4. Fin Poulsen | Denmark | Member |
| 5. Darius Cosmas | Denmark | Member |
| 6. Gloria Ngaiza | DFID | Member |
| 7. Suse Matamwa | DFID | Member |
| 8. Hiltruda Temba | PEPFAR | Member |
| 9. Otilia Scutelnicu | UNAIDS | Member |
| 10. Maximilian Mapunda | WHO | Member |
| 11. Dr. Grace Saguti | WHO | Member |
| 12. Rose Shija | WHO | Member |
| 13. Dr. Jarrie Kabba-Kebbay | UNFPA | Member |
| 14. Felister Bwana | UNFPA | Member |
| 15. Samwel Msokwa | UNFPA | Member |
| 16. Pascal Kanyinyi | KfW | Member |
| 17. Kira Thomas | KOICA | Member |
| 18. Giampiero Baldassarri | GIZ | Member |
| 19. Laurel Fain | USAID | Member |
| 20. Elizabeth Williams | USAID | Member |
| 21. Jane Schuellor | USAID | Member |
| 22. Thomas Teuscher | Swiss Embassy | Member |
| 23. Frederick Magnusson | UNICEF | Member |
| 24. Wendy Fisher | EU | Guest |
| 25. Laurean Bwanakunu | MSD | Guest |
| 26. Billy Singano | MSD | Guest |
| 27. Dr. Joseph Komwihangiro | Pathfinder International | Guest |
| 28. Josaphat Mshigati | Pathfinder International | Guest |
| 29. Meshack Mollel | Pathfinder International | Guest |

AGENDA

1. Welcome and Introduction of members
2. Presentations: (1) Demographic study (2) Improving supply chain management and commodity security
3. Adoption of the Minutes, Agenda and Matters arising
4. Updates on SWAp events
5. DPG H Representation in TNCM
6. Next Incoming DPG H Chair
7. Critical issues from TWGs/Thematic Areas



8. Updates on key events/ Upcoming events, missions
9. AOB
10. Next DPG H meeting: 3rd April 2019

ACTION POINTS:

- **DPG H Representation in TNCM:** DPG H Outgoing Chair will be representing DPG H in the TNCM.
- **Next Incoming DPG H Chair:** DPG H Chair will send an email to DPs to express their interest.
- **HRH small team to prepare for high level dialogue:** Troika will send an email to DPs to express their interest in joining the team for HRH analysis.
- **TDHS:** Canada will liaise with NBS for stakeholders meeting.
- **Presentation for April DPG H meeting:** Troika and the Secretariat will follow up on a presentation on HRH analysis to prepare for high level dialogue meeting.

1. **Welcome and Introduction of members**

The DPG H Chair welcomed all members to the meeting followed by round of introductions.

2. **Presentations:**

(i) Harnessing the Demographic Dividend for Tanzania

The presentation was done by Pathfinder International Country Director, Dr. Joseph Komwihangiro, informing DPs on the recent study conducted by the government on modelling demographic dividend (DD modeling). It was informed that the World Bank, DFID, and USAID have undertaken demographic dividend modeling studies with similar findings. USAID supported the DD modeling study which was led by the GOT. It involved 9 Ministries and 6 Universities. The study objectives were to: review past trends and current demographic and economic data; explore impact of demographic, education, and economic policies on Tanzania's development aspirations; enhance understanding of the DD concept and assess the prospects of harnessing it for Tanzania; and identify policy options to optimize DD. The study report has been approved and signed by the Minister of Finance and Planning, and expected to be launched soon. The DD modelling is based on the four scenarios:

SCENARIO 1: BUSINESS-AS-USUAL (BAU): *Maintains 'status quo:'*

- High child-dependence burden.
- Poor economic performance (~30% of progress needed to achieve Vision 2025 aspirations).
- Weak implementation of development policies.



- Country continues to perform below its potential.

SCENARIO 2: ECONOMIC-ONLY EMPHASIS: *Prioritizes investment in economic reforms, but limited investment in social sectors:*

- Country addresses its economic bottlenecks and puts in place policies, systems, and resources to implement Vision 2025 and Five-Year Development Plan.
- Enhanced production efficiency, accelerated economic growth, job creation, and poverty reduction.
- Education and FP indicators remain at business-as-usual levels.

SCENARIO 3: ECONOMIC + EDUCATION EMPHASIS: *Prioritizes investment in economic reforms and education, but limited investment in other social sectors:*

- Economic bottlenecks addressed.
- Enhanced production efficiency and accelerated economic growth, job creation, and poverty reduction.
- Investments in education reforms, significantly increasing number of schooling years.
- FP indicators kept at business-as-usual scenario level.

SCENARIO 4: COMBINED INVESTMENT: *Prioritizes investment in economic reforms, education sector, and FP:*

- Considered the best policy scenario for attaining socioeconomic transformation per Vision 2025.
- Simultaneous investment in economic and education reforms and FP.
- Commitment and actions to develop quality human capital and create competitive economy and favorable investment climate through good governance.

The presenter requested DPs to understand the DD concept and assist in socializing it with the government officials including the sub-national level.

Discussions:

During discussions it was suggested that the report should also be shared with the Social Welfare Parliamentary Committee. It was responded that engagements have started whereas the Speaker of the Parliament has promised to present the report to all MPs and Parliamentary Committees once launched. It was advised that advocacy additional inputs are needed to go with the modelling analysis including the political economic analysis to be able to communicate the message well to policy and decision makers. The presentation can be found at the DPG H website through: http://www.tzdpg.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2019/DD_Slides_DPG-Health_12_March_2019.pdf

(ii)Improving Supply Chain Management and Commodity Security: A case of MSD Tanzania



The presentation was made by the MSD Director, Mr. Laurean Bwanakunu, who reminded DPs of MSD's role: procurement, storage and distribution. MSD currently has 111 international and 17 local manufacturers. New digital platforms have been developed. MSD customer portal has also been developed to facilitate procurement of health commodities by health facilities. MSD has also signed MoU for pooled procurement for SADC. The biggest challenge that has been noted is quantification of viral load reagents which threatens stock availability and expiries. Government debt as of February 2019 is at \$90.1m. MSD is planning to build new warehouses in Dar es Salaam, Simiyu, Bukoba and Ruvuma, being more digital and go for e-procurement to improve supply chain. The presentation can be found at the DPG H website through: http://www.tzdpdpg.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2019/MSD_PRESENTATION_13.03.2019.pdf

3. Adoption of the Minutes, Agenda and Matters Arising

Minutes of the previous meeting were approved and Agenda for this meeting adopted.

4. Updates on SWAp events

Feedback on February and March 2019 monthly consultative meetings between PS-MOH and DPG H Troika: the meetings are going on well. Deputy PS –PORALG has been invited to the meetings. There is also a good follow up on the items discussed. On the family planning, MOHCDGEC agreed to look into it and advise. The PS MOHCDGEC is quite open and interested in talking about HRH issues with DPs. The Ministry agreed to have a small team to conduct HRH analysis in preparation for the high level dialogue meeting. The Ministry is looking forward to focus on production to have more of the lower level cadres in health facilities e.g. nurses and improve training institutions. Deputy PS –PORALG highlighted clearly the interventions she wants to put forward especially the clinical care, which she re-emphasized during the TC-SWAp meeting. MOHCDGEC will send their proposal to DPs to support construction of their 6-storey office building. DPG-H will facilitate the process assuming that there might be donors interested in civil work.

5. Feedback on the TC-SWAp meeting, MTRs – HSSP IV and One Plan II

The meeting was very good, it was also attended by the Deputy Minister. HSSP IV MTR Inception report was presented whereby One Plan II MTR has been integrated into the HSSP IV MTR. The MTR budget has almost been fully covered which is about \$678m. MTEF budget 2019/2020 was presented with an indication of priority areas especially the JAHSR Policy Commitments being included. There is a budget increase of 1.6% from the previous year budget. A presentation on revitalization of TWGs was also made. ToRs for TWGs have been revised. The TWGs will be invited in April 2019 to develop their Plan of Actions. The PS MOHCDGEC wants to see the TWGs meet regularly as per the SWAp calendar. Institutionalization of an accountability mechanism to ensure TWGs efficiency was recommended.

6. DPG H Representation in TNM



It was suggested that, to ensure maximum representation of the DPG H in TNCM, amongst the DPG H Troika, one chair should be representing the group in TNCM. It was agreed that DPG H Outgoing Chair will be representing the DPG H in the TNCM.

7. Next Incoming DPG H Chair

DPG H Chair will send an email to members to allow those interested to express their interest. Voting will done in April DPG H meeting.

8. Technical Working Groups/Thematic Areas Updates

TWGs updates that have been submitted are from Health Financing, and Health Commodities and Health Technologies. See DPG H web link: <http://www.tzdpg.or.tz/dpg-website/sector-groups/cluster-2/health/top-tabs/dpg-h-meetings/2019.html>

RMNCAH TWG: the TWG meeting is planned for 21st March 2019 in Morogoro.

Health Basket Fund: Funds disbursement has been done for quarter one only, we are now in quarter four. HBF Mid-Term Review (MTR) has been delayed, MOHCDGEC is still working on the procurement of consultant.

DPG AIDS: Last week the group was engaged with the GF Country team mission. 29th March 2019 is the deadline for final submission of PEPFAR COP. There was a meeting in March 2019 in Johannesburg where the government made policy commitment to HIV so that they can access COP funds.

Global Fund: GF Country team visited the country last week. On 2nd February 2019, GFATM country team met with members of DPG Health and DPG AIDS for a debriefing. They completed reprogramming for TB and RSSH, they have not completed for HIV. The CHW component is standby. GF expressed interest to attend the HRH high level meeting as they cannot reprogram the CHW funds. This can be a hindering factor to the next round applications, there is a need for an harmonized dialogue. They also reminded of their request to participate in DPG H and stressed that their interest is to participate as observer and not as member of DPG H. The confirmation letter will be sent to GF.

GAVI: About USD 39m for Health System Strengthening grant number 2 (HSS II) final budget has been submitted to GAVI board for approval. Currently, audit issue has been ongoing with the government, so GAVI will continue transferring money through UNICEF. GAVI is also looking into other financing mechanisms.

Ebola/ cholera/ dengue/anthrax outbreaks' updates:

Ebola: the 2015 cholera outbreak is over. There is a new wave since January 2019. WHO and partners support the Ministry to come up with cholera elimination multi-sectoral plan.



Dengue: no weekly reports. The government is supposed to review its plan for a multi-sectoral approach.

Anthrax: no case has been reported in the past month. Vaccination continues in the affected areas.

Discussion: How can we get the components of the National Health Security Plan be addressed in other sectors' budgets? What activities are facility based or LGAs based so that others can be addressed through health basket fund? This can be advocated through Comprehensive Council Health Plans (CCHPs) to ensure the activities are reflected and funds are allocated in the CCHP. There is a need to factor in the CCHP review guideline.

More information on the outbreaks updates can be found at the DPG H website link: http://www.tzdp.org.or.tz/fileadmin/documents/dpg_internal/dpg_working_groups_clusters/cluster_2/health/DPG_H_Meeting_Documents_2019/DPGH_Updates_Tanzania_Weekly_Update_11_March_2019.pdf

9. Updates on key events/Upcoming events

- **Global Fund board meeting** will take place in May 2019. Thomas Teuscher (Swiss Embassy) will participate. He will share Agenda of the meeting.
- **PS3** is coming to an end next year 2020. USAID is designing another HSS area which will be a multi-sectoral involving among others, health, education and agriculture sectors.
- **Improve coordination as DPs:** DPs should look at the SWAp calendar when they have missions to avoid overwhelming government officials and adhere to the principles of aid effectiveness.

10. AOB

- **HRH small team:** a small group of partners and government will conduct HRH analysis to be presented at HRH High level dialogue meeting. An email will be sent to DPs to express their interest for those who wish to join the group so that the names can be shared with MOHCDGEC.
- **TDHS:** USAID undertakes a costing analysis for next TDHS. Canada will liaise with NBS to find out dates for stakeholders meeting.
- **Presentation for next DPG H meeting:** will be on HRH analysis.

11. Next meeting:

Next DPG H meeting will be held on **3rd April 2019 at 12pm at Canadian High Commission.**