

**SPEECH**

**BY**

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**AT**

**THE OPENING OF THE REGIONAL MEETING OF  
PARLIAMENTARY COMMITTEES OF HEALTH IN  
EASTERN AND SOUTHERN AFRICA**

**SPEKE RESORT MUNYONYO, KAMPALA**

**SEPTEMBER 21, 2009**

Our Guest of Honour, the Minister of Health, Republic of Uganda Hon. Dr Stephen Mallinga  
The Chairman, SEAPACOH, Dr Blessing Chebundo  
The Deputy Executive Director, APHRC, Dr. Eliya Zulu  
The Representative of EQUINET  
Distinguished Hon. Members of Parliament both from Uganda and outside Uganda  
Representatives of Development Partners  
Ladies and Gentlemen.

First of all I wish to start by extending a very warm welcome to all of you to this regional meeting of Parliamentary Committees of Health in Eastern and Southern Africa

Let me also take this opportunity, on behalf of PPD Africa Regional Office and on my own behalf, to welcome you to our Munyonyo, Kampala, Uganda. I would like to thank you for the valuable time you have taken off your busy schedules to travel all the way to be here with us in this meeting.

Guest of Honour, Ladies and Gentlemen,  
Allow me to share with you some background information on Partners in Population and Development (PPD).

As you may recall, in 1994, in Cairo, Egypt, representatives of the countries of the world came together in the landmark International Conference on Population and Development (ICPD) and developed a new paradigm for reproductive health, the ICPD Programme of Action (PoA). At the ICPD, developing countries endorsed the concept of south-south cooperation that has since become the core model of Partners in Population and Development (PPD).

Mr. Guest of Honour, the dominant capacity of implementing reproductive health, population and development policies and programmes lies in developing countries, yet the usual mode for providing assistance has historically been north-south. The idea was therefore for the PPD to "broker" arrangements for the horizontal transfer of technical and programmatic expertise from one southern country to another (South – South cooperation).

Uganda is host to the PPD Africa Region Office which was opened in February 2007 in order to help invigorate south-south collaboration within Africa. The PPD Africa Office was established to ensure an improved sexual and reproductive health environment and better coordination of south-south collaboration activities and programs in Africa. The Vision of PPD Africa is "a continent that meets its Reproductive Health needs promotes the Population and Development agenda and thereby addresses poverty, through South-South Cooperation". Its Mission is "to provide a platform for the promotion of and resource mobilization for Reproductive Health and Population and Development in Africa through advocacy and policy dialogue, networking and building strategic partnerships in the region and sharing of experiences and good practices".

**Ladies and Gentlemen,**

PPD ARO sees a great, yet not fully tapped potential of working and collaborating with parliamentarians in promoting issues of RH, population and development at country, regional and continental levels. We believe that by working together with parliamentarians across countries and regions, the benefits of networking, sharing of information, experiences and best practices can be realised. That is why PPD ARO, in line with its strategic pillar of advocacy and policy dialogues supports interventions geared at working with and engaging policy makers especially parliamentarians.

Indeed, PPD ARO was able to organise a similar meeting like this one in September last year in this same venue, and it is gratifying to note that many of you present here attended that meeting. As a matter of fact this meeting has been organised as a follow up to the one that was held in September 2008.

As an update for you, just a month ago, in August, PPD also organised another policy dialogue meeting for the Afro – Arab Parliamentarians on reproductive health and HIV/AIDS which was

held in Nairobi. The meeting focused on issues of integration of reproductive health and HIV/AIDS. Again when I look around this hall, I note that a number of you attended this meeting. Thank you for the positive response to our calls and to attending our meetings. Let me also remind you that PPD also organised and supported a Strategic Plan development meeting for SEAPACOH which was held in July this year. SEAPACOH now has a Strategic Plan which guides and steers its work. All this work we do and continue to do with parliamentarians is because of the recognition of the important role you play in shaping human destiny through your critical role as Parliamentarians.

**On this particular meeting:**

PPD greatly appreciates the main objective of this meeting which is to provide an opportunity to review progress, share experiences and lessons learnt over the past one year on the implementation of the resolutions made at the September 2008 meeting. I would like to underscore one of the resolutions that was adopted which is “to raise the profile of health in all our parliaments and strengthen our own leadership, roles and capacities in promoting, monitoring and advancing equity in health and health care. I want to believe that implementing such a resolution by parliamentarians is not far-fetched, neither is it asking for too much from you, ladies and gentlemen.

**Our guest of honor**

PPD ARO believes and is keenly devoted to working with parliamentarians as change agents and central players to the full implementation of international and regional agreements on sexual and reproductive health and rights. Our countries have very good and clear policy frameworks but the overriding problem on our continent remains a lack of political will and commitment to support the implementation of these otherwise good policies. For instance, performance on Abuja Declaration of devoting at least 15 % of the national budgets for health has remained a major challenge. Of all sub Saharan African countries, only one country Malawi, has reached the 15% target. Implementation of the Maputo PoA at country level remains poor and uneven. While some countries such have formulated national strategies or “Roadmaps”, their financing and implementation remains weak. In some countries, the Roadmaps have remained in draft forms due to lack of political commitment. We, therefore, see a lot of hope in parliamentarians as vanguards to improve the implementation of policies and programmes, as well as resource allocations for health including reproductive health. Through legislating on good policies for health, appropriating funds for health programs and projects, and exercising your oversight roles in the implementation of health related policies and programs, we know you can make positive impact in the policy environment for improving the reproductive health situation at country, regional and continental levels.

It is gratifying to note that we have a pool of policymakers committed to health issues, population and development in this room and I am encouraged and optimistic that this meeting will by the end of this meeting come up with concrete and realistic and workable recommendations. We also hope that this meeting will provide an opportunity for us all to have a critical look at our own strengths and opportunities as well as areas where we can learn from each other. We also hope that the meeting will help to lay a strong foundation for long lasting and mutually beneficial partnerships and collaborating arrangements among countries, in addressing SRHR, population and development in the region.

I thank you.