



Partners in Population and Development Africa Regional Office (PPD ARO)

Third Partners Country Coordinators (PCCs) for Africa Region

Highlights on Maputo Plan of Action and Abuja Declaration

By
Abdelylah Lakssir
International Programme Officer, PPD ARO

**Dakar, Senegal
November 28, 2011**

About Maputo Plan of Action (MPoA)

- A continental policy framework on Sexual Reproductive Health and Rights (SRHR) adopted in 2006 by Africa Union Summit to accelerate and improve sexual and reproductive health and rights in Africa.
- The MPoA was extended to 2015 by the Africa Union Summit in Kampala, July 2010
- MPoA is vital to the achievement of the goals of the ICPD, and the MDGs, particularly MDG 4 & 5.

Maputo Plan of Action (MPoA) (1)

Elements:

1. Integration of HIV/STI, Malaria and SRH Services into PHC
2. Strengthening of Community based STI/HIV/AIDS and SRHR Services
3. Repositioning Family Planning as key strategy for attainment of MDGs
4. Positioning Youth-friendly SRHR services as key strategy for youth empowerment, development and well-being
5. Reducing the incidence of unsafe abortion

Maputo Plan of Action (MPoA) (2)

Elements:

6. Increasing access to safe motherhood and child survival services
7. Increasing resources for SRHR
8. Achieving SRH Commodity security strategies for all SRH components
9. Monitoring and Evaluation

Progress-to-date in implementing MPoA

- Within the first cycle of life of the MPoA, major milestones were attained.
 - Several countries developed Maternal and New-born Health Road Maps
 - Significant progress in scaling up linkages between SRH and HIV/AIDS was made
 - Significant increase in expanding access to FP services
 - Laws to protect women against violence and criminalizing harmful practices against women were passed.

However progress in term of implementation varies between countries

Energizing factors to support the implementation on MPoA

- **The African Union** should continue its advocacy role, conduct resource mobilization, monitoring & evaluation, and dissemination of best practices
- **Regional Economic Communities** need to provide technical support to countries, advocate for increased resources, harmonize implementation, monitor progress, and share best practices
- **Countries** should incorporate all action areas of the Maputo Plan of Action into current national strategies and roadmaps
- **Members of Parliament**, must play their legislative, representative, budget appropriation, and oversight roles
- **Partners**, including NGOs and CSOs and other development partners, need to align their financial and technical assistance and cooperation plans with national and regional needs

About Abuja Declaration

- Generated from a special summit of Heads of State of Africa held in Abuja from 26-27 April 2001 to address the exceptional challenges of HIV/AIDS, tuberculosis and other related infectious diseases
- At this meeting, African governments committed to allocating at least 15% of their annual government budgets to the health sector
- They also called upon donor countries to meet their commitment of devoting 0.7% of GNP as Official Development Assistance (ODA) and cancel African external debt in order to allow increased investment in the social sector

Progress-to-date in implementing Abuja Declaration

- Since 2001, few countries have made progress in increasing their domestic funding towards the Abuja target. the AU reports that six (6) AU member states have met the 15% target—Rwanda (18.8%), Botswana (17.8%), Niger (17.8%), Malawi (17.1%), Zambia (16.4%), and Burkina Faso (15.8%)
- According to the WHO, only eight (8) countries in Africa are on track to meet the Millennium Development Goals (MDGs)—Algeria, Cape Verde, Egypt, Eritrea, Madagascar, Rwanda, Seychelles, and Tunisia—and most African countries are achieving less than 50% of the gains required to reach the goals by 2015
- The AU reports that government health spending in sub-Saharan Africa currently averages US\$25-27 per capita, yet 32 of the 53 AU member states invest less than \$20

The result of this funding shortfall from both domestic and donor resources means that most African countries are not yet on track to achieve the health MDGs.

Energizing factors to support the implementation of Abuja

- **African countries:**

- Need to monitor/evaluate and report regularly on progress towards the Abuja target in national and regional meetings
- Need to set out open and transparent policies on how domestic funding for health is sourced, spent, monitored and accounted for.
- Ministers of health and finance can enhance governance of ODA that flows into their country for health
- Promote South-South collaboration through exchange of best practices and expertise to improve the efficiency of the health system.
- Increase domestic spending for health BUT not at the expense of reductions in spending on other social services.

- **Donor countries:** need to to increase their ODA to the target of 0.7% of gross national product (GNP) to developing countries in line with the national and regional priorities of recipient countries

Conclusion

Universal access to family planning and reproductive health services is critical for the achievement of MDG5 and essential to the other MDGs. The Maputo Plan of Action and the Abuja commitment are the vehicles in Africa for their attainment. It is time to refocus our efforts on ensuring their implementation



Partners in Population and Development Africa Regional Office (PPDARO)

Thank you!

