

***Review of the implementation of the SEAPACOH
Strategic Framework Plan: Achievements;
Challenges and the way forward***

HON Blessing Chebundo
Chairperson, SEAPACOH

chebundobmc@yahoo.com and garaibmc@gmail.com

PRESENTATION LAYOUT

- Brief on SEAPACOH
- Background of Strategic Framework
- Strategic Vision: Mandate: Mission: Values
- Brief on Strategic Framework implementation
- Overall Assessment of Implementation of 'Strategic Framework Plan'
- Summary of Challenges/Threats
- Way forward

SEAPACOH

- SEAPACOH: *is a Network of Parliamentary Committees on Health In Southern and Eastern Africa.*
- The Overall **Objective** of the Network is to build a more Consistent/coherent collaboration of the Parliamentary Committees on Health towards achieving individual and regional goals of health equity and effective response to HIV/AIDS
- The Network **aim** is to strengthen the role of Parliamentary Committees on health in areas of **budget oversight**; review of health **related legislations**; health policies; and to provide leadership for the achievement of health goals.
- Within the fulfillment of its facilitative democratic principles, SEAPACOH will continue to **engage, collaborate**, and work with Civil Society Organizations for health (CSO), health **professionals, academics**, non-state research institutes, development partners for health, and, will co-operate and interact with regional policy institutions in areas of equity on health.

Background to Strategic Framework

- ❑ Developed with the assistance of PPD ARO and other partners (**April 2009**) and through a participatory process,
- ❑ The Strategic Framework provides **direction (compass)** and articulates the Alliance's priority areas of business focus, and strategic interventions during the period 2009-2013.
- ❑ The **three** main areas of focus identified include:
 - Ensuring needs-based resourcing of the health sector
 - Ensuring effective domestication, implementation and compliance with agreed upon commitments in the health sector by governments, and
 - Ensuring sustainability of the Alliance/Network

Strategic Vision: Mandate: Mission: Values

- **Vision:** Health for all as a fundamental human right
 - **Mandate:**
 - a) To **nurture a culture** of health as a basic human right
 - b) To **promote community participation** and involvement in public health issues affecting the population
 - c) To **strengthen linkages** with key stakeholders including civil society organizations and state and non-state professionals in Health at regional level in order to increase health promotion, strengthen public participation, provide leadership and enhance responses to Health challenges including Equity, Reproductive health, HIV and AIDS.
 - d) To undertake any other activities in line with the Alliance's Vision and Mission
 - **Mission**
 - To provide **consistent collaboration** of the Parliamentary Committees on Health in the ESA Region in their representational, legislative, budgetary processes including appropriation and oversight roles to achieve health for all.

Cont..... Strategic Vision: Mandate: Mission: Values

- **Core Values:**
 - a) **Shared concerns** - members share common concerns regarding the health sector including the current inequity in resource allocations for health; challenges in Reproductive health, HIV/AIDS
 - a) **Common voice** - SEAPACOH presents an opportunity for unified, strong and coordinated advocacy for effective action to be taken on the health sector issues of concern to the Alliance. And the regions
 - a) **Commitment to equity and equality** - SEAPACOH believes that sound **health is a fundamental human right** that must be accessible to all regardless of gender or socio-economic circumstances.
 - a) **Adherence to democratic principles** - The Alliance believes that **power belongs** to the people who must be enabled to have their expectations and voices heard through free and fair representational processes.
 - a) **Sharing of lessons learnt and best practices** - Members of the Alliance value the **unique opportunity that SEAPACOH presents** for exchange of experiences, views and success stories that add value to their Parliamentary roles and responsibilities
 - a) **Solidarity and Collaboration** - SEAPACOH members keenly believe in their calling; stand up for one another, and seek to forge mutually beneficial linkages amongst the members and with all their strategic partners in promoting equitable and fair allocation of health sector resources to uplift health for all.

Strategic Framework implementation

☐ **Priority Area 1** : (Needs-based resourcing of the health sector)

- ✓ **Objective** ; To ensure equity in health sector resource allocation (human, financial and others)
- **Strategy 1** : (Continuous skills development for MPs to competently play their role in budget processes, advocacy, lobbying and information access)
- ✓ **Key Activities** : Plan and implement needs –based re-tooling seminars & workshops to capacity Members

- **Strategy 2**: (Ensuring timely access to evidence-based data and information)
- **Key Activities**: Improve Parliamentary Information Resource centers ; Source funding to support research assistance for MPs; Review health budgets to determine whether there is equity in the appropriations; Develop agreed Agenda for Policy Advocacy.

- **Strategy 3**: (Building strategic alliances and partnerships at all levels)
- **Key Activities**: Establish updated database on key stakeholders at national, regional and international level; Develop program for sharing information & experiences on regular basis; Negotiate & implement MOUs with key partners

Strategic Framework Cont...

Priority Area 2: (Domestication, implementation & compliance with agreed commitments in the health sector)

- ✓ **Objective:** To ensure timely domestication, effective implementation and compliance with agreed upon commitments
- **Strategy:** Effective involvement of Parliamentarians in the processes leading to signing health sector related agreements, protocols and compliance thereof
- ✓ **Key Activities:**
 - a) Initiate amendment of legislation, as may be necessary, to embed MPs role in regional/international health sector agreements/protocols
 - b) Monitor, evaluate and report progress to Parliament and the Public

Strategic Framework Cont.....

□ **Priority Area 3:** (Sustainability of the Alliance)

✓ **Objective:** Enable SEAPACOH to service its administrative budget by end of plan period

• **Strategies :**

- a) Implement innovative resource mobilization
- b) *Effective membership mobilization*
- c) *Innovative financing of partnership and theme events*
- d) Building internal capacity for governance and management
- e) Effective documentation and MIS to support the work of SEAPACOH for institutional memory
- f) Formal linkages with RECs (EAC/EALA ,SADC PF, ECSA Health Community, AU, WHO Afro-Regional Committees and Ministers Meetings)

✓ **Key Activities:**

- a) Develop 2-Year/Annual Work Plan & Budget
- b) Finalize and market SEAPACOH provisional Funding Proposal (Jan. 2009-Dec.2011)
- c) Communicate clear timelines for members to meet their obligations
- d) Formalize the terms and conditions of Secretariat staff
- e) Establish basic financial and administrative support systems
- f) Implement skills development program for SC members
- g) Establish agreed Annual Schedule of SC and AGM Meetings
- h) Establish a computerized MIS to support a vibrant SEAPACOH Communication Strategy
- i) Negotiate formal recognition as a key stakeholder in regional health issues by relevant RECs

Overall 'Framework Plan' Implementation Assessment to date

- **Priority Area 1: :** (Needs-based resourcing of the health sector)
 - In the main, Continued capacity building of Member Committees to enable them to effectively advocate for improved national funding by Governments , continue to be achieved through regional annual seminars organized by partners [EQUINET; PPD –ARO]
 - : However, situation is different at National level, some Member committees have engaged and assisted by CSO for health, such is in Malawi's past Parliament where they worked with 'WHEN', Kenya with APHRC; Zimbabwe with CWGH, Uganda with PPD – ARO and DSW etc. **Some Committees have not established the needed working relationships/collaboration with 'technical and development partners'.**
 - : Assistance ranged from Fiscus Budget formulation, Analysis and trekking to ensure adequate and equity in health resource allocation, and research work on other health issues of concern to ensure that committees advocated using 'information supported by research'.
- **Priority Area 2: (Domestication, implementation & compliance with agreed commitments in the health sector)**
 - SEAPACOH have consistently urged Member Committees to 'advocate at national level' for the respective governments to comply with all relevant Health Sector Commitments [such as the Abuja 15%, MDGs, UNGASS, Maputo, etc] : **However, it has remained difficult for the Network to assess/measure the efforts and achievement by Member Committees in this regard**
- **Priority Area 3: (Sustainability of the Alliance/Network)**
 - **Also, in the main, the Network have managed to grow in numbers, but lacked in the establishment of:**
 - ✓ **improved financial status**
 - ✓ **Inadequacy publicity of the network for the purpose to impact Health Sector Issues in the ESC**
 - ✓ **The need to work, and strengthen relationships with Partners via MOUs have not been achieved**
 - ✓ **Formalized link with Regional Parliamentary Institutions [EALA, SADC PF] is being undertaken.**
 - ✓ **The Network has largely dependent on 'voluntary secretariat' (unfortunately, the incumbent passed away 10 days after our September 2010 meeting.**

Summary of Challenges/Threats

- Lack own focal administrative secretariat
- Financial constraints for SEAPACOH as a network.
- No regular AGM (largely depend on 'side meetings' during regional seminars.
- No fully fledged secretariat (difficulties in coordination]
- Different perceptions and understanding of the health priorities by the alliance members
- Frequent turnover of the membership following periodic elections in member countries
- Existence of competing parliamentary structures/institutions
- Actual and potential national/regional conflicts and instability
- Competing stakeholders priorities
- Lack of functional Parliamentary democracy in some countries

Way forward

- Enlisting assistance of Technical Partners in Marketing of the 'produced Funding proposal'
- Holding of AGM to 'Review/Reflect' on founding document, legal status, and mandate leadership
- Member committees at national level assisted to Establish working relationship, and rapport with CSO for health, health professional organizations etc
- Formalize working relationship with Regional Legislatures
- Establish fulltime Secretariat for the Network.
- Establish clear communication channels/systems between, and amongst Member Committees and Network
- Creation of 'Website' for the Network and ensure consistent in data /information updates by Secretariat to enhance profile of Network