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OPENING REMARKS BY

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**AT THE 3RD MEETING OF THE SPECIALISED
TECHNICAL COMMITTEE ON HEALTH
POPULATION & DRUG CONTROL (STC-HPDC-
3)**

Theme: Increased Domestic Financing for Universal Health Coverage and Health Security for All African Citizens- Including Refugees, Returnees and Internally Displaced Persons

**1ST AUGUST 2019
CAIRO, EGYPT**

Honourable Ministers of Health
Senior Government officials;
Representatives of Development Organizations;
Distinguished delegates, Ladies and Gentlemen
All Protocol Observed

I would like to sincerely thank you for taking time out of your busy schedules to be here and welcome you to the ministerial session of this Third Ordinary Session of the Specialised Technical Committee on Health Population and Drug Control (STC-HPDC-3).

The theme of this meeting ***Increased Domestic Financing for Universal Health Coverage and Health Security for All African Citizens- Including Refugees, Returnees and Internally Displaced Persons indeed*** echoes our aspirations as a continent. Africa is home to nearly a third of the world's refugee and internally displaced persons while many of our Member States in particular, Ethiopia, Kenya, Uganda, Sudan and are among the top countries in the world hosting refugees - a result of both natural and man-made causes.

No population group of the continent should either be left behind or too difficult to reach, and it is for this reason that the theme of the STC, and the AU theme of the year shall be critical to our deliberations as we prepare for the International Conference on Population and Development ICPD@25 conference that shall take place in Nairobi, Kenya in November of this year.

It is of no coincidence that we are in Cairo, 25 years later where the commitments to the ICPD were made by 194 member states in 1994. The Commission looks to support its member states to build on the outcome of the very successful 5-year review of the Addis Ababa Declaration on Population and Development , speaking with one voice as we prepare to keep the promises of commitment to all of our populations, including and especially the most vulnerable, difficult and furthest to reach.

In order to ensure that the aspiration of Agenda 2063 “The Africa We Want” are realized, allow me to highlight key action points from the framework that need to be taken into account that is commitment to the achievement of financially sustainable health care systems through:

- Engendering country ownership of the funding and management of health care, including increase in domestic funding;
- Engaging the relevant stakeholders in the funding of health care delivery;
- Mobilizing resources especially local and international, for the financing of health; and
- Aligning donor policy and funding with national government and local priorities. The continent must optimally explore some opportunities that could effectively change the current scenario of health financing.

The revised Africa Health Strategy, through its strategic approaches provides guidance on how some of these recommendations could be implemented in Member States. In line with this, the commission through the department has successfully advocated for the implementation of the following initiatives:

- The establishment and full functionality of the Africa Centres for Disease Control and Prevention (Africa CDC). The Africa CDC has been actively involved in the current Ebola outbreak and has provided support to the Democratic Republic of Congo through the deployment more than 41 multidisciplinary team of experts and 17 epidemiologists; laboratory diagnosis- in 6 health zones through provision of 6 geneXpert machine with more than 3000 testing cartridges; surveillance and contact tracings in the affected health zones and villages by registration and follow up of more than 140,000 people; Infection Prevention and Control by training of 469 health workers tradition healer and teachers; and training, supervision and provision of personal protection equipment (PPEs) to 13 health centres and hospitals; community mobilization and risk communication by screening at Point of Entries (POEs) and training of 350 experts on POE monitoring.
- Efforts in the Establishment of the Africa Medicines Agency (AMA) are underway and significant progress has been made following of the endorsement of the AMA Treaty by Heads of State and Government during the 32nd Session of the Assembly held in

February in Addis Ababa. I am pleased that 3 member states have already signed the treaty document namely; The Republics of Algeria, Rwanda and the Saharawi Arab Democratic Republic, and I encourage others to do the same. The Treaty documents can be signed by Minister during this STC or by accredited Ambassadors to the AU upon receipt of a letter of designation from the Minister of Foreign Affairs or Head of State and Government. The Commission looks forward to the establishment of the AMA in-order to improve the regulation of medicines and medical products across our continent. .

- In February 2019, on the margins of the 33rd AU Summit, the department hosted the Africa Leaders Meeting to advocate for increased domestic financing for health at national level and from the private sector and philanthropists. The meeting was successful attended by Head of States and high level delegates in the health sectors who gave various pledges.
- During the July 2018 Summit in Nouakchott, Mauritania, the assembly commended the commission for undertaking a consultative progress and developing the Common African Position which was presented to the United Nations General Assembly High Level Meeting (UNHLM) on Tuberculosis. The Assembly also endorsed the TB scorecard and the Accountability Framework which stipulates some of the key actions that should be implemented to accelerate the End TB 2030 goals.

The Commission has embarked on advocacy towards creating awareness of the score card, the Accountability framework and the outcomes on the UNHLM.

- Currently the department has also developed a number of score cards which are being used to accountability tools to measure progress towards Malaria, Tuberculosis, Health Financing and the Campaign for the Accelerated Reduction of Maternal Mortality (CARMMA).
- The Commission has recently embarked on advocating for the elimination of Neglected Tropical Diseases and is in consultation with the key stakeholder to promote strong collaboration and concerted effort in ensuring that countries establish strong control programs and increased financing towards addressing these diseases. As we know, Neglected Tropical Diseases are diseases of poverty. They affect the poorest people on our continent. If we are serious about realizing our Agenda 2063 goal of Healthy and well-nourished citizens, then we need to prioritize the elimination of these diseases. I am personally committed to ending these diseases and to the commission playing a key role. I urge all the countries to support our efforts and to prioritize these diseases.

Excellencies, Ladies and Gentlemen,

When it comes to Drug Control, It's a tale of two stories for Africa. The continent is experiencing an exponential growth in the number of drug users. To make matters worse, Africa's youth bulge, coupled with high unemployment has seen a surge in the number of young people who use drugs. However, investment in prevention and treatment services for treatment of drug use disorders is among the lowest concern on the health agenda of many AU Member States.

In spite of several declarations at continental and international levels for multi-sectorial and balanced responses to drugs incorporating both supply and demand reduction, some countries still believe in the punitive approach that considers drug dependency as a crime to be punished.

The first African Union Continental Drug Epidemiology report launched at this STC, and the report on the implementation of the AU Plan of Action on Drug Control (2013-2017) by Member States show rising drug use among our people. Presenting a growing concern for public health and safety is the non-medical use of opioids in particular, Tramadol that is widely trafficked and used in West, Central and North Africa.

Two months ago, the World Drug Report by UNODC was launched at the African Union Commission and the findings were solemn. Globally, some 35 million people suffer from drug use disorders and require treatment.

The experts meeting considered the Draft Revised AU Plan of Action on Drug and Control and Crime Prevention (2019-2023) which incorporates measures to tackle drug demand reduction and health issues associated with drug use; and also availability and access to controlled substances for medical and scientific purposes, while preventing their diversion. It is important that this esteemed assembly approves this document to guide our responses towards the health and well-being of people in Africa.

Excellencies, Ladies and Gentlemen,

To ensure that the aspiration of the Agenda 2063 are accomplished, there is need for a multi-sectoral approach and collaboration between relevant stakeholders including the Regional Economic Committees (RECs), Member States, International development partners, private sector and the Civil society. As a commission, we will continue to advocate and engage various stakeholders to promote the implementation of interventions and address the health challenges on the continent.

I would like to urge the RECs and Member States to play a major role in ensuring that resources are mobilized and commitments for increased domestic financing are met and interventions monitored. I would also like to urge our partners to continue with the provision of technical assistance for harmonization of policies and resource allocations in Member States.

Lastly I urge the Civil Society and Private Sector to continue providing checks and balances through monitoring the implementation of these interventions which will lead to improved health service delivery. May also urge the various stakeholders to explore the potential of applying innovative technologies as modern solutions of addressing health concerns.

Excellencies, Ladies and Gentlemen,

The past three days, experts have been deliberating on key ensures and reports on Health, population and drug control and outcome of these discussions will now be presented for your consideration. I look forward to fruitful deliberations and recommendations on the way forward as the report is being presented. I also wish all member states who have launched the Campaign for the Accelerated Reduction of Maternal Mortality in Africa (CARMMA), a very happy anniversary of one of the most successful campaigns of the Africa Union. In the 10years of the campaign 51 member states have launched the Campaign, and over these past 10 years the continent has maintained its focus on its women children and young people, looking ahead, the CARMMA campaign brand shall be maintained and continue to be used to draw attention to maternal, newborn, child and adolescent health issues. Once more, I thank you for your participation in this meeting.

Thank you.