16th NETWORK OF AFRICAN PARLIAMENTARY COMMITTEES OF HEALTH (NEAPACOH) MEETING

"Re-positioning the Role of Parliamentarians for Implementation of the Unfinished ICPD agenda and Attainment of Universal Health Coverage (UHC): South to South Sharing of Lessons and Good Practices."

Ramada Resort Hotel, Dar es Salaam, Tanzania

DAR ES SALAAM CALL TO ACTION

The 16th meeting of the Network of African Parliamentary Committees of Health (NEAPACOH) was held on March 6-7, 2025. The meeting convened 186 delegates and members of Parliamentary Committees responsible for health and budget from 23 countries (Benin, Democratic Republic of Congo, Eswatini, Ethiopia, Ghana, Kenya, Lesotho, Madagascar, Malawi, Mali, Mauritius, Namibia, Niger, Nigeria, Senegal, South Africa, Tanzania mainland & Zanzibar, The Gambia, Tunisia, Uganda, Zambia and Zimbabwe) as well as representatives of UNFPA, SADC Parliamentary Forum, Inter Parliamentary Union, the Commonwealth Parliamentary Association, and development partners, technical experts, health champions, researchers and academia, Civil Society Organizations, and other stakeholders engaged in programmes on health financing, SRH, HIV, TB, NCDs and harnessing the demographic dividend in Africa.

For the first time, NEAPACOH welcomed the participation of the AU through the African Union Development Agency - NEPAD, which signals the beginning of a strategic level of engagement that seeks to consolidate the regional integration agenda, and coordination efforts within the health sector in Africa, especially developments in SRH through the A2DSRH programme.

The meeting was organized under the theme: "Re-positioning the Role of Parliamentarians for Implementation of the Unfinished ICPD agenda and Attainment of Universal Health Coverage (UHC): South to South Sharing of Lessons and Good Practices."

The 2025 NEAPACOH meeting provided a platform for Africa Parliamentarians to get acquainted with the status of implementation of the ICPD PoA and attainment of UHC in the Africa region. It provided space for the engagement, reflection and constructive discussions on priority policy and legislative interventions, built momentum for political will and action, facilitated the exchange of lessons and best practices, and support towards consolidating the gains made towards achieving the ICPD agenda and Universal Health Coverage.

The meeting participants deliberated on transformative actions for the health and well-being of millions of the African people. They discussed challenges incumbering the achievement of UHC, such as inadequate domestic financing for health, structural inefficiencies and resource leakages.

The meeting was hosted by the Parliament of Tanzania and supported by Partners in Population and Development Africa Regional Office (PPD ARO) and partners namely the African Institute for Development Policy (AFIDEP), AUDA-NEPAD, Afya na Haki, AIDS Health Care Foundation (AHF), Center for Health, Human Rights and Development (CEHURD) and PATH. The 16th NEAPACOH Meeting ended with adoption of the Dar es Salaam Call to Action (2025).

Preamble:

At the conclusion of the 16th NEAPACOH Meeting, we, the participants:

Cognizant that although progress has been made by African countries on implementation of the ICPD PoA and attainment of UHC, we still lag behind other countries in the development world.

Aware that Africa has a rapidly growing youthful population with sexual and reproductive health (SRH) challenges which if addressed through legislation, policies and resource allocation, can propel accelerated economic growth and transformation, hence facilitating the harnessing of the Demographic Dividend;

Mindful of the dwindling international foreign development aid to Africa;

Recognizing that the health challenges we face across Africa are vast, but so are the opportunities for meaningful change through collective commitment and leadership;

Appreciating that our people need to access and utilize the health services they need; of sufficient quality, along the continuum of care and the life course without suffering pressing financial hardship and other barriers while accessing and utilizing the health services;

Noting that health is a human right and at the core of the development agenda, and the need to ensure that health priorities, including emergency preparedness and Universal Health Coverage are adequately reflected in the national development agenda and budget;

Appreciating that promotive and preventive health services including vaccines, are as important as the curative, rehabilitative and palliative services hence the need to make them safe, accessible and affordable without exposing the users to financial hardship;

Underscoring the need for building strong, resilient, functional, well-governed health systems, for quality service delivery;

Aware that whereas some African countries have strong legal and policy frameworks and have made commitments to advance access to quality reproductive health information and services for women, girls, adolescents, young people and other vulnerable groups, there are inequities and inequalities within and among countries, which can be addressed through political commitment and action, laws and policies and regional cooperation;

Noting that prioritization of implementation of these legal and policy frameworks and commitments has remained weak largely due to under-investments;

Recognizing the urgent need to reduce dependency on external supply chains by strengthening local production, regulatory systems, and research and development capabilities;

Deeply Concerned that family planning and reproductive, maternal, newborn, child, adolescent health, HIV/TB, immunisation and NCDs are among the essential health services most seriously affected by inadequate funding and emerging geopolitical changes;

Recognizing the critical role of the Global Fund to Fight AIDS, Tuberculosis, and Malaria in Africa as the largest multilateral funder of grants to strengthen health systems and a vital source of international financing to combat infectious diseases;

Noting that Africa continues to face challenges of teenage pregnancies and early or child marriages, gender-based violence including sexual and obstetric violence;

Noting the critical role of sharing of experiences and innovative practices in the context of South-South Cooperation for the achievement of UHC;

Observing that there are African countries which are on track for realizing UHC by 2030 and can offer lessons and best practices for potential adaptation and adoption;

Acknowledging the vital role of representation, legislation, appropriation and oversight by the parliamentarians towards the achievement of national, regional and global development goals, including UHC;

Appreciating the role of evidence in informed health policy and legislative formulation;

Noting that the Maseru Call to Action adopted by the 2024 NEAPACOH meeting remains an important blue print for accelerating the attainment of UHC in the region but whose full implementation remains unfinished business;

Hereby adopt and bind ourselves to this Dar es Salaam Call to Action on this 7th Day of March, 2025, with the following commitments:

- 1. To take proactive roles in strengthening the region's health systems for attaining UHC, through advocacy, legislation, demand for accountability, policy-making and regional collaboration.
- 2. To Advocate for increased domestic investment in health; Support and champion laws and policies that support sustainable financing mechanisms, including innovative domestic resource mobilization and national health insurance schemes.
- To align budget and planning frameworks of our countries to cater for the financing gaps for essential health services created by the changing donor funding environment, including the US Executive Orders.

- 4. To provide oversight and accountability by strengthening scrutiny and tracking of health budgets to reduce the leakages & inefficiencies in health budget spending.
- 5. To advocate for increased national budget allocations to Primary Health Care (PHC), Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH), HIV/AIDS and TB, Immunization and Non communicable Diseases.
- 6. **T**o advocate for the establishment of national TB Caucuses in national parliaments.
- 7. **T**o redouble our efforts to accelerate progress towards UHC through PHC and SRHR
- 8. To strengthen health infrastructure; Work with governments to enhance the capacity of health facilities, including digitalisation; and expand access to essential services, especially in the underserved areas.
- 9. **T**o monitor budgetary commitments and mobilize technical expertise to reinforce governments' mandate to deliver quality health services to every citizen.
- 10. To advocate for increased partnerships and investment in Africa's vaccine and dugs manufacturing capacity to ensure sustainable, timely, and equitable access to life-saving vaccines for our populations.
- 11. **T**o advocate for the establishment of a Parliamentary Forum on Antimicrobial Resistance (PF-AMR) in the respective countries.
- 12. To prioritize preventive and promotive health services; promote health education and awareness; empower communities with information and resources to take charge of their own health, reducing preventable diseases and fostering healthier lifestyles through the institutionalising of self-care approaches.
- 13. **T**o integrate reproductive justice into national legal frameworks.
- 14. **T**o enhance regional parliamentary coordination Utilize regional legislative networks (EAC, SADC, ECOWAS, etc.) to develop and harmonize laws and policies, strengthen accountability mechanisms, and monitor the implementation of SRHR commitments across Africa.
- 15. **T**o strengthen South-South Cooperation and enhance parliamentary awareness, knowledge, lessons learned and good practices in the field of population, health and development.
- 16. **T**o popularize the NEAPACOH advocacy work and develop networks with other parliamentary networks including Pan African Parliament (PAP), SADC Parliamentary Forum, Inter-Parliamentary Union (IPU)

- Commonwealth Parliamentary Association (CPA) and Forum of African and Arab Parliamentarians on Population and Development (FAAPPD)
- 17. **D**evelop strategic partnerships with the Faith Based, traditional leaders, and other related networks to advance the advocacy agenda for UHC incountry
- 18. To collaborate for regional health solutions; foster greater collaboration across African nations, pooling resources, knowledge, and expertise to address common health challenges such as infectious diseases, maternal and child and adolescent health, alcohol and substance abuse and non-communicable diseases.

In the same spirit, the 16th NEAPACOH meeting participants collectively and individually convey their sincere appreciation and gratitude to the People and Government of the Republic of Tanzania, especially the Parliament of Tanzania, Partners in Population and Development Africa Regional Office (PPD-ARO) and the partners, for the successful organization and hosting of the 2025 NEAPACOH meeting.

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