

Tanzanian P4H Partner's meeting with Dr. David Evans, WHO Director, Health Systems Governance and Financing

12th February 2014 – New Africa Hotel, Dar es Salaam



Participants:

1. Dr. David Evans (WHO)
2. Max Mapunda (WHO)
3. Rekha Menon (WB)
4. Nina Siegert (P4H focal point)
5. Susna De (USAID)
6. Zohra Balsara (USAID)
7. Christian Pfleiderer (GIZ)
8. Nicolas Rosemberg (GIZ)
9. Olivier Praz (SDC)
10. Kira Thomas (SDC)

The P4H focal person presented the active P4H partners in Tanzania (WHO, WB, SDC, GIZ, KfW, USAID), pointing out that ILO and AfDB have no active representation in the country network.

Dr. David Evans mentioned that it was not the idea behind P4H that all members would be active in each country. However, he shared his concerns about ILO's commitment to the P4H network globally. Nevertheless, ILO is active in the promotion of social protection floors and the next DG might be interested in becoming more active.

Dr. Evans was interested in the progress and implementation of the Health Financing Strategy in Tanzania.

The partners shared their views on the topic:

- Since the **Health Financing Strategy Option Paper's Consolidation Workshop** in December 2013, the HFS development has not made significant progress. The Inter-ministerial Steering Committee (ISC) and the Ministry of Health and Social Welfare (MOHSW) are currently deliberating to conduct consultations among the regions in order to obtain their feedback on the 3 narrowed down insurance market options assessed during the Workshop. ISC members are expected to conduct the regional consultations and collect feedback. The Health Care Financing Committee is currently waiting for the MOHSW to communicate the action plan for this activity (latest at the next TWG meeting).
Dr. Evans commented that despite how useful the engagement from different actors is during such a process, it would be a pity if the progress in developing the strategy was interrupted for too long.
- Meanwhile the outstanding **study on fiscal space** in health is in the process of being organized with the goal to be conducted between March-May 2014. The consultants for this study are currently being selected with Oxford Policy Management consultants potentially in the lead.
- The lack of a **champion at political level** was pointed out as one important reason why the HFS development is moving forward in moderate pace. The upcoming elections might also play a role. There is also a need to orient and update the newly appointed Minister of Health on the important issues surrounding the HFS and interlinked reform options. It was, however, mentioned that most high level officers at the MOHSW are well aware of the implications of the HFS. The group identified WHO's direct access to the Minister of Health as an important element to increase leverage.
- Discussions revolved around the question of how to push the HFS onto the political agenda.
Dr. Evans said that Ghana and Sierra Leone, for example, have successfully managed to do so. He found that CSOs may play a significant role in accessing parliamentarian groups with strategic messages in a more direct way than bi-lateral cooperation might be able to.
- Coming up with a **communication strategy** in support of the HFS agenda (e.g. creation of a catchy slogan) was discussed, which could be used by partner's cooperation heads at relevant high level conferences and meetings.
- Establishing some peer pressure by highlighting the **successes of other countries** in the region was mentioned as a way to get the attention from high level officials. For that purpose, it was suggested to organize a follow-up conference to the 2012 Kigali Conference on SHP/ UHC in Tanzania. It would

be a regional ministerial conference following up on the SHP/ UHC resolutions signed back in 2012. The conference could focus on the progress made with regards to Health Financing Strategy developments across EAC countries.

- A **high level round-table discussion** (to engage Tanzanians leadership) on Health Financing could be organized. Concerns were shared that these type of discussions may not really lead to concrete outputs. In general, it was agreed that an event close to the elections could help push the HFS onto the political agenda.
- The 10th of April, World Bank organizes an event in Washington DC (Spring Meeting) where Ministers of Health and Ministers of Finance are invited, as well as high ranked UN staff (as part of spring meetings). This could also be used to push related messages forward.
- In general, it was observed that the technical aspects of the **cooperation between P4H partners and the government** in TZ are very strong and have been very successful (including the production of strong consultancies providing reform options for HF and ongoing active participation in the technical dialogue). Increased focus should now be placed on efforts to help establish political ownership of the HFS agenda. A meeting between the new Minister of Finance and P4H partners could be beneficial to enhance awareness within MOF on SHP/UHC and the ongoing HF strategy developments. Lastly it was pointed out that to gain MOF backing of the HFS and for financing of the Health Sector in general, it was important to provide evidence of efficiency gains and value for money – showing links between productivity and quality.