

Reflections

a. Key recommendations

1. To accelerate progress towards UHC, the Congress calls on governments in the region to:
 - a. Allocate adequate resources for health, at least 15% of the national budgets, in line with Abuja Declaration. Ensure that the THE is at least 4%–5% of the GDP. While improving financial allocation to the sector, measures should be put in place to ensure efficiency in the utilisation of resources. In addition, governments should ramp up pre-payment to reduce OOP expenditure to not more than 40%
 - b. Prioritise investment in PHC system strengthening, including the community component, as this is one of the key strategies to UHC attainment
 - c. Address as a matter of urgency HR gaps: Develop and implement HR plans at country and sub-national levels that respond to country-specific contexts and needs. Further, curricula of health training institutions should be revised periodically to respond to changing healthcare needs. Innovative strategies, including use of internet technology, should be put in place to enhance learning, mentoring and technical support for both pre-service and in-service health workers and also enhance health worker motivation
 - d. Pay special attention to the health and social needs of vulnerable groups, including women adolescents and children. There should be no diversion of funds for RMNCAH + N towards COVID-19 response, instead the funding should be significantly increased and properly targeted to meet their needs. In addition, mechanisms should be put in place to track the allocation and release of these funds, including funds for family planning. Ensure that life-saving commodities for mothers and children are always available in health facilities
 - e. Generate evidence on the various dimensions of inequalities in health and develop appropriate interventions, including measures to track these inequalities
 - f. Promote collaboration between the health sector and other relevant sectors to promote health in all policies for tackling the social determinants of health, including redressing poverty and female empowerment in the areas of education and decision-making
 - g. Invest at least 2% of the health budget, in line with WHO recommendation to health research, and put in place a system for promoting health research, including collaborative researchers in the Region. Further, pro-actively commission medical research including repurposing of drugs and producing their own vaccines to meet the needs of the region, via collaboration of the member states
 - h. Exploit low cost-effective life-saving innovations that abound for improving quality of healthcare in the region including the development of a curriculum in biomedical engineering
 - i. Strengthen partnerships, including with the private sector and collaborations at regional and national levels. Regional bodies such as AU and ACDC should continue to provide leadership in this regard in their areas of comparative advantage
 - j. Train medical doctors and other health workers as close to the communities as possible to encourage them to stay in-country after qualification and reduce the large exodus through brain drain
 - k. Scale up community-based health services comprising health promotion, disease prevention, treatment and support to accelerate attaining UHC in a sustainable manner.
2. The MWIA, NEAR should support governments' efforts and initiatives for accelerating UHC in the region through:
 - a. Advocacy to governments at all levels for the implementation of the recommendations made towards building a strong, resilient and sustainable health system that provides an essential package of quality, affordable, accessible and acceptable services, equitably, leaving no one behind
 - b. Partnering and collaborating with government, regional bodies and other relevant stakeholders such as CSOs, development partners and the Academia on programmes, projects and interventions that meaningfully impact on women, children and other vulnerable groups in the region
 - c. Tracking government funding and expenditures for RMNCAH + N, including family planning
 - d. Engaging and participating in the ACDC gender analysis of the impact of COVID-19 in the region while contributing to proffering solutions on issues or findings reported
 - e. Promoting greater involvement of men in all health interventions and related matters concerning women and children, who are the most vulnerable groups in most countries within the region

- f. Improving networking and sharing of best practices among health professionals in the region.

b. Quotable quotes

Some of the notable quotes from the Congress were:

1. *'MWAN (and indeed MWIA) should be the catalyst that creates harmony within (and among) all health professionals and HCWs'* – Dr Osagie Ehanire, Minister of Health, Nigeria
2. *'Violence against women cannot be stopped by vaccines'* - Dr. Eleanor Nwadinobi, President MWIA
3. *'Women ought to be at the table of decision-making on healthcare. We should not always allow the men to make decisions for us on matters that concern us'* – Prof Murthy Padmini, Secretary General MWIA
4. *'In the quest to deliver UHC, no one size fits all. The PHC approach provides opportunity to engage communities in a bottom-up approach that promotes achievement of UHC'*
5. *'A respiratory pandemic is the worst nightmare that anyone or country can have'* –Mohammed Abdulaziz, ACDC