

Joint Annual Review

Dr. Pushpa Chaudhary, Secretary, Ministry of Health

(31st Jan 2018)

Namaste and Warm greetings to all of you on behalf of ministry of health on the occasion of first JAR in federal context.

- Hon'ble Minister of health, Mr Deepak Bohara
- Hon. Member, National Planning Commission, Dr Geeta Bhakta Joshi
- Respected secretary , Ministry of Finance, Mr Shankar Adhikari, Representatives of government of other ministries and local government,
- Director Generals from Department of Health Services, Ayurveda and Drug Administration,
- Vice Chancellors of Academic Institutions ,
- EDP chair,
- Directors from Different Centers and Divisions, hospital directors
- Representatives from national and international partner organizations,
- Ex secretaries and Director generals of health ministry ant other distinguished guests and Fellow colleagues,
- Members from media and all other invitees,

Ladies and Gentlemen

- This year is the **40th anniversary of the Alma Ata Declaration**- which expressed the need for urgent action by national governments, health and development workers, and the world community to protect and promote health of all people. Four decades down the line, we have yet another opportunity “Federalism” to reaffirm this international commitment of people-centered primary care as a foundation to achieve universal health coverage.
- Health sector **transitioning to federalism** is certainly the top concern for all, as there are many uncertainties. What we must understand is that federalism is new to all and we need collective wisdom to be able to take policy decisions that will help to sustain the health gains as well as **achieve the goals and targets of Nepal Health Sector Strategy (NHSS) and Sustainable Development Goals**.
- The NHSS, our guiding document for the health sector for next four years has four strategic directions **for Universal Health Coverage (UHC); equity, quality, reform and multi-sectoral collaboration** which are indeed very important needs to be incorporated into various tiers of government for effectiveness. In this regard,

necessary adjustments to the NHSS's implementation plan is needed to suit the changed context and these need to be translated into the activities in the AWPB.

- Investment for UHC means laying the foundation for making progress towards all the other targets and goals even beyond the health sector - like ending poverty, improving gender equality, economic growth, and more. When we talk about Universal health coverage, I must underscore the need of adequate, **skilled, well-trained and motivated workforce** for improving the health services. We have the presence of **academia and private sectors here and with effective partnership** we can address the challenges of human resources. **Enabling environment** is crucial and I see greater the role of local governments in terms of ensuring safe and motivating work environment to our health workforce.
- Next, is the **financing for health**, which is an important part of broader efforts to ensure social protection in health. We have envisioned one health facility in every ward at local level , one 15 bedded hospital in each local unit and one multi super specialty hospital in each province. These health institutions will certainly

need added number of skilled human resource together with equipments and supplies to provide range of services- basic as well as specialized but this can only be possible by investing more on health services. Health care financing is crucial for free basic health services for all as mandated by the constitution as well as strengthen social health insurance for covering wider population for increasing range of services beyond basic.

- Globally, evidence shows that **85% of the costs of meeting the SDG health targets can be met with domestic resources and we need to increase our domestic funding on health.** However, there is also need for partners to increase their investment in health so that together we can achieve the goals and targets that we have committed to.

Ladies and Gentlemen,

- As we all know, the national health sector strategy (NHSS) is developed within the context of **Sector Wide Approach (SWAp)** and it sees partnership as a cornerstone for health development in Nepal. Therefore, the **SWAp in health should continue even in the changed federal context.** I hope for the seamless support from the

partners as in the past in the implementation of SWAp. I would also like to take this opportunity to inform the donors and partners that **the federal government is mandated by the Constitution to sign international treaties and agreements.** Therefore, I urge all of you to comply with this.

- The **functional analysis and assignment (FAA)** of the Cabinet has clearly delineated functions of all three levels of government and MoH is working to ensure that the functions for health sector is delivered effectively and with quality by all three levels of government. Amongst other functions, delivery of **basic health service** is the responsibility of the local government while federal government has the responsibility to define its scope and develop standards. I urge my colleagues to prioritize this task and request EDPs to provide the required support.
- In accordance to the **function of the federal level, MoH is developing several legal and regulatory frameworks** to govern the health sector in light of the federal context. **Social Health Insurance Act** has been recently promulgated by the parliament. Similarly, the **National Health Act, the Health Institution Quality Assurance**

Authority Act have been drafted by the MoH and are in inter-ministerial consultation process. Moreover, a **new national health policy** has been developed and submitted to the cabinet for the endorsement. In order to materialize these policy commitments, additional resources is required and I urge all the stakeholders and partners to support us in this endeavor.

- I would also like to share that MoH has established the **Federalism Implementation Unit** to support the implementation of activities on federalism and to liaise with other ministries on health related issues. Several progress has been made in this regard which is captured in the Pre-JAR report and the gist will also be presented in the coming sessions.
- MoH has shared the progress on federalism in several forums, the recent one being the **National Annual Review Meeting**. We discussed province-wise progress and challenges existing in the health sector during the National Annual Review few months back. We strongly feel that we need to focus more on those provinces where progresses are slow, particularly the **province 2 and 6**. This

JAR will touch upon those pertinent issues that we need to address in next year's AWPB for which planning process will start soon.

- For the harmonized support to the local level in health in the changed context, the ministry also needs a **detailed technical assistance mapping of partners**. I request EDP chair to lead this exercise and present the detailed TA mapping to MoH at the earliest possible. This is important to see who is doing what and where in the health sector to avoid duplication and to ensure that no local level is left behind.
- While health sector is struggling to manage the communicable diseases, there is increasing burden of non-communicable diseases, antimicrobial resistance and disaster related health issues. Therefore, there is a greater need for **multi-sectoral collaboration** in health sector at all levels of government. **For this, there are two panel discussions that are planned in the afternoon today**. The first panel will be with the Mayors and second with the high level officials from various ministries to build common understanding and get insights to guide the health sector in this transition to federalism.

- Federalism has provided impetus for the **decentralized planning and budgeting** at the Local Level. However, I will again emphasize that **adequate financing** for health is critical to ensure smooth delivery of health services. Similarly, **procurement** and effective management of supply chain is one of the critical functions to be coordinated at different levels of the governments. Therefore, MoH needs **solution oriented proactive and flexible collaboration of EDPs** in the implementation of the constitutionally mandated devolution of functions to the local governments.
- In this JAR, we have tried to get the representatives from different ministries, development partners, private sector, civil societies, academia and other key stakeholders. I urge all of you to utilize this meeting to critically review the observations from the **Pre-JAR field visit** along with issues related to implementation of health program, capacity building and funding gaps so that our goal **“to improve health status of all people through accountable and equitable health service delivery system”** can be realized.

- We need to engage our key stakeholders- civil society, as well as media colleagues for their effective participation in all health related areas. We would also like to acknowledge the contribution of academia, professional councils and private sector in improving the health outcomes by developing skilled health workforce and providing wide range of health service deliveries .
- With this, I request all of you for active participation in this meeting by providing your valuable inputs and constructive feedback. I sincerely hope that together we can make this **first JAR in the federal context** fruitful and successful.
- Finally, I thank all dignitaries over dais for encouraging us with your valuable presence and guidance, all distinguished guests and invitees and last but not the least , the organizing team members who have worked very hard with great enthusiasm over weeks and days to make this JAR happen. With these concluding words, I formally announce closing of the inaugural session and welcome you all in following technical session.

Thank you all