



COMMUNIQUE
REGIONAL BUDGET SUMMIT ON STRENGTHENING SOCIAL ACCOUNTABILITY
IN HEALTH AND AGRICULTURE IN SOUTHERN AFRICA
6TH TO 7TH MARCH 2019, LUSAKA, ZAMBIA

WHEREAS a regional multi-stakeholder gathering comprising representatives of four (4) SADC National parliaments, civil society organisations (CSOs), small scale farmers' associations, the media, government officials and representatives of Southern African Development Community Parliamentary Forum (SADC PF) from Malawi, Mozambique, Tanzania, and Zambia, met in Lusaka, Zambia on 6 and 7 March 2019 for the 3rd Regional Budget Summit on Strengthening Social Accountability in Health and Agriculture in Southern Africa, co-hosted by the Partnership for Social Accountability (PSA) Alliance and the SADC PF.

Considering the findings of social accountability monitoring undertaken by the PSA Alliance members in Malawi, Mozambique, Tanzania and Zambia in 2017 and 2018, the data from other national and regional research, as well as the testimonies of civil society, smallholder farmers and young people, focused on HIV testing and sexual and reproductive health (SRH) services for adolescents and youth, as well as agricultural services for smallholder farmers, particularly the Farm Input Support Programmes (FISPs);

Cognizant of important regional health and agriculture and related instruments, specifically:

- AU Malabo Declaration on Accelerated Growth and Transformation for Shared Prosperity and Improved Livelihoods, 2014
- AU Abuja Declaration on HIV/AIDS, Tuberculosis and Other Related Infectious Diseases, 2001
- SADC Integrated HIV, SRH, TB and Malaria Strategy and Business Plan, 2016-2020
- Strategy for SRHR in the SADC Region (2019 – 2030)
- SADC Regional Agricultural Policy (RAP), 2013
- SADC RAP Investment Plan (RAIP), 2017 - 2022
- SADC Food and Nutrition Security Strategy (FNSS), 2015-2025

Recognising the importance of social accountability for effective delivery of quality, affordable, accessible and gender responsive public services to all our people, and

ultimately to the achievement of Sustainable Development Goals (SDGs) and regional commitments in health and agriculture;

Concerned with the heavy foreign donor dependence in both the health and agriculture sectors;

Agricultural Services for Smallholder Farmers

- Noting that agricultural growth in the SADC region has been marginal and unsustainable falling short of the Malabo Declaration goal of a 6% annual growth rate, resulting in food insecurity, despite large scale investment in the farm input support programmes (FISPs).
- Observing that despite smallholder farmers contributing up to more than 80% of the food in the Sub-Saharan African region, the priorities of smallholder farmers, particularly women, do not form the basis for national agricultural planning and budgeting, resulting in agricultural programmes which exacerbate climate change and overlook key alternatives such as agroecology.
- Further observing that challenges in social accountability in the management of public funds for agriculture, particularly on FISPs, including inconsistent spending and weak monitoring and reporting, have led to reports of widespread leakage, diversion, embezzlement and theft of vouchers and inputs.
- Appreciating that although parliamentary committees in some Member States are able to scrutinize needs assessments, plans, budgets and reports before approval, many lack the capacity to undertake such analysis and do not have access to the needed independent research and technical assistance to adequately perform their oversight function.

HEALTH: HIV Testing and SRH Services for Adolescents and Youth

- Acknowledging that the national budget allocations to the health sector in Malawi, Mozambique, Tanzania and Zambia has not reached 15% as per the Abuja declaration whereas the national allocation to SRH of the total national health budgets is barely below 2% in the last five years;

- Recognising that Member States have made an effort to institutionalise consultative processes to ensure citizen participation in budget development and priority setting, however noting with concern that in the development of health plans there is very low participation by youth and women and a mismatch between budget consultations and final decisions.
- Observing that health budget expenditure often does not follow the plans developed, and delays in fund disbursements from central government results in underspending.
- Concerned that inadequate staffing, poor staff attitudes and infrastructure in health facilities has resulted in poor quality or a lack of youth friendly SRH services.

We now therefore:

HIV Testing and SRH Services for Adolescents and Youth

- Call on SADC Member States to allocate resources at national level for implementation, monitoring and evaluation of the SADC SRHR Strategy, and ensure efficient and transparent spending. Specifically, SADC Member States should commit at least 5% of their national health budget for implementation of the SADC SRHR Strategy (2019-2030). Additionally, local government authorities where relevant should also contribute at least 10% of their own sources to facilitate implementation by local health departments.
- Urge the SADC Secretariat to establish a regional youth advisory committee to inform implementation and operationalisation of the SADC SRHR Strategy and Scorecard. The committee should represent young people from all SADC Member States and mirror national level structures that will co-monitor national progress.
- Encourage SADC Member States to undertake innovative and sustainable domestic resource mobilisation and ensure adequate budgetary allocations to SRH services for adolescents and young people, especially services tailored for SRH of adolescent girls and young women.

Agricultural Services for Smallholder Farmers

- Call upon SADC Member States to progressively allocate budgets to agriculture that efficiently and effectively reach the Malabo Declaration target of at least 10%

to sustain annual agricultural GDP growth of at least 6% annually, while also increasing the quality of investments and the efficient utilisation of budget allocations. National investments in agriculture should align with farmers' own priorities and focus on financing diversified smallholder support programmes, such as extension services, research, climate change adaptation and financing, input support, improving access to finance and market.

- URGE the SADC Secretariat urgently operationalise the establish SADC Food and Nutrition Security Regional Steering Committee as formed during the SADC Food and Nutrition Security Strategy Forum in Malawi (2014), which is both gender-balanced and inclusive of civil society and smallholder farmers' organisations, to advise on regional food and nutrition policy frameworks and strategies.

Call upon SADC Member States to support innovative research and development to develop and implement alternatives to hybrid seeds and chemically intensive agriculture, such as integrated pest management, use of community-based seed systems, improvement of soil fertility through increasing soil organic matter, to inform the diversification of farmer support programmes and redirection of funds towards the adoption of agroecological practices.

- Recommend the supreme audit institutions of SADC Member States to conduct performance audits of their agricultural extension services to assess their efficiency and effectiveness in capacitating smallholder farmers, particularly women, to sustainably contribute to the realisation of food security goals in the region.
- Urge the supreme audit institutions of SADC Member States to conduct forensic audits of all farmer support programmes, with a focus on FISPs, with the aim of identifying and addressing the systemic internal control weaknesses that allow for misuse of funds.

GENERAL RECOMMENDATIONS

- Welcome and express support for the SADC Online Monitoring and Evaluation System and urge SADC Secretariat to facilitate its full and regular use for reporting on regional commitments on health and agriculture through simplification of documents, raising awareness and ensuring easy access by all stakeholders, including national government departments, parliaments and civil society.

- Implore the SADC Heads of State and Government to develop an oversight mechanism to ensure SADC regional commitments on health and agriculture are implemented in a meaningful and effective manner by SADC Member States.
- Recommend that SADC PF support its Member Parliaments in strengthening the three roles of parliaments in representing their constituencies, law making and oversight. This should include encouraging Member Parliaments to establish fully functioning and independent parliamentary budget offices (PBOs) with well-defined roles and responsibilities.
- Call on the relevant government departments of SADC Member States to avail information related to Health and Agriculture in accordance with Access to Information legislation or to enact such legislation where it is non-existent.
- Urge SADC National Parliaments to bring their representational, legislative and oversight function to bear in the advancement of the objectives of the regional health and agricultural instruments for the benefit of the SADC citizenry.

Finally, we do hereby submit this communique to the Directors of the Food, Agriculture and Natural Resources (FANR) and Social and Human Development and Special Programmes (HSDSP) Directorates at SADC Secretariat, as well as the SADC Heads of State and Government Summit scheduled for August 2019 and any other relevant structure for implementation.

