



MEDIA STATEMENT

ORDINARY JOINT MEETING OF SADC MINISTERS OF HEALTH AND MINISTERS RESPONSIBLE FOR HIV AND AIDS

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SADC Ministers of Health and Ministers responsible for HIV and AIDS met on 15th January, 2015 in Victoria Falls, Republic of Zimbabwe. The Ministerial Meeting was preceded by a preparatory meeting of Senior Officials and heads of National AIDS Authorities. In addition, consultative meetings were held on the sidelines with key stakeholders including International cooperating partners and the private sector.

The main purpose of the Joint Meeting was to review progress in the implementation of regional policies and programmes for addressing public health issues in the region, within the context of SADC Protocol on Health and the Maseru Declaration on HIV and AIDS. Ministers also agreed on common positions to be adopted at international fora namely the African Union (AU) and World Health Organisation (WHO).

The Ministers will also participate in the commemoration of SADC Malaria Day, held on 16th January 2015, at Monde Primary School, Victoria Falls, Republic of Zimbabwe under the theme **'Strong partnerships sustain gains in malaria control'** and Slogan: **'Combining efforts - Key to success'**.

The Chairperson of the SADC Ministers of Health and Ministers responsible for HIV and AIDS, and Minister of Health and Child Care of the Republic of Zimbabwe, Honourable Dr. David Parirenyatwa, officially opened the meeting. The Minister outlined achievements and challenges recorded by the region in the fight against major communicable, emerging and re-emerging diseases especially Ebola Virus Disease.

Ministers received status reports from SADC Member States on the Implementation of the SADC Protocol on Health with special focus on the agreed priorities in the areas of Disease Control, Maternal, Newborn, and Reproductive Health, Health Education and Communication and Health Systems Strengthening.

Ministers noted that the SADC Region continues to experience a huge burden of communicable diseases. The big three, namely HIV and AIDS, TB and malaria remain the largest contributors to morbidity and mortality across SADC. The meeting noted that declines in new HIV infections of 26% and above were recorded in 8 Member States between 2001 and 2011. Botswana, Malawi, Namibia, Zambia and Zimbabwe recorded declines in new HIV infections among adults of between 26% and 49%, thus, surpassing the global target. Mozambique, South Africa and Swaziland recorded declines in new HIV infections above 50% during the same period. Eight Member States are likely to reach by end of 2015 the 50% target reduction in new HIV infections. The TB burden remains high in the Member States but significant achievements have been made in diagnostic and provision of TB treatment. The Ministers also took note of the rising burden of non-communicable diseases and the need to address them.

Ministers commended the region for the use of ICT in health communication such as print and electronic media which influences behaviour change, thereby contributing to the realisation of positive health outcomes.

Ministers commended Member States for measures taken to prevent the spread of Ebola in the region, including the containment and control of Ebola in the DRC which was declared Ebola free. In this regard, Ministers reaffirmed their commitment to the implementation of internationally advocated state of preparedness and response guidelines for Ebola and have continued to adhere to International Health Regulations. Ministers also reiterated their continued logistical, technical and financial support to Ebola affected countries in West Africa.

Ministers further reviewed and approved key strategic documents that will guide SADC public health priorities and for regional co-operation and integration. In this regard, Ministers approved key documents including the following;

- The SADC Code and Action Plan of Conduct on TB in the Mining Sector
- Minimum Standards for the Integration of Sexual and Reproductive Health and HIV in SADC
- Framework of Action for Sustainable Financing of Health and HIV in SADC Region.
- The establishment of Public Private Regional Partnership in complimentary Health financing.

Ministers also endorsed WHO AFRO decision of strengthening health care systems in the continent through universal health coverage and further regard universal health coverage as a flagship of health care reform

Ministers ended their meeting on a high note, and expressed their heartfelt gratitude to the Government and the people of the Republic of Zimbabwe for their warm reception and hospitality extended to them during the course of the meeting.

**Victoria Falls, Republic of Zimbabwe
January 15, 2015**