

REPORT

of the

Commonwealth Advisory
Committee on Health

to the

Commonwealth Health
Ministers Meeting

21 May 2017

CHAIR

The Commonwealth Advisory Committee on Health has been chaired by the Commonwealth of the **THE BAHAMAS**, under the leadership of DR GLEN BENEBY, Chief Medical Officer in the Ministry of Health.

CONTEXT AND MANDATE

The Commonwealth Advisory Committee on Health is made up of senior officials from the different Commonwealth member countries, regional bodies and civil society. CACH serves as a link between the health ministers and the Commonwealth Secretariat. The committee's main aim is to advise the Commonwealth Secretariat, through its Health Section, on matters of public health concern and interest to the Commonwealth. The committee provides guidance to the secretariat on its work and advice to Commonwealth health ministers on strategic direction and outcomes of the Health Section's work programme.

MEMBERSHIP

The committee is currently made up of 17 members: 9 country representatives who rotate every 4 years, and 8 permanent members representing regional bodies, the Commonwealth Foundation and Commonwealth Professional Associations.

The current membership (2016/17) is as follows:

nine countries: The Bahamas, Barbados, Cameroon, Cyprus, Ghana, Kenya Kiribati, Nauru and Sri Lanka;

five regional bodies: the Caribbean Community (CARICOM) Secretariat, the East Central and Southern Africa (ECSA) Health Community, the Southern African Development Community (SADC), the Secretariat of the Pacific Community (SPC) and the West African Health Organisation (WAHO);

the Commonwealth Foundation;

civil society representatives: the Commonwealth Health Professions Alliance (CHPA) and the Commonwealth Pharmacy Association (CPA).

The Bahamas tenure comes to an end on 30 June 2017. Also leaving the Committee will be **Cameroon** and, after serving as members since 2013. CPA will also be leaving after serving for a year.

ATTENDANCE

The attendance and engagement of CACH members has greatly improved over the last year. The Secretariat's efforts in facilitating this improvement need to be acknowledged and commended.

In the light of previous challenges in getting responses from countries, the Committee had resolved that any countries that did not respond to the invitation to serve on CACH, within the given timelines, would be replaced by the next country in the rotation line. This would ensure full participation in the Committee at all times.

Achievements

The Secretariat has made efforts to engage WAHO because Members noted the prolonged non-attendance by WAHO. The Secretariat continues in its efforts to establish regional representation from Asia.

For the first time, The committee met in one of the member countries, Sri Lanka - in order to improve engagement with countries. We hope this practice will continue because it is important to ensure the Commonwealth visibility and engagement across all the Commonwealth regions.

At the March 2016 meeting, the Committee was provided with progress updates on the work undertaken in the areas of UHC and NCDs, as well as the health hub. The Committee also discussed the latest agenda and programme of the 2016 ministerial meeting, including the suggestion to invite a high-calibre speaker, preferably with an appeal beyond the health sector. Members also noted the need to approach such potential speakers much earlier than in previous years to ensure their participation.

Challenges

REPORT ON THE SECRETARIAT'S HEALTH WORK PROGRAMME

Focusing on assisting member countries with policy review and development.

The Secretary General already mentioned

The focus of our work in health in this strategic period has therefore been on assisting member countries in addressing NCDs and in the development of health policy. In conjunction with the Healthy Caribbean Coalition, we developed the National NCD Commission (NNCDC) Implementation Framework to strengthen national NCD commissions in region. This was piloted in Antigua & Barbuda, St. Vincent & the Grenadines, and Grenada. In Sierra Leone, we placed a long-term expert in the Ministry of Health and Sanitation to contribute to the Strengthening of the National Health System post-Ebola Virus Disease. In Mauritius, our long term expert supported the legal establishment of a Health Professions Council (HPC) and in Saint Lucia our long-term experts assisted the country with Strengthened Health Workforce Planning.

In terms of the Commonwealth Youth Health Network (CYHN) as requested.

The Commonwealth Youth Health Network was established in June 2016 following its endorsement at the last Minister's meeting "in recognition of the contribution of young people and their potential to make significant contribution to the achievement of the SDG."

The network has since supported the participation of young people in global health governance through consultations and representation at relevant meetings on the achievement of SDG3 including the 2017 UN ECOSOC youth forum, UNFPA consultations and the UN Youth Commission on Science, Engineering & Technology for the SDGs.

It has also organised and supported capacity building initiatives to address NCDs through ongoing partnerships with youth and health organisations and is scheduled to deliver a joint side event on the role of the next generation in addressing NCDs on the 25 May 2017 during the World Health Assembly. The side event will contribute to continued advocacy and engagement towards the third UN High Level review on NCDs in 2018.

The network is currently working on the development of a pan-Commonwealth mental health directory as well as initiating Universal Health Coverage consultations among young people across the Commonwealth. To achieve these and other network objectives, closer country engagement is needed through ministerial support for the establishment of national leadership structures or focal points to liaise with the network's leadership team.

PROPOSED THEME FOR 2018 CHMM

In view of the number of suggested themes for next year, CACH is leaving this to this meeting- if te Chai could take suggestions from the Ministers.

However, CACH had suggested Ministers consider theme which build on previous themes, so that the Secretariat has time to build on work and engage more effectively with issues

CACH CHAIR'S REFLECTIONS

It has been an honour and privilege to serve on the Commonwealth Advisory Committee on Health since 2015, as a member and Vice-Chair, and now as Chair.

I have learnt a lot through the interactions with members from across the Commonwealth and have made many new friends.

I acknowledge the sacrifice of many CACH members, who, despite their busy schedules and demanding duties, have taken time to meet, to review documents and to deliberate on ways to improve the impact and relevance of the Secretariat's work programme. This in itself is a good reflection of the Commonwealth and the progress being made.

We are also grateful to have had the opportunity to build on the excellent work of the last Chair, Botswana, building on the reforms they started, to increase the effectiveness and relevance of CACH and the Commonwealth Health Ministers Meeting, particularly:

- The involvement of the incoming CHMM Chair in CACH planning for the ministerial meeting. Fortunately This year Cyprus is already a member of CACH. And will be Vice Chair of CACH next year- then Chair the year after. This has contributed to more effective briefing of the Chair as well as smoother and more effective running of the ministerial meeting.
- The greater focus on meeting outcomes and goals, as well as a more global outlook, including regional perspectives, rather than just national reports.
- The implementation of the agreement that the Commonwealth should deliver a statement at WHA, which had been discussed previously but not implemented.

Recommendations

The development of a database of potential speakers to encourage early identification of and engagement with potential speakers.

I have also been impressed by the efforts of the Secretariat in the preparation, organisation and content of the meetings, which have led to tremendous and very visible improvements in attendance, engagement and impact.