Basic information

2009/2552(RSP) RSP - Resolutions on topical subjects	Procedure completed
Resolution on an approach to 'EC development assistance to health services in sub-Saharan Africa' **Subject** 4.20.06 Health services, medical institutions 6.30 Development cooperation 6.30.02 Financial and technical cooperation and assistance	

Key events

Date	Event	Reference	Summary
11/03/2009	Debate in Parliament		
12/03/2009	Decision by Parliament	T6-0138/2009	Summary
12/03/2009	Results of vote in Parliament		
12/03/2009	End of procedure in Parliament		

Technical information

Procedure reference	2009/2552(RSP)
Procedure type	RSP - Resolutions on topical subjects
Procedure subtype	Debate or resolution on oral question/interpellation
Legal basis	Rules of Procedure EP 142-p5
Stage reached in procedure	Procedure completed

Documentation gateway

European Parliament

Document type	Committee	Reference	Date	Summary
Oral question/interpellation by Parliament		B6-0016/2009	09/03/2009	
Motion for a resolution		B6-0114/2009	11/03/2009	
Text adopted by Parliament, single reading		T6-0138/2009	12/03/2009	Summary

European Commission

Document type	Reference	Date	Summary
Commission response to text adopted in plenary	SP(2009)3244	06/10/2009	

Resolution on an approach to ‘EC development assistance to health services in sub-Saharan Africa'

2009/2552(RSP) - 12/03/2009 - Text adopted by Parliament, single reading

Following the debate which took place during the sitting of 11 March 2009, the European Parliament adopted by 555 votes to 8 with 11 abstentions, a resolution tabled by the Committee on Development on an approach to "EC development assistance to health services in sub-Saharan Africa".

Parliament began by noting that EC funding for the health sector has not increased as a proportion of its total development assistance since 2000 despite the Commission's commitment to the MDGs and the health crisis in sub-Saharan Africa. It considers that weak health systems, including the human resources crisis, are a major barrier to the achievement of the health-related MDGs, and stresses that strengthening health systems should be an essential element in poverty reduction. Basic healthcare infrastructure needs stable, long-term financial support if the health-related MDGs are to be delivered.

Members feel that, with a view to reaching better health outcomes, a common commitment is needed. They welcome the commitment on the part of the developing countries to work towards the target of 15 % of national budgets as investment for health in accordance with the commitments made by African leaders in Abuja, Nigeria, in April 2001. They regret, however, that the EC allocated only 5.5 % of total assistance under the 9th European Development Fund (EDF) to health. Parliament urges the Commission to strengthen its support for health services in sub-Saharan Africa and to review the balance of the EC funding with a view to prioritising health system support. The Commission needs to increase the funds allocated to the health sector at the mid-term review of the 10th EDF, regardless of a comprehensive strategy which includes support to sectors that have a wider impact on health outcomes, such as education, water and sanitation, rural development and governance.

The undertaking given in the context of the Development Cooperation Instrument (DCI) to devote 20% of funds to health and basic education by 2009 should apply to all European development policy spending, including the EDF, in order to be coherent.

Members asked the Commission to do the following:

- to ensure that there is sufficient health expertise to play an effective role in the health sector dialogue by seeing to it that all delegations where health is a focal sector have health specialists, by working more closely in post-conflict countries with European Community Humanitarian Aid department (ECHO) health advisers, by forming closer partnerships with the WHO, and by entering into formal agreements with Member States to use their expertise. Parliament wants detailed information on health and education experts;
- to provide technical assistance support to the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) at country level in the preparation of grant applications and in the implementation of grant contracts and to provide feedback to EC headquarters in order to ensure that it plays an effective role on the GFATM's executive board;
- a greater prioritisation of easily preventable diseases, such as diarrhoeal diseases, which could be largely avoided;
- to make greater use of general budget support for strengthening healthcare with performance indicators of progress towards the Abuja 15% target and execution rates, technical assistance on health-sector policy dialogue and sound statistical systems;
- to ensure that MDG contracts concentrate primarily on the health and education sectors and to develop alternative approaches, for those countries not yet eligible for MDG contracting, which are often further away from achieving the health MDGs;
- to use targets that directly measure the outcome of policies and to put in place mechanisms to ensure that an adequate proportion of general budget support aid supports basic needs, particularly in health;
- to make greater use of sector budget support, and to review the general requirement that sector budget support can only be used if health is a focal sector and to reconsider its current distribution of resources between sector budget support and general budget support;
- to provide support for scrutiny of budget support by parliaments, civil society and local authorities in order to ensure a strong link between budget support aid and the achievement of the MDGs;
- to encourage countries to increase national health budgets through the use of performance indicators by targeting such increases in its general Budget Support Financing Agreements. Parliament deplores the fact that only in 6 partner countries was health selected as a focal sector under the tenth EDF;
- to disseminate clear guidance on when each of the instruments should be utilised and how they can be used in combination to maximise synergy, and to ensure coherence between the different financial instruments.

Lastly, Parliament insists that the Commission and the Member States apply the EU Code of Conduct on Division of Labour Development Cooperation to ensure that health spending and programmes are better coordinated and to ensure a sharper focus on neglected aid-orphan countries, including countries in crisis and fragile states.