

Forum of the Concertation, dialogue between actors involved in the
development of Mutual Health Organizations in Africa
Yaounde (Conference center), September 30 – October 1 2009

The YAOUNDE DECLARATION

The 2009 ‘Concertation’ Forum of mutual health organizations in Africa, was just held in Yaounde for two days between September 30 and October 1 ; it brought together close to 400 participants from 23 countries among which 18 francophone and anglophone African countries » to exchange on three essential topics:

- Mutuality and the conditions of its functioning
- Relationships between mutuality and access to quality health care
- Mutuality and universal health insurance

With the support of the platform of promoters of Mutual Health Organizations in Cameroon, the Forum « **10 years of mutuality in Africa: realities, trends and challenges** », gave an opportunity to see the mutuality movement in a dynamic way. It confirms the continuous expansion of Mutual Health Organizations in many countries. Yet, this dynamic remains fragile due to political, financial and human conditions which are still unmet.

At the end of this Forum,

- *the Concertation considers that the development of Mutual Health Organizations whose ultimate objective is to improve access to health care for all should be based on the principles of solidarity, social justice, non-exclusion and non-profit making.*
- *the Concertation considers the implementation of needed political incentives to enable mutuality structures to evolve in an adapted legal framework which favors access to health services, and to improve healthcare quality.*

The Concertation Forum is a chosen moment when actors participating in the development of mutuality and micro insurance movements, public authorities and international organizations come together to exchange ideas. Through these exchanges, the Forum also contributes to create opportunities in terms of cooperation between all these actors. These collaborations and synergies contribute to the emergence and strengthening of mutuality and micro insurance movements in Africa. This 5th Forum fully falls in line with this joint dynamics.

Having noticed that:

- Health is at the heart of the Millennium Development goals and is a reaffirmed priority of the International agenda which aims at poverty reduction and economic and social development,
- Health is a fundamental human right and a world public good that cannot be merchandized,

Considers that universal coverage is a long term objective that relies on a national consensus and that can only be attained through successive steps and the implementation of sustainable and diversified financing mechanisms based on solidarity.

Considers that Mutual Health Organizations are an adequate response to cope with and to attain the objective of universal coverage in low and middle income countries and for which the international community gets organized to respond through different initiatives, notably to promote a social protection floor.

Considers that Mutual Health Organizations' strength and sustainability require an increased professionalization of the financial risk management and of management as a whole, as well as transparent and accurate governance necessary to get the members' trust.

Considers that networking can partly solve financial risks, provide technical assistance and allow the set up of guarantee and reinsurance funds or the provision of healthcare supply.

Considers that the objective of universal coverage cannot be attained without real political will or the financial intervention of the State whose role is to guarantee national solidarity and availability of quality health care. Mutual health organizations are convinced that anyone should participate in function of its financial capacities and should benefit from services according to his/her needs.

Considers that if the lack of income appears to be the heaviest determinant for non-enrolment, poor quality of care deters those who have the financial contributive capacity to enroll.

Considers that if Mutual Health Organizations have potential, even sometimes real negotiation power with service providers to control for overbilling (whose victims are patients), their capacity to have an impact on their members' access to quality health care is sometimes limited. **Mutual Health Organizations** have to overcome the weaknesses of public health facilities which constitute a majority and are known for their monopolistic nature. In this situation, mutual Health Organizations may consider becoming health care providers themselves.

Mutual Health Organizations recall that they are organizations of people with a social and non profit goal. They are characterized by autonomy of management, absence of shareholders and independence with regards to public authorities. The democratic control of their functioning is exerted in priority through its elected administrators. Autonomy and a democratic structure ensure the dynamism and permanent readjustment of services in function of real needs. The participation of the end-user in the process (empowerment) is a key element of Mutual Health Organizations' internal policies.

We, members of Mutual Health Organizations of all countries, encourage governments to take all necessary initiatives to ensure information, promotion and development of Mutual Health Organizations having to do with a clear institutional and legal framework, and ask international organizations to maintain their financial commitments in order to meet the needs of this development.

Yaounde, October 1 2009