

## **A Call for Health Equity and Justice in Southern Africa**

*Being a communique of the Southern African Health Sector Unions Network (SAHSUN) meeting held on 12 March 2026, at Gaborone, Botswana*

### **Preamble**

Representatives of the health and care workforce from across Southern Africa, convened in Gaborone, Botswana as the Southern African Health Sector Unions' Network (SAHSUN), reaffirm our shared commitment to advancing universal access to quality health and care services in the sub-region. We recognise that this moment calls for renewed cooperation among governments, trade unions and other social partners, communities, and regional institutions to accelerate progress toward Universal Health Coverage (UHC), in line with global and continental commitments, including the 2030 UHC target and the principles reflected in the 2001 Abuja Declaration.

We acknowledge the efforts made by governments in improving key health outcomes in the region, including gains in maternal health and progress, reduction of the incidence of HIV/AIDS, and prevention of mother-to-child HIV transmission. At the same time, we note with concern that persistent gaps remain between our populations health needs and available resources, contributing to inequities in access and outcomes.

We further take note of the region's ongoing health workforce constraints, including shortages relative to internationally recognised benchmarks, which continue to affect service availability, quality, and resilience of health systems. The density of health professionals is just 2.3 per 1,000 as against the WHO-recommended threshold of 4.45.

Guided by the principle that health is a fundamental human right and a public good, we underline the importance of strengthening public health systems so they can effectively serve all people, particularly those most vulnerable through equitable financing, strong primary health care, decent work for health workers, and accountable governance.

### **Key Priorities and Recommendations**

In a spirit of partnership and shared responsibility, SAHSUN encourages governments and relevant stakeholders to consider the following priority actions:

#### **1. Fulfil the 15% Abuja Commitment**

Governments across Southern Africa must move beyond rhetoric and reach the target of allocating at least **15% of their annual national budgets to the health sector**, as pledged in the 2001 Abuja Declaration. This is not merely a budgetary goal; it is a moral imperative to ensure the survival and resilience of our health systems, based on equity and justice.

## **2. Prioritize Primary Healthcare (PHC)**

We underscore the importance of prioritising PHC and district health systems as the frontline for integrated, people-centred care. We encourage balanced resource allocation that improves access for underserved communities and reduces inequities between urban and rural areas.

## **3. Invest in the Health Workforce**

We emphasise that health systems depend on a supported and adequately staffed workforce. We therefore encourage measures to:

- a. recruit and retain health and care workers** to fill critical vacancies for nurses, doctors, community health workers, and support staff.
- b. ensure safe and healthy working environments**, including attention to the mental health and psychosocial wellbeing of health and care workers.
- c. advance decent wages and fair working conditions and** reduce excessive casualisation and unsustainable outsourcing.
- d. strengthen social dialogue** and the meaningful involvement of health sector unions in policy development, implementation, and monitoring, consistent with national laws and relevant international labour standards

## **4. Achieve Financial Protection and Universal Coverage**

We reaffirm that access to health care should be based on need and not ability to pay. We encourage the design and strengthening of equitable, progressive, and accountable health financing approaches, including insurance and other pooled funding mechanisms under public authority and accountability, to reduce harmful out-of-pocket expenditure and protect households from impoverishment.

## **5. Promote Transparency, Integrity, and Accountability in Health Financing**

We encourage strengthened governance measures that promote integrity in health spending, including:

- a. robust oversight to prevent and address corruption and mismanagement; and
- b. inclusive planning and monitoring frameworks that enable participation by trade unions, civil society, and communities in health budgeting and accountability processes.

## **The way forward**

SAHSUN reiterates its readiness to engage constructively with governments, communities, allies, and relevant regional bodies, including the Southern African Development Community (SADC) to support reforms that strengthen public health systems and improve health outcomes for all. We encourage approaches that view public health spending as a strategic investment in the social, economic, and developmental future of Southern Africa.

## **Call to action**

We call on all health workers' unions, civil society organisations in the health sector, and communities across the region to organise, mobilise, and amplify this call for health equity and justice.

We encourage government ministries and institutions to deepen engagement with health unions through transparent, solutions-oriented processes.

We call for an end to privatisation, including public-private partnerships which amount to subsidising private profit with public resources. We will also push back against development financing and private equities, which have been used to further the commodification of health in our sub-region, and thus worsen health inequity.

**This is the time to act, towards making health for all a reality in Southern Africa.**