



Zimbabwe Aids Network
Civil Society Coordinating Platform on HIV/ AIDS, SRHR and Health

Response to Revision of User Fees by 600%

Zimbabwe AIDS Network, the coordinating platform for health, HIV and SRHR in Zimbabwe, is noting with great concern the government's unrelenting move of increasing user fees at public health facilities by 600% which inadvertently affecting the already fragile public health delivery system. Although general hospitals face severe cash constraints, the problem cannot be rectified by increasing user fees which are beyond the reach of the general public, especially those without medical insurance cover. The rocketing cost of medical treatment at government hospitals will further alienate impoverished people considering that they are already struggling to meet their basic needs. The increment of fees is uncalled for as it comes against a backdrop of current challenges to resolve structural bottlenecks such as the doctors' strike, shortages of drugs and medicines. This wave of increments effectively represents a structural exclusion of the majority, which depend on public health delivery systems. Ironically, these sad developments are emerging at a time when the country recently committed to the global call for Universal Health Coverage (UHC) at the United Nations High Level Meeting (UNHLM) on UHC. In the 2020 national budget, the government seeks to transition from austerity

to growth, but the per capita allocation for health resembles an insignificant effect to ensure access to health services without financial hardships and ensure equitable financing for health. These catastrophic costs represent an affront to the pertinent principles of universal health care which has effectively disenfranchise the majority who depend on the public health delivery systems. The cumulative effect of direction is to stymie realization of the targets and goals enunciated in the key agendas of SDGs and UHC. This also negates the government push towards improved health care delivery as envisaged in Transitional Stabilisation Programme. The country, for the past 3 years has managed to register improvements in various indicators and with increment in user fees these indicators are likely going to backslide due to financial hardship imposed to the general populace. It is also uncertain whether the increase in user fees shall be matched with improvements in health care service delivery or not.

We urge the following:

- Ensure that there is political will to prioritise the health sector.
- Domestication, contextualisation and implementation of the founding principles of UHC.
- Institute measures to ensure that all the people continue to access quality and affordable healthcare services
- Ongoing fiscal policy developments place public health delivery as an investment priority through meeting the Abuja and SADC commitments of allocating at least 15% and 11.3% of the national budget to health.