## **REPUBLIC OF NAMIBIA**



## MINISTRY OF HEALTH AND SOCIAL SERVICES

STATEMENT BY DR KALUMBI SHANGULA, (MP) MINISTER OF HEALTH AND SOCIAL SERVICES, ON THE OCCASION OF THE INTRODUCTION OF VOTE 13 (HEALTH AND SOCIAL SERVICES) FOR THE 2024/2025 FINANCIAL YEAR

2 APRIL 2024

NATIONAL ASSEMBLY WINDHOEK

\*Checked Against Delivery

Honourable Chairperson of the Whole House Committee Honourable Members!

- 1. Allow me latitude to table Vote 13 for the Ministry of Health and Social Services. I commend the efforts of Honourable Iipumbu Shiimi, Minister of Finance and Public Enterprises and Comrade Obeth Kandjoze, Director General of the National Planning Commission and their teams, for the sterling work in crafting a well-articulated national budget that demonstrates a deep understanding of the centrality of the social sectors in the socio-economic development of our country. Their meticulous attention to detail and fine balancing acumen are evident throughout the Appropriation Bill and the Medium-Term Expenditure Framework Documents which were served before this august House.
- 2. Vote 13 concerns us all. It is this Vote that cater for our monitoring, *in utero*, before birth through antenatal care. We are then born in hospitals, health centers and clinics, which are catered for under Vote 13. This Vote follows us during postnatal period through immunization and care amongst others. When our energies become expended in old age, we become constant visitors to hospitals and health facilities for medication against chronic ailments. And finally, we return to the hospitals for continued care and its where many of us exit this world. Therefore, this is our collective Vote which we are obliged to support collectively and unreservedly.
- 3. On 28<sup>th</sup> February 2024, the National Budget for the 2024/2025 Financial Year was tabled in the National Assembly by the Honourable Minister of Finance and Public Enterprises. The Ministry of Health and Social Services received an allocation of **Ten Billion, Eight Hundred and Ninety-One Million, and Seventeen Thousand Namibian dollars (N\$10 891 017 000)**, which constitutes roughly 11% of the total national budget. The development budget allocation amounts to **Four Hundred and Fifty-Seven Million Namibian Dollars (N\$457 000 000)** out of the total allocation to Vote 13, while the operational budget is allocated an amount of **Ten Billion, Four Hundred and Thirty-Four Million and Seventeen Thousand Namibia Dollars** (N\$10 434, 017 000).
- 4. Today, I will share with this august House some of the major achievements and programme outputs which were recorded during the 2023/24 budget cycle. Additionally, I will outline how the Ministry intends to utilize the funds allocated under the 2024/2025 Appropriation Bill. Finally, I shall inform the House on new developments.

## **Program 01: Health System Planning and Management**

## 5. Human Resources for Health

During 2023, the Ministry filled a total of 506 positions across various job categories. Enrolled Nurses comprised the highest number of positions at 308, followed by Registered Nurses at 221, Pharmacists at 36 and Dentists at 7. From January 2024, a total of 127 positions across different categories were filled. The highest number comprises Enrolled Nurses at 74. The majority of those recruited are trained at local private institutions.

6. The Ministry continues to place interns in health facilities under different disciplines. During 2023, we placed a total of 290 interns. The majority are medical graduates at 195, Dentistry graduates at 47, Pharmacist graduates at 31, Occupational Therapy graduates at 11, 4 Physiotherapist graduates, and 2 Psychologist graduates. An amount of N\$93 824 491 was spent for these placements in terms of remuneration. In 2024, a total of 161 interns were placed at a total cost of N\$42 723 744.16. There are 116 Medical Interns, 18 Dental Interns, 17 Pharmacist Interns, 9 Occupational Therapist Interns, and 1 Psychologist Interns. The Ministry continues to support training and development programmes for a skilled and competent healthcare workforce.

## 7. **Infrastructure Development**

The Ministry is undertaking activities to expand and modernize public health facilities to improve delivery of public health services at all levels. Several projects were undertaken during the 2023/2024 financial year to construct, upgrade and renovate hospitals and other health facilities. We completed several projects which were previously abandoned. I will expand more on this topic during my presentation.

### 7.1. Construction of Intensive Care Units (ICUs)

Prior to COVID-19, there were less than 40 ICU beds in public health facilities around the country, shared among Windhoek Central Hospital, Katutura Intermediate Hospital, Oshakati Intermediate Hospital, and Onandjokwe Intermediate Hospital. In order to remedy this situation, the Ministry embarked on the establishment of ICUs at various hospitals around the country. So far, we have added 55 ICU beds to reach a total of 97 beds. The Ministry is investing to establish modern ICU facilities in different District Hospitals in all 14 Regions. The ICUs for Katima Mulilo and Keetmanshoop District Hospitals were completed in 2023.

### 7.2. **Renal Dialysis Units**.

Government spends upwards of N\$100 million every financial year on renal dialysis care by referring state patients to private facilities. We are reversing this situation by establishing and expanding renal dialysis units in public hospitals across the country. The installation of renal dialysis at Katutura Intermediate Hospital complex (15 chairs) and

Oshakati Intermediate Hospital (12) has been completed and will be commissioned into service soon. We have commenced with similar projects at Keetmanshoop District and Hospital and Rundu Intermediate Hospital. Bids have been advertised for Walvis Bay and Otjiwarongo District Hospitals. For Katima Mulilo District Hospital, the procurement process is underway.

## 7.3. Medical Oxygen Upgrade

With the difficult Covid-19 lesson in mind, the Ministry has procured and installed oxygengenerating systems at Swakopmund District Hospital, Okakarara District Hospital and St Mary Rehoboth Hospital as well at Keetmanshoop District Hospital, Okahao, Eenhana, Okongo and Andara District Hospitals, which were installed during February 2024. The Global Fund to Fight AIDS, TB and Malaria, supported the procurement of some of these equipment.

#### 8. Other Capital Projects

Other projects completed during the period under review include the construction of Shamaturu Clinic; Gcaruhwa Clinic; Oshikulufitu Clinic; Keetmanshoop Hospital TB Wards; Windhoek Central Hospital Uninterrupted Power Supply (UPS) System for Theatres; Okakarara District Hospital Laundry and Kitchen; installation and commissioning of electricity backup generators at Andara, Okongo and Okahao District Hospitals; and installation of additional ground water tank reservoir for Omuthiya District Hospital. Construction is ongoing at Onamafila, Epupa, Linyanti, Okondjatu, Malengalenga, Onanghulo Clinics, and Aussenkehr Health Centre, which also includes staff accommodation. There is progress with the upgrading of electricity supply at Windhoek Central Hospital; construction of Onandjokwe Paediatric Ward Phase A and installation of Solar Water Heating System and Water Softening plant for Kitchen and Laundry at Okakarara District Hospital.

9. Katutura Intermediate Hospital is undergoing major renovation, upgrading and restructuring. On the 1 November 2023, the Late President, H E Dr Hage G Geingob, inaugurated the newly renovated Emergency Centre at Katutura Intermediate Hospital. This was a joint project between the Ministry of Health and Social Services, Standard Bank Namibia and Motor Vehicle Accident Fund. All the floors of the hospital are currently under renovation jointly by the Ministry and the Ministry of Works and Transport.

#### **Programme 02: Curative and Clinical Health Care Services**

10. The Ministry is implementing interventions to improve stock levels of pharmaceutical and clinical supplies in the short, medium, and long term. Short-term actions included emergency procurements by our Ministry under exemptions approved by Treasury. For

the medium-term, we shall replenish stock levels, with purchases sufficient for four months concluded in April 2023 and an additional six months procured in October 2023.

- 11. After years of waiting, we have now been informed that the Central Procurement Board has signed contracts for delivery of clinical supplies and antiretroviral medicines to the Ministry of Health and Social Services with the successful bidders. The responsibility is now on the successful bidders to ensure that they deliver as per orders. This will ensure that shortages of medicines and clinical supplies in our hospitals, Health Centres and Clinics will no longer be experienced and patients will get the quality healthcare services they deserve. The tender for pharmaceutical products is still awaiting High Court judgement.
- 12. In order to ensure that patients on chronic medication have easier access to their medications, the Ministry launched in May last year, the innovative Pelebox. Patients are notified via short message service (SMS) and can pick up their medications at their convenience from the boxes any time of the day. To date, we have installed 17 of these boxes around the country.
- 13. The procurement, installation of commissioning of essential medical equipment nationwide continues apace. During the reporting period, 13 operating tables, 20 electro cardiographs, 97 infant incubators, 20 dental chairs, 20 dental x-rays, and 18 dental autoclaves were procured and installed at various public health facilities. We have also installed Ceiling Suspended X-ray Units and Digital fluoroscopy units at referral hospitals. In June last year, the Ministry commissioned the Picture Archive and Communications System (PACS) and Radiology Information System (RIS) at a cost of N\$19.3 million at the five referral hospitals to digitalize the storage and transfer of patient imaging records at these facilities. These high-end equipment have significantly improved diagnostic capabilities in the public health sector. Awards have been made for the supply of several other equipment including mobile examination lights, theatre lights, laparoscopic units, cardiotocography (CTG) machines, ICU monitors, patient monitors, and dental chairs for public health facilities. The Ministry's Quality Surveillance Laboratory (QSL), which tests and analyses medicines to confirm conformance to set standards, received the (International Organisation for Standardization (ISO/IEC 17025:2017) accredited by the SADC Accreditation Service (SADCAS).

### **Programme 03: Public Health**

#### 14. Outbreak Preparedness and Response

Namibia has implemented an Emergency Preparedness and Response Programme, with investments in surveillance systems, infrastructure, and capacity-building initiatives. With the support of the WHO, we have trained 53 local professionals to complement the African

Health Volunteers Corps (AVoHC). We have also trained 50 members of the local Medical Emergency Teams (EMT). Approximately 200 personnel were trained in surveillance, outbreak investigation, and response under the Field Epidemiology and Laboratory Training Programme (FELTP), implemented jointly by the Ministry and the University of Namibia. Namibia's Field Epidemiology and Laboratory Training Program was last year accredited by the Africa Field Epidemiology Network, AFENET. This speaks to the high quality and maturity of our programme, earning it international recognition.

15. Our country has been implementing the National Action Plan for Health Security (NAPHS). This has bolstered response capacities to deal with public health emergencies, including outbreaks of diseases like Crimean-Congo Haemorrhagic Fever (CCHF), COVID-19 and other diseases. We have adapted the Integrated Disease Surveillance and Response Guidelines and conducted a comprehensive multi-hazard public risk assessment for the country.

#### 16. **HIV/AIDS**

Between 2018 and 2022, Namibia experienced a significant decline in HIV incidence from 6.29 to 4.2 per cent. Reductions in prevalence, new infections, and AIDS-related deaths were also recorded. As a measure of this progress, Namibia currently stands at 94-97-95 on the UNAIDS 95-95-95 fast-track targets. The fact that 97% of people living with HIV in Namibia are initiated on antiretroviral therapy (ART), translates into substantial progress in curbing HIV-related mortality. Free HIV testing, counselling, and treatment services are available nationwide, coupled with the decentralization of treatment to community-based ART centres and Adherence Clubs. The prevention of mother-to-child transmission have yielded impressive results, achieving a 98.5% success rate HIV-free births born to HIV infected mothers. Namibia is the second country in southern Africa to be recognized by the WHO as being on the Path to Elimination of Mother-to-Child Transmission of HIV. We are committed to end AIDS as a public health threat by 2030.

#### 17. Malaria

Initiatives to combat the malaria are being intensified. The Ministry offers free diagnosis and treatment in all public health facilities. The public has access to effective anti-malaria medicines, and diagnostic tests. The Government distributes insecticide-treated mosquito nets. More than 95 000 such nets were distributed recently in endemic areas. Approved insecticides are used for indoor residual spraying campaigns. Our strategy aims to eliminate malaria as a public health threat in Namibia by 2025.

#### 18. **Tuberculosis**

Tuberculosis (TB), especially the multi-drug resistant type is a major health concern. Although the total numbers of TB cases in the country, stands at a relatively low number Namibia is ranked 11<sup>th</sup> globally in terms of the TB burden per capita. Our strategy to

combat TB include free diagnosis and treatment services. The cure rate stands at 87% nationally. However, TB remains the leading cause of death among people living with HIV. The Ministry has deployed community health workers for case finding and treatment support and has leveraged technologies like AI-supported X-rays for diagnosis. Stakeholder engagements and targeted interventions, especially among miners and exminers are ongoing, as part of the Tuberculosis National Strategic Plan. The observed decline in external funding for HIV, TB and Malaria necessitates increased mobilization of domestic resources to maintain the momentum and the gains made, and to continue effectively responding to the three diseases.

19. Non-Communicable Diseases (NCDs) present a major public health concern in all countries. In Namibia, deaths attributable to NCDs are increasing, and are estimated at 43% of all deaths. The most common NCDs are high blood pressure, diabetes mellitus and some cancers. There is a need to allocate resources to support community level efforts to educate communities on these diseases as well as their complications such stroke, heart failure, end-stage renal failure, lower leg amputation, blindness, and reduced quality of life.

## 20. **Disability Prevention and Rehabilitation (DPR)**

Disability Prevention and Rehabilitation services are offered at tertiary, intermediate, and district-level hospitals. There are outreach activities to health centres and clinics, covering a range of conditions including physical, visual, hearing, and mental health, providing prosthetics, orthotics, physiotherapy, occupational therapy, audiology, speech therapy, eye care, and mental health support. A total of 620 wheelchairs, costing N\$4.7 million, were procured and distributed to beneficiaries, free of charge, during the FY 2023/2024. More than 14 350 persons were provided with prosthetics and orthotics services during the same period. There is a backlog of more than 1 400 wheelchairs countrywide. At least 100 000 persons around the country require other assistive devices such as artificial limbs (prostheses), eyeglasses, hearing aids and white canes, at one time or another. The Ministry typically receives an allocation of around N\$25 million for these items per year. Cumbersome and most of the time protracted procurement process often hinders achieving 100% expenditure each year.

### **Programme 04 Developmental Social Welfare**

21. The Ministry continues to provide treatment and psychosocial support for alcohol and drug dependency at the Etegameno Rehabilitation and Resource Centre. Out-patient services have been extended to other Regions. We have introduced the Brief Motivation Intervention Tool for early detection and referral of individuals struggling with substance abuse. I have appointed Mental Health Boards for Windhoek Central Hospital and Intermediate Hospital Oshakati in accordance with the provisions of the Mental Health Act

No 18 of 1973 to ensure the welfare of mental patients who are admitted to the mental health institutions.

22. We have also established a National Action Committee on Suicide Prevention to addressing the complex issue of suicide through coordinated efforts aimed at awareness, support, and prevention. The Ministry will continue to actively address these issues through the Health Systems Strengthening Plan. A new bill, the Mental Health Bill will soon be introduced in this august House for consideration. Once enacted, it will optimize mental health services, which is one of the priorities programme of the Ministry.

## **Programme 99: Policy Co-ordination and Support Services**

Cabinet has endorsed and tasked the Ministry to spearhead the development of Universal Health Coverage (UHC) Policy Framework. This includes the revision of the Essential Health Services Package (EHSP), which outlines services available at each level of healthcare. Several other policies, guidelines were reviewed and updated. Based on the World Health Organization's UHC Service Coverage Index, Namibia has made notable progress towards achieving UHC. We stood at 63% in 2021, a significant increase from 39% in 2000. This level of access and utilization of healthcare services has translated into tangible improvements in health outcomes, including an increase in life expectancy from 60.9 years in 2010 to 64 years in 2019. Moreover, healthy-adjusted life expectancy (HALE) has risen from 58 in 2010 to an impressive 67.5 years by 2022, underscoring substantial enhancements in health and well-being for Namibians.

### **Honourable Chairperson of the Whole House Committee**

24. Let me now turn to the key priority spending and investment programmes to be implemented during the budget year 2024/25 and the expected outputs.

# Program 01: Health System Planning and Management (N\$71 541 000)

- 25. The Ministry will implement activities to improve efficiency and effectiveness in healthcare delivery. These include digital health technologies to strengthen health information systems; provision of high-quality epidemiological data and indicators, and preparations for the long overdue National Demographic and Health Survey. We will conduct research activities to generate evidence-based inputs for the review and possible formulation of policies and strategies in public health.
- 26. Several capital projects will be implemented, including the commencement of the construction of the Windhoek District Hospital, which will be carried out as a fast tract

project. New clinics and Health Posts will be built in different parts of the country. Contractors will be held to account to complete outstanding capital projects. The establishment of Intensive Care Units at District Hospitals, the Mother's Waiting Shelters and Mental Health Units as per the approved Plan, will enjoy attention. These interventions will bring about the benefits of cost savings, operational efficiencies, convenience as well as improved patient care and health outcomes. Referrals of patients to other facilities will also be significantly reduced.

#### Programme 02: Curative and Clinical Health Care Services (N\$10 120 598 000).

27. This programme receives the lion's share of **N\$10 120 598 000**. Activities include the provision of services for in-patient and outpatient health care services; the acquisition of essential medicines and clinical services, expansion of specialized services and procurement of necessary equipment for the delivery of quality public health care services around the country. Particular emphasis will be placed on the acquisition of medical equipment over the MTEF period and the procurement of oncology radiation equipment and their maintenance. The construction of a modern Central Medical Stores will also commence.

### **Programme 03: Public Health (N\$100 794 000)**

- 28. Through this programme, the Ministry ensures an efficient public health system with programmes aimed at reducing the incidents of diseases and disability; improvement of maternal and child health; prevention of communicable and non-communicable diseases; epidemic preparedness; promotion of environmental and occupational health, as well as the reduction of morbidity and mortality in society. We will intensify efforts to ensure robust vaccination programmes, disease surveillance systems, and public health campaigns, including those geared toward the elimination of Malaria, Tuberculosis and Neglected Tropical Diseases. The Ministry will engage Civil Society Organizations in the provision of health services at community level through the implementation of the Social Contracting Policy. We will continue to decentralise services to the community with the establishment of Health Posts.
- 29. Specific focus continues to be placed on strengthening Maternal and Neonatal Health as one of the important indicators of the health of the nation. We will continue to invest in the vaccination programme, surveillance and laboratory capacity. Special attention will be given to the acquisition and distribution of wheelchairs and other assistive devices over the MTEF period. The Ministry has decided to support staff members to undertake postgraduate training in public health. Prevention is cheaper than treatment.

30. New facilities to be undertaken during this financial year are the prefabricated facilities at Onamukulo, Ompundja and Mabushe. NAMDEB has provided a facility to the Ministry to serve as a Health Centre for the provision of public health services to Oranjemund community. This facility will be renovated to conform to the standards of a Health Centre. The documentation for Serringkop Farm and Tjaka Ben Hur has been completed and the procurement process for construction will commence in this financial year. Consultants will be appointed soon to compile documentation for Vaalgras and Uuvudhiya Clinics. Nineteen fixed health points are being constructed country wide with financing to a total amount of N\$9 761908 outside the State Revenue Fund, supported by CDC.

### Programme 04: Developmental Social Welfare (N\$28,480,000).

31. The programme delivers quality social care, while enabling affected persons to retain their independence, control and dignity. It includes activities such as the promotion of family wellbeing, prevention of substance abuse, and the administration of policies and legislation on registration and operations of welfare organizations and institutional centres. We will work collaboratively with relevant stakeholders to address social determinants of health, such as poverty, education, and housing, recognizing their significant impact on health outcomes.

## Programme 99: Policy Co-ordination and Support Services (N\$569 604 000)

- 32. Under this programme, we develop the capacity for planning and management of health and social services in order to optimally and efficiently utilize the resources allocated to the sector. In the new Financial Year, particular attention will be given to planning in Human Recourses Development, Performance Management, Health Financing, Policy and Legal Framework, and Health Services delivery. We will prioritize training and capacity-building initiatives to enhance the skills and competencies of healthcare professionals, ensuring a well-equipped workforce to meet the diverse needs of our population.
- 33. Other priorities during the 2024/2025 Financial Year include the acquisition of medical equipment in the areas of maternity, monitoring, rehabilitation, dialysis, and oxygengenerating systems in line with the Ministry's equipment replacement plan. For example: we plan to procure x-ray and imaging equipment for hospitals such as Karasburg, Omuthiya, and Swakopmund, where this capacity is needed. We plan to recruit and train technicians and engineers for maintenance and repairs of equipment; and we plan to acquire a computerized medical equipment management system to enhance equipment maintenance and utilization. For impact, the Ministry's will implement the initiatives set out in the costed Proposal for the Mobilisation of Additional Funding for Critical Activities and Interventions for Health System Strengthening (2023/2024 to 2027/2028), according to the set timelines

### **Special projects**

### **30.1.** Windhoek District Hospital

The Windhoek District Hospital is envisaged to provide general outpatient and inpatient care in order to reduce the work load and referrals to Katutura Intermediate Hospital, which will serve as a Class B Facility in the referral pathway, including receiving patients from country wide district hospitals and as a training centre for interns in different health disciplines. Katutura Intermediate Hospital will focus on specialist services, training and research. The Windhoek District Hospital will provide relief to the Katutura Intermediate Hospital and will free up space for specialized services. It will also reduce congestion, long waiting times and overcrowding in the wards. The groundbreaking ceremony will take place on the 9 May 2024. I invite all Honourable Members to witness this milestone.

#### 30.2. Central Medical Store

The Central Medical Stores (CMS) is a government-owned entity responsible for procurement, warehousing and distribution of all pharmaceuticals and clinical supplies for use in public hospitals and health facilities in Namibia. The CMS has been experiencing a challenge in service level, from a high of 92% in 2007/2009 to a low of 58% in 2017/2018 financial year. This has been partly due to the procurement bottlenecks, poor on-time delivery by CMS suppliers, increasing demand and order volumes by health facilities and organizational challenges at CMS. The Ministry is keen to address these challenges and implement long term solutions to prevent similar occurrences and to ensure the sustainability of the CMS function. As such, the Ministry developed a Central Medical Stores Namibia Turnaround Strategy Phase 2, which provides for improvements in storage infrastructure. The CMS will be located at new warehousing site which allows for optimum operational smart warehousing facilities relevant to cater for needs for the next 20 to 30 years.

#### 30.3. Namibia Institute of Public Health

The COVID-19 pandemic has heightened the urgent need for the establishment of NIPH that is able to efficiently coordinate the response to public health threats. Cabinet has approved the establishment of the Namibia Institute of Public Health whose core pillars are Public Health Surveillance and Epidemiology; Public Health Laboratory Systems and Networks; Public Health Workforce Development; Public Health Emergency Management and Public Health Emergency Operations Centre and Public Health Operational Research. The Namibia Institute of Public Health is envisioned to play a critical role in generating, synthesizing, and interpreting data, and using this information to make recommendations, to support Ministries to make informed policy and programme decisions. The NIPH will provide national leadership and expertise in driving the public health function nationwide while linking the country to the global health community in the prevention and control of diseases and epidemics. The Institute will be a critical foundation for the public health

delivery system and will provide early warning signals of health risks and hazards, compile data to support outbreak investigations, identify the causes of diseases to aid prevention and treatment. The NIPH will provide national leadership, competent expertise and coordination of rapid, effective evidence based public health emergency risks thereby improve organization and agility to respond.

#### Awards

32. It is notable that the achievements recorded by the Government of the Republic of Namibia has been recognized at Regional and International levels. For example, in March 2023, our country received an Award from PEPFAR in recognition of the remarkable progress that Namibia has made towards reaching the UNAIDS fast track 95-95-95 targets and the efforts toward ending AIDS as a public health threat by 2030. Similarly, on 16 February 2024, our country received two awards from the Director General of the World Health Organisation. The first one is the Certification on the Achievement of the Silver Tier on the Path to Elimination of Mother-to-Child Transmission of Hepatitis B Virus. The second one is the Certification on the Achievement of the Bronze Tier on the Path to Elimination of Mother-to-Child Transmission of HIV as a public health problem. The official presentation of the last two awards will be done in the near future.

# Honourable Chairperson of the Whole House Committee,

- 32. I give assurance to this House that the Ministry of Health and Social Services remains steadfast in its commitment to promoting the health and well-being of our citizens. We will continue to strive for excellence in service delivery and stewardship of resources to ensure a healthier and prosperous future for all Namibians
- 33. The budget allocation will go a long way in catering for the critical programmes and activities of the Ministry. We are grateful to our development cooperation partners, private sector and non-governmental organizations who continue to support us in different areas. We will continue to ensure prudent utilization of resources placed at our disposal as evidenced by unqualified Audit Reports during the last three Financial Years, following many years of qualified audits.
- 34. Finally, I request you, Honourable Members, to support and approve the allocation of **Ten Billion, Eight Hundred and Ninety-One Million, and Seventeen Thousand Namibian dollars (N\$10 891 017 000)**, for **our collective** as I said at the beginning, Vote 13 for the 2024/25 Financial Year. When you make your contribution to the discussion, I respectfully implore you to start or to conclude with the following sentence: "I support Vote 13 for the Ministry of Health and Social Services".

I thank you.