

Department of Health, South Africa

Address by the Minister of Health, Dr Aaron Motsoaledi at the media launch of the Lancet Country Series on Health in South Africa

24 August 2009

The Chairperson, Dr Sabine Kleinert,
The Editor of the Lancet, Dr Richard Horton,
Professors Coovadia and Karim,
Authors of the various articles,
Members of the media,
Ladies and Gentlemen

Good afternoon.

I wish to thank the Lancet for commissioning this series on health in our country. This is a very important contribution to the ongoing reviews that are being conducted on the challenges and opportunities to strengthen the national health system and to improve health outcomes. We welcome this addition to the existing reviews.

I took office in May this year after being appointed by the African National Congress which emerged from the 2008 national elections with a mandate to improve the health of our people. These mandates include increased and dedicated efforts on:

- The creation of decent work and sustainable livelihoods;
- Improving access to good quality education;
- Improvements in health services;
- The establishment of safe and secure communities; and
- Rural development.

These five areas arise from a consultation process that was undertaken both prior to the 52nd National conference of the ANC and in preparation for the 2009 National Elections. This is therefore what our people want us to prioritise.

What is remarkable of this list of key priorities is that it bears striking similarities with the list of issues raised in the Report of the Commission into the Social Determinants of Health chaired by Sir Michael Marmot which was aptly titled: 'Closing the Gap in a Generation: Health equity through action on the Social Determinants of Health'.

In the editorial of the Lancet the marked the launch of the Report you noted and I quote:

"The Commission talks unashamedly about social justice, a phrase that is used more by politicians than health professionals. But the inequities and inequalities in health that exist today must surely prick the concern and conscience of every physician (and may I add every health worker). The problem for most doctors is likely to be the twin feelings of hopelessness and impotence at the sheer scale of the difficulty they face. Those feelings often translate into paralysis. The Commission's most refreshing conclusion is that hopelessness, impotence, and paralysis can be overcome by optimism, vigour, and muscular policy responses.

Three principles of action are set out. First, to improve the conditions of daily life-at home and at work, for women and men, in rural and urban settings, and for all ages. Second, to address the inequitable distribution of power and money, forces that shape the conditions of daily life. And third, to act-based on knowledge, a professional workforce, alliances with civil society, and evaluation".

Of course this is not the first time that these issues have been raised. In the 1940s the government of the day, in South Africa, appointed what subsequently became known as the Gluckman Commission which pointed to the importance of the social determinants of health and recommended that the government implement a national health insurance system. Several decades later, in 1978, we had the Declaration of Alma Ata which recommended the primary health care approach which again clearly linked social and economic conditions to health outcomes.

This issue was again raised in the early 1990s when the ANC produced a series of papers under the broad heading 'Ready to Govern'. Key amongst these was the reconstruction and development programme and the National Health Plan.

Prior to the 2009 elections, facilitated by the Development Bank of Southern Africa we produced a review of our health system and health outcomes and developed a 10 point plan to deal with the challenges that were uncovered by this process.

Today we launch the Lancet Series on Health in South Africa.

What is clear is that we are able to very adequately make the diagnosis of the key challenges facing our globe and our country and have been more than a century. Indeed one can go back to Edwin Chadwick and his sanitary prescriptions for London in the early 1800s and Hippocrates before him!

In this context then, I welcome the Lancet series on South Africa and the wisdom of the authors of the various articles. It is evident that all is not right with the health system and health outcomes in our country. All commentators on our health outcomes appear to agree that we will not be able to meet the health related MDGs by 2015. I will not disagree with these analyses.

The key now is to agree on what needs to be done to 'close the gap', not 'in a generation' but as soon as possible.

Together with the MECs for Health we have agreed on a detailed programme of action for the next 5 years which includes the following:

- Strengthening strategic leadership for better health outcomes
- Implementation of a national health insurance system
- Improving quality of care
- Overhauling the health system & improve its management
- Improving human resources for health management, planning, development & management
- Revitalising our health infrastructure
- Accelerating implementation of the National Strategic Plan for HIV with an increased focus on TB and other communicable diseases
- Mass mobilisation for better health for the population which includes a strengthened response to improving maternal and child health
- reviewing our drug policy
- and strengthening research & development

The successful implementation of this programme of action requires us to strengthen and extend our partnerships with all stakeholders in South Africa and with our development partners. It is critical that civil society, organized business and labour, researchers and academics in our country work with us to turn our health system around and to achieve better outcomes.

We are committed to doing this and will do everything that we can to improve the health of our people.

I therefore welcome the Lancet series on health in South Africa and hope that the dialogue that the results from the publication of the six articles will provide us with practical solutions to some of the challenges that we face.

I wish to apologise for not being able to attend your symposium tomorrow as I have to attend a mandating committing meeting in Cape Town.

I would like to wish you a successful symposium tomorrow and look forward to learning from your deliberations.

I thank you.

<http://www.doh.gov.za/docs/sp/sp0824-f.html>