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**UNIVERSAL ACCESS TO HEALTH CARE:
ADDRESSING INEQUALITIES
SOUTH AFRICA**



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1. INTRODUCTION

- The right to health is fundamental to the physical and mental well being of all individuals.
- Universal Health care is a national health insurance program in many countries financed by taxes and administered by government to provide comprehensive health care that is accessible to all citizens of that nation.
- To ensure the realization of right of access to health care services as guaranteed in the Constitution of the Republic of South Africa(Act No 108 of 1996) the Department of Health is committed to upholding, promoting and protecting this right and therefore proclaims the Patients Right Charter as a common standard for the realization of this right

INTRODUCTION (CONT.)

- A Health Charter has been developed which aims to create a platform between sectors to address issues of access, equity and quality health services
- As in many other countries ,health care in South Africa is characterized by huge disparities between private and public health sector
- Minority of 8.1 million pay significant private health care compared to 41 million who rely solely on public health care.

2. ACCESS TO HEALTH CARE

- Everyone has the right of access to health care service that include emergency care
- Receiving timely emergency care at any health care facility that is open regardless of one's ability to pay
- Treatment and rehabilitation
- Provision for special needs
- Palliative care that is affordable and effective in cases of incurable or terminal illness
- A positive disposition displayed by health care providers that demonstrate courtesy, human dignity, patience, tolerance and
- Health information that includes the availability of health services and how best to use such services , information shall be in the language understood by the patient.

3. NATIONAL HEALTH ACT (No. 61 of 2003)

➤ National Health Act Objectives:

- Regulate national health and to provide uniformity in respect of health services
- Establishing a national health system which encompasses public and private providers of health services
- Protecting , respecting, promoting and fulfilling the rights of the people of SA to the progressive realization of the constitutional right of access to health care services, including reproductive health
- The socio economic injustices , imbalances and inequalities of health services of the past

THE NATIONAL HEALTH ACT (CONT.)

- The need to improve the quality of life of all citizens and to free the potential of each person
- Puts vulnerable groups such as women, children, older persons and persons with disabilities at centre stage

4. INEQUALITIES

- Disparities in access and care between -:
 - Public and Private sector jarring - high cost high quality health care for those who can afford private health care , while people at the base of the economic pyramid rely on state hospitals and clinics that have fewer resources , understaffed and under equipped
 - . Example in public sector - Renal Dialysis is rationed - cut off number.
 - Urban and rural care , with many rural patients having to travel into cities to access services
 - Human Resources – The public health system has the same level of human resources in 2007/8 as it had in 1997/8 despite significant increase in population and disease burden. To date nurses appointments have increased by only 1.8%

5. HEALTH CARE SYSTEM

➤ Financing Health Care System:

- Bulk of health sector funding comes from the South Africa's National Treasury
- Public health services are funded largely from general taxes
- Giving provincial governments significant discretion in the funds allocated to the provincial health departments.
- Health services are also funded through conditional grants which largely limit provincial discretion

6. ADDRESSING INEQUALITIES

➤ **ANC as Governing Organisation:**

- ANC stands for basic democratic principles that include:
 - a constitution which guarantees human rights for all, the right to a minimum standard of life, including the right to access health.

➤ **ANC Election Manifesto**

- Identified five priority areas for the next five years, one of them is health
- The Freedom Charter commits to a preventive health scheme run by the state; free medical care and hospitalization provided for all, with special care for mothers and young children.

ADDRESSING INEQUALITIES (CONT.)

- Forward to achieving health care for all
 - The government will aim to reduce inequalities in our health system
 - Improve quality of care and public facilities
 - Boost human resources
 - Step up the fight against HIV and AIDS and other diseases
 - Health reforms will involve mobilization of available resources in both private and public health sectors to ensure improved health outcomes for all South Africans

ADDRESSING INEQUALITIES (CONT.)

- **Primary Health Care**

- Free Primary Health Care – 1600 more clinics built, about 248 out of 400 public hospitals have been revitalized and refurbished .

In the 2011 ANC Manifesto and the recent Nursing Summit called by Minister of Health, highlighted the establishment of Primary Health teams in municipalities to work in programs addressing social abuse, HIV and AIDS, and broaden the scope of reproductive rights through provision of contraceptives and sanitary towels to the indigent municipalities

- Access to HIV and AIDS treatment has expanded dramatically for both public and private sector, all patients have access to treatment
- Effective implementation of National school based Primary Health Care system led by nurses.

ADDRESSING INEQUALITIES (CONT.)

NATIONAL HEALTH INSURANCE

- The South African Government is currently in the process of a major health sector reform that is aimed at achieving universal access to good quality health care for all South Africans.
- National Health Insurance(NHI) a new concept for South Africans is the way to go. Kicks in by 2012, not an event, but a process.
- NHI will deal with by providing universal access to health care based on need rather than ability to pay. Will phase in NHI in 14 years.
- Dr Motsoaledi “The starting point for NHI is to close the increasing gap between the rich & the poor, he describes the existing health care system as very expensive, destructive, unaffordable and not sustainable. 8.6% of the GDP than many middle income countries & our outcomes are poor”

ADDRESSING INEQUALITIES (CONT.)

PROVISIONAL MODEL OF FUNDING NHI

- Main source of revenue would be South Africa's general taxation
- Additional financing may be sought through a surcharge on taxable income
- An increased value added tax (vat)
- Payroll taxes for employers and employees and
- Removal of the presently existing tax credit medical aids
- The first phase of the project will be rolled out in 2012 and will focus primarily on bringing services to areas with little or no access to quality health care.

ADDRESSING INEQUALITIES (CONT.)

- Upgrade and improve public hospitals and clinics , as well as the administrative systems and buildings so that long queues and waiting times are reduced and improved quality care is available
- Will improve the health status of the population and achieve the health related Millennium Development Goals (MDGs) .This will include measures to scale up HIV prevention, address the challenge of TB and upscale PMTCT to 95% in all districts
- Strengthening of the public health sector and the mobilization of our people around NHI and HIV and AIDS as key campaigns for 2010 and beyond.
- Developing human resource programs to fill the national shortage of qualified health workers

ADDRESSING INEQUALITIES (CONT.)

- **Government Employee Medical Scheme (GEMS), 01 Jan 2005**
- Address the challenges in respect of current provision of medical assistance to public service employees by government
- Before GEMS:
 - Many employees could not afford medical cover the cost of belonging to a medical scheme has continuously become more expensive
 - The scheme is restricted to public servants only & ensures that all government employees are awarded equitable access to their conditions of service in the public service
 - GEMS achieves the promotion of equitable access to comprehensive & affordable healthcare benefits by public service employees

7. CONCLUSION

- The political will and enthusiasm by the public and Trade Unions assures us of the success of the implementation of the National Health Insurance.
- Everyone has a right to access healthcare as enshrined in the constitution
- The government has an overall responsibility for healthcare in the country and has to ensure that there is unified action across the health sector

REFERENCES

- Constitution of The Republic of South Africa ,Act No 108, 1996
- National Health Act. No 61, 2003
- Healthcare in South Africa –South Africa Media
- A National Health System – Opportunities and Challenges for South Africa – CEO of the Human Science Research Council
- Bulletin – World Health Organization 2010, November- Universal Access to Health Care in South Africa



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