



Health

One of the challenges to government has been the reform of the health system. This has included creating a single, unified national health system and strengthening institutional capacity at national, provincial and district levels.

In 1994, government started providing free public primary healthcare (PHC) services for children under six years, and pregnant and lactating women. During the same period, government initiated a programme that resulted in more than 1 300 clinics being built or upgraded between 1994 and 2004.

Where necessary, patients with complications are referred to higher levels of care, such as hospitals.

PHC services include immunisation, communicable and endemic disease prevention, maternity care, screening of children, integrated management of childhood illnesses and child healthcare, health promotion, counselling, management of chronic diseases, and diseases of older persons, rehabilitation, accident and emergency services, family planning, and oral health.

By September 2005, 21 000 community members had participated in a number of healthy lifestyle activities initiated by the Department of Health during 2005/06.

More than 2 000 people underwent eyesight, oral health, blood glucose, blood pressure and body mass index screenings during these campaigns.

The budget for the public health sector grew from R33 billion in 2002/03 to R51,7 billion in 2006/07 and is set to increase to R60,8 billion in 2008/09.

During 2006/07, the Healthy Lifestyles Campaign was expanded to districts and local municipalities, schools and places of work. Thousands of schools will be assisted to establish school-based food gardens, to implement tobacco-control programmes, and to implement the strategy on diet, physical activity and health. Health promoters will be trained in all provinces to implement this strategy. The programmes were expected to reach 5 000 schools during 2006.

Health-delivery system

The major emphasis in developing health services at provincial level has been the shift from curative hospital-based healthcare to that provided in an integrated community-based manner.

Provincial-hospital patients pay for examinations and treatment in accordance with their income and number of dependants. A provincial government may partly or entirely finance patients' treatment.

Clinics

A network of mobile clinics run by government forms the backbone of primary and preventive healthcare.

There were 3 380 health professionals allocated to community service in 2006.

- dentists – 184
- pharmacists – 473
- medical doctors – 1 324
- clinical psychologists – 104
- dieticians – 161
- environmental health practitioners – 208
- occupational therapists – 244
- physiotherapists – 280
- radiographers – 274
- speech therapists – 128.

Malaria cases and deaths in South Africa from 1999 to 2005

Year	Total cases	Total deaths	CF (%)*
1999	51 444	406	0,8
2000	64 622	458	0,7
2001	26 506	119	0,4
2002	15 649	96	0,6
2003	13 459	142	1
2004	13 399	89	0,6
2005	5 351**	40**	0,7475**

* CF = case fatality

** Data not available for August to December 2005

Source: Department of Health

Hospitals

By June 2006, there were 400 public hospitals in South Africa serving more than 43 million people. The private health sector takes care of seven million principal members of the medical aid schemes.

The budget allocation for the Hospital Revitalisation Programme is R1,4 billion in 2006/07; R1,7 billion in 2007/08; and R1,9 billion in 2008/09.

The programme aims, among other things, to retain health professionals, especially in the remote underserved areas of South Africa, by improving their working environment. With 48 hospitals enrolled in the programme, the state-of-the-art George Hospital in the Western Cape was one of the facilities to benefit from it.

The total cost of the revitalisation of this hospital was R90 million. This 265-bed facility serves 550 000 people in the region. It was officially opened in June 2006.

In addition, by mid-2006, eight new hospitals were being designed, bids had been invited for another 16 and 24 were being constructed. Two were expected to be opened in Limpopo and the Eastern Cape respectively in 2006.

Four had been opened, including the Kimberley and Chief Albert Luthuli hospitals.

There were 357 private hospitals in 2004, according to the Health Systems Trust. Private hospital fees are generally higher than those of provincial hospitals.

Emergency medical services (EMS)

EMS, including ambulance services, are run by the provinces, but training is nationally standardised.

Private ambulance services also provide services to the community. Some of these also render aeromedical services.

Registered medical interns, practitioners and dentists, 2002 – 2006

	2002	April 2006
Dentists	4 560	4 799
Medical interns	2 306	2 864
Medical practitioners	30 271	33 220

Supplementary healthcare practitioners, April 2006

Basic ambulance assistants	26 924
Ambulance emergency assistants	5 100
Environmental health practitioners	2 718
Medical technologists	4 895
Occupational therapists	2 886
Optometrists	2 603
Physiotherapists	4 892
Psychologists	6 059
Radiographers	5 395

Source: Health Professions Council of South Africa

Registered and enrolled nurses, 2003 – 2005

	2003	2005
Registered nurses	96 715	99 534
Enrolled nurses	33 575	37 085
Nursing auxiliaries	47 431	54 650
Students in training	23 661	27 481

Source: South African Nursing Council

Legislation

The National Health Act, 2003 provides a framework for a single health system for South Africa. It highlights the rights and responsibilities of health-providers and users, and ensures broader community participation in healthcare delivery from a health facility up to national level.

The Traditional Health Practitioners Act, 2004 provides, among other things, for the establishment of a council for traditional health practitioners.

The Department of Health has established a directorate on traditional medicine. It will develop and implement policy on traditional medicine, and co-ordinate the activities of the National Reference Centre for African Traditional Medicine.

The South African Government has identified telemedicine as a strategic tool for facilitating the delivery of equitable healthcare and educational services, irrespective of distance and the availability of specialised expertise, particularly in rural areas.

In 1998, the Department of Health adopted the National Telemedicine Project Strategy.

In 1999, the department established 28 pilot sites in six provinces. The initial applications were teleradiology, tele-ultrasound for antenatal services, telepathology and tele-ophthalmology. By 2006, South Africa had 57 telemedicine sites.

The Nursing Act, 2005 addresses developments in nursing education and classification of nurses into categories. This Act will also assist in introducing the nursing profession to the community-service programme, which already covers all other categories of health professionals.

The Mental Healthcare Act, 2002 enforces the culture of human rights within the mental-health service and ensures that mental-health patients are treated with respect and dignity.

Health team

The core team consists of:

- 33 220 registered doctors (April 2006)
- 4 799 dentists (April 2006)
- 10 971 pharmacists (August 2006)
- 99 534 registered nurses (2005).

South Africa has a shortage of health professionals such as physiotherapists, dieticians and radiographers.

National Health Laboratory Service (NHLS)

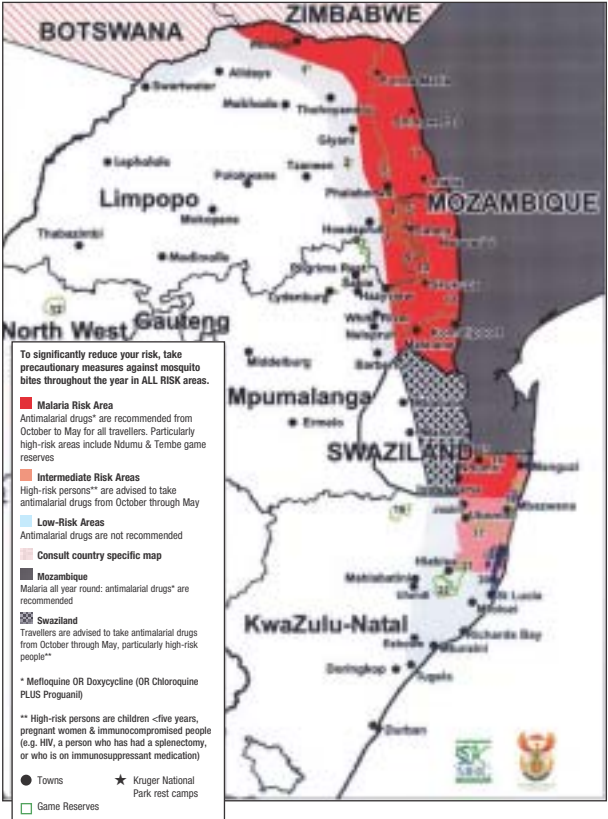
The NHLS is a single national public entity. With over 250 laboratories serving 80% of the country's population, it is the largest diagnostic pathology service in South Africa. All laboratories provide laboratory

The Department of Health has established a directorate to oversee the country's first comprehensive forensic pathology service. An assessment of the existing service was conducted and challenges in capacity to deliver quality service identified.

An emergency maintenance and upgrading project includes acquiring urgently required equipment and vehicles with a budget of R72 million.

A modernisation plan to improve the quality of the forensic service has been developed. The plan includes refurbishing selected mortuaries and building new ones. More than R1,5 billion has been allocated for implementing the plan over the next three years.

Malaria risk areas



diagnostic services to the national and provincial departments of health, provincial hospitals, local governments and medical practitioners.

The NHLS conducts health-related research appropriate to the needs of the broader population, including research into HIV and AIDS,

tuberculosis (TB), malaria, pneumococcal infections, occupational health, cancer and malnutrition. The NHLS trains pathologists as well as medical scientists, technologists and technicians in pathology disciplines, and occupational health practitioners.

Medical schemes

The Council of Medical Schemes regulates more than 160 registered private medical schemes, with a total annual contribution of about R35 billion.

Community health

The most common communicable diseases in South Africa are TB, malaria, measles and sexually transmitted infections.

In South Africa, it is recommended that children under the age of five be immunised against the most common childhood diseases. Immunisation should be administered at birth, six weeks, 10 weeks, 14 weeks, nine months, 18 months and five years of age. Childhood immunisations are given to prevent polio, TB, diphtheria, pertussis, tetanus, *haemophilus influenzae* type B, hepatitis B and measles.

The set routine immunisation coverage target for fully immunised children under one year is 90%. In 2006, the overall routine immunisation coverage for South Africa was less than 80%, but

By September 2006, more than 1 060 health professionals had been recruited to support government's comprehensive programme to deal with HIV and AIDS. Some 7 600 health professionals have been trained in the management, care and treatment of HIV and AIDS. Government is also improving working conditions so that it can recruit and retain more health professionals. This includes providing a scarce skills allowance for certain categories of health professionals (doctors, pharmacists and specialist nurses) and a rural allowance for health professionals working in less developed parts of the country. This is in addition to steadily improving salary packages.

some districts were still lagging behind with less than 60% immunisation coverage.

In October 2006, the Reach Every District Strategy was launched to help improve childhood-immunisation services.

The last confirmed case of polio was reported in 1989.

Malaria is endemic in the low-altitude areas of Limpopo, Mpumalanga and north-eastern KwaZulu-Natal. About 10% of the population lives in malaria-risk areas. The highest-risk area is a strip of about 100 km along the Zimbabwe, Mozambique and Swaziland borders.

The success of the country's malaria-control programme has not been limited to affected areas in South Africa but extended to other countries in the Southern African Development Community region, where South Africa initiated joint efforts in malaria control with its neighbours.

The department has strengthened the roll-back malaria strategy in KwaZulu-Natal, Limpopo and Mpumalanga, where malaria is

Government's AIDS-prevention programmes are implemented by private-sector, non-governmental and civil-society initiatives. A new phase of the awareness campaign started in September 2002, joining government with partners like loveLife, and focusing on prevention among youths, support for orphans and vulnerable children, and living positively.

The Khomanani (Caring Together) Campaign, a multimedia mass communication campaign, supports all aspects of the comprehensive programme.

In 2005/06, the distribution of male condoms increased to 386 million and of female condoms to 1,3 million.

By the second half of 2006, the prevention programme included prevention of mother-to-child transmission, with 3 000 facilities in operation, covering 87% of health facilities. Post-exposure prophylaxis is provided in almost all hospitals and trauma centres for sexual-assault survivors and health professionals exposed to HIV.

Health facilities providing voluntary counselling and testing increased from 3 369 in 2004/05 to 4 930 in 2005/06.

endemic. Between 2004 and 2005, the number of malaria cases and number of deaths dropped by 46% and 38% respectively.

The decline in the number of malaria cases as well as fatalities is due to the increase in the number of houses covered by the indoor residual spraying programme using DDT and improved collaboration with neighbouring countries. Coverage with indoor residual spraying increased to 83% during 2004/05, and was expected to increase further to 90% during 2006/07.

Child and maternal health

In 1998, the infant mortality rate was measured to be 45,4 per 1 000 live births. This decreased in 2003 to 42,5 per 1 000 live births.

The proportion of births attended to by either a nurse or doctor increased from 84% in 1998 to 92% in 2003. This could be attributed to increased access to health services both in terms of availability of health facilities in various communities and free health services for pregnant and lactating women, as well as for children under the age of six years.

Tuberculosis

In 2005, 300 000 people were suffering from TB. Free testing is available at public clinics countrywide.

Countrywide efforts have now been brought to bear on this disease. These efforts include:

- implementing the Directly Observed Treatment Strategy
- establishing a national TB team
- a countrywide reporting system
- a TB crisis-management plan, launched in 2006.

HIV and AIDS

The Government's Comprehensive Plan for Management, Care and Treatment of HIV and AIDS centres aims at preventing the spread of

HIV-infection and improving the health system to enable it to provide a series of interventions to improve the lives of those infected and affected by HIV and AIDS.

By September 2006, progress had been made in the various aspects of the plan:

- each of the 53 health districts in the country had at least one service point providing comprehensive HIV- and AIDS-related services, including antiretroviral treatment (ART), from prevention to terminal palliative care
- 250 laboratories had been certified to provide support to the programme
- three pharmacovigilance centres had been established to monitor and investigate adverse reaction to treatment.

By the end of September 2006, over 213 000 patients had been initiated for ART. By September 2006, 273 facilities were implementing the comprehensive plan across all districts. Forty-three CD4 count, 11 viral load and seven PCR machines were operational in laboratories across the country.

The South African AIDS Vaccine Initiative is a holistic vaccine-development initiative that has three locally-developed products that are going through the regulatory process preceding Phase 1-trials.