**BUDGET VOTE SPEECH OF DR MJ PHAAHLA, MP DEPUTY MINISTER OF HEALTH**

**AT NCOP 17 JULY 2019**

Honourable House Chairperson

Minister of Health Dr Zweli Mkhize

Ministers and Deputy Ministers present

Chairperson of Select Committee for Social Services Hon. Gilion

Honourable members of The NCOP

Distinguished Guests

Thank You honourable Chairperson

The debate on our budget vote takes place a day before we celebrate Mandela Day which this year marks 101 years since our icon was born. I dedicate the budget vote to the memory of President Mandela. I also dedicate my input to our late music icon Johnny Clegg.

Over and above leading us into the establishment of our democratic state based on constitutionalism and establishing the key institutions which anchors the state, President Mandela led in focussing on access to basic and social services to the most vulnerable in society. In his lifetime he established the Nelson Mandela Children's Fund and thanks to that initiative we today have a long-lasting memorial for him, the Nelson Mandela Children's Hospital.

Another impactful legacy of our icon is the Nelson Mandela -Fidel Castro Medical Training program which is based on the cooperation agreement signed by the two leaders in 1995.As of today this program has contributed 731 Cuban trained South African medical doctors to our country and hundreds of Cuban nationals who are doctors in our health services. Just 2 weeks ago on the 5th July we witnessed the graduation of 87 young new doctors conducted by the Rector of the Medical University of Havana at Walter Sisulu University in Mthatha. The overwhelming majority of these graduates are serving in rural areas. One of the graduates of this program is Dr Lindiwe Sidali, she is the first black African Female cardio-Thoracic surgeon operating at Inkosi Albert Luthuli Hospital in KZN. She comes originally from rural Eastern Cape -Idutywa but like many families they migrated with their mineworker father to Wonderkop in North West near Rustenburg where she grew up and matriculated. If it was not for this program she would have never realised her dream of becoming a medical doctor.

We have now brought back to South Africa 647 students who completed their fifth year of study in Cuba and will be starting their final year integration in local medical schools between 20th July and 1st August.

These Cuban trained doctors will add a lot of impetus into the improvement of our Health Human resources with a major focus in Primary Health Care. They are going to be our building blocks on capacitating our primary health care services at district level.

As we have often stated, nurses are the bedrock on which our health services are built. The process of restructuring nursing education is at advanced stage. All public nursing colleges have been restructured into one main nursing college per province with sub-campuses in the districts which are 76 in total for the whole country.

Three national curricula were finalised and used to develop province specific curricula. The new three-year Diploma in Nursing as well as the one-year Advanced Diploma in Midwifery and selected post- graduate diplomas have been prioritised by all colleges. These programmes will be offered in a phased in approach commencing with the three-year basic diploma in 2020.Prioritisation is aligned to the PHC re-engineering agenda and the national health priorities.

The Department of Higher Education is in the process of developing regulations for declaring Nursing Colleges as Higher Education Colleges in terms of The Higher Education Act. These regulations will specify that the nursing colleges, while established under the Higher Education Act (101 of 1997) as amended, will operate under the administrative oversight and management of the National Department of Health. In terms of a protocol to be signed by the two DGs the colleges will in the transition be able to continue operating until they are formally declared as Higher Education Colleges. The 9 provincial colleges, with 53 campuses will commence with the 3-year Diploma in Nursing in January 2020.Further campuses will offer advanced diploma in midwifery and other post graduate diplomas in critical care, trauma and others in a phased in approach from 2021.

Honourable Chairperson, noncommunicable diseases continue to outstrip infectious diseases in South Africa according to STATS -SA. A huge chunk of the deaths are due to diabetes and cardiovascular diseases including strokes. Cancer has also been rising to epidemic levels. These developments can be attributed to urbanisation, commercial determinants of health, risk behaviour such as tobacco use, harmful use of alcohol, unhealthy diets and lack of physical activity.

The challenge of NCDs is also global and as a result, in September 2018 a High Level meeting of the UN General Assembly was convened by the Secretary General to focus Heads of States and governments on this matter. Our own President Ramaphosa was a participant and we were there to support him and participate in several parallel sessions and civil society activities.

The General Assembly passed a political declaration which amongst others expressed concern at financial and human cost of NCDs on developing countries which was estimated at 7 trillion US dollars over the next 15 years. The assembly reaffirmed the primary role of governments in responding to the challenge of NCDs by developing adequate national multisectoral responses.

In this regard there are a number of steps we have taken.

1. New draft legislation on tobacco control was published in May 2018 which advocates a zero- tolerance policy on indoor smoking in public places, including removal of smoking areas in restaurants and also regulating e-cigarettes and vaping.
2. Introduced regulations to restrict salt permitted in 13 categories of foodstuffs through which most of us consume salt.
3. Tax on sugar -sweetened beverages was implemented from 1 April 2018.
4. DTI is leading, supported by DoH in enhancing visible health warning labels on alcoholic beverages, increasing age restriction on purchase of alcohol from 18 to 21 years and regulating alcohol advertising.

The DoH is in the process of designing front package labelling which will alert purchasers and users to the amount of sugar, salt and fats in products in easy to read signs.

Following the call by President Ramaphosa in 2018 SONA to respond to the cancer pandemic, a number of steps have been taken.

1. National Cancer campaign was launched in October 2018 in KZN,
2. A number of Linear Accelerators were purchased including for Charlotte Maxeke and Universitas Academic Hospitals and are being installed for radiotherapy treatment of cancer.
3. We continue to roll out the HPV vaccine in two doses to grade 4, 9-year-old girls to prevent cervical cancer.

Mental Health services remain severely under resourced but there is a focussed approach to increase capacity. In this year's budget we have allocated funds to contract private sector psychiatrists and psychologists to reduce the backlogs in both forensic assessments and referred patients from primary health care facilities.

We are also retraining medical officers and nurses in district hospitals to better manage patients with psychiatric conditions.

**MALARIA**

The department of health has prioritised the elimination of malaria by 2023 which means zero local cases by then. From year 2000 to 2018, cases have decreased by 73% from 64.622 in 2000 to 17 625 in 2018. Deaths have decreased from 459 in 2000 to 116 in 2018 which is 74% down.

Challenges Ahead are:

Movement of mobile migrant population from endemic neighbours to RSA. We are working with them especially, Mozambique, Zimbabwe and Eswatini.

Some provinces do not secure funding for indoor spraying, there are 3 affected provinces, Limpopo, Mpumalanga and KZN. We have secured R90m conditional grant from National Treasury to top up the budgets.

Before next rains we must ensure 90% Indoor Residual Spraying Coverage and strengthen cross border collaboration.

**NHLS**

The National Health Laboratory Services continues to be the mainstay of Laboratory services to all public primary health and hospital facilities. It also trains pathologists and medical scientists. The board and management have stabilised it with a turnaround from R1.8bn deficit to R1.4bn surplus for 2 years running. Thanks to the Acting CEO Dr Kemy Chetty and her management team and chair of the board Dr. Eric Buch and his team.

There is improved efficiency, service delivery as demonstrated by improved turnaround times and quality.

The NHLS also runs two renowned institutes, the National Institute for Communicable Diseases and National Institute for Occupational Health. The NICD continues to respond within 24 hours to notifiable outbreaks-recently being Flu, Ebola, malaria, measles etc.

The NHLS aims to continue improving quality of service and turnaround times by investing in equipment, IT, training and recruitment of professionals and improved quality management systems.

**SOUTH AFRICAN HEALTH PRODUCT REGULATORY AUTHORITY**

2018/19 was SAHPRAs first financial year as a public entity. This was a year of setting up to operate independently and retain revenue collected through fees from the pharmaceutical industry. The board focused efforts towards developing and implementing strategies to address the backlog of applications for product registrations. Authorisation for section 21 applications were amended from manual to electronic which reduced the time for approval.

Amongst many achievements in its KPI SAHPRA managed to:

1. Issue a consolidated 5910 establishment licences, narcotic and psychotropic substance permits and registration certificates
2. Inspect 169 establishments for Good Manufacturing Practice, Good Clinical Practice and Good Wholesale Practice Compliance.

In the current 2019/20 financial year, amongst other SAHPRA will work on:

1. Roll out and implement the backlog elimination strategy and reduce it by 40%
2. Digitisation of operational pathways and processes

Hon Chairperson the NDOH is ready to respond to the President's call for all of us to be ready to be sent and to move with speed, Thuma Mina and Khawuleza in the realisation of Universal Health Coverage

**I THANK YOU**

**KE A LEBOGA**