



PRESENTATION BY COSATU

**GEMS SYMPOSIUM
DR PC RAMATHUBA
MBCHB,MPHARMED,AMP(MBS)
SAMA CHAIR PUBSEC**





Scope of presentation

- Background
- Our Perspective on current health system
- Challenges of SA current health care system
- Our Perspective on NHI
- Our Principles
- Funding
- Socio Economic Benefits
- Role of Medical Aid Scheme
- Way forward



Background

- Green Paper published 12 August 2011
- NHI Policy document expected to be one of the biggest transformations on the health care landscape in South Africa
- All stand to be affected positively/negatively, in short or long term



Current health system

- Health care is a basic human right
- State is responsible to provide conditions for every citizen to have access to essential health care services
- Life expectancy for South Africans can be increase by prevention illnesses through promoting healthy life style and
Strengthening health system by focusing on access, equity and quality



Current health system

- Radical redistribution of health care resources is critical in achieving objectives
- Desperate Public/Private divide is a shame full emblem of health system
- 8,3% GDP is spent on health
- 4,1% on 16,2% (8.2m)
- 4.2% on 84%(42m)
- R11 150 VS R2766 per capita expenditure on health in private and public respectively



Challenges of Current Health Care system

- Post 94 break through achieved:
 1. Health as a human right constitutional
 2. Abolishment of institutional racial divides
 3. Free health care for pregnant women and children under six
 4. 700 new clinics now 3 600
 5. Ten point plan adopted and currently being implemented



Challenges of Current Health Care system

- Under funding of public health care system
- Human Resources shortage
- Infrastructure
- Overcrowding
- Equipments
- Life expectancy 48 and along racial lines
- White to live 23 years more than blacks



Challenges of Current Health Care system

- Maternal mortality from 81 to 600 per 100 000
- Child Mortality not to reach MDG target
- Wasteful, unsustainable and destructive private health care
- Coverage is never comprehensive
- Migration of health care professionals



Perspective on NHI

- 7TH Congress called for NHI 4th CC decision to campaign for NHI
- 2011 budget speech made commitments to allocate resources towards NHI
- Funding of NHI
- ? Multi model pay out systems
- Role of private hospitals and pharmacists



Perspective on NHI

- ? Training of doctors privately
- Raising VAT is regressive
- Progressive Tax system to protect the poor and working class
- Training of Nurses and doctors purely state responsibility



Principles

1. Health Care is basic human right.
Coverage not depended to employment
but universal
2. Social Solidarity: healthy to ill, young to
elderly and rich to the poor.
3. Decent work



Principles

- Other reasons for NHI
 1. Burden of disease in SA
 2. Decrease life expectancy: AIDS/TB non communicable diseases, Trauma and injury, Maternal and child health mortality
 3. Curative rather than Preventative health care
 4. Integrated district Health system focusing on PHC as point of entry



Reasons for NHI

- Medical Aids funds exhausted
patients dumped to state facilities



Funding of NHI

- All citizens contribute to VAT irrespective of economic status
- Compulsory Contributions through tax
- Protection of the poor and working class



Socio economic benefits

- Impact on labour force
- Economic Growth
- More jobs created



Role of Medical Aid

- Facts about Medical Aids
 1. Slightly less than 16% of SA covered by MA
 2. Since 1999 annual contributions increase twice inflation
 3. Average contribution have increase from less than R4 500 per person in 1992 to over R9 600 in 2008
 4. Increasing more rapidly than wages



Role of Medical Aid

- The lowest-income medical scheme members pay out more than twice the share of their income in scheme contributions than the highest-income medical scheme members
- Despite increasing contributions, the medical aid schemes have reduced the amount of funds available for each member to use each year on services especially services such as eye care and dentistry



Way forward

- COSATU believe we must fast track public health care for all
- COSATU called for state owned pharmaceutical
- Fundamental change by direct intervention of private health care.
- Our interpretation of NHI is 'a universal, comprehensive, free national health care system founded on the primary health care approach, requires a well-funded and well resourced funded public health system'. It must be state-mandated and state-administered system.



Way forward

- COSATU has established the task team who's primarily objectives is to coordinate our campaign on the implementation of NHI and develop the funding models of the NHI. There is a need to comply with the Abuja resolution of increasing health spending to 15% of the GDP.



*Thank you
Ndo livhuwa
Baie dankie
Ke a leboga
Na khensa*

