

CHECK AGAINST DELIVERY

Key-note address by

Director General Stefano Manservigi

Closure Event

**Primary Health Care Sector Policy Support
Programme**

Soshanguve, Pretoria, Saturday 07 October 2017

Hon. Minister of Health, Dr Aaron Motsoaledi
Director General of Health, Ms Precious Matsoso
European Union Member States Ambassadors and Colleagues here present
Senior Government Officials from National Provincial and Municipal levels
Members of the Community,

Distinguished Guests,

Ladies and Gentlemen,

I am very pleased to be here today for the closure event of the European Union-South Africa Primary Health Care Sector Policy Support Programme. The presence of so many prominent figures shows how important, programmes such as this, are to the people of South Africa.

Indeed, the programme we are celebrating together today is one of the largest EU investments in public health anywhere in the world. As European countries, we have invested **126 M€ – over 2 billion rand** – in supporting the South African government's efforts to improve access and quality of public health services.

I am very happy to disclose today that the last payment of this programme, almost **6.5 M€ - over 100 million rand**- is currently being transferred from the Headquarters of the European Commission in Brussels to the National Treasury

of South Africa. The disbursement confirms the good performance of South Africa in the health sector.

The Programme we are celebrating today, the 'PrimCare' as it is called, is one of our most successful programmes in South Africa. I thank you, Honourable Minister, and I thank you, Director General, for making such a good use of the European funds.

The PrimCare was launched exactly 6 years ago, on September, 14, 2011, not far from here, in Mamelodi, by our former Commissioner for Development, Andris Piebalgs, together with you, Honourable Minister Motsoaledi, as you will probably remember.

During the launch, 6 years ago, Commissioner Piebalgs, said, I quote:

This 126 million euro programme will support the South African government to improve access to public health services and to increase quality of service delivery of primary health care through the district health system. This programme will contribute to reaching the four key focus areas of the South Africa health sector, which are 1) Increasing life expectancy; 2) decreasing Maternal and Child Mortality; 3) Combating HIV and AIDS and decreasing the burden of diseases from Tuberculosis; and 4) Strengthening Health Systems effectiveness.

I would like to mention now where the above expected results stand, as per the last official South African data:

Concerning **focus area number 1**, "life expectancy": life expectancy of South Africans has increased to 63.3 years, an improvement of more than 9 years since 2005: what an impressive result, Minister! (*applause*)

The specialists tell us that this exceptional result is much linked to providing free-of-charge antiretroviral treatment to HIV positive citizens. In addition to your policy on universal access to medicines, I would like to commend also your overall approach to health.

I also know, Minister, that you are a champion in promoting healthy lifestyles: you have stopped smoking and dropped weight!. You definitely 'walk the walk' in showing that prevention is better than cure! I also would like to praise your and the National Treasury involvement in pushing industry to reduce sugar and salt content of staple food and beverages, a very cost-effective measure to increase the number of years we live and especially our quality of life, in addition to keeping under control the national health budget!;

Regarding **focus area number 2**, the annual number of children dying before 5 Years of age has declined. Maternal mortality has also declined dramatically from 281 (in 2008) to 154 (in 2015) per 100 000 live births, which is very positive, even if more effort and investments are needed to reach the target of below 100.

I am proud to say that the PrimCare has allowed to train doctors and nurses in managing obstetrical emergencies. This approach has proven successful in reducing the unnecessary and sad deaths of mothers in the most vulnerable districts of South Africa. We urge you to continue on this good path.

Number 3: Concerning HIV/AIDS: You Minister are a STAR in this area!

The European Union recognises the enormous challenges that South Africa is faced with, in particular the burden of disease caused by HIV and AIDS. We recognize the effort in keeping almost 3.5 million people on ART (Anti Retro Virals) every day. South Africa must be praised for this huge financial, logistical and capacity effort.

I have also been 'following' you on the internet and on Twitter, 2 weeks ago at the United Nations General Assembly, in New York, where you were able to secure an exceptionally low-price for the first affordable, generic, single-pill HIV treatment. You have said this '**breakthrough deal**' may lead to a 11.7 billion of rands saved over the next six years.... well done for South Africa and

well done for the 7 million of positive South African citizens to be covered with the Test-and-Treat approach!

As an additional success against HIV, to which the PrimCare has contributed is the **massive reduction in the mother-to-child transmission** of the virus: from 70,000 South African babies who were born HIV positive in 2004, to less than 7, 000 in 2015/2016, i.e. a ten-fold reduction in this very sad infection modality.

Let me aslo say a word on tuberculosis, which is sadly the first cause of death in South Africa. In the last years, you have embarked in an aggressive campaign to de-stigmatise **Tuberculosis** and test as many people as possible. I praise you for this pro-active approach.

And I am also proud to announce that the machines currently used by nurses for a faster diagnosis of this disease were endorsed by WHO and then rolled-out in South Africa thanks to studies carried out in Cape Town with **European Union research funds**.

Concerning the last focus area of the EU Primcare Program, **Health system strengthening**, I have of course to mention the National Health Insurance, or "NHI" Policy, that, thanks to your strong engagement, Minister, your Parliament has recently approved.

As Europeans, we follow the development of the South African NHI with great attention. NHI, or Universal Health Coverage, means that all citizens have access not the type of health care they can afford, but to the type of health care they need, based on the principle of **solidarity**, **equity** and on the principle of **health care as human right**.

The principle of solidarity, as laid down in your beautiful constitution, is also one of the key principles which guide all policies and actions in health in the European Union and our Member States. Since a number of years, all of our 28 Member States have a clear mandate to ensure equitable access to high-quality health services for everyone living in their countries. Universal Health Coverage is indeed part of our 'DNA' as Europeans.

Let me tell you more about me and **why I personally think** the NHI is such an important piece of policy for South Africa.

In addition to being European, I am an Italian national. The Italian 'NHI' became law at the end of the nineteen seventies (in 1978), following a period of violent turmoil in the country, lack of internal cohesion, when many people were protesting for a more equal, reformed society and also **wanted 'transformation'**. Our 'NHI' took a long long time to approve, as well as even more time to be fully operationalized among our 20 Provinces.

I am proud to say that today all citizens and legal residents in my country Italy and with small differences in all European Countries, have access to an unique system founded on the principles of universal coverage, social financing through the use of general taxation and non-discriminatory access to the health care services. **Coverage is automatic and universal.** Everyone is registered and receives **a unique identifier number** on a card, and with that card, you can access care. Universal Health Coverage is therefore an important element of social cohesion in any country, as it sends a strong message that no one can be left behind when it comes to health, no matter where and how wealthy or poor that person is.

I was told that EU **PrimCare program has been financing all the complex NHI information technology that is necessary** for the registration of patients via a unique identifier and that has led to now more than 3 million been registered South Africans in the system.

I congratulate the country for this important step. I am proud that EU support has supported such a concrete building block towards an effective and modern health system. This is the way to go, Minister, and in Europe you will always find a supporter in us for Universal Health Coverage!

In conclusion

Ladies and Gentlemen,

Today we celebrate one of the last steps of a very important and very successful EU programme in support of the South African health sector. It is by no means the end of our partnership the health sector. The EU and some of our Member States remains engaged for instance in the health sector through the Global Fund to Fight AIDS, Tuberculosis and Malaria and other programs and we will remain attentive to any requests for support and technical exchanges in all the aspects related to health.

I sense and rejoice in the fact that the European investment has really made a difference in the access and delivery of quality health care for all South Africans – thanks in no small measure to the tireless work of the Department of Health and you, Minister, as its leader.

I thank you.