RELIGION & STATE DEVELOPMENT COOPERATION

*A German-South African dialogue on
historical and current challenges*

Editors
Renier Koegelenberg
Udo Hahn

EVANGELISCHE AKADEMIE
TUTZING

EFSA

The cooperation between state and church in South Africa's healthcare system

Lindiwe Makubalo¹

I would like to first thank the Protestant Academy of Tutzing and the Ecumenical Foundation of Southern Africa (EFSA) for inviting me to this Dialogue and also for giving me the opportunity to represent the Minister of Health, Dr Aaron Motsoaledi, who was to speak here again on behalf of Lindiwe Sisulu, Foreign Minister of the Republic of South Africa. Please accept my sincere apologies from the Minister for Health, who is unable to be here.

Last night the Minister of Health joined a debate on the State of the Nation speech delivered by the President. The Minister underlined the central importance of universal health coverage, also known in South Africa as national health insurance, in providing basic services to ensure social justice and access to affordable but good health care. National health insurance will provide South African residents access to free services in public and private, certified and high-quality health facilities, which is a basic component of social solidarity to reduce health inequalities. Referring to an article in the *Lancet* journal, his analysis suggests that universal health care could bring about the third major revolution in world health.

¹ Dr Lindiwe Makubalo, *Health Expert and Representative of the Republic of South Africa to the United Nations, Geneva*

Minister Motsoaledi pointed out that the article demonstrates how in the 18th century the first significant breakthrough in global health was accomplished with the introduction of clean water and improved sanitation. A second major turning point was the introduction of vaccines to eradicate smallpox. However, the *Lancet* article now argues that the third turning point is imminent. It is the moment when a comprehensive health care system is introduced. In this respect, progress is being made in South Africa. The National Health Insurance (NHI) bill will be discussed soon and, if everything goes well, it will be introduced in the coming months.

All of these comments on universal health care create a context for our current position on improving healthcare for South Africans. The country is known to have high rates of infectious diseases, in particular HIV/AIDS and tuberculosis, but increasingly also of non-infectious diseases such as heart disease, diabetes, high blood pressure and a variety of other conditions and diseases leading to high rates of morbidity, mortality and disability.

Primary health care is the heart of comprehensive health care. Among other things, primary health care will enable local actors to improve access to health care. These actors at the local level have been identified as an important component of the successful implementation of universal health care as well as primary health care (as increasingly recognised under the Alma-Ata Declaration on primary health care and health promotion). In South Africa the continued deployment of health workers to communities shows that primary health care activities and local interventions are up and running again. For instance, the Ministry of Health expects to hire around 54,000 community health workers (CHWs) between now and the middle of the year, and one province is already working with nearly 10,000 CHWs.

While healthcare professionals do their utmost to deliver healthcare services, those in the communities who are in need are often not reached. Some people in our communities are considered difficult to reach only because healthcare professionals are not always able to identify and reach every corner of the local community. In South Africa it is currently very clear there is a need for better approaches towards partnerships to ensure that local communities can be reached

through prevention and treatment programmes as well as social, psychological, pastoral and other forms of support.

Congregations of faith, churches, NGOs and civil society are the key to reaching congregations. Churches have a familiar voice and an open ear in the congregations and are therefore important partners for public and non-profit partnerships in the areas of healthcare and development.

There is no doubt that the public sector in South Africa is indebted to the churches for the role they have played in health and education programmes. Numerous activities and programmes organised over the years by the churches represented today have been extremely successful. The treatment of HIV and AIDS and tuberculosis are examples. Programmes such as those carried out in collaboration and with the support of the Global Fund² and PEPFAR³ have included the provision of care services, long-term medication, mental health regimens and access to tuberculosis and cancer patients.

Some of these areas of cooperation between church and state in South Africa include the following:

- Setting up of clinics. There are still only a few, but they play an important role in supporting the churches;
- Official cooperation on dealing with HIV, AIDS and tuberculosis by encouraging communities to carry out tests and treatments as well as ensuring compliance with therapies and conducting environmental assessments. Archbishop Makgoba and the Minister of Health participated in a successful tuberculosis campaign, which was also accessible through the social media;
- Joint campaigns against HIV and AIDS;
- Strengthening public participation.

² The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), based in Geneva, Switzerland, is an instrument for financing the fight against these three major infectious diseases AIDS, tuberculosis and malaria. The Fund, which operates in more than 100 countries worldwide, is one of the most important instruments in the fight against these diseases.

³ In 2003 US President George W. Bush initiated the global US programme to combat AIDS, PEPFAR (President's Emergency Plan for AIDS Relief). This programme is one of the major donors in the fight against HIV/AIDS, particularly in Africa, and supports preventive, therapeutic and nursing measures through bilateral partnerships.

Church leaders and faith organisations in South Africa have also played an important part in building bridges between national and international partnerships. Such partnerships mobilise resources and support local health care, education and health literacy programmes. Over the years churches in South Africa have shown that they have played a significant role in this regard. Both the Global Fund and PEPFAR projects mentioned above are good examples to illustrate how this mobilising role can be achieved.

Moreover, the important and fruitful relationship between South Africa and Germany demonstrates the efficacy of this bridging function, in particular through German development organisations and religious initiatives cooperating with the South African religious sector in local communities.

The Ministry of Health intends to cooperate with churches in a number of different fields this year. To this end, we want to concentrate the World Tuberculosis Day activities around church leaders who lead the fight against tuberculosis. For instance, it was suggested that Archbishop Makgoba would hold a national service in Cape Town on March 24 and that all other churches be invited to speak about tuberculosis during the service on March 24 and 25.

Additional cooperation activities are expected to commence in the course of the year. In connection with expanding primary health care and universal health care through cooperation with the religious sector, the Minister will issue an invitation to the Partnership for Research and Development (PaRD) to further discuss cooperation at a meeting in South Africa in 2020.

The Agenda 2030 and the Sustainable Development Goals (SDGs) have created a very helpful joint framework for development and cooperation. The Ministry of Health considers the current dialogue to be a valuable opportunity to reflect on how goal number three of the UN Sustainable Development Goals (health and well-being for all) and other health-related sustainability goals, as well as the goals of our national development plan, can be achieved through increased cooperation between South African organizations with churches and church organizations in South Africa.