

# South African Health System Requires a State of Emergency

By *moderator*

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## **This is an unedited version of a letter published in City Press on 3 September 2006**

As a person openly living with HIV & AIDS, I am ashamed of what will happen in the future if Dr Manto Tshabalala-Msimang continues to be the Minister of Health. I have contributed to the liberation of this country. I served years in prison for the African National Congress and I was shot defending it during the Thokoza & Katlehong upheavals as a member of a Self Defence Unit (SDU). Many of my former MK and SDU comrades are dying as a result of this epidemic.

Since the recent International AIDS conference, there's been escalating tension between the Treatment Action Campaign and the South African Government. Government has accused TAC of trashing the South African exhibition in Toronto. This is false. TAC members showed their frustration by demonstrating against Tshabalala-Msimang's incompetence. The stand was not damaged. Other countries displayed what they were doing to deal with HIV/AIDS, e.g. research, prevention strategies, rolling out ARVs, nutrition etc. South Africa's stand featured garlic, lemons and potatoes as well as photos of Tshabalala-Msimang, the President and the Deputy-President. (ARVs were only put on display after South African delegates criticised the stand.)

Is that what Tshabalala-Msimang went to Toronto for?

Tshabalala-Msimang has allowed AIDS dissidents like Matthias Rath to operate in the country with impunity. Rath's medicines are not registered and he is not registered as a doctor, so the Minister's support of him has undermined key institutions like the Medicines Control Council and the Health Professions Council of South Africa. She has also misused traditional healers in her fight against ARVs and TAC, even though garlic, lemons and beetroot are not traditional medicines. The Minister's old apologist, the head of NAPWA, Nkululeko Nxesi has called TAC opportunistic. His organisation is almost entirely funded by the Department of Health. The Auditor-General has issued a qualified audit of the Department of Health for NAPWA's failure to account for its expenditure of state funds. Nxesi's office is no longer operational as a result of misappropriation of funds. His sole purpose appears to be to attack TAC and say things the Minister wants to say but can't. These are the types of opportunists the Minister works with.

The Minister boasts about the Comprehensive Plan for the Management, Treatment & Care for HIV & AIDS. The problem lies with the implementation of the plan. It is not the most comprehensive in the world as Tshabalala-Msimang claims. If we look at the percentage of people on treatment who need treatment, South Africa isn't even in the top ten in Africa. The Minister emphasises the nutritional aspect of the plan, but God forbid if nutrition is only about her famous beetroot, garlic and lemon. TAC has never disputed the importance of nutrition. But it is a problem if nutrition is claimed to be a replacement for treatment. It is not a question of either treatment or nutrition. Both are needed. And getting enough to eat is an issue for people with and without HIV.

The Durban Westville prisoners' court case has been a major cause of the conflict between TAC and government. The

court has ruled that inmates must be provided with ARVs but government has failed to implement the judgment and has now been found in contempt of court. Clearly senior government officials do not respect the Judicial system. Dennis Bloem, head of the Portfolio Committee on Correctional Services, should have done his job and called the Minister of Correctional Services to account before his committee. Instead Bloem chose to gratuitously attack the TAC.

The health system is in a shambles and Tshabalala-Msimang has no plan to sort it out. We have a massive TB epidemic, that has been made much worse because of HIV. We have seen the collapse of SANTA and its subsequent incorporation into the Department of Health. There are insufficient resources to ensure the TB DOTS programme works. Staff shortages in our hospitals and clinics have created a heavy burden on health workers. Lay counsellors are not getting the respect they deserve; many have gone without pay for months. The referral system between clinics and hospitals is also failing. As one newspaper editor has already indicated, a state of emergency should be declared for our Public Health System.

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