
A PEOPLE'S HEALTH MANIFESTO **2014**

We have a right to access
healthcare services!



The Treatment
Action Campaign's

11 QUESTIONS
TO POLITICAL
PARTIES





South Africa's fifth free democratic elections will take place on May 7, 2014. As we head toward these elections, our politics and our country more broadly is at a crucial juncture in our history.



We have made significant strides in recent years against one of South Africa's biggest post-apartheid crisis, the HIV/AIDS epidemic. After the dark years of state-sponsored AIDS denialism, we have managed to scale-up the provision of antiretroviral treatment at an impressive rate. More than two million people now receive antiretroviral treatment through the public health system. This scale-up is the most likely cause for the rise in life expectancy. An ambitious HIV testing campaign, though not without problems, has seen an estimated 20 million people tested for HIV. The rate of mother-to-child transmission has dropped from over 20% to under 3%. Our progress against the HIV epidemic is undeniable.

However, much of the progress we've seen in recent years could be undone by poor public administration, a lack of skilled management, cadre deployment, corruption and a lack of political will in key provinces, among others.



In November 2013 the Stop Stockouts Project (SSP) reported that one in five public health facilities surveyed had experienced a stock-out of essential HIV or TB medicines in the three-month period prior to being contacted and the average duration of ARV stockouts was 30 days. The health systems in the Eastern Cape, Mpumalanga, and Limpopo are all in crisis and the leadership in these provinces seem unwilling to face the severity of the problem head-on and to accept help from civil society. Instead, members of civil society and health workers who speak out are greeted with antagonism or outright intimidation. Many provincial and district AIDS councils are dysfunctional. The political will shown by the Minister of Health is absent when it comes to most provincial MECs for health.



On a national level, reforms to South Africa's patent laws that would ensure lower medicine prices continue to be delayed. In light of the plot by multinational pharmaceutical companies to derail this law reform process, and more importantly because of the impact on access to medicines, it is imperative that the Department of Trade and Industry's intellectual property policy be finalised and adopted before the elections. This policy has been consulted on widely and it has already been delayed a number of times. Failure to finalise this policy before the elections will bring into question the current African National Congress leadership's commitment to providing access

to healthcare and meeting its constitutional obligations.



While we have concerns around the lack of clarity about the National Health Insurance policy and the lack of improvement in the NHI pilot districts, we affirm our support for the principles underpinning the NHI. The NHI's goal of providing free quality health care and treatment to all who need it in South Africa is also one of the Treatment Action Campaign's core objectives. Making a success of NHI and protecting it from capture by commercial interest groups will be a key challenge in the coming five years.

The continued scale-up of HIV and TB testing and treatment will also be a critical challenge. However, there is no good reason why South Africa cannot make stockouts of essential medicines a thing of the past. There is no good reason why everyone who needs ARV and TB treatment should not get treatment. There is no good reason why health workers should be paid late and work without equipment in clinics and hospitals that are falling apart. There is no good reason why important legislative reform should continue to be delayed. These are all problems we can and must fix.



The dysfunction in our health system is inextricably linked to the poor quality of governance in many of our provinces. Functioning health systems depend on good budgeting and rational expenditure. We cannot divorce access to healthcare from the broader context of widespread corruption

and mismanagement, attacks on the Constitution and the judiciary by some politicians, regressive legislation like the Protection of State Information Bill and the Traditional Courts Bill, and an increased hostility toward civil society, including violence by the police against peaceful protesters.

The success of our struggle for access to quality healthcare for all in South Africa will depend to a significant extent on how we deal with these broader threats to our Constitutional democracy. Our ability to deal with problems in the health sector, and to ensure people's health and dignity, will of course also depend on our ability to deal with other pressing social problems such as unemployment, poor housing and sanitation, and a crisis in the quality of our basic education system.

It is in this context that TAC has produced this Manifesto on Health outlining what we consider to be the key health related issues in the upcoming elections. We ask all key political parties to respond publically to the issues and questions raised in this document.

In this way we hope to sensitise political parties and the public to the health challenges we consider to be important and to help citizens understand where different parties stand on the key issues relating to the provision of healthcare.

What we ask is that political parties demonstrate commitment and political will to fulfil the Constitutional duty to constantly improve the quality of health care services for everyone and to ensure that all children have access to quality basic health care services immediately. In this Manifesto we call on all political parties to commit to facing our healthcare problems head-on. This means a commitment to budgeting adequately for all aspects of health care, stamping out corruption and cronyism and working with health workers and civil society as partners. We will not allow the 2014 elections to be about cheap politics while our health and our lives are being threatened by dysfunction in the health system.



Note: TAC is not aligned to any political party. We neither support nor aim to

undermine any parties. Our function is to represent and advocate for the rights and interests of people living with and affected by HIV and TB. However where we disagree with policy positions espoused by specific political parties we will say so.

Neither is it our intention to be unfairly critical of government. We recognise some progress in providing health care, particularly regarding access to ARVs. However, we are independent of government and where the interests of people living with and affected by HIV and TB demand it, we will be critical of specific government policies or service delivery failures. So, for example, while we have recognised the excellent leadership shown by Minister of Health Dr Aaron Motsoaledi, this does not mean we will stay quiet about the stockouts of essential HIV and TB medicines at clinics and hospitals.



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Below is a list of key election issues in 2014. We ask all major political parties to respond to these points and to indicate their positions clearly.

We have divided the 11 questions into three sections: HIV and TB, fixing the health system and issues on governance and accountability.

The National Strategic plan for HIV, STIs and Tuberculosis

The National Strategic Plan for HIV, STIs and TB 2012-2016 (NSP) is the strategy that must guide our combined response to the HIV and TB epidemics. It aims to reduce new infections by 50% by 2016, initiate at least 80% of eligible patients on antiretroviral treatment by 2016, and reduce both the number of new TB infections and TB deaths by 50% by 2016.

The NSP provides a road map for reaching these targets. It was

developed with input from all sectors and would ideally lead to greater cooperation and efficiency in our struggle against HIV and TB. However, not all parties have shown commitment to the NSP and its targets.

Furthermore, the current NSP comes to an end in 2016. We need commitments that it will be followed up with an improved strategy that will learn from the strengths and weaknesses of the current NSP.

a. Are you committed to meeting the targets identified in the NSP? How will you demonstrate a commitment to meeting the NSP targets?

b. When the current NSP ends in 2016 will you agree to a new set of targets to ensure 100% of people with HIV who need treatment can access it?

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Stockouts of essential medicines

A recent report from the Stop Stockouts Project (of which TAC is a member) found that one in five facilities in the public health system had experienced a stockout of essential HIV or TB medicines over a three-month period. The report can be found at www.stockouts.co.za. Failure to take HIV or TB treatment on time and in the correct dosages can lead to illness and/or the

development of drug resistance and can increase the risk of death. In addition, poor drug supply often means people have to visit the clinic more frequently, which is difficult for poor and working people.

The persistent problem of drug stockouts must be solved as a matter of urgency. We cannot accept denials of the seriousness of the situation.

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- a.** Do you agree that preventable medicine stockouts are unlawful and a violation of health rights?
 - b.** What concrete steps will your party take to bring an end to stockouts of essential medicines?

Patent law reform

In 2013 the Department of Trade and Industry (DTI) published a draft intellectual property policy for South Africa. The draft policy contains a number of important undertakings to create a better balance between the right to access healthcare and the private interests of foreign pharmaceutical companies. It will also be an important step toward aligning South Africa's intellectual property legislation with our developmental needs and the state's constitutional obligation to put health first. This policy must be finalised urgently to ensure that it is fully aligned with the Constitution (specifically section 27) and that it makes full use of pro-public health flexibilities provided for in international law. The Constitution places an obligation on the state to reform our patent laws in such a way as to advance access to healthcare. In

addition, such reforms are essential to ensuring lower drug prices in the future and, thereby, the viability of NHI and the sustainability of the ARV programme.

Once the policy is finalised, legislation to amend our patent laws must be prepared as a matter of urgency. We are very concerned about a recent comment by Rob Davies, The Minister of Trade and Industry, that suggested that law reform in this area is not seen as a matter of sufficient urgency. We are also alarmed by the PHARMAGate plot that explicitly aimed to delay this policy process until after the 2014 elections.

These delays in law reform will also have an adverse impact in non-health related areas - like the domestication of a recent treaty aimed at making more books available to blind people.

a. Does your party support the amendment of South Africa's intellectual property laws in order to protect the right to health and to fully utilise all pro-public health flexibilities available in international law?

b. Do you commit to finalising this policy process before the 2014 elections and introducing new legislation as a priority in the next parliament?

District and provincial AIDS councils

The success of South Africa's National Strategic Plan (NSP) for HIV, STIs and TB 2012-2016 requires that provincial and district AIDS councils are fully functional with full participation from premiers, MECs, unions, mayors, healthcare workers and patient groups. This is not the case in most provinces and districts. The poor or non-functioning of these structures is largely due to a lack of political will from Premiers and MECs at provincial level and mayors at district level.

Political parties who are serious about the fight against HIV and TB must ensure that these structures are fully functional and contributing to the fight against HIV and TB.

The current NSP comes to an end in 2016. We seek commitment from political parties to play a part in and to involve civil society in the development of our national strategy to respond to HIV and TB after 2016.

a. Will your party ensure that performance evaluations of MECs and premiers include a measure of their success or failure in budgeting for and ensuring the success of provincial and district AIDS councils?

b. What steps will you take to ensure that performance evaluations include this measure?

TB in prisons

One of the key obstacles to bringing down the high TB transmission rate in South African prisons is the extreme overcrowding in many of our prisons. Inmates are forced to breathe and rebreathe the same air, which creates the ideal conditions for TB to spread. One study estimated that the risk of contracting the TB bacteria in one year in Pollsmoor prison in Cape Town is over 90%. TB is transmitted from correctional facilities back into our communities, often in drug-resistant form.

Some steps have been taken to provide better TB screening and treatment in prisons. These are however not sufficient to significantly reduce the high number of active TB cases because they don't address the underlying causes i.e. overcrowding and lack of ventilation.

An end to overcrowding and the spread of TB in prisons firstly requires that prisons should be redesigned and refurbished to ensure better infection control, and secondly requires a dramatic reduction in the number of prisoners or awaiting trial prisoners in the system at any point in time. This can only be achieved with sustained cooperation between the Department of Correctional Services, the Department of Health, the Department of Public Works, and the Department of Justice and Constitutional Development. Chapter three of the Constitution requires cooperative governance and places an obligation on these departments to coordinate this response. Such interdepartmental cooperation must be driven by strong political will at the highest level.

a. What concrete steps will your party take to ensure that the problem of overcrowding in prisons is solved?

b. How will your party demonstrate political will to respect, protect, promote and fulfil the right to health in prisons?

Quackery

The unlawful selling of unproven or unlawful treatments or medical procedures in South Africa remains a serious and poorly controlled problem. We hear too often of patients who have stopped taking effective HIV or TB treatment in favour of unproven ‘miracle cures’. South Africa’s legislative framework relating to such false advertising and sales is good, but there is currently little or no enforcement of the relevant laws. There is a Law Enforcement Unit within the Department of Health, but this unit is chronically understaffed and underfunded. This unit must be given significantly more human and financial resources and given a clear mandate to prosecute those who

unlawfully sell unproven treatments. Similar units must also be set up in each province.

A similar problem exists with the Medicines Control Council (MCC) which is grossly underfunded, inefficient and vulnerable to corruption and manipulation. In 2014 the MCC will be replaced by the South African Health Products Regulatory Authority (SAHPRA). It is essential that the new authority be led by a highly competent individual and that its independence from industry and political interference be jealously guarded. It must also receive a budget that is sufficient for it to perform its functions swiftly and to the highest possible standards.

a. Will you commit to sufficient funding for the law enforcement unit and support speedy prosecutions of quacks?

b. What steps will your party take to guard the independence of the SAHPRA? Will you ensure that it has funding sufficient to allow it to perform its statutory functions efficiently and timeously?

Cervical cancer

Cervical cancer kills more women in South Africa than any other form of cancer. The introduction of the human papillomavirus (HPV) vaccine in schools is an important step forward in the longer term fight against this disease. HPV is the virus that causes most cases of cervical cancer. It will take a number of years before the introduction of the HPV vaccine brings down the rate of cervical cancer deaths since most women immediately at risk of cervical

cancer are too old to benefit from the vaccine.

It is therefore essential that cervical cancer screening in the form of pap smears continues to be offered to all women, especially HIV-positive women who are at an increased risk of developing cervical cancer. Through earlier detection of cervical abnormalities many cervical cancer deaths can be prevented.

What concrete steps will your party take to ensure that more women are screened for cervical cancer?

HIV prevention

Rates of HIV transmission remain shockingly high in young women between the ages 14-24 years. Many teenagers however are unable to access condoms and quality sex and reproductive health rights education. TAC believes that the failure to provide these teens with the information and access to condoms with which to protect themselves against HIV and

unwanted pregnancies is a violation of the right to health care services and therefore unlawful.

We understand that some parents fear that the provision of condoms at schools will increase sexual activity amongst young people. However there is no evidence to support this view.

Does your party support the provision of both condoms and comprehensive sex education in schools?

National Health Insurance

NHI together with the re-engineering of primary healthcare has the potential to yield massive improvements in the quality of healthcare available to people in South Africa.

We are however concerned that civil society has not been sufficiently

consulted in the development of NHI - particularly in the NHI pilot districts. For NHI to succeed, significant public education and consultation is essential. NHI must be owned by all who live in South Africa. We cannot afford for it to be captured by narrow commercial interest groups.

a. Does your party support the introduction of National Health Insurance?

b. Does your party commit to increased public spending to improve the quality of the public health care system and to the Abuja target of spending in health being 15% of the national budget?

c. Will your party support the reasonable regulation by law of medicines prices and of private health facilities and services?

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Accountability and co-operation

We are concerned that some Health MECs appear unable or unwilling to respond to the severe challenges in the health systems in the provinces in which they have been appointed. Such MECs must be removed and replaced by more capable individuals. We cannot afford to have our struggle to achieve the realisation of the constitutional right to access to healthcare to be hamstrung by poor leadership at the provincial level. Political parties must show their commitment to the health and education of all in South Africa by appointing suitably qualified and capable MECs.

We are also shocked that TAC leaders in both the Free State and KwaZulu-Natal received death threats in recent months. The threats appear to have been triggered by TAC's work in exposing service delivery failures in the health sector. In the Free State, the computer of a TAC member employed as part of the civil society forum of the Provincial AIDS Council was confiscated without any explanation.

Such intimidation is unlawful and makes it more difficult for organisations like TAC to continue to hold government to account. We will however not be intimidated.

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- a.** Do you commit to only appointing appropriately qualified and committed persons as MECs of Health?
 - b.** Will you meaningfully engage with civil society and set up Provincial Health Consultative Forums as required by the NHA?
 - c.** Do you condemn any form of intimidation and support the rights of whistle-blowers in the health service?
 - d.** Will you immediately dismiss or suspend any health official implicated, charged or found guilty of corruption?
 - e.** Do you commit to annual open performance assessments of MECs and premiers?

Openness, transparency and freedom of expression

The Protection of State Information Bill (the “secrecy bill”) and proposed media appeals tribunal threaten the media, free speech and fundamental rights of all South Africans. It is essential to TAC’s work, truth and open debate generally that all people are protected by law when they publish or share information when it is in the public interest to do so. The media must also remain free

to report without fear on both the successes and failures of government. The media has an essential role to play in holding government to account and exposing corruption. In the interest of our democracy, we cannot afford for the media to be restricted through the secrecy bill or bullied into silence through the proposed media appeals tribunal.

a. Will your party reform or repeal the Protection of State Information Bill?

b. Does your party support or oppose the establishment of a statutory media appeals tribunal?

Political parties are requested to send their responses to the questions above to TAC at

marcus.low@tac.org.za.
before 14 March 2014.

TAC will publish parties responses on March 20 2014 at a mass Right to Health rally in Bloemfontein.

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