

CHALLENGES

Poor leadership, corruption in healthcare system in spotlight

KAREN SINGH

karen.singh@inl.co.za

AS SOUTH Africa grapples with four “colliding” epidemics, ineffective leadership and corruption within the healthcare system adds to the country’s burden and poses an obstacle to building a better healthcare system.

This is according to infectious diseases epidemiologist, Professor Salim Abdool Karim, director of the Centre for the Aids Programme of Research in SA (Caprisa) and a member of the World Health Organization’s Science Council.

Abdool Karim was speaking at the 28th annual KZN Doctors’ Healthcare Coalition conference recently.

The quadruple burden of disease in South Africa is actually colliding epidemics including maternal, newborn and child health; HIV/Aids and tuberculosis (TB); non-communicable diseases; and violence and injury, he said.

“South Africa is in the middle of a transition, which means infectious diseases are coming down slowly, and chronic diseases are going up slowly. So we have the worst of both worlds.”

Comparing South Africa to other countries, he said it has a disproportionate burden of disease. For example, India accounts for one fifth of the world’s burden of disease, Nigeria 9% and China, with a huge population, 6%.

Bangladesh has 3% of the world’s burden but a population three times the size of South Africa’s, yet we have three times the burden of disease compared to Burma, which has the same population as South Africa (more than 63 million).

“There’s a huge need for prevention,

but there are patients queuing for medical care, they want cancer treatment and heart surgery and that’s because we’re dealing with this quadruple burden of disease,” Abdool Karim said.

South Africa is facing added challenges due to the impact of Long Covid following the recent pandemic.

“Long Covid is going to worsen our situation in terms of number of patients with cardiovascular disease. You’re going to see an increase of 50% to 60% in strokes, myocarditis and ischemic heart disease,” he said, regardless of whether people have risk factors.

Abdool Karim said SA spends a lot of money on health, more than most other countries in the same situation, but its health outcomes are poorer.

“We have poor health outcomes, despite super policies.”

In his opinion, the two main reasons for this are incompetent management and corruption. He said management has the responsibility for taking policies and resources and translating them to effective action on the ground.

“We are failing to do that because we have incompetent managers and it applies at multiple levels,” he said.

Incompetence leads to corruption because the checks and balances are falling apart, he said. “We have too many people not making sure that those checks and balances are holding back the corruption, so incompetence allows corruption to flourish. We need a proper root cause analysis on why we don’t have good health outcomes for the amount of money we invest.”

The Department of Health did not respond to a request for comment.