

Working with our friends

South Africa always seeks mutually beneficial relationships in its international engagements, the writer says



Analysis

LUWELLYN LANDERS

SOUTH Africa's foreign policy remains an extension of the country's domestic priorities. All our international engagements seek to address the triple challenges of poverty, inequality and unemployment and our objectives as contained in the National Development Plan (NDP).

Our future well-being also remains inextricably linked to the future of Africa. Since the attainment of democracy, South Africa has continued to premise its foreign policy on the inherent African identity and collective aspirations. The African Agenda is premised on the Pan-Africanist vision of creating a peaceful, stable and prosperous continent.

The key outcomes of the 25th African Union (AU) Summit that South Africa hosted in June 2015; the seventh Brazil, Russia, India, China and South Africa (Brics) Summit in July 2015 in Ufa, Russia and the upcoming Forum on China-Africa Cooperation (Focac) in Johannesburg in December 2015, illustrate the centrality of the African Agenda in South Africa's foreign policy.

The 25th AU Summit adopted the First Ten-Year Implementation Plan of Agenda 2063, a 50-year strategic framework for people-centred, inclusive growth and sustainable development. The First Ten-Year Plan also identifies key projects that have to be attained by 2023.

Furthermore, the Continental Free Trade Area (CFTA) negotiations were launched by the summit. This will go a long way in integrating Africa's markets and facilitating free movement of goods and means of production.

South Africa's role in the conception of the New Partnership for Africa's Development (Nepad) gave meaning to the concept and the pursuit of African solutions to African problems. Nepad remains a frame of reference for all our interactions with Africa's international partners.

Our role in peace and security initiatives on the continent is well documented. We continue to play a very active part in the prevention, management and resolution of conflict in Africa, including improving working relations between the UN Security Council and the AU Peace and Security Council.

South Africa contributed to the establishment of the African Capacity for the Immediate Response to Crises (ACIRC), which is the precursor of the African Standby Force (ASF). Later this year, South Africa will host the Amani Africa II Field Training Exercise, comprising forces from the region and ACIRC to test the readiness of the ASF.

South Africa participates in Brics to advance its own interests, the interests of Africa and the global South. We share a common vision with other members of Brics.



THINK TANK: Sierra Leonean politician Zeinab Bagura, former British first secretary of state William Hague, AU Commission chairperson Nkosazana Dlamini Zuma, UN high commissioner for Refugees Angelina Jolie and special envoy on women, peace and security of the AU Commission Bineta Diop in a panel discussion on conflict-related gender violence in Johannesburg in June. PICTURE: AFP

When South Africa hosted the fifth Brics Summit in 2013 in Durban, African leaders participated in the Brics Retreat. This approach was informed by our continued commitment to utilise different forums and partnerships to advance the African Agenda as a thrust of South Africa's foreign policy. Brics leaders committed to cooperate and support Africa to diversify its economies through infrastructure development, knowledge exchange and building and investing in the continent's human capital.

The Seventh Brics Summit marked a new era for South Africa's engagement with Brics. The agreement on the New Development Bank (NDB) and the treaty establishing a contingent reserve arrangement entered into force in Russia.

South Africa subsequently undertook the necessary steps to honour its obligations to support the operationalisation of the NDB's headquarters in Shanghai and to open the African Regional Centre in Johannesburg, concurrently. Leslie Maasdorp was appointed as South Africa's vice president to the bank.

The relationship between China and Africa has experienced immense growth over the last 10 years. China has become Africa's largest

trading partner and Africa is now one of China's major import sources. The continent is considered China's second-largest overseas construction project contract market and fourth-largest investment destination.

The gains that have been realised are mutually beneficial to Africa and China. The Forum for China-Africa Cooperation (Focac) is therefore an important structured mechanism for our engagement with China. Its intention is to strengthen equal and harmonious partnership, grounded in the pursuit of economic development and catalysing Africa's industrial revolution.

The theme for the upcoming second Focac summit is Africa-China Progressing Together: Win-Win Cooperation for Common Development. This theme is designed to take into account the aspirations of both the African continent and China. It also seeks to ensure increased focus on Agenda 2063 and its First Ten-Year Implementation Plan as a driving force of Africa's partnerships with the rest of the world.

China has the unique distinction of being the only country in the world to achieve full industrialisation within a 30-year period. The Chinese experience can hold many lessons for

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- ▶ All our international engagements seek to address the triple challenges of poverty, inequality and unemployment
- ▶ Our future well-being also remains inextricably linked to the future of Africa.
- ▶ Since the attainment of democracy, South Africa has continued to premise its foreign policy on the inherent African identity and collective aspirations
- ▶ The African Agenda is premised on the Pan-Africanist vision of creating a peaceful, stable and prosperous continent

Africa. Skills and technology transfer, as well as agro-processing are among the sectors that could be of benefit to Africa.

South Africa will continue to prioritise the development of the African continent through its foreign policy.

This is an edited address by the Deputy Minister of International Relations and Cooperation, Luwellyn Landers, at the Dirco/Accord Public Lecture at the University of KwaZulu-Natal

Healthcare service delivery fault lines



Analysis

LAETITIA RISPEL

DEMOCRACY in South Africa has brought about many gains in healthcare: free care for pregnant women and children, free primary healthcare services and a programme to build clinics have removed barriers to basic healthcare. The expanded immunisation programme and the largest HIV treatment programme in the world are among other encouraging developments.

The policies that have ushered in these changes are revolutionary. They have had an explicit focus on equity and redress. They benefit those most affected by previous apartheid policies and improve population health.

But they are not enough to turn around the overall performance of South Africa's healthcare system. Although the country spends 8.5% or around R332bn of its GDP on healthcare, half is spent in the private sector, which caters for the elite.

The remaining 84% of the population, which carries a far greater burden of disease, depends on the under-resourced public sector.

Despite its middle-income status, South Africa has poor health outcomes compared with other middle-income countries. An example is Brazil, which has similar health spending as a percentage of its GDP.

The new sustainable development goals are a sharp reminder of the "unfinished business" of unacceptable health inequalities. Evidence shows that a high-performing public health sector is one of the most redistributive mechanisms to reduce health inequalities.

South Africa suffers from the following: it tolerates management and governance failures; it does not have a fully functional district health system, and it has not dealt decisively with the health workforce crisis.

These have negative consequences for patients, health professionals and policy implementation. Patients bear the brunt through sub-optimal care.



CHECKPOINT: South Africa has not dealt decisively with the health workforce crisis, which negatively affects patients, health professionals and policies. PICTURE: GETTY IMAGES

Healthcare providers on the front line and at the bottom of the hierarchy also suffer. Faced with an unsupportive management environment, staff shortages and health system deficiencies, they find it difficult to uphold their professional code of ethics and provide good quality of care.

Despite the leadership by Health Minister Aaron Motsoaledi and the commitment from competent health service managers and professionals, incompetence and leadership and governance failures still exist. It is exacerbated by a general lack of accountability.

In 2009 my research showed management flaws and leadership gaps, particularly around service delivery and its quality as the underlying factors behind the overspending in provincial health departments.

Corruption also plays a role. The auditor-general found that between 2009 and 2013 R24bn in provincial health funds were classified as irregular spending.

In 1996, our study into primary healthcare services set out recommendations on an essential package of integrated primary healthcare services. This included women's health, mental health, and rehabilitation.

Almost 20 years later, our studies highlight several constraints to achieve a fully functional district health system. These include: policy changes on the role of local government in primary healthcare service delivery and funding and capacity problems.

In theory, South Africa has a five-year national Human Resources for Health strategic plan to address the health workforce crisis, but the plan does not deal with the critical issue of how to get the right skills to different levels of the health system.

Aside from the leadership crisis, there are still inequalities and maldistribution of health workers between urban and rural areas and between the public and private health sectors. Second, there is a reported crisis of staff

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shortages. Moonlighting and agency nursing among nurses and private practice among public sector doctors fuel this.

Third, there is poor staff morale, unprofessional behaviour and unacceptable attitudes – all which impact on the quality of patient care.

Also, there is a crisis of inadequate human resource information systems. There are also problems of data quality, coverage and comparability. Even where information is available, it is not used to inform decision making.

So what needs to be done? There must be a metaphorical repair of these fault lines. This requires political will, leadership and stewardship.

Public service managers with the right skills, competencies, ethics and value systems must be appointed. There must be effective governance across the health system to enforce laws, appropriate management systems, and citizen involvement and advocacy to hold public officials accountable.

But at least the reforms envisaged by the National Health Insurance provide exciting opportunities for health system changes. *Laetitia Rispel is head of the School of Public Health, University of the Witwatersrand. This article first appeared on theconversation.com*

THE NEW AGE
Online COMMENTS

LETTER
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Drug, alcohol abuse behind crime crisis

THE crime statistics released by the minister of police has revealed one of the uncomfortable truths about the future of our country.

It is devastating and concerning to learn that more crimes occurred as a result of the high consumption rate of alcohol and drugs. It is therefore self-evident that we are vulnerable to crime after taking this substance.

In hindsight, the scourge of alcohol and drug abuse is robbing our country of a prosperous future we all envisage. It is therefore necessary to find amicable solutions that will ensure a reduction in alcohol consumption before it leads to moral decay in our society.

The situation shows that we still have a long way in educating our youth to abstain from substance abuse. We must formulate efficient awareness campaigns that will speak to the vast majority of people so as to win the fight against the scourge of this problem that often leads to more societal ills.

Schools and other public spaces are the right places to communicate to our youth and encourage them to stay away from substance abuse.

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TWEETS
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Improved library service for Philippi Don Fraser
@donscot23@PatriciaDeLille. Communities need more facilities. With high unemployment, need new thinking on sport&recreation facilities

#CrimeStats Phiyega: Taxi drivers are one of the drivers of crime
Xolani Islomo Why didn't she also mention the thousands of criminals within government?

Maybe Bheki Cele was right all along - SAIIR
vuyo the saint@VuyoMkhize Hahaha... Regretting that Fire this man headline, are we?

#CrimeStats Nhleko: Killing police is like killing ourselves
collen matanda @collen111_36900 Police should operate with no limits.

#CrimeStats Phiyega: 2.1 billion came into the country illegally
Nduna Ncube @047a16a3193d4eb That's bad #CrimeStats Nhleko: We need to value our police.

Mothusi@Mothusi9007 #CrimeStats they are valued but Hon Nhleko what should we do about police officers who don't come on time due to shortage of vans?

#CrimeStats Nhleko: Police attacks is a concerning development
Bradley@LFC02WP#Crime stats - people attack police and innocent public cause they're not scared of the law, that's why.

#CrimeStats Nhleko: Killing police is like killing ourselves
Booi Mlungisi@mlungisib Being a police officer is just a job at the end of the day those #police officers are humans they deserve respect and honour.

Bradley@LFC02WP #Crimes stats - how about getting the justice system right, training police and handing down heavier sentences?

#Crime stats Nhleko: There are loopholes in the firearm legislation and it must be confronted.

mojela modupe@ModupeMojela How many firearms used in crimes - most of them taken from SAPS possession.

CrimeStats Phiyega: Police sexual offences showed an increase.
portia mbali kgabo@snercia. Waaat!?