

Surgery as a component of universal healthcare: Where is South Africa?

Conditions that can be treated or alleviated by surgical, obstetric and anaesthesia services, collectively termed surgical care, account for approximately one-third of the total global burden of disease.^[1] In November 2018, the Southern African Development Community (SADC) passed an intergovernmental resolution^[2] that recognised surgical care as an indispensable component of Universal Health Coverage (UHC) to attain global health and the Sustainable Development Goals (SDGs)^[3] and to affirm 2015 World Health Assembly Resolution WHA68.15.^[4] SADC health ministers, including the former South African Minister of Health, Dr Aaron Motsoaledi, pledged to invest in surgical care by developing National Surgical, Obstetric and Anaesthesia Plans (NSOAPs). Three non-SADC African countries (Ethiopia, Rwanda and Nigeria) and two SADC countries (Tanzania and Zambia) are implementing NSOAPs, while four other member states (Botswana, Malawi, Namibia and Zimbabwe) are developing them. Although South Africa (SA) has promoted the concept of UHC, it has not taken any concrete steps to meaningfully include surgical care in its new National Health Insurance (NHI) policy.

SA has one of the most inequitable health systems in the world.^[5,6] The national health system has been under international scrutiny^[7] since the adoption of NHI, a health system payment reform to improve the quality of healthcare and address the disparities in health service provision. Surgical care is an indispensable, cross-cutting health service that is necessary to improve health in diverse areas such as cancer, injury, cardiovascular disease, infection, and maternal/child health.^[8] The high burdens of trauma, non-communicable diseases^[8] and communicable diseases (HIV and tuberculosis in particular) are a triple threat to the health and well-being of South Africans. It is projected that without an essential and emergency surgical package that is accessible to all South Africans, beginning at first-level (district) facilities, the country will experience significant gross domestic product (GDP) workforce-related productivity losses.^[9] Substantial investment in surgical care is an important prerequisite for the realisation of SA's National Development Plan,^[10] the government's current strategy to promote macroeconomic growth, which aims to improve basic welfare and citizen capabilities through a more efficient state service delivery in health and other sectors. Large segments of the young working population may be unable to contribute to this broader societal development process if afflicted by untreated surgical conditions.^[11] For an upper middle-income country like SA, failing to invest in surgical care could result in GDP losses of up to 2% by the year 2030 as a result of premature disability and mortality.^[12]

To improve surgical care, the National Department of Health (NDoH) could utilise the NSOAP framework, as a 'systems'-based and fully costed approach, to deliver an essential surgical package through NHI. In 2015, a National Surgical Forum was convened at the University of Witwatersrand to discuss a roadmap for an NSOAP following the launch of the Lancet Commission on Global Surgery (LCoGS). Since then, perioperative research has been conducted in SA to quantify the LCoGS indicators and identify health system gaps in workforce,^[13,14] infrastructure^[15-17] and quality.^[18-20] While more than 96% of South Africans live within 2 hours of a government hospital,^[21] quality surgical care is variable

and lags behind global standards.^[20] Governance, financing, service delivery, infrastructure, the workforce and data systems must be optimised to improve surgical outcomes at a national level.

Leadership from the NDoH has been lacking, but is desperately needed to mobilise internal political support for an NSOAP, including promoting the financing, implementation and integration of surgical care in the National Health Strategic Policy.^[22] Additional research is needed to identify innovative solutions for NSOAP governance, financing, workforce, service delivery, infrastructure and information management (Table 1). NSOAPs require complex health system reform,^[23] with co-ordination from the NDoH, and a pragmatic approach to implementation that is easily understood by early adopters. Frontline providers, for example, will be the first to interact with the policy, requiring a change in how they function, behave, and adapt in changing hospital settings.^[24] Such an approach demands effective co-operation and partnerships across the stakeholder continuum, spanning academia, public and private sectors (including the biomedical sector), non-government organisations, civil society and, most importantly, patient representatives and advocacy groups.

SA could play an important leadership role in advancing the global and SADC resolutions by including an NSOAP in its NHI policy. We encourage the new Minister of Health, Dr Zweli Mkhize, to prioritise surgical care as a means to strengthen the SA health system and make progress towards the SDGs.^[11] This is likely to translate into significant improvement in the health and wellbeing of all South Africans.

Table 1. NSOAP priority areas

Health system reform/ NSOAP domain	Examples of reform to capacitate first-level facilities
1. Governance	Actively support the decentralisation of surgical care and improve referral systems between hospital levels
2. Finance	Ensure appropriate financing for a fully costed NSOAP through NHI
3. Workforce	Promote workforce retention and performance and provide skills development based on evidence and contextually based competencies
4. Service delivery	Institute protocol-based surgical care, and strengthen auxiliary surgical services such as radiology, pathology, blood transfusion and critical care services
5. Infrastructure	Ensure that first-level hospitals are equipped to provide essential surgical procedures
6. Information systems	Strengthen information management and structuring of data for ongoing performance evaluation and data analysis

NSOAP = National Surgical, Obstetric and Anaesthesia Plan;
NHI = National Health Insurance.

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