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## ZAPU bemoans Zimbabwe's ailing health sector

By Dr Themba Bulle, ZAPU Deputy Secretary for Health and Welfare

The recent death of uGogo Rose Nyathi, "a Bulawayo celebrity, human rights activist, and informal comedian", who was laid to rest at Lady Stanley Cemetery highlighted some of the anomalies in our health system. While uGogo Rose advocated for the rights of vulnerable communities, she was rendered critically vulnerable in her time of need. With her pitiful demise, the notion that our health system is free has been battered and proven untrue. UGogo Rose, a vendor at 5th Street, Bulawayo had to fork out more than \$1,400 for medical treatment before her death. She needed financial and material assistance from local and Zimbabweans in the diaspora. It is not uncommon for our people in Zimbabwe to seek, not only general assistance but particularly health assistance from relatives or international donors.

On the contrary, our high-ranking government officials along with their connected elites, have access to medical aid packages and can afford private health which is quite expensive. Our rich and powerful government officials can afford to travel to foreign lands to seek medical attention. They travel to the USA, the UK, India, Singapore, Malaysia, China, South Africa and many such countries for their treatment while ordinary citizens die in the squalor of public referral hospitals such as Mpilo, UBH, Ingutsheni, Parirenyatwa, Sally Mugabe and Chitungwiza. These six major public hospitals in Zimbabwe are noted for shortages of medicines and ageing facilities as well as shortages of healthcare staff. Yet many ordinary citizens actually never make it to these central hospitals, dying instead in their homes because of abject poverty and lack of ambulances.

The World Health Organization (WHO) defines health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity." It can therefore be argued that by this definition many citizens in Zimbabwe are not healthy. Under the principles of universality, we demand a public health system that is free of charge and paid for by the state at the point of delivery. Citizens deserve a high quality and effective healthcare system which is fair to all and is available when needed regardless of one's financial or social status.

We demand a functional public health system.

The Global Health Security Index measures the strength of healthcare systems, and ours is weak and poor. Our healthcare system ranks at a dismal 117 out of 195 countries with a GHS Index Score of 32.4 as calculated by the GHS Index team. This poor rating hampers our country's image as a viable destination for foreign direct investment. All investors consider public health as one of the key performance indicators of any government. A functional public health system is a magnet for investment.

One of the health determinants is health spending by the state as a percentage of overall annual state budget or as a percentage of the GDP. We demand that the government increase its health spending from the current 2.79 % of the GDP to 5% of GDP as recommended by the World Health Organization. Health spending should be increased from approximately 12.7% of the total planned state budget to the 15% target set by the Abuja Declaration adopted in 2001 by African Union member states.

To increase our GDP and by extension health spending, we need to adhere to certain economic fundamentals which include:

- 1. Political Stability and Good Governance: Ensuring a stable political environment and transparent governance can build investor confidence and foster economic growth. Every other economic endeavour is hinged upon this.
- 2. Sound Fiscal Policies: An efficient tax system and prudent government spending help manage public debt and the effective allocation of resources. Fiscal prudence should not be undervalued.
- 3. Stable Macroeconomic Environment: Maintaining low inflation, stable interest rates, and a balanced budget create a favourable environment for economic activities. This stability is highly dependent on sound fiscal policies.
- 4. Regulatory Reforms: Simplifying regulations and reducing bureaucratic red tape encourages entrepreneurship and business expansion. This is the gateway to attracting both internal (local) and external (international) investments.
- 5. Investment in Infrastructure: Any uptick in economic activity requires cyclic improvement in transportation, energy, and communication networks so as to enhance productivity and increasingly attract foreign investment.
- 6. Technological Innovation and Robust Financial Sector Development: In today's web-based economies these two initiatives are inexorably linked. Encouraging research and development (R&D) and adopting new technologies will drive productivity and economic diversification. This requires prudent liberalization of web traffic.
- 7. Education and Workforce Development: Ensuring a skilled workforce is vital for technological innovation, even general innovation, and economic growth. Diversification of education beyond physical institutions is essential, this includes improvements in work-based learning (WBL) beyond formal classroom education.
- 8. Health and Social Services: Investing in healthcare and social services improves the overall well-being of the population, leading to a more productive workforce and population.

The above eight points are the bastion of any functional and robust economy. Once all the above are in place, or at least making some identifiable progress then we need to move on to:

9. Job creation and the reduction of unemployment: It is recommended that unemployment be reduced from the current 11.5% (or 95% if you exclude informal workers and subsistence farmers) to at most 5% of unemployment. First though is the need to have a national consensus on the definitions of employment and unemployment. Consideration should be given to subjective as well as objective descriptions. It is disingenuous to describe a person as employed who considers him/herself to be unemployed.

10. Income stabilization. The average incomes for Zimbabwe should be stabilised. We believe that when fiscal consolidation is done right and the economy is stabilised, incomes will naturally gravitate towards functional set points (Balasundharam et al, 2023; Molnar, 2012). Merely increasing salaries increases the fiscal pressures that lead to inflationary pressures thus perpetuating never-ending salary increase-inflation cycles. Zimbabwe's Inflation Rate of 57.5% (compared to South Africa 3.8, Australia 2.8 and USA 2.4) needs to be tamed for salaries to be viable.

Improvement in the socioeconomic circumstances of our people will improve health outcomes.

Our ailing public health system is robbing our people of life, with the life expectancy of Zimbabwe being a lowly 59.3 years compared to the average 73.4 years globally. Institutional maternal mortality rate was 114 per 100,000 live births in 2023 compared to 107 in 2022, noting a concerning increase. Perinatal mortality rate (PMR) increased from 28.4 per 1000 births to 35.6 per 1000 births. The neonatal mortality rate (per 1,000 live births) in Zimbabwe was reported at 24.3 % in 2022. These unnecessary deaths are unacceptable.

With the Zimbabwe population expected to increase from 16,320,540 as in 2022 to 25,866,385 by 2050 according to <u>database.earth</u>, the health system will be severely stretched by then if no system improvements are put in place. The government needs to act on our recommendations without delay.

We demand a free public health system for all regardless of their wealth or status.

We demand that health professionals be paid adequately and on time to prevent the current brain drain to other countries in the region and further abroad. We demand that citizens be treated freely but with dignity at all our public health institutions. We in ZAPU have no desire to politic with people's lives. We stand ready to assist with ideas and practical strategies that the government of the day can implement to improve our people's health outcomes.