

## **South Africa**

# Decision making for social and movement measures in the context of COVID-19

**SNAPSHOT AS OF NOVEMBER 2020** 



**Dr. Mark Blecher**Chief Director for Health and Social
Development, South African National
Treasury

Dr. Mark Blecher completed his medical training at Wits and is a public health medicine specialist. He also has a PhD in health economics from UCT. Dr. Blecher has gained experience in public sector management, health financing, planning and management through employment at provincial and national government levels. His work focuses on health budgets in provinces and he has a special interest in the economics of health service delivery, HIV and health programs. Dr. Blecher has over 50 publications. He has been very involved in South Africa financing response to Covid-19.

## 1. Which social and/or movement measures against COVID-19 are currently in place in your country?

- Closures of schools
- Closures of offices, businesses, institutions and/or operations closures
- Restrictions on domestic movement (e.g. stay-at-home, stay within a city, etc.)
- Limitations to international travel
- Restriction on size of gatherings
- Other (please specify)
  - CURFEW
  - COMPULSORY WEARING OF FACE MASKS
  - PHYSICAL DISTANCING
  - THE SALE OF ALCOHOL IS BANNED IN LEVEL 5 AND 4 OF LOCKDOWN REGULATIONS

The above-mentioned measures were underpinned by a five-level risk-adjusted strategy which was developed by the National Coronavirus Command Council (NCCC) to contain the spread of COVID-19.

In March 2020, the President declared a national state of disaster under the 2000 Disaster Management act, this was done to ensure prioritization of the response to the pandemic and enforce coordination across government to facilitate effective planning and implementation of measures to curb the virus.

#### 2. Which information has been used to make these decisions in your country?

- The South African epidemiology team developed a sentinel hospital surveillance system, which collected data used to monitor bed utilisation.
- COVID-19 was rapidly integrated into existing influenza and pneumonia surveillance system and the South African COVID-19 Modelling Consortium was established. The models developed by this consortium were used to guide planning and implementation.
- Models were developed to estimate the capacity that would be required at the peak of the epidemic, these
  estimates included the number of hospital beds, nurses, doctors, community health workers, isolation
  facilities, medical equipment, oxygen, and personal protective equipment (PPE) that would be required.
- Micro-Macro economic modelling has been done in South Africa to assess the magnitude of the impact of measure instituted in response to the pandemic now and in the future.
- The Ministerial Advisory Committees comprising of various subject matter experts provided the Minister
  of Health with evidence-based advice on managing the pandemic.

### 3. Please describe the process (formal or informal) through which information/data are discussed and decisions are made

- At the beginning of the year, before South Africa reported its first case, the Ministry of Health established
  its Incident Management Team (IMT), modeled on the WHO's Framework for a Public Health Emergency
  Operations Centre, on 30 January 2020. The purpose of an incident management system and the team is
  to create a structured approach for managing a public health emergency.
- A National COVID-19 Command and Control Council was established for inter-government coordination and to influence government-wide decisions concerning the response to COVID-19. The NCCC comprises of various minsters from different departments.
- Other supporting structures such as the Ministerial Advisory Committees comprising of various subject matter experts. These committees provided the Minister of Health with evidence-based advice on managing the pandemic.

## 4. How are selected measures communicated/explained to stakeholders and/or the general public?

A key strategy that was employed by South Africa in the early stages of the pandemic was Community Engagement and Risk Communication, and a technical working group was formed to facilitate the execution of the strategy. This team was led by NDoH and includes other government Departments, government agencies, and partners (donors, UN, and NGOs). The communication team has worked to ensure that accurate, timely information is passed to the population. The measures taken to contain the virus were communicated through a variety of channels including WhatsApp, radio, television, and the internet, in all the official South African languages. Over and above this, the President and Minister of Health continue to interact with the public and stakeholders regularly, to provide updates on the progression of the disease spread and containment to build trust, confidence, and rapport in the fight against the disease.

## 5. What have been the key challenges and/or lessons learnt from your experience/perspective?

- Establishing the IMT early, to prepare, contain and mitigate COVID-19 enabled swift evidence-based decision making
- Public and private sector collaborations enabled efficient capacity scale-up.
- One of the most obvious challenges encountered has been achieving a balance between reducing the
  economic hardships associated with the alert levels and preventing the rapid spread of COVID-19.
  - South Africa was already in a difficult fiscal position before it was hit hard by the pandemic with before COVID-19, the country had a budget deficit of 6.4 per cent of GDP, gross government debt of 63.3 per cent of GDP
  - After the effects of COVID-19, the consolidated fiscal deficit is projected at 15.7 per cent of GDP, up from 6.4 per cent of GDP in 2019/20. The debt stock is expected to reach nearly R4 trillion, or 81.8 per cent of GDP, in 2020/21. Over the medium term, debt-service costs are the fastest-growing item of spending.
  - As a result, the health budgets are projected to grow at a very low rate i.e. 2.9% from 2020/21 2023/24.
- The establishment of the Solidarity Fund by the private sector with contributions from the public eased some financial burden faced by the government.
- PPE procurement was a major challenge as South Africa was competing with the rest of the world for limited supplies.
- An important lesson learned is the need to strengthen the governance systems to improve accountability and effective management in government as a whole.
- While this pandemic affected everyone, the poor population was disproportionately affected and the
  aftermath is even more worrying with rising unemployment currently estimated at 30%, and many
  businesses have closed.