

Health Care and Justice

South Africa is in a process of major socio-political change. Informed people know that such times are dangerous. Not only do individuals suffer, as is already plainly evident, but the normal growth of the infrastructure and services are also delayed. The 'haves' retain what they have and the 'have nots' fall further behind.

The Academy of Family Practice/Primary Care has repeatedly stated its purpose. We wish and work for an adequate and acceptable level of primary health care for every person in Southern Africa.

Presently the bulk of the population depend directly or indirectly on a government-related health service for their primary health care. Government expenditure on health care is effectively shrinking. Primary health care in the geographic areas and economic strata served by the Government can thus only improve if there is a re-allocation of funds in favour of the right kind of primary health care. The National Health Facilities Plan of the Dept of Health and Population Development has the potential to bring primary health care into a more equitable balance within our present ill-balanced health service. There has, however, been minimal progress towards this. Will this year again see a lack of will and power to redistribute the health budget rationally?

The changes in administrative structures, the poor state of the economy, the political turmoil and talks on privatization of services are all reasons why we can

expect a continued paralysis. Inertia in moving towards the admirable objectives of the Health Facilities Plan and the Alma-Ata declaration.

In today's world it is no longer acceptable (both in human and economic terms) to have an inadequate and inequitable primary health care service. A service in which health promotion, prevention and health care are not all taken seriously. A service that is not available to all. To use any excuse to delay a redistribution of resources towards primary health care in 1986 can thus truly be considered an injustice to our society.

It is the view of the Academy that any redistribution of funds should include an amount for Vocational Training in primary health care. Without appropriately trained and orientated doctors in general practice/family practice/primary care additional expenditure could even be counter-productive. The present medical school graduate does not have as much skill in promoting health as in coping with disease. Neither has he as much skill in dealing with people as he has in handling illness. Appropriate Vocational Training can bring about these changes effectively.

We look forward to a year of progress in our chosen field of service in primary health care. We wish all readers of SA Family Practice a happy and fulfilling 1986.