

# Public health and the State

by Dr D Sing

People concerned with the everyday problems of health approach their problems from varying perspectives depending on the way they have been trained and upon the particular kind of work in which they are involved.

The first perspective concerns the problem of health in the community as a national unit.

In recent years a totally new perspective has emerged which considers the individual as a member of the international community. This has been brought about by the World Health Organisation.

At the community or national level, questions such as the following, are asked:

*"How can an epidemic be prevented from entering the country? What measures can be initiated to create an awareness of diseases? How must children and the aged be treated?"*

From this concept stems the responsibility of the State for the health of the community as a whole.

The consequences of such responsibility are the enactment of legislation, the making of institutional arrangements and the taking of administrative steps to deal with health problems.<sup>1</sup>

This article focuses on the role of the Department of Health, Welfare and Pensions<sup>2</sup> in public health, as a State institution. As a preliminary step towards the understanding of this role, attention is given to statutory measures and general administrative arrangements as they affect the Department.

## Public health—a definition

The concept of health which forms individual, national and international perspectives is best illustrated by the Preamble to the

Constitution of the World Health Organisation which reads as follows: "Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity. The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition. The health of all peoples is fundamental to the attainment of peace and security and is dependent upon the fullest co-operation of individuals and States. The achievement of any State in promotion and protection of health is of value to all. Unequal development in different countries in the promotion of health and control of disease, especially communicable diseases is a common danger. Healthy development of the child is of basic importance; the ability to live harmoniously in a

diagnosis and preventative treatment of disease, and the development of the social machinery which will ensure to every individual in the community a standard of living adequate for maintenance of health."<sup>4</sup>

It is evident therefore that public health demands a comprehensive approach by means of appropriate legislative measures and administrative arrangements.

## Legislative measures and administrative arrangements

While statutory enactments provide for the establishment of public institutions and determine their objectives, administrative arrangements based on (i) policy-making; (ii) financing; (iii) organising; (iv) personnel provisioning and

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changing total environment is essential to such development. The extension to all peoples of the benefits of medical, psychological and related knowledge is essential to the fullest attainment of health."<sup>3</sup>

A comprehensive definition of Public Health by Winslow is stated as follows:

"Public health is the science and art of preventing disease, prolonging life and promoting physical health and efficiency through organised community efforts for the sanitation of environment, the control of community infections, the education of individuals in principles of personal hygiene, the organisation of medical and nursing services for the early

utilisation; (v) work methods and procedures and (vi) control, aim at the efficient achievement of objectives.

## Legislative measures

According to Professor J J N Cloete the provision of public health services in South Africa is a relatively recent development because for a considerable period after Jan van Riebeck landed on the shores of Table Bay in 1652, the government did not concern itself with health matters.<sup>5</sup>

The **Public Health Act, 1919** (Act 36 of 1919) which established the Department of Public Health was the first comprehensive legislative measure on health services for the Union of South Africa. Before this development, public health was the responsibility of the Department of the Interior.<sup>6</sup>

An important reason for this legislative and administrative measure was to remedy an omission in the South African Act which brought home to the public the ravages of the influenza epidemic of 1918-1919.<sup>7</sup>

During this period over one hundred and fifty thousand deaths occurred in the Union. This tragedy therefore focussed public attention on the gross inadequacy of the legislative machinery for the safeguarding of public health.<sup>8</sup>

As a result of the changing health situation in South Africa, Dr J P Roux pointed out that the consolidation of the **Public Health Act, 1919** as amended, became a matter of urgency.<sup>9</sup>

This led to the repeal of Act 36 of 1919 by the **Health Act, 1977** (Act 63 of 1977) which became the principal statutory enactment setting out the public health functions of the Department of Health Welfare and Pensions. Other important legislation affecting the public health functions of this Department are as follows:

**Mental Health Act, 1973** (Act 18 of 1973); **Atmospheric Pollution Prevention Act, 1965** (Act 45 of 1965); **Hazardous Substances Act, 1973** (Act 15 of 1973); **Foodstuffs, Cosmetics and Disinfectants Act, 1972** (Act 54 of 1972); **Drug Control Act, 1965** (Act 101 of 1965).

### Administrative arrangements

The political link to Parliament of this Department is provided by the Minister of Health, Welfare and Pensions, who is an executive political-office bearer. In this capacity he is responsible for piloting all legislation through Parliament which affects the Department.

In addition he has to answer questions put to him in Parliament regarding the activities of the Department. Activities of the Department

are financed from the State Revenue Fund. Like all state departments the allocation of funds for its activities are contained in a comprehensive budget document called Estimates of Expenditure to be defrayed from the State Revenue Account.

The spending of funds is authorised by Appropriation Acts. Personnel provisioning and utilisation and financial administrative practices are controlled by the Commission for Administration, Auditor-General and the Department of Finance.

The Director-General who is the chief executive administrative officer is responsible for the day-to-day activities of the Department with assistance of other public servants.<sup>10</sup> As in the case of all state departments the Director-General submits an annual report of the Department's activities to the Minister who tables it in Parliament.

The Department also advises other public institutions and regular co-operation exists between it and

other state departments such as: Departments of Defence; Police; Co-operation and Development; Water Affairs, Forestry and Environmental Conservation; Agriculture and Fisheries.

Statutory research institutions which receive financial assistance from the Department of Health Welfare and Pensions for research carried out on behalf of the Department and for general health research are as follows: Human Sciences Research Council; Council for Scientific and Industrial Research and South African Medical Research Council.

### Objectives

The main objectives defining the public health role of the Department of Health Welfare and Pensions is set out in section 14 (i) of the Health Act, 1977.

The objectives are as follows:

- co-ordinate health services



rendered by the Department and provide such additional services as may be necessary to establish a comprehensive health service for the population of the Republic of South Africa;

- take steps to establish a national health laboratory service;
- provide facilities and undertake research in connection with any matter falling within the scope of the Department with due regard to the provisions of the **South African Medical Research Council Act, 1969** (Act 19 of 1969); and
- perform such other functions as assigned to it by the Minister.

### Programmes<sup>11</sup>

In order to give effect to the aforementioned objectives the Department executives give health programmes each with a specific aim.

- **Infectious, communicable and preventable diseases**  
To prevent, limit and suppress infectious, communicable and preventable diseases.
- **Mental health**  
To provide comprehensive psychiatric service to the public.
- **Medical care**  
To provide medical care for persons whose care has been assigned to the Department excluding hospital treatment or institutional care which is the statutory responsibility of the provincial authorities.
- **Health protection**  
To protect the population against health hazards and attendant harmful and offensive conditions resulting from environmental factors as well as from products and substances which are made available for human purpose.
- **Associated and supporting care**  
To render supporting services and services associated with the above programmes. Details as to programme activities and functions are described in the subsequent paragraphs.

### Infectious, communicable and preventable diseases

#### Erecting and equipment of buildings

Payment of grants-in-aid or refund of approved net costs of incurred by

bodies in connection with erecting and equipping of institutions or accommodation for persons suffering or suspected to be suffering from any infectious or formidable epidemic disease.

#### Tuberculosis

Care and treatment of tuberculosis sufferers or suspected tuberculosis sufferers in departmental hospitals or refund of the net costs incurred by local authorities or other organisations on their behalf in providing such services.

Rendering of departmental out-patients services or refund of an approved portion of the net costs incurred by local authorities or other approved organisations in providing out-patients services for persons suffering, or suspected to be suffering from, tuberculosis in a communicable form.

Refund of the net costs incurred by local authorities or free supply to local authorities and departmental administration when necessary, of materials to prevent tuberculosis.

Provision of free bacteriological or other examinations, (including radiological examinations) for organisations, excluding departmental hospitals, in order to determine whether any person is suffering from, or is cured of, or is free from tuberculosis in a communicable form.

Provision of tuberculostatics and vaccination apparatus to local authorities and/or other organisations undertaking the treatment of persons suffering from tuberculosis on behalf of local authorities and recovery of that portion of the expenditure which according to legislation must be borne by local authorities.

#### Venereal diseases

Provision for the care and treatment of persons suffering from venereal disease or refund of the approved net costs incurred by local authorities in providing such services.

Free supply of remedies, materials, instruments and equipment and equipment to local authorities in respect of out-patient clinical services to persons suffering from venereal disease.

Provision of free bacteriological or other examinations for bodies excluding departmental hospitals, in

order to determine whether any person suffers from or is cured of any venereal disease in a communicable form.

#### Leprosy

Treatment and maintenance of patients in departmental institutions. Refund of full costs incurred in connection with the medical examination and provisional isolation, outside departmental institutions of persons suffering from or suspected to be suffering from leprosy.

Provision of transport, board and lodging at Westfort Institution for patients' visitors.

#### Poliomyelitis

Free provision of laboratory services and refund of the costs incurred in connection with the hospital treatment of poliomyelitis sufferers for the period of potential contagiousness (21 days after onset of disease).

Free provision of poliomyelitis oral vaccine and free administration by state health personnel.

#### Rabies

Free provision of rabies vaccine.

#### Malaria

Combating malaria by the application of preventative measures in river beds and on state-owned land and undertaking of investigations, including laboratory examinations.

#### Bilharzia

Combating of bilharzia by undertaking investigations and laboratory examinations.

#### Neonatal haemolytic disease

Provision of free blood testing services for medical practitioners in respect of their private patients and for antenatal clinics in order to determine whether a pregnancy is likely to terminate in acute haemolytic disease of the infant.

#### Cancer

Free laboratory examination of cervical smears taken by district surgeons and at local authority clinics for the early diagnosis of cancer.

Payment of contribution to the National Cancer Association of South Africa towards expenditure incurred in connection with cancer guidance.

#### Formidable epidemic and other infectious diseases

Free provision of laboratory services, vaccines and materials and refund of the net running costs to local

authorities and other bodies in connection with the prevention, investigation and suppression, including hospitalisation, of prescribed formidable epidemic and other infectious diseases.

**Vector surveillance**

Surveillance of the habitat and concentration of zoonotic and other vectors as well as determining their possible infection with human pathogens thereby anticipating the epidemic trends of particular diseases and provision of advisory services regarding appropriate preventative measures.

**Port health services**

Prevention of the introduction of infectious diseases from outside the Republic.

**Recreation and entertainment**

Payment, at an approved rate, of grants-in-aid towards the recreation and entertainment of patients detained at state infectious disease hospitals.

**Prevention of nutritional diseases**

Collecting information and providing education advice as well as financial aid.

**Mental health**

**Hospital treatment**

Care and treatment of the mentally ill in departmental hospitals including day and over-night patients.

Provision of psychiatrists, medical officers and clinical psychologists to provincial hospitals for the psychiatric treatment of mental pa-

of mental health.

**Training**

Training of psychiatrists, psychiatric nursing personnel and para-medical personnel.

**Recreation and entertainment**

Payment, at an approved rate of grants-in-aid to recreation funds towards recreation and entertainment of patients.

**Medical care**

**Erecting and equipping buildings**

Refund of seven eighths of the approved net costs incurred by local authorities in connection with erecting and equipping detached out-patients clinics.

**District surgeon services**

Free medical examination by district surgeons.

**District nursing services**

Rendering departmental district nursing services or the refund of seven-eighths of the expenditure incurred by any charitable organisation or local authority in connection with the provision and maintenance of district nursing services.

**Detached out-patient services**

Refund of seven eighths of the irrecoverable net costs incurred by a local authority in respect of detached out-patient services as well as the rendering of out-patient services at departmental health centres.

**Care of the aged**

Rendering of clinical services, excluding services in respect of tuberculosis, venereal diseases, psychiatric and family planning and the provision of health education to the aged as well as the refund of determined part of the irrecoverable approved expenditure incurred by a local authority in respect of such services.

**Family care**

Rendering of clinical services, excluding services in respect of tuberculosis, venereal disease, psychiatry and family planning and provision of health education to the family as well as the refund of a determined part of the irrecoverable approved expenditure incurred by a local authority or any charitable organisation in connection with the provision of such services.

**Dental services**

Treatment of patients whose dental care is the responsibility of the

Year	1979/1980		1980/1981	
	Amounts	%	Amounts	%
Infectious, Communicable and Preventable diseases	32 061 000	18,61	41 675 000	20,99
Mental Health	50 814 000	29,50	59 851 000	30,15
Medical Care	49 527 000	28,75	46 664 000	23,51
Health Protection	7 413 000	4,30	9 188 000	4,63
Associated and Supported Services	32 424 000	18,84	41 139 000	20,72
TOTAL	R172 239 000		R198 517 000	

Table 1 An indication of the estimated amounts expressed as percentages for each of the programmes for the financial years ended 31 March 1980 and 1981.

**Genetic services**

Determination of the occurrence, extent and trends of congenital and hereditary diseases and abnormalities in order that heredity factors may be detected early and the provision of genetic advisory services regarding corrective preventative measures to individuals and families.

Financing of research undertaken by the Human Sciences Research Council on behalf of the Department.

**Education and guidance.**

Education and guidance of the community as regards the prevention, spread and treatment of infectious, communicable and preventable diseases.

tients.

Payment of fees, at fixed tariffs, for the treatment and care of the mentally ill in non-departmental psychiatric hospitals and licensed homes and by single care.

**Out-patients**

Rendering of out-patients services to the mentally ill at departmental clinics, provincial hospitals and in their community.

**Certificates**

Payment of costs connected with certifying of the mentally ill by private practitioners.

**Education and guidance**

Provision of a mental health education and guidance service.

**Financial assistance**

Rendering of financial assistance to bodies involved in the promotion

state as well as the refund at an approved tariff of the expenditure incurred by approved organisations in rendering with treatment.

Provision and administration of substances for the prevention of dental diseases and the rendering of dental health education as well as the refund at an approved tariff of the expenditure incurred by approved organisations in rendering such services or the payment of contributions to such organisations.

#### General hospitalization

Hospital, surgical and general outpatients treatment, at fixed tariffs, of certain principal and private patients, who are the statutory responsibility of the provinces, at approved departmental hospitals as a special arrangement.

#### Prosthetic appliances

Free provision of refund of expenditure in respect of providing prosthetic appliances, including wheelchairs, outside state institutions.

#### Transport of indigent persons

Provision of transport for indigent persons from and to state aided hospitals and chronic homes.

#### Hypophysial dwarfs

Free supply of growth hormone for treatment of hypophysial dwarfs.

#### Contributions and grants-in-aid

Payments of contributions and grants-in-aid to organisations providing medical and nursing services.

#### School health services

Rendering of a school health service, excluding dental and other services for which provincial administrations are responsible, to all scholars.

### Health protection

#### Pollution control

Determination and control of the injurious effect of environmental factors on the health of the population and development stimulation and subsidising of measures to eliminate such factors.

Research by the Council for Scientific and Industrial Research on behalf of the Department.

#### Control of consumer goods

Control of products emitting radiation and the safe use thereof.

Control of the importation, manufacture, sale, use, operation, application, modification, disposal or dumping of hazardous

substances and the provision of information and guidance on the toxicity and tolerance of certain poisonous substances.

Control of the sale, manufacture and importation of foodstuffs, cosmetics and disinfectants.

Rendering of administrative and laboratory services for the Medicines Control Council.

#### Public environmental services

Determination of hygiene standards, controlling the compliance therewith and preventing the distribution of food which is produced under unhygienic conditions or which is otherwise unfit for human use.

Refund to local authorities of one-third of the salaries of health officers and pupil health inspectors. Training and payments of bursaries in respect of the training of health inspectors.

Financing research projects carried out on behalf of the Department by the Council for Scientific and Industrial Research.

#### Industrial health services

Investigation of health conditions in the working environment and advice and guidance in this connection. Research and investigations regarding the incidence of disease and circumstances hazardous to health in the industry and the rendering of advisory and analytical services to other parties in this regard.

### Associated and supporting services

#### Family planning

Rendering and promotion of a national family planning service with a view to the social upliftment of all population groups, including financial aid to bodies promoting family planning.

Research in connection with family planning services.

#### Laboratory and medico-legal services to state departments, administrations and organisations.

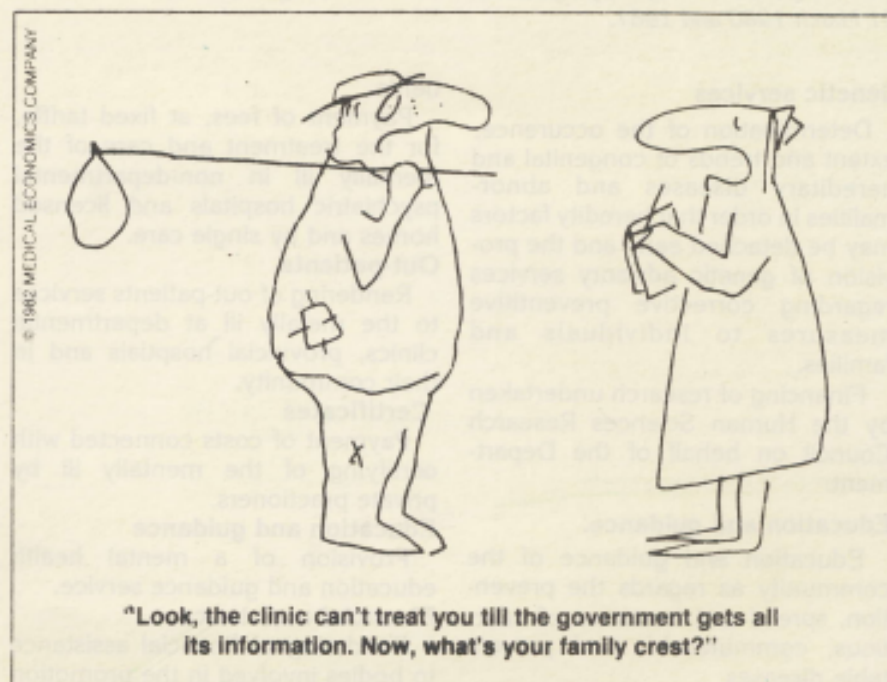
Chemical determination of pesticide residues on fruit for the Department of Agriculture and Fisheries and provision of free pathology laboratory services to provincial administrations.

#### Medical services

Provision of free medical and/or laboratory services for state patients as well as members of the Defence Force, the South African Police and Prisons Service, and their dependants, who are entitled to free or subsidised medical services in terms of their conditions of service; and rendering of supplementary medical services on behalf of state departments.

#### Laboratory services

Rendering of intra-departmental laboratory services and manufacture of specified vaccines required by



various programmes and sub-programmes.

**Removal and burial of corpses**

Payment of expenses incurred in respect of the removal and burial of corpses in areas where there is no local authority.

**Conclusion**

Changing health circumstances will constantly demand the adaptation of legislative measures and administrative arrangements affecting the Department.

Two related crucial factors viz. the availability of funds and the ability of the Department to attract and retain high calibre personnel will, to a great extent, determine the efficiency and effectiveness of the Department in achieving its public health objectives.

In regard to the personnel factor the 1980 Report of the Department of Health, Welfare and Pensions stated as follows:

"Sufficient personnel could not be recruited or retained in the cases of certain categories for example health inspectors and nursing staff

as well as administrative staff in general, the shortages have reached serious proportions. The general revision of salaries as from 1 April 1980 has not resulted in an improvement of the situation. As a result of the staff situation, services for which the Department is responsible are being rendered unsatisfactory and certain services run the risk of collapsing. The state of affairs assumed dramatic proportions towards the end of the year. The department will therefore not be able to meet its statutory and other commitments even on the basis of minimum efficiency. This particularly applies to medico-legal examinations as evidence in courts, health inspection services by health inspectors and nursing of patients in the care of the State. On other levels the quality and extent of service is handicapped by a shortage of staff."

**References**

- 1 Hobson, W (ed) *Theory and Practice of Public Health*, Oxford University Press, Oxford 1979, p XI
- 2 *Under the Rationalisation Programme of the Public Service this Department falls under the Minister of Health, Welfare and*

*Pensions.*

- 3 Kapiro, A L *International Health Organisations quoted in Hobson, W (ed): op. cit., p 764*
- 4 Hobson, *op. cit., p. XII.*
- 5 Cloete, J J N *Administration of Health Services*, J L van Schaik, Pretoria, 1978 p 3.
- 6 *Loc cit*
- 7 *Guide to State Departments and Certain Statutory Bodies 1978/1979*, Harold MacCarthy Publications, Johannesburg, 1979, p 238.
- 8 Cluver, E H *Medical and Health Legislation in the Union of South Africa Central News Agency Ltd, South Africa 1960, p 5.*
- 9 Roux, J D "Health Services in South Africa with particular reference to the Health Act, 1977", Saipa, *Journal of Public Administration*, Vol 12, No 2, June 1977 p 41
- 10 *Posts in the Public Service are given appropriate designations and are classified into classes. All posts having similar functions are placed into a specific class. The classes in the South African Public Service are known as divisions and include the administrative, clerical, professional, technical, General A and General B divisions as well as the Services (Police, Prisons and Defence). — vide — Cloete, J J N. Introduction to Public Administration, J L van Schaik, Pretoria, 1981 p 147.*
- 11 *Details have been extracted from the Estimates of Expenditure to be defrayed from the State Revenue Account during the financial year ending 31 March 1981.*



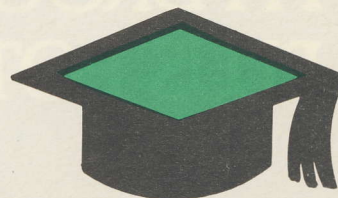
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