

# 5th GP Congress Opening

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## Minister's opening address

*Address by Dr W A van Niekerk, Minister of National Health and Population Development, at the opening of the 5th General Practitioners Congress, on Monday 14 April 1986, Johannesburg.*

Mr President, Colleagues, Ladies and Gentlemen, allow me first of all to thank you for the privilege and honour to open this fifth congress of the general practitioners of South Africa.

Mr President, I would like to state categorically that the general practitioners of this country are the most important factor in the primary health care of a very large section of our population. For this reason you play a most important role in the total health care. As a matter of fact, you play an indispensable role.

I have personally been involved in the training of doctors for more than two decades in this country. I am proud of the high standard of training, but I also realise the challenges which face the general practitioner, and which yearly become more complex.

In 1983 the Science Committee of the President's Council published a report on demographic tendencies in South Africa. The fifth recommendation of the report states:

"That it be accepted as an objective that the level of health of all groups be promoted to such a degree that parity regarding indices of mortality be reached during the present century at the level prevailing in developed western countries".

Some health commentators will say that this can only be achieved by major socio-political and economic changes within our society and that the health care system has very little, if nothing, to offer towards achieving this goal. This is not so.

Socio-political aspects may have a considerable influence on morbidity and mortality rates; but an appropriate approach to health care is similarly a major health promoting factor that cannot be ignored. To achieve our goal we in the health care professions will need to continuously re-evaluate our health strategies. We need changes and improvements in the way health care is organised, distributed, taught and practised within our country.

Indeed even individual doctors can make a very big difference to the health of the community they serve, whether this be the two to three thousand people they care for in their private practice or the 50 000 people they may be responsible for in a particular area of health service.

This has been documented in your journal, *SA Family Practice*, by Dr Martin Bac in a series of articles between May 1983 and April 1984.

The percentage of undermass and malnourished children was dramatically reduced within the whole district in the space of two years in children under five years. This kind of success in changing the incidence of disease and death in a community is being achieved more and more by people who are correctly applying the principles for the delivery of primary health care.

I believe it is most significant that this congress is being jointly sponsored by the South African Academy of Family Practice/Primary Care and the National General Practitioners Group of the SA Medical Association of South Africa.

From the statements made by academy leaders it is clear that you are emphasizing the similarities between these poles within the field of primary health care, rather than the differences that may exist. It seems to me essential that this should be so if we are to embark on a future in health care in South Africa which is free from double standards in health care delivery and morbidity and mortality rates.

The principles of caring for individuals and groups should be the same for the rich and the poor, the urban and the rural, whether they are being served by means of the private or public sector health care system.

Each side of the spectrum also has much to teach the other. The doctors in small scale private sector practice have advanced much in their understanding of the doctor-patient relationship, and the importance of that relationship in re-humanising medicine and producing better clinical outcomes.

On the other hand, as already pointed out, the public sector, working with larger groups of patients, are developing skills of priority determination and cost effective intervention which produce major benefits in health at remarkably low costs.

I am glad to see that people representing both these sectors are presenting papers at this congress and wish you every success in further promoting the bringing together of these two aspects of practice



within primary health care, to the benefit of all people in our country.

South Africa is well-known in the world for its excellence in high technology medical care, but we can improve our primary health care.

In 1982 the Department of Health and Welfare published its National Health Care Facilities Plan. In this the great importance of primary health care is stressed. The response to this plan has been slow.

It is my wish that every generation of medical graduands should have a clear understanding of the primary health care discipline. This will enable them, with the guidance of their teachers, to objectively visualise primary health care as a career.

To achieve our objective to give primary health care its proper place in balance with the rest of the health care service, all will have to show a greater determination to focus on clearly identified priorities. It is only then that the potential contribution of your discipline to health care and health promotion can be achieved.

Even if there is no increase in expenditure, a radical improvement is possible if we can re-deploy our resources to more rational and cost effective activities. It is urgent that we make more rapid progress in this direction.

I shall again confer with my colleagues on the National Health Policy Council with a view to promoting the implementation of the Health Facilities Plan by encouraging the service departments to take the next steps forward.

A National Primary Health Care Policy is our objective. To implement this, a rational manpower policy for the health sector as a whole is needed.

- We must look at optimal proportions of doctors in the primary care and consultant sectors.
- We should look at the best mix of doctors, nurses, pharmacists and others in the health field.
- Urgent attention to the training of all categories of health workers for primary care should be given. This is especially true for you as family practitioners who form an indispensable part of the service.

I have been interested to see that some of your members recently held a workshop on the subject of vocational training for those involved with family practice/primary care. The report of the workshop is not yet complete, but it does seem that those present were strongly motivated to implement training.

The workshop felt that where the vocational training took place in localities where there was great need and a shortage of doctors also existed, some of the trainees would remain on afterwards and the mal-distribution of doctors would be corrected.

In attempting to calculate the cost of such a programme the workshop found that by the re-deployment of existing posts for trainers and trainees the additional cost would not be great. Such a plan for

the training of practitioners in primary care, somewhat similar to that given to clinical assistants (registrars) in the registrable specialities, is to be welcomed.

It is pleasing to note that your academy is already piloting such a project with the KwaZulu Department of Health. I have noted that the South African Medical and Dental Council are currently giving attention to the question of vocational training for general practice.

It does not help to have policies and plans if the people who are to execute them have been inadequately or inappropriately trained. It is therefore my wish that the Academy, the universities, the SA Medical Association and the profession as a whole, will respond to the challenge of our day.

Primary health care should be developed to achieve its full potential through your skills and the best possible organisation.

David Starr Jordan said, and I quote: "The world turns aside to let any man pass who knows whither he is going".

I trust your congress will give such a stimulus to the establishment of primary health care in our country that others will move aside as we pass them.

It is my pleasure to declare your congress open.

