

**TUESDAY, 28 MARCH, 2017**

**MINISTERIAL STATEMENT**

ON

RE-ORGANISATION OF THE HEALTH SECTOR

BY THE

HON. MINISTER OF HEALTH, DR CHILUFYA

Mr Speaker, it is my honour and privilege today to inform the Zambian compatriots through this august House about our continued effort to optimise National Health Service delivery through the reorganisation of the Ministry of Health.

Today, we are confronted by contemporary challenges that require contemporary solutions and the health sector does not stand in isolation. Increasingly, the wealth of the nation and the nation's capacity to grow hinges on its human capital. The wellbeing of the citizenry determines success or doom, as with your permission, I itemise:

- (a) a healthy population provides a healthy workforce which directly contributes to increased productivity;
- (b) a healthy population lives longer, thus providing a ready pool of consumers of products, fast growing our Gross Domestic Product (GDP);
- (c) healthy Zambians reduce the burden on the treasury in terms of treatment for both communicable and non-communicable diseases; and
- (d) investor confidence is enhanced when the people are healthy.

Mr Speaker, African countries, recalling the 1978 Alma Attar Conference on Primary Health care agreed to the Ouagadougou Declaration in 2008 to set the framework for successful implementation of High Impact Actions (HIA) founded on primary health care. This is a practical, scientifically sound and socially acceptable means of availing universal health care. It should come at affordable cost and form the core central function of the overall social and

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economic development of the community. Primary health care is premised on self reliance and determination with empowerment of individuals and our society to define their health destiny.

Mr Speaker, today in Zambia, as we reorganise the national philosophical approach to health, I am calling for the national social movement which will value and entrench wellness and good health as the pillar of our livelihood from individual, family and community to national level. No one should be left behind and, we must commit to a national vision of universal health coverage. Our aim is to ensure that all Zambians:

- (a) access quality health services spanning the whole continuum of care from preventive, promotive, curative, rehabilitative and palliative care;
- (b) are safeguarded from public health risks;
- (c) are protected from impoverishment due to illness whether from out-of-pocket payments for health care or loss of income when a household member falls sick; and
- (d) are empowered to take ownership for their well-being and given the power to define their destiny and contribution to the nation through living a healthy and productive life.

Mr Speaker, in order to attain the lofty ends outlined before, the Ministry of Health is pursuing a transformational agenda as we work to become a nation of healthy and productive people. Under the guidance of His Excellency Mr Edgar Chagwa Lungu, the PF Government has prioritised health as a key economic investment. Vision 2030 aims to transform Zambia into a prosperous middle income country and, as a ministry, we intend to provide the engine for this transformation.

Mr Speaker, I would like to speak to where we are in contemporary Zambia and start with a quote by Tsu Tzu (512BC):

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“If you know the enemy and know yourself, you need not fear the result of hundred battles. If you know yourself, but not the enemy, for every victory gained, you suffer a defeat. If you know neither the enemy nor yourself, you will succumb in every battle.”

Mr Speaker, as a country we find ourselves faced not only with a high burden of communicable diseases but also a rapidly rising burden of non-communicable diseases. The two challenges we face are that of a growing population, as well as transition in disease patterns, with more of non-communicable diseases being manifest. However, given the collective potential of our country, we can do better. In doing so, we shall need to tackle a number of challenges which I shall enumerate.

Mr Speaker, in re-organising the health system, I will itemise the broad strategic shifts that will focus on. The five fundamental changes are as follows:

- (a) beyond delivering healthcare to enabling health; we are now focusing on promoting health and preventing diseases. Each day must start with exercises for all of us, as we promote healthy living, eating and regular screening for hypertension, cancers, diabetes mellitus and other communicable diseases including Human Immune Virus (HIV);
- (b) we need to move the centre of gravity of healthcare delivery, from the hospital to the home within the community. We are embarking on a social transition, or movement, away from just focusing solely on treating diseases, to begin promoting wellness and preventing diseases and at the same time, creating enhanced capacity to treat the diseases while in our hospitals. This responsibility should be shared by individuals, and our society. Good health in the re-organised approach starts with each one of us individually, before we move to collective responsibility. In most cases, you will find that people simply need health promotion messages and a helping hand, to be motivated to seek wellness. My

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ministry intends to be that hand, in partnership with our communities, civil society organisation, media, exercise groups, the church, traditional leaders and other Government institutions. We are all in this together;

- (c) in our re-organised approach, we are embarking on innovative ways of raising finance for health. We are fostering partnerships to ensure that we raise the necessary finances for health. Our medical streams in our hospitals are being improved, premium health care services are being introduced and our hospitals are improving the quality of care and engaging various institutions to ensure adequate financing for our hospitals. Furthermore, Mr Speaker, as was presented earlier on, on the Floor of this House, the Government is in the process of setting up a Social Health Insurance;
- (d) we must avail right specialists mix human resource and that is what we have started doing by engaging the community in healthy living, in various aspects of preventing and promotive health services. Furthermore, we must provide adequate human resource to provide the tertiary level care in our specialist institutions; and
- (e) we must adopt a whole of Government and multi-sectoral approach so that we can develop a comprehensive and holist universal health coverage system.

Mr Speaker, in focusing on key areas in the health sector, I will refer to the seven key result areas that are shaping our re-organisation. These include:

- (a) health service delivery;
- (b) human resource for health;
- (c) infrastructure and equipment;
- (d) vaccines and medicines;