



health

Department:
Health
REPUBLIC OF SOUTH AFRICA



**ADDRESS TO THE INTERNATIONAL PHARMACEUTICAL
FEDERATION (FIP) CONGRESS
DR AARON MOTSOLEDI, MINISTER OF HEALTH – SOUTH AFRICA
CAPE TOWN INTERNATIONAL COVENTION CENTRE
MONDAY, 02 SEPTEMBER 2024**

President of International Pharmaceutical Federation Congress, Mr Paul Sinclair,

Members of the International Pharmaceutical Federation Congress Bureau,

President and Members of the Pharmaceutical Society of SA

Director-General of the Department of Health, Dr Sandile Buthelezi

Representatives of the South African Pharmacy Council

Representatives of the Independent Community Pharmacy Association

Captains of the Pharmaceutical Industry

Distinguished Guests

Ladies and Gentlemen

Members of the media present

Good morning

It is with great pleasure and immense pride that I welcome you all to the 82nd FIP Congress of Pharmacy and Pharmaceutical Sciences here in the vibrant City of Cape Town – the Mother City.

We are honoured to host this prestigious gathering, where the world's leading minds in Pharmacy and Pharmaceutical sciences come together to share knowledge, exchange ideas and forge for the future of the profession.

This year's theme, "*Transformation to Equitable Quality Health Care: A call to Action for Pharmacy*" resonates deeply with the health challenges that humanity faces today. We stand at the intersection of a fast-changing global health landscape, with its ever increasing uncertainties.

We are however unfortunately certain of one thing: that pandemics are going to come one after the other, perhaps even in quick succession or worse still, simultaneously for centuries or even millennia to come.

This is borne out of three (3) contemporary events over which humanity seems to have lost control. I really hope that I am wrong in asserting that humanity seems to have lost control.

1. The first is climate change, which will bring with it disasters and disease processes never seen before;
2. The second is Antimicrobial resistance in both human and veterinary medicines with antimicrobial resistance on the increase, even previously treatable infections will morph into uncontrollable pandemics;
3. Habitat: Human beings, in a desperate bid to forage for food, and look for shelter, are busy encroaching on the habitat of other species.

This human action brings with it hitherto unknown zoonotic conditions for which we might not have ready-made answers.

I am sure that as Pharmacists and Pharmaceutical scientists, you are acutely aware of these events and you are aware that we will be looking your way in search of answers, as we recently did with Covid-19 and presently with Mpox. Ordinary folks on the street cannot believe it when told that a particular condition has no cure or worse still even ordinary treatment. This disbelief even develops into conspiracy theories, whereby it is believed that somebody is deliberately withholding something from them, ostensibly to blackmail governments and communities into parting with more money.

The significance of global solidarity and collective action in transforming health systems around the world to better serve all of humanity, cannot be lost to us. We are in it together. As we say in South Africa and in the political party I belong to, “working together we can do more”.

As we deliberate in this Congress, we must think back at what we in the pharmaceutical world have done for humanity – we once helped humanity to experience a massive transition out of what appeared to be hopeless situations.

In its editorial of September 2013, the British Medical Journal, The Lancet avers that since human being started populating this planet, healthcare has undergone only two (2) transitions:

- the first one, dubbed the Demographic transition, began late in the 18th Century and changed the planet in the 20th Century through Public health improvements, including basic sewerage and sanitation. This helped to reduce premature death greatly;

- the second transition, called the Epidemiological Transition began in the 20th Century and eventually reached even the most challenged countries in the 21 Century, communicable diseases, from Smallpox to Poliomyelitis were vanquished or controlled on a scale never imagined, opening the way for the contemporary action to tackle NCDs.

This transition was the work of Pharmaceutical Scientists – it is you here who brought this transition.

Of course The Lancet goes on to mention that the 3rd transition seems to be sweeping the globe, changing how healthcare is financed. This is in reference to Universal Health Coverage – in South Africa the National Health Insurance (NHI).

I want you to understand the significance of the role the Pharmaceutical scientist played in bringing the epidemiological transition.

You are called again today to get ready to play that role once more, for indeed, new vaccines are needed more than ever before, for the three reasons I mentioned earlier in this speech. The world is seriously crying for vaccines and medicines – affordable ones for that matter. Should we be squabbling with each other like we did during Covid-19?

When the need arises for all humanity to be vaccinated, should the vaccines be so scarce that the developed world starts hoarding them for themselves, leaving the still developing world on their own? Surely we can do better than this and it is within our capability to do better.

I have full confidence that in your deliberations, those facts will not just be shoved away and kept under the carpet, for there is a lot at stake for All humanity.

I am one of those who believe that in the next 10 to 15 years we would have vanquished modern day infectious diseases like HIV and AIDS, Ebola, Mpox, TB, Malaria etc. But in doing this, as The Lancet states, we shall be ushering in a new era of Non-Communicable Diseases (NCDs).

You shall be called again to provide easily accessible and affordable pharmaceuticals to deal with these NCDs, which are needless to say, already upon us.

The question is: Are we equal to the job? Shall we rise to the occasion?

I am eternally optimistic that we can, and your gathering here this week is testimony to that. You are gathered here today because you believe that you have a critical role to play in shaping the future of global health.

I would then like to raise five (5) issues for your consideration:

1. The need to address health inequities across the world

We cannot be content with a situation where in one part of the world we have innovative medical research and cutting-edge healthcare technologies while in other parts of the world people still face barriers to receive even the most basic of healthcare. I am sure that no one wants to live in that type of a world.

2. The urgency of strengthening health systems

The Covid-19 pandemic serves as a sobering reminder of the flaws in our healthcare systems. It has brought to light the flaws in our supply chains, personnel constraints, infrastructural inadequacies and global governance structural difficulties.

The Pandemic has however also presented us with an opportunity to reconsider, reconstruct and redesign our health care systems.

We should never let a crisis go to waste!

3. The need to harness innovation and technology to transform our health systems

Adopting innovation and digital health is now essential rather than just a choice.

4. The need to invest in sustainable and equitable health financing

Let us remember that healthcare is a fundamental human right. In trying to access this right, even the best-designed health policies and initiatives will struggle to meet their objectives in the absence of adequate healthcare financing strategy. This is where Universal Health Coverage comes in. Unfortunately in my country this has raised fire and fury by those who wrongly believe that the elevation of others is automatically a downfall of fortunes for those who have already arrived – those who are clear beneficiaries of the present grossly unequal system.

I am sure you have seen screaming headlines over the past week, about the Minister of Health of South Africa proclaiming the downfall of the Government of National Unity (GNU) in order to implement NHI. I wish to inform you that the fate of NHI is far above my pay grade, whether in Luthuli House, Headquarters of the Ruling Party, or in Government, that is above my pay grade. But the screaming headlines are designed to scare people off and make them angry about this NHI.

I wish to believe that those who are South African in this gathering, and are old enough, will have seen this type of strategy some years back during the era of Apartheid. It is a strategy that used to be called “Swart Gevaar”. It was used to scare those who are clamouring for freedom, never even to think about it, because it was going to bring terrible things to them. The same strategy is being deployed today and I have even seen an article by a prominent South African who likened NHI to Communism. I was wondering that it means that countries like the UK are in essence Communist countries. So successful was “Swart Gevaar” in scaring people off, that white people in my home province of Limpopo started hoarding essentials like tin food, candles and matches etc, waiting for the doomsday when Mandela becomes the first black democratically elected President of South Africa. There were shocked to discover that Mandela was actually a human being like them, perhaps even more human than them.

I still remember a soccerfield stacked with supplies up to the sky in the centre of Polokwane, when they discovered after the elections, that the “Swart Gevaar” which they were told about, never was.

5. Healthcare as a public good and as part of social justice

The fifth issue I would like to raise for your consideration is a need to unite under a shared commitment to advance healthcare as a public good and as part of social justice.

Access to good quality healthcare for all people of the world is a fundamental human right and not just objectives of government. Hence regardless of their financial situations, human beings are entitled to health services that are of good quality and adequate for their needs.

Let us remember that as pharmacists, we are not just being distributors, No, you also serve as instructors, patient safety advocates and important participants in public health campaigns.

Today here in Cape Town, we are making a Call to Action. As we embark on the journey of transformation, I call upon each and everyone of you to be agents of change. Let us work together to ensure that our health systems are not just of good quality, but are also equitable and inclusive. This is a call to advocate for policies that prioritize the needs of the most vulnerable, and in the process, commit to advancing the pharmacy profession as a driving force for health equity and quality care.

In conclusion, I want to express my heartfelt gratitude to FIP for bringing this Congress to Cape Town, and to all the delegates for your commitment to improving healthcare through the pharmacy profession. We hope that your decisions over the next few days will shape the future of health. I wish you all a productive and inspiring experience Congress, and I look forward to seeing the innovative solutions and partnerships that will emerge from our time together.

I Thank you.