



PHASA

Public Health Association
of South Africa

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NEWSLETTER

December 2022

Message from the PHASA President



Dear PHASA members

As we mark the end of another memorable public health year, navigating COVID-19 endemicity in the country, the emergence of new patterns of Influenza, climate-related health impacts of flooding events, and a renewed drive towards planning for universal health coverage and a national health insurance-funded health system; let me take a moment to reflect on the significant work of the many public health practitioners throughout the country, who have been on the front-lines of health services, integral to the generation of relevant scientific evidence to inform health responses, and been involved in related advocacy efforts to advance improved health outcomes; and wish you a well-deserved break over this festive season.

There were a few changes to the PHASA board this year- Thameshree Naidu resigned at the Annual General Meeting, and we are joined by Antoinette Stafford Cloete, who has been co-opted, effective 1 January 2023. She is the communication manager at Health Systems Trust, and we welcome the considerate spirit, partnership, and expertise that she will bring to our board and organisation.

PHASA hosted its first in-person conference since 2019, from 11th to 14th September, in Durban and in collaboration with the South African Medical Research Council. We are truly grateful for the amazing support and participation, that culminated in an incredibly successful PHASA conference- and included 5 plenary sessions, 11 oral abstract sessions, 11 poster sessions, 15 organised sessions, 14 plenary speakers, 65 oral presenters, 198 poster presenters, and a total of 360 conference delegates.

It was wonderful to be able to connect in person and to be reminded of how fortunate we are for the diversity of our public health community, including the intergenerational range, from "the public health giants whose shoulders we stand on" (a recurring reflection by many delegates throughout the conference); to the exciting, younger public health practitioners who bring renewed energy and promise. This certainly provides favourable foundations for well-informed, responsive, and sustained strategies, policies, and actions; as we look to build on our responses to tackle pervading public health priorities.

It was also wonderful to engage in the meaningful discussions and hear about the impactful work that is being done throughout the country, that has been making a difference to the lives of patients, health care workers, and communities especially during the past three years. Unprecedented solidarity and commitment contributed to systematic resilience that guided us through the most challenging health emergency of our lifetimes, and provides hope as we reflect on the past and look forward to embracing another new year. Thank you for being part of our public health community and until we connect in 2023, I wish you a joyous and healthy holiday season.

With warmest wishes, Harsha

Meet our new board member- Antoinette Stafford Cloete



I have always been a knowledge worker. I started my career in academic development because I wanted to understand why students struggled with transitioning from writing and learning in high school to university and discovered the demands were completely different. I occupied this space for a decade supporting student learning and writing acquisition, language-across-the curriculum and language policy and planning efforts at the University of the Western Cape, the University of Cape Town, as a visiting scholar at Teacher's College, Columbia University and then through what was known as the University of Port Elizabeth as part of the Quality Learning Project.

I then became a part of government in the content management space focusing on youth development. This was an exciting time because I wrote my job description as I worked, the job and area was so new. I managed all the information channels and related teams in a very demanding and dynamic space. I did this for 11 years and then took a two-year break to be a mom and consultant. Health communication happened quite by accident and am I glad it did. I love it I work with amazing people who are so committed to effecting positive change in the health landscape and I am so happy and feel so privileged to be making a contribution. As the Content Editor in my Comms team at the Health Systems Trust would say, "This is my jam".

It truly is and I am so excited at the prospect for furthering my purpose through contributing to PHASA where I hope my skills as a communicator, researcher and information channel specialist will be of benefit.

The PHASA 2022 Conference

The 17th annual Public Health Association of South Africa's (PHASA) conference was held from 11 - 14 September 2022, at the Southern Sun Elangeni and Maharani conference centre in Durban.

This year's conference theme was "Building back better: public health resilience and recovery," following over two years of facing multiple COVID-19 waves, and as the country focused on rebuilding our society and health system to deliver universal health care and improved health outcomes for all South Africans. The conference provided the ideal setting for stakeholders to engage on robust discussions on related public health progress and challenges, and how to shape a post COVID-19 pandemic health system and world.

The PHASA conference has always been a highlight of the annual public health year in South Africa, and this year was no different. It brought together public health practitioners, researchers, academics, students, and policymakers from across the country and beyond; and created an ideal platform for these public health stakeholders to share their work, engage in critical conversations, and to potentially form long-lasting collaborations that advance public health.



Prof. Quarraisha and Salim Abdool Karim, who sponsor the Susser and Stein keynote lecture, seen at the opening session of the conference. Prof. Quarraisha Abdool Karim introduced the background to the lecture and the legacies of Mervyn Susser and Zena Stein, and Prof. Salim Abdool Karim delivered this keynote address, discussion 'The fifth wave and beyond. Where to from here?'



Prof. Glenda Grey presented virtually at the opening cocktail of the conference, addressing the role of research in public health.



Book launch of "South African Health Reforms, 2015-2020."



Panelists from the Public health preparedness in managing climate-related disasters.



Conference dinner.



Natasha Kannemeyer, winner of the Tik Tok competition, for her video on the importance of vaccinations.



The PHASA Fellows!



Panelist from the plenary discussion on National Health Insurance and our future health system.



The PHASA Board team.

PHASA 2022 Conference Statement

The Durban Declaration

The Public Health Association of South (PHASA) and its annual conference delegates, meeting in Durban from the 11th to 14th September 2022, and reflecting on public health resilience and recovery as we embrace our post-COVID-19 pandemic world; call on the government, healthcare providers, non-health sectors, and health care partners, to individually and collectively commit to rebuilding our society and health system to deliver universal health care and prioritise improved health outcomes for all. We recognise the accentuation of existing health inequities during the COVID-19 pandemic, the existential threat of the climate crisis to the health, and the urgent need for universal health coverage, including affordable, safe, and high-quality health care services for all people; without anyone incurring financial difficulty.

Our call to action:

1. Health equity must be at the centre of all health and intersectoral policies.

- The COVID-19 pandemic not only exposed the vulnerability of the country in terms of health, that includes health system weaknesses, fractured health service delivery, disparate vaccine outreach to localities in terms of urban versus rural, but also long-standing structural weak points in terms of high unemployment rates, and financial crises.
- This re-emphasized the lessons from the HIV pandemic for COVID-19 and the post-pandemic world i.e. recognition of our shared responsibility and solidarity, and the inherent urgency for health equity to be at the centre of all health and intersectoral policies, to advance universal health coverage.

2. Public health training must address public health principles, health equity, and social justice competencies

- A professionally competent and socially accountable workforce is critical to appropriately address the current health system and health care challenges in the country.
- Thus, investment in public health training that comprehensively addresses competencies related to proper public health principles and values, including health equity, the social determinants of health and social justice; must be prioritised and standardised throughout the country.

3. Strategies to address the health impacts of climate change must be a health policy priority

- Changes to climate bring about climate hazards and increases the risk of extreme weather disasters.
- We remember the devastating floods in May 2022 that affected communities living in KwaZulu Natal, that left 40 000 people homeless, resulted in the loss of 435 lives with other persons reported as missing, and caused public health infrastructural damage estimated at R 200 million.
- The reality is that climate change, which is mainly caused by burning fossil fuels, is a health emergency and crisis, and climate-related health risks must be mitigated across regions, sectors and communities.

4. Comprehensive, integrated responses are needed to address the complex determinants of health.

- Biological, psychological, behavioural, socio-economic, structural, and commercial factors are among the key, and often intersecting, determinants of health
- Health responses, including health advocacy, health activism, and health communication, can also be considered to be underlying determinants of health
- Responses to address the multifactorial and complex nature of risk factors for health, warrant comprehensive and multi-faceted thinking and planning

Statement contributors: Harsha Somaroo, Thlamelo Mothudi, Natisha Dukhi, Amilcar Juggernath

Position statement

Strengthening occupational health systems in the post COVID-19 and the State of Disaster era in South Africa – strategies for the road ahead

(published in the College of Public Health Medicine newsletter, Volume 4, Issue 2, 2022.)

Background and Introduction

South Africa has emerged from the COVID-19 pandemic with major impacts on communities – from loss of family members, severe disabilities and considerable economic consequences. During the pandemic, South Africa called on its workers to be on the frontline to protect the health of people and communities, or ensure that our factories, mines, educational institutions, markets and commercial centres continued to drive the economy. This placed workers in many economic sectors at risk of being infected, and a considerable number experiencing the more severe forms of the disease. Stakeholders in various occupational contexts responded in a variety of ways. The 17th Annual Public Health Conference of the Public Health Association of South Africa (PHASA) held in Durban, provided an opportunity to discuss important issues pertaining to occupational health in the time of the epidemic – lessons learnt and the ways forward. A Panel was convened under the auspices of the Colleges of Medicine of South Africa, and brought together occupational medicine and public health medicine specialists, Rajen Naidoo, Mohamed Jeebhay, Sujatha Hariparsad, Muzimkhulu Zungu and Itumeleng Ntamatama. In keeping with Conference theme “Building Back Better”, the overall purpose of the Panel was to identify high level interventions to strengthen the overall occupational health system in South Africa that will promote and protect the health of all workers in the country, based on the experiences during the COVID-19 pandemic.

Purpose of this Position Statement

1. To report on the pre-pandemic deficiencies in occupational health (OH) in South Africa and strategies that emerged during the pandemic to address these shortcomings.
2. To emphasise the need for a strengthened, sustainable, and integrated OH services across all sectors (formal and informal, public and private) in the country.
3. To recommend new and innovative paradigms for implementation within occupational health whilst promoting and strengthening intersectoral collaboration.

Occupational Health Status in the period before the pandemic

Research has shown that, at best, only 20% of SA workplaces have occupational health services, and these are generally available within larger workplaces. 1,2 Workers in the public sector (other than health workers), small enterprises, and the informal economy have limited access to OH services. 3 Although SA already has reasonably progressive OH legislation, it is poorly enforced. In addition, the legislative framework in the country is extremely fragmented, with the Department of Minerals Resources and Energy responsible for monitoring and enforcement of OH on mines and works while the Department of Employment and Labour is responsible for the same in other workplaces. The latter Department is responsible for compensation of workers, but mining related respiratory diseases are compensable through processes within the Department of Health, which is also responsible for providing occupational health services only for health workers.

The impact of the pandemic on workplaces

This fragmentation, poor enforcement of legislation and lack of services for the majority of workers impacted negatively on workplaces as the pandemic unfolded. Employers failed to respond to legislation and guidelines, mostly because of the lack of capacity at a workplace level. Furthermore, differential responses to protect workers meant that certain categories of workers, such as health workers and miners, were better protected whilst others were neglected – especially those in small and medium enterprises (SMMEs) and the ever-growing informal economy. There was an absence of worker understanding, limited behavioural change, and apprehensions regarding COVID-19 infection, severe disease, effective prevention measures and no coherent plan for return of affected workers back to work. Many work sectors, including retail, small businesses and mining, reached out for additional technical support and assistance.

The national response relating to Occupational Health

Several drivers contributed to the development of multidisciplinary OH teams of experts in various government agencies during the pandemic. Some of these include recognition of the pending disaster, lack of OH capacity for ground-level implementation and strong coordination for OHS teams with rapid responsiveness. The national Department of Health, the Department of Employment and Labour, and Department of Minerals Resources and Energy, together with academic institutions, NIOH, tripartite structures such as NEDLAC and professional bodies such as SASOM, SASOHN and SAIOH formed a national OH Task Team. Trade unions and worker organisations also had direct involvement pertaining to areas of concern, a significant issue being workplace trust in PPE provided and COVID-19 vaccine hesitancy.

Strengthening Occupational Health systems in South Africa

The need for equitable and sustainable OH service delivery integrated across both public and private sectors covering formal and informal workers beyond the COVID-19 pandemic was identified. It has been a longstanding challenge and requires transparency with broad collaborative engagement to protect workers' health. It is widely accepted that an organised effort for service delivery must involve the Departments of Health, Employment and Labour, Minerals and Energy and Environmental Affairs. Participation of local municipalities in this initiative is crucial to address OH service delivery in the informal economy. A paradigm shift is needed where multidisciplinary teams that investigate and address future outbreaks should have the necessary expertise, such as Environmental Health Practitioners that can assist in workplace interventions. A platform for identifying occupational diseases, disability and rehabilitation needs to be created to address the impact of the pandemic on the current occupational health system. Post COVID-19 condition or 'Long COVID' represents a unique challenge in developing guidelines for fitness to work and occupational disease compensation.

To overcome fragmented and under-resourced OH systems, a monitoring and response system with clearly defined roles and responsibilities at multiple levels is proposed. This should include the establishment of 1) a technical framework to address OH emergencies, 2) a surveillance system with access to dynamic data to assess the impact of policies and interventions in workplaces, 3) integration of occupational health within the public sector health services, and 4) an independent OH coordinating authority to pool resources and strengthen networks for addressing challenges. In addition, the DOEL requires capacitation to enforce technical aspects of legislation. A medical inspectorate is also needed for non-mining industrial sectors, akin to the structure that exists for mineworkers.

Conclusion

In summary, to protect workers' health, enablers needed for OHS include strengthened resources, a deliberate and strengthened role for health departments, access to information, collaborative and responsible teams, workplace interventions, surveillance, inspection and enforcement. Although the COVID-19 pandemic was a major threat to OHS systems, our resilience, responsiveness, and ability to innovate were evident. These lessons learnt must not be forgotten, and the momentum for establishing and improving OHS systems must be sustained.

STATEMENT AUTHOR STATEMENT AUTHORS

Zahida Sunday, Christel Nagoorsamy, Fredrick Weinand, Rajen Naidoo, Shahieda Adams, Sujatha Hariparsad, Mohamed Jeebhay, Spo Kgalamono, Saloshni Naidoo, Itumelang Ntamatamala, and Muzimkhulu Zungu.

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Panelists from the "Strengthening Occupational Health systems in the post COVID19 and the State of Disaster era in South Africa - strategies for the road ahead to send earlier" session.

(From left to right: Mohamed Jeebhay, Itumeleng Ntamatamala, Sujatha Hariparsad, Rajen Naidoo, & Muzi Zungu)

The PHASA PHILA Awards seek to honour excellence and commitment to public health in South Africa, and PHASA wishes to acknowledge exceptional individuals whose:

- activities have been consistent with PHASA's founding values of equity, integrity, social responsibility, caring, compassion, empathy and partnership; and whose
- purpose is aligned with its mission to provide leadership and a collective voice to improve health and health equity.

This year, PHASA received 25 nominations for the PHILA awards, seven for the lifetime achievement award, and nine each for the annual award and emerging practitioner awards.

These were adjudicated by respected public health practitioners in the country- panels comprising of a previous PHASA president/senior member, a head of school of public health from South Africa, a previous PHILA award winner, and a civil society leader; were constituted for each of the three categories of awards. The judging process included reviewing and scoring of applications received, using a standardised online scoring form, aligned with each category of award.

After a rigorous and close process, the eventual winners were:

1. **PHILA Annual Award**
Mosa Moshabela
2. **PHILA Emerging Practitioner Award**
Muzzammil Ismail
3. **PHILA Lifetime Achievement**
Mark Heywood

Annual Award Winner



Mosa Moshabela

Professor Mosa Moshabela, MBChB, M.Med (Family Medicine), MSc (Demography and Health), PhD (Public health) is a Professor of Public Health and Deputy Vice-Chancellor for Research and Innovation at the University of KwaZulu-Natal in South Africa.

He was awarded a Ministerial Special Covid-19 Award (2020 - 2021) for Covid-19 Science Communication and Public Engagement, and this work led to him being voted as the PHASA PHILA Annual Award winner

He is the chairperson of the Standing Committee on Health in the Academy of Science of South Africa (ASSAf), and chairperson of a committee to evaluate the Covid-19 health sector response in SA, commissioned by the National Department of Planning, Monitoring and Evaluation. He is also the Health Commissioner to the Premier of KwaZulu-Natal, as one of the seven multi-sector commissioners on the Premier's Provincial Planning Commission.

Globally, he is a member of the international advisory board for the Lancet Healthy Longevity, Lancet commission on synergies between Health Promotion, Universal Healthcare Access and Global Health Security, and the commission of the US National Academies for Science, Engineering and Medicine on the Global Roadmap to Healthy Longevity.

Emerging Practitioner Award Winner



Muzammil Ismail

Dr Muzammil Ismail is a Public Health Medicine Registrar at the Health Intelligence Directorate in the Western Cape Department of Health.

During his time as a UCT Public Health Medicine Registrar he has made significant contributions to district, provincial, and national level planning and managed to harness the knowledge garnered through health systems research, policy and systems thinking and applied it in several innovative ways including: establishing an award-winning provincial level COVID-19 communication platform to garner public trust and confidence and directly influence cross sector planning and behaviour, to translating evidence to inform service redesign and improve the performance of the health system through a data-driven telemedicine programme and model that attracted global recognition by the Schmidt Futures Foundation.

Perhaps most importantly he was able to demonstrate evidence-based advocacy for alcohol regulation that translated into policy implementation and protected health services during one of the worst COVID-19 waves in the country.

Lifetime Award Winner



Mark Heywood

Mark Heywood is one of South Africa's most experienced and well-known health activists and has used evidence-based medicine and constitutional law to protect and advance human rights and public health in the country. He is the former Executive Director and co-founder of SECTION27 as well as a co-founder of the Treatment Action Campaign (TAC). He sits on the Boards of several health and human rights NGOs in South Africa and internationally.

He is currently editor of Maverick Citizen, a section of the Daily Maverick that focuses on activism, human rights and social justice. He is also adjunct Professor at the Nelson Mandela School of Public Governance at the University of Cape Town; a distinguished visitor at the O'Neill Institute for National and Global Health Law, Georgetown University Law Center; and a visiting scholar at the Bonavero Institute for Human Rights, Oxford University.

He was part of the legal teams that were involved in all the major litigation around HIV and human rights. He is most recognized for the campaign for access to medicines for HIV in South Africa by the TAC, between 1998 and 2008. This resulted in access to treatment, the reduction of the price of medicines, prevention of hundreds of thousands of HIV-related deaths, and also led to significant additional resources into the health system and towards the poor.



Gender Based Violence

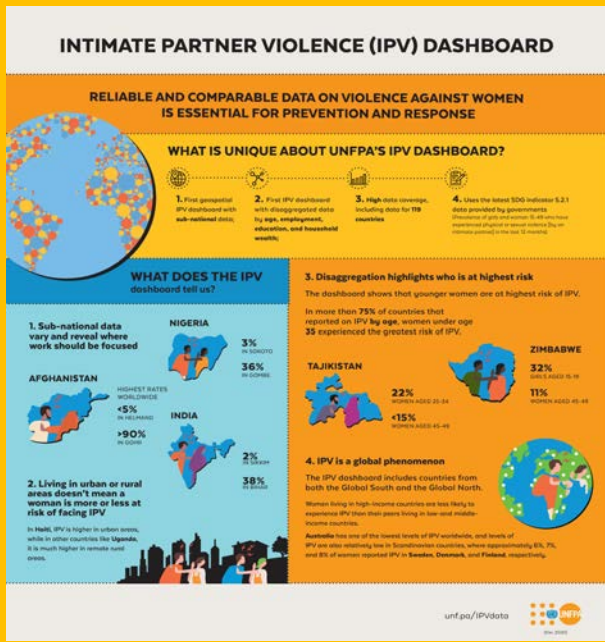
Dr Natisha Dukhi

A major contributor to ill-health of girls and women across the globe is gender-based violence (GBV), also known as violence against women and girls (VAWG). GBV includes not only physical or sexual violence but is inclusive of verbal and psychological violence, intimate partner relationships and domestic violence, as well as harassment and socio-economic violence. Tactics can include degradation, deprivation, threats, and surveillance.

Often enough, GBV is limited to a female-male binary, but GBV is inclusive of intersex persons, transgender women and men, as well as other people with various gender identities and sexual orientations. Therefore, it cannot remain such that GBV is mainly about any form of violence enacted by a man upon a woman but rather must highlight that it includes the experiences and perpetration of violence by boys and men, and people from the LGBTQ+ community. Underpinning the conceptual framework of GBV is patriarchy that serves as a structural power. Here too, the female-male binary was analysed, however, heteropatriarchy analyses GBV beyond this and is inclusive of gender diversity [1,2]. There has been increasing acknowledgement of the negative role of sexual and gender norms that are the structural GBV drivers and this has gained enough research attention. Unemployment, inequality and poverty are common structural challenges, especially in a country such as South Africa, which is also considered as one of the most unequal countries around the globe.

South Africa has startling violent crime and homicide rates, placing it the sixth highest country globally and second in sub-Saharan Africa, with majority of the violence being that of intimate partner violence [3 - 5]. While available data points to the GBV epidemic, in South Africa provincial and national GBV victimization and perpetration prevalence estimates are absent, as well as GBV data that includes GBV drivers, patterns and settings that such as tribal (rural informal) and farms (rural formal). While the impact of COVID-19 placed significant pressures and challenges on health and health systems, along with intersecting crises such as climate change, economic instability, amongst others, the GBV space was also compounded by the exacerbation in violation of human and gender rights. While the unknown of GBV may be concerning, it is pleasing to note that currently there are various studies in South Africa that are focusing on GBV, and we can look forward to new data in the near future that is vital to inform policy. To further drive policy change regarding GBV, are autonomous women's movements around the world, continuously creating and participating in feminist mobilization, that serve to increase evidence that violence against girls and women are preventable.

As part of the drive to increase awareness, mobilize advocacy and encourage action against GBV, since 1991, the 16 days of Activism Against Gender-Based Violence, has been observed. This period starts annually from November 25 (International Day for the Elimination of Violence Against Women) till 10 December (Human Rights Day) to highlight the various forms of GBV people face and the urgent need for action against GBV [6]. For more information on campaigns, news, videos, publications, and events regarding GBV and the 16 days of Activism click on <https://www.unfpa.org/16days>



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16 DAYS OF ACTIVISM
FOR NO VIOLENCE AGAINST WOMEN AND CHILDREN 25 NOVEMBER - 10 DECEMBER



PHASA representation at the COP27 meeting **Urgent action to strengthen climate change education for all health professionals**

COP27 Side Event | 10 November 2022

The COP27 Health Pavilion convened the global health community and its partners to ensure health and equity were placed at the center of the climate negotiations. It offered a rich 2-week programme of events showcasing evidence, initiatives and solutions to maximize the health benefits of tackling climate change across regions, sectors and communities.

The Capacity Building Subcommittee of the WHO-Civil Society Working Group to Advance Action on Climate Change and Health, in partnership with the Global Consortium on Climate and Health Education, launched a special call for strengthening climate change education for all health professionals, together with an Open Letter with recommendations to all health education stakeholders in June 2022.

The proposed side event, co-organized with the WHO HQ, the WHO EMRO and WHO SEAO, was a continuing effort of the partnership to showcase innovative case studies in curriculum development on climate change, planetary health, and sustainable healthcare. The event highlighted the importance of climate change education in building the capacity of health professionals for better preparedness and responses to the climate crisis, and discussed ways to inspire more actions that can lead to regional/national/local changes in health training programs and equip future health workforce with essential knowledge and skills to save lives from climate change.

PHASA Secretary, Dr Lwando Maki, was involved with the organisation, and Azeeza Rangunwala, a member of the PHASA Climate, Energy and Health Special Interest Group, represented PHASA at this session.

The session can be watched at the following link:
<https://www.youtube.com/watch?v=cs4UduV6CJY>



COP27
SHARM EL-SHEIKH
EGYPT 2022



A WORLD IN TURMOIL:

Opportunities to Focus on the Public's Health.

 **WFPHA** World Federation
of Public Health
Associations

 **SItI**
Società Italiana di Igiene,
Prevenzione e Sanità Pubblica

 **ASPHER**
Association of Schools of Public Health
in the European Region

A World in Turmoil: Opportunities to Focus on the Public's Health

In May 2023, over 3.000 public health professionals and researchers, policymakers, and students will convene in Rome, Italy, for the 17th World Congress on Public Health, a momentous event organised by the World Federation of Public Health Associations (WFPHA) in association with the Italian Society of Hygiene, Preventive Medicine and Public Health (SItI) and the Association of Schools of Public Health in the European Region (ASPHER).

The 17th World Congress on Public Health coincides with a critical juncture for our world. The COVID19 pandemic has indelibly altered our planet and our lives, exacerbating existing inequalities and alerting us to the threats of an unsustainable mode of production. Conflicts worldwide, from Ukraine to Afghanistan, from Syria to Ethiopia — to cite a few — have further destabilised the world, alongside the devastating consequences felt by all those directly affected. And together with the pandemic and the war, we have failed to mitigate the effects of climate change— the pandemic itself a potential consequence — with environmental disasters growing in frequency and impact. We are undoubtedly living in a world in turmoil.

Now more than ever, these crises serve as an opportunity to advocate for and create better social protection systems, promote health for all, prepare for the challenges posed by future pandemics or global crises, and work together to end exploitation and to create harmony between nature and humanity.

The theme of the Congress — A World in Turmoil: Opportunities to Focus on the Public's Health — reflects our commitment, as the global health community, to work together in and outside of our respective fields to promote health equity and to build a more sustainable and just future.

This World Congress on Public Health will be an opportunity to foster collaboration and co-creation of a vision informed by our professional knowledge and that of the communities we serve. Empowering communities and becoming more responsive to them will lie at the heart of any attempt to move forward, to safeguard and nurture a world in need of healing and protection.

For more information, check the conference website: <https://wcpH.org/>

@wcpH_official

#WCPH2023

www.wcpH.org



PHASA

Public Health Association
of South Africa



Best wishes for a joyous festive season
and a peaceful, prosperous new year! 🎁

