The National Institute for Communicable Disease
Division of NHLS

Experience in responding to COVID-19: health equity perspective

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• Historical deep inequity
• Gini coefficient = 63
• Inequity, cross-cutting impact on all 17 SDG’s
• Personal, institutional, national, private & public, urban & rural, regional, global
• Principles to address issues include:
  - universal access- NHI
  - leaving no one behind
  - social justice imperative
  - focus on social determinates of health
  - interconnectedness of health and development
COVID-19 exposed cracks in equity

Equity institutionalised, embodied within governance legislation, and policy framework

Systems work in harmony – intergovernmental, across private and public sectors, whole of society & government approach

Recognising special needs especially for vulnerable individuals, such as older people, poor living in townships and persons with disabilities

Leaders make decisions based on best available evidence

Protection of the entire public ensuring individual liberty maintain confidentiality and dignity – pandemic ethics
NHLS / NICD Services

- 56 Million Patients in the public sector
- 3841 Public Clinics
- 422 Public hospitals
- 9 Provinces in RSA
- 233 NHLS clinical laboratories

<table>
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<tr>
<th>Core functions of the NICD</th>
<th>Surveillance</th>
<th>Outbreak response</th>
<th>Specialised diagnostic services</th>
<th>Research</th>
<th>Capacity Building</th>
<th>Communication</th>
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<tbody>
<tr>
<td>Enablers</td>
<td>Dynamic data driven approach evidence-for decision making</td>
<td>Whole of government approach and whole of society approach</td>
<td>Infrastructure</td>
<td>Regional and global partnerships</td>
<td>Lab Field Epidemiologists HCW training</td>
<td>Involvement of stakeholders Top down vs. bottom up Transparent</td>
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<td>Barriers</td>
<td>Integration of data systems Standardisation systems Data quality Excess deaths</td>
<td>Cross border outbreak detection and response</td>
<td>Reagents Costs and prohibitions of importation Vaccine access</td>
<td>How is research agenda crafted Access food security Transport as super-spreaders events Lockdown and access / GBV Merging of CD/NCD</td>
<td>Information literacy HCW Empowering communities to make decisions</td>
<td>Language barriers Social listening Appropriate messaging Methodology of communication – door to door, remote vehicles, influencers, local cartoon hero's</td>
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Resource availability, allocation and distribution e.g. public health & clinical disciplines, social distancing, connectivity, human resources
South Africa COVID-19 and Vaccine Social Listening Report
23 November 2021, Report 28

This is a weekly report of COVID & vaccine sentiment, rumours & misinformation in SA. Further info here.

KEY TRENDS

- Public concern about mandatory COVID-19 vaccination in the workplace: There is growing concern about several SA companies mandating or planning to mandate compulsory vaccination of their employees. The Commission for Conciliation, Mediation and Arbitration (CCMA) received complaints following dismissal of employees because of being unvaccinated (see Here). The Party of Action shared a tweet claiming that COVID-19 vaccinations are part of a "satanic plot".

- Vooma Vaccination Weekend increased vaccination numbers. On the weekend 12 – 14 November over a quarter of a million vaccine doses were given, over double a usual weekend, through less than the ambitious target (Here). The seven Vooma Weekend social media banners posted on NDOH Facebook this week promoting vaccine acceptance received more positive public
Access for testing

- 72 ports of entry land, sea and airports.
- Of the 53 land ports, 35 was closed
- Remaining ports of entries mobile laboratories deployed to provide on-site Antigen testing

All mobile laboratories have full connectivity
- All PCR based instruments are interfaced with the Laboratory Information System (TrakCare)
- Antigen testing is reported in real-time
- All COVID results are immediately sent directly to patients via Short Message System (SMS)
<table>
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<tr>
<th>Number of Antigen tests</th>
<th>Positive</th>
<th>Negative</th>
<th>Total</th>
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<tr>
<td>Total</td>
<td>133 260</td>
<td>1 776 603</td>
<td>1 909 863</td>
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Considerations

• Translate lessons into practical actions – integrated services vs data integration, IDSR
• Build back different – social/ economic/ health outcomes beyond health sector
• Focus health diplomacy and science diplomacy
• Essential health service recovery, renewed focus on mental health / NCD`s
• Adaptations- agility, tracking efficacy of interventions to address inequity
• HCW allocation and workforce planning

As a way forward for NPHI

1. Define next normal
2. Determine metrics that will be used to determine impact
3. Prevention, prevention, prevention- nutrition
4. Cost effectiveness and cost benefit
5. Collectively define success indicators
Acknowledgement to IANPHI & all health care professionals

THANK YOU