



## Coronavirus and Implications for the Public Service

14 April 2020

There are over 1 844 863 confirmed coronavirus (COVID-19) cases across the globe. This pandemic has also caused 117 021 deaths, which have mostly occurred in Europe and the United States of America.<sup>1</sup> Health workers in public and private sectors continue to lead global responses to COVID-19, caring for the sickly and providing important advice for government leaders to consider when making policy decisions. The pandemic has even spread amongst health workers, resulting in trade unions urging state authorities to ensure that all health facilities provide sufficient Personal Protective Equipment (PPE). Infections amongst South African health sector employees are increasing steadily, and there is growing concern that government's interventions are inadequate. But the recent procurement of PPE from other countries should allay these concerns.

The COVID-19 pandemic affects health employees and the entire public health system. These impacts will persist for a long period and public service stakeholders should adapt through long-term strategic thinking. Several policy lessons can be gleaned from the COVID-19 experience for workers, health managers and citizens. The primary one is the need for improved coordination across all departments in the public service. It is essential to avoid the silo fragmented approach in public service, which separates health from other important human development areas. Health care is connected to economic development, good governance, social issues and environmental factors. This approach in public health is called a syndemics framework because it considers all the factors mentioned above when addressing a pandemic like COVID-19. Many African governments and public service stakeholders used this method in responses to pandemics such as Ebola.<sup>2</sup> South Africa's public service, especially health stakeholders, should adopt this model and avoid poor coordination in public service provision.

Another significant observation for public service is the neglect and undervaluing of what the International Labour Organisation (ILO) calls care work. This type of employment includes community healthcare workers, nurses, home-based care providers, social workers and early childhood development practitioners. Care work focuses on providing essential services for human survival and development. The ILO estimates that '269 million new jobs could be created if investment in education, health and social work were doubled by 2030'.<sup>3</sup> COVID-19 highlights that South Africa's public service has not invested adequate financial and human resources into care work. Several factors cause this oversight, but the main one is skewed public service expenditure.<sup>4</sup>

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<sup>1</sup> World Health Organisation (WHO) 2014. Coronavirus disease 2019, Situation Report, 14<sup>th</sup> of April 2020

<sup>2</sup> Mapungubwe Institute for Strategic Reflection (2019). Epidemics and the Health of African Nations. Edited by Z.Mazibuko

<sup>3</sup> International Labour Organisation (ILO) 2018. Care work and care jobs for the future of decent work report.

<sup>4</sup> Institute for Economic Justice (2019). budget justice coalition MTBS submission.

National Treasury has resisted attempts over the years to absorb various categories of care workers as full-time state employees. It argues that it cannot carry the costs of employing these essential workers. This explains low levels of investment in the public care economy and the precarious nature of care work. A clear example is the status and working conditions of community healthcare workers.

COVID-19 has compelled the National Treasury to rethink its budget plans. The Minister recently indicated that additional public resources will be redirected to health. This presents an opportunity for the public service to focus on care work when the reframed health budget is tabled. Nurses, community healthcare workers and social workers play an important role in primary healthcare provision. The syndemics approach described earlier supports primary healthcare in several ways. Public service stakeholders can also use the COVID-19 response to test the implementation of existing policies such as the National Health Insurance (NHI). This policy framework prioritises the following practical steps for realising universal quality health care: a dedicated focus on primary healthcare, rebuilding public health human resources, decentralising health care provision, improved governance and private-public-partnerships. There are additional quality control measures described in the NHI bill.

All these policy proposals require productive partnerships between social partners: government, business, labour and civil society. South Africa's current achievements in combating COVID-19 are attributed to collaborative policy development. Different stakeholders from diverse organisations have assisted government in crafting the nation's COVID-19 strategies. The example set by the National Department of Health should be repeated in the future. It has illustrated South Africa's potential to create globally competitive policy measures through social compacting. This good start requires additional support and collaboration in other policymaking areas such as finance and economic development. These partnerships are essential for improving the public service's implementation capacity.

The last lesson from the COVID-19 experience is information sharing, which empowers citizens to actively participate and support public service programmes. Uneven distribution of information and communication inconsistencies cause social unrest in communities. Some citizens have complained about the inaccessibility of information and receiving contradictory policy directives. This communication problem in the public service requires a different approach. It must use diverse modern communication tools and mediums to explain public service programmes.

The focus should be on language diversity, using community radio stations, and social institutions such as churches. Furthermore, government needs to improve the functioning of its intergovernmental forums that allow national, provincial and local public servants to discuss public programmes. These forums are essential for maintaining coordination and consistency in policy implementation from national to local level.

COVID-19 has shown both positive and negative aspects of public service provision in South Africa. The lessons should inspire citizens and government authorities in shifting public service towards enhanced efficiency, especially in health and other forms of care work.