Health and WaSH
 Conclusion

Jakkie Cilliers
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Access to water, sanitation and hygiene (WaSH) serves as a helpful proxy for a government’s ability to fulfill the basic needs of its people, and access to safe water has therefore been declared a basic human right. SDG 3 speaks to ‘ensuring healthy lives and promoting well-being for all at all ages’ and targets falling under this goal include:

- reducing maternal, infant and child mortality
- ending the AIDS, tuberculosis and malaria epidemics, and
- reducing mortality from non-communicable diseases such as diabetes and cancer.

A healthier population will also be more productive and, once combined with better education and other enablers, improve economic growth prospects significantly.

This theme started by briefly explaining the historical context for Africa’s continued high disease burden. It included an analysis of the impact of the most serious epidemics — HIV/AIDS and COVID-19—on Africa and examined the positive impacts of modern medicines (that partly obviate the requirements for functioning basic infrastructure), and the negative impacts of under-resourced and poorly designed health systems.

The recent COVID-19 crisis has delayed progress towards achieving the targets of the SDGs, as substantial public resources have been diverted away from primary development priorities in fighting the virus. Moreover, the pandemic has rudely exposed the dismal state of Africa’s health and associated systems and its dependence on the largesse of others. Currently, the continent imports 99% of its vaccines from abroad and its ability to respond to future pandemics through research and manufacturing of vaccines is abysmal.

Consequently, in April 2021 the Africa Center for Disease Control and Prevention (CDC) and the African Union launched the Partnership for African Vaccine Manufacturing (PAVM) with pledges of support including nearly $3 billion in funding. The initiative aims at equitable access to COVID-19 vaccines as many high-income countries, like the United Kingdom and Canada and the European Union, procured several times the number of doses required for their populations at the height of the pandemic. Going forward, the international community will have to step in to ensure equitable vaccine distribution programmes on top of measures to avert the abuse of vaccine intellectual property rights by pharmaceutical companies even amid a pandemic to then make exclusive deals with rich countries.

It is likely that we underestimate the relationship between health and economic growth, but the inclusion of infrastructure in the Demographics and Health scenario already underscores the imperative to design health programmes that extend well beyond the health sector itself.

In Africa, providing basic infrastructure, such as WaSH facilities and household electricity, reduces the impact of diarrhoeal and vector-borne diseases, as well as the respiratory harm caused by indoor use of traditional fuels like dung and charcoal. There is also a role for the international community although, as we explore elsewhere, aid is no panacea. Installing taps and toilets has historically not been as attractive to donors (and sometimes governments) as, say, eliminating river blindness, but it will have a tremendous impact on livelihoods on the continent if foreign aid providers and African governments were to place more emphasis on WaSH and related infrastructure.

Demographic growth and technological change can work in Africa’s favour, but deferred action will be extremely costly. Delays or poor urban planning will result in larger and more dangerous unplanned urban spaces. Urban planning in Africa must emphasise the provision of basic infrastructure, such as clean water, improved sanitation facilities and household
electricity, as well as increased access to and the general quality of health and education services.

Africa’s health systems are desperately trying to battle the world’s worst communicable disease burden with rising rates of non-communicable diseases. This emerging double burden of disease is a complex challenge with many moving parts, but a better understanding of the trade-offs in health policy versus investments like providing basic WaSH infrastructure should lead to better outcomes.

Against this background, improvements in education are an important driver of better health in much of Africa. Awareness and information programmes can contribute greatly to communicating the benefits of good hygiene and preventing the spread of communicable diseases like HIV/AIDS and diarrhoea. They can also instil healthy, lifelong habits regarding the importance of reducing the risk factors which include tobacco consumption, harmful use of alcohol, unhealthy diet and physical inactivity. Improved investment in detection, screening and treatment—notably by ensuring access to health services at the primary level to boost early detection—are other significant measures to lower the growing burden of non-communicable diseases that are expensive to treat, such as type 2 diabetes and heart disease.

Chart 19: Key recommendations

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<th>Recommendations</th>
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<td>1. A productive economy requires a healthy and appropriately educated population, but Africa has the highest disease burden globally and low levels of education.</td>
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<td>2. In recent years, HIV/AIDS had a dramatic impact on mortality/life expectancy, but the economic impact of the COVID-19 pandemic far outweighs its effect on mortality.</td>
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<td>3. Given the density of humans, poultry, pigs and ruminants, West Africa may become a hotspot of zoonotic pathogens.</td>
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<td>4. Sub-Saharan Africa is rapidly approaching its epidemiological transition - while communicable diseases are coming down, non-communicable diseases are increasing, pointing to an expensive double burden of disease</td>
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<td>5. Africa must increase investment in basic healthcare, disease prevention and education on health dangers such as obesity and smoking</td>
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<td>6. African governments must invest in understanding the trade-offs between basic health care vs investments in WaSH infrastructure</td>
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<td>7. Urban planning must include the provision of basic infrastructure, such as clean water, improved sanitation facilities and household electricity, and increased access to health and education services.</td>
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<td>8. Donors and African government must invest in:</td>
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<tr>
<td>○ basic infrastructure such as taps and toilets to reduce communicable diseases</td>
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<td>○ early detection, screening and treatment of non-communicable diseases</td>
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About the authors

Dr Jakkie Cilliers is the ISS’s founder and former executive director. He currently serves as chair of the ISS Board of Trustees and head of the African Futures and Innovation (AFI) programme at the Pretoria office of the Institute. His 2017 best-seller Fate of the Nation addresses South Africa's futures from political, economic and social perspectives. His three most recent books, *Africa First! Igniting a Growth Revolution* (March 2020), *The Future of Africa: Challenges and Opportunities* (April 2021), and *Africa Tomorrow: Pathways to Prosperity* (June 2022) take a rigorous look at the continent as a whole.

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