FISH HOEK VALLEY RATEPAYERS & RESIDENTS ASSOCIATION

(Incorporating Fish Hoek, Clovelly and Sun Valley)

Central Circle, Fish Hoek 7975

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Heritage Western Cape: Conservation Body

TO: MS TSAKANI FURUMELE <u>tsakani.furumele@health.gov.za</u>

SUBJECT: COMMENTS ON NATIONAL HEALTH ACT AMENDMENT

REGULATIONS RELATING TO THE SURVEILLANCE AND THE CONTROL

OF NOTIFIABLE MEDICAL CONDITIONS: AMENDMENT 2022

DUE: 16 MARCH 2022

The Fish Hoek Valley Ratepayers and Residents Association (FHVRRA) objects to proposed amendments to the National Health Act of 2003 which make the temporary regulations for lockdown restrictions of the State of Disaster permanent under this Act. We need checks and balances across several disciplines, such as partially provided by the Covid-19 advisory panel to the president. We are concerned that these amendments are open-ended allowing other restrictions to be applied without oversight and public participation. Other restrictions could include curfews, national lockdown, sports, economic activity, public transport, religious / cultural practices and the sale of alcohol. Extending the regulations allowing further restrictions to be implemented through other government departments is entirely nonsensical. There needs to be oversight by environmental health practitioners and economists.

We are perturbed that it was our national government that destroyed our jobs and the economy. Also, for mental health reasons, it is imperative to be able for family member to be able to visit their children or parents. This latter restriction is counter to our Constitution's Section 21 (1) Everyone has the right to freedom of movement.

Buildings were built to economically contain a certain number of people. Events have to cover their expenses in order to be economically viable. Limiting capacity to anything less than 100% could result in many events not being scheduled or buildings being used.

Requiring proof of vaccination or recent test results have proven ineffective. Vaccinations haven't prevented contracting the disease. It has just lessened the life-threatening severity for those inoculated. Test results don't show the severity of the disease nor do they relate to the infectious period.

Self-isolation is arbitrary. If someone is forced to leave home in order to provide food for the table, they will not voluntarily self-isolate. Mere exposure is not a guarantee that a person will contract the disease, as evidenced by family members exposed to an infected member not all contracting the disease and 72-hours is completely arbitrary, especially to unknown future diseases.

Failure to comply with these provisions is a criminal offence with a sanction of an unspecified fine and / or 10 years in jail is too harsh. Next thing we know, SAPS will be shooting suspects. Oh! That has happened already.

Not all employers can encourage work-from-home and restrict face-to-face meetings.

Many jobs in South Africa require direct manual labour.

Maintaining social distancing of one metre won't work and is certainly unsustainable. Social distancing fatigue is evident in nearly any store check-out queue.

People seem to object most to wearing face masks. Even at the height of any peak, any sweep of the nearby landscape saw evidence that people will not wear their face masks properly. In nearly every report we receive from the City of Cape Town's Law Enforcement there are multiple incidents of people not wearing face masks when using public transport. In Asian countries, wearing of face masks is voluntary. Those concerned about contracting the disease or contentious enough to not infect others, will voluntarily wear a face mask.

We have no problem with hand sanitisers being made compulsory at all entrances of public places to promote hand hygiene. Few will use them, but those that do, will.

SUMMARY

In conclusion, the FHVRRA objects to the proposed amendments to the National Health Act of 2003 aka Regulations Relating to the Surveillance and the Control of Notifiable Medical Conditions: Amendment 2022, for the above stated reasons.

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DATE	8 April 2022