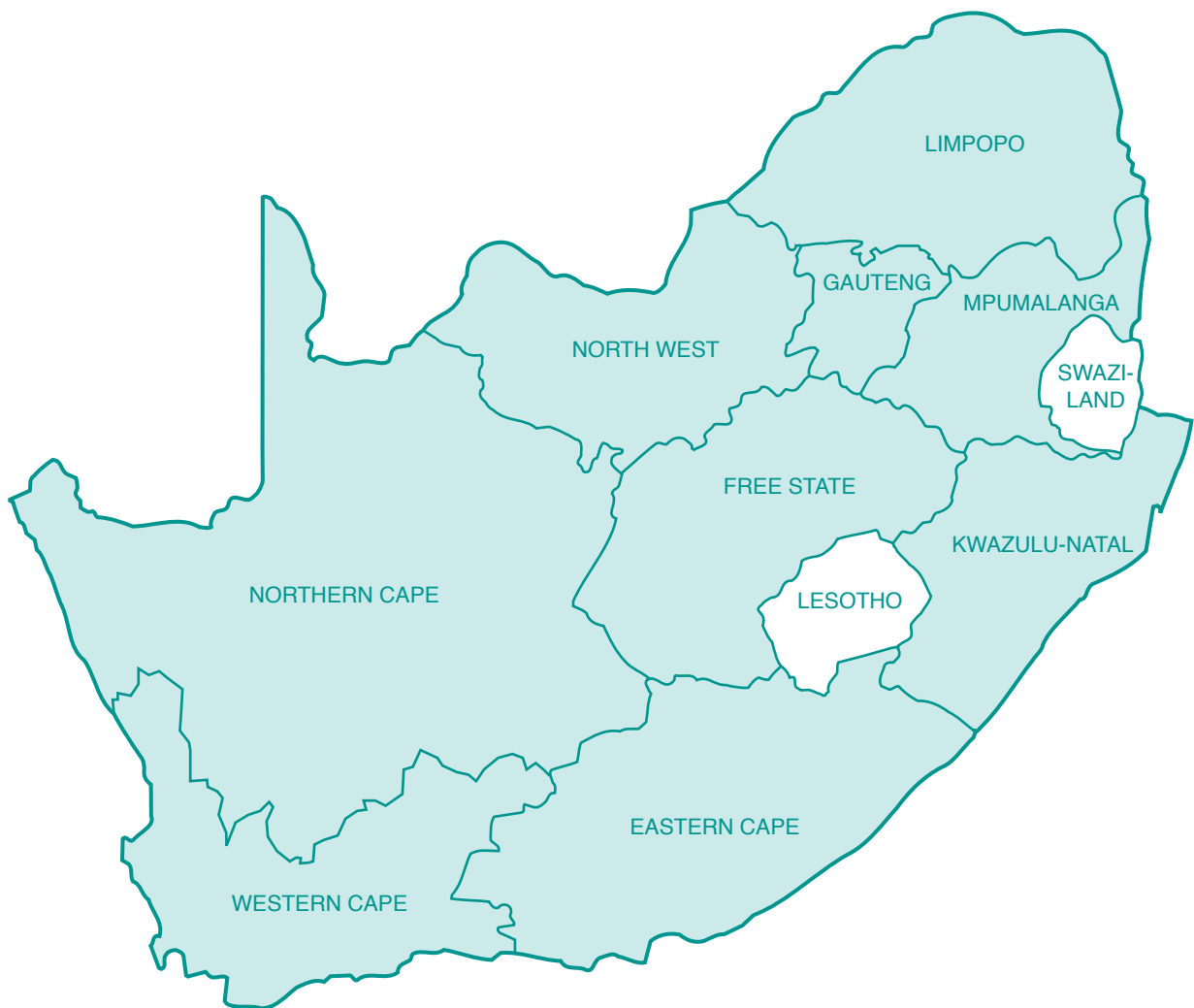


South African Health Review 2018



Published by
Health Systems Trust

Information presented in this Review is based on best available data derived from numerous sources. Discrepancies between different sources reflect the current quality of data. All data should thus be interpreted carefully and with recognition of potential inaccuracy.

The views expressed in this Review are those of the individual authors and do not represent the views of their respective organisations / institutions or Health Systems Trust.

Also available on CD and on the HST website

<http://www.hst.org.za/publications/Pages/SAHR2018>

Health Systems Trust
34 Essex Terrace
Westville 3630
Durban
South Africa

ISSN 1025-1715
ISSN 978-1-919839-99-8
November 2018



Email: hst@hst.org.za
Website: <http://www.hst.org.za>
Tel: +27 (0)31 266 9090
Fax: +27 (0)31 266 9199

This publication was supported by a grant from the South African National Department of Health.

Suggested citation, for example:

Gray A, Vawda Y. Health Legislation and Policy. In: Rispel LC, Padarath A, editors.
South African Health Review 2018. Durban: Health Systems Trust; 2018.
URL: <http://www.hst.org.za/publications/Pages/SAHR2018>

The information contained in this publication may be freely distributed and reproduced, provided that the source is acknowledged and it is used for non-commercial purposes.

Foreword

It is my pleasure to introduce the 21st edition of the *South African Health Review (SAHR)*, the Health Systems Trust's annual flagship publication that curates knowledge from a wide variety of sources to provide an overview of health systems issues in the country.

We are proud to have Professor Laetitia C. Rispel as the guest editor of this edition. Professor Rispel was involved in conceptualising and contributing to the first *SAHR* in 1995, and it is fitting that she serves as the guest editor of this 21st edition.

While the central focus of the 2018 *Review* is human resources for health (HRH), this edition also provides analysis and commentary on other important topics in our national discourse on citizen health and the responsiveness of the health system. Chapters on mental health, quality improvement, management of infectious and communicable diseases, and increase in 'obesogenic' environments have been included. These illustrate the complexity of health systems and the range of issues that need to be addressed in order to achieve universal health coverage in South Africa.

A strong group within the HST, supported by a cadre of highly regarded peer reviewers and authors, have worked through the year to bring the *Review* to completion. On behalf of the Board, I extend our deep appreciation to all HST staff involved in producing the *Review*, to the authors and peer reviewers, and the *SAHR* Editorial Advisory Committee members who provided oversight and direction to the editorial team.

The collective input of internal and external peer reviewers, and the willingness of authors to accommodate collegial feedback and editorial comment, have strengthened the publication.

As always, we are grateful to the South African National Department of Health for supporting the production of the *Review*.

We feel confident that the 2018 *SAHR* will serve as a key resource and departure point in advancing the development of HRH in the journey to universal health coverage.



Flavia Senkubuge

Chairperson of the Board of Trustees,
Health Systems Trust

Table of Contents

Acknowledgements	v
Editorial	vii
1 Health Legislation and Policy <i>Andy Gray, Yousuf Vawda</i>	1
2 Human resources for health and universal health coverage: progress, complexities and contestations <i>Laetitia C. Rispel, Duane Blaauw, Prudence Ditlopo, Janine White</i>	13
3 Human Resources for Health Planning and National Health Insurance: the urgency and the opportunity <i>Anja Smith, Shivani Ranchod, Dave Strugnell, Jodi Wishnia</i>	23
4 Strengthening the district health system through family physicians <i>Robert Mash, Klaus B. von Pressentin</i>	33
5 20 Years of community service in South Africa: what have we learnt? <i>Steve Reid</i>	41
6 A rural scholarship model addressing the shortage of healthcare workers in rural areas <i>Richard Gavin MacGregor, Andrew John Ross, Ganzamungu Zihindula</i>	51
7 Ward-based primary health care outreach teams in South Africa: developments, challenges and future directions <i>Helen Schneider, Emmanuelle Daviaud, Donela Besada, Sarah Rohde, David Sanders</i>	59
Case Study: Factors influencing the motivation of community health workers in Vhembe district, Limpopo <i>Selby Maboko, Khumbulani Hlongwana, Tivani P. Mashamba-Thompson</i>	67
8 Transgender women outreach workers and their role in South Africa's HIV response <i>Andrew Scheibe, L. Leigh-Ann van der Merwe, Allanise Cloete, Michael A. Grasso</i>	69
9 Development of a national strategic framework for a high-quality health system in South Africa <i>Kerrin Begg, Gail Andrews, Punithasvaree Mamdoo, Justin Engelbrecht, Lilian Dudley, Lebogang Lebeso</i>	77

10	Communicable diseases surveillance and outbreak investigation in South Africa <i>Vanessa Quan, Kerrigan McCarthy</i>	87
11	Towards universal health coverage for people living with mental illness in South Africa <i>Lesley Jane Robertson, Bonginkosi Chiliza, Albert Bernard Janse van Rensburg, Mvuyiso Talatala</i>	99
	Case Study: The experience of nurses working in an acute mental health care unit in a Johannesburg hospital <i>Romi Blumenau, Laetitia Petersen</i>	107
12	Perceptions on and quality of clinical practice guidelines for stroke management in a rural health district <i>Kganetso Sekome</i>	109
13	Assessment of food environments in obesity reduction: a tool for public health action <i>Noluthando Ndlovu, Candy Day, Benn Sartorius, Jens Aagaard-Hansen, Karen Hofman</i>	115
14	Status of South Africa's National Health Research System: a 2018 update <i>Flavia Senkubuge, Tshilidzi Muthivhi, Michael Makanga, Moses Bockarie, Thomas Nyirenda, Joses Muthuri Kirigia, Michael Kahn, Glaudina Loots, Joyce Shirinde</i>	125
	Case Study: Health information as a catalyst for community health system engagement <i>Christopher J. Colvin, Myrna van Pinxteren, Bey-Marrie Schmidt, Morna Cornell, Mark Lurie, Eleanor Whyle, Natalie Leon</i>	135
15	Health and Related Indicators 2018 <i>Candy Day, Andy Gray, Noluthando Ndlovu</i>	139
	Abbreviations	251

Acknowledgements

Editors

Laetitia C. Rispel and Ashnie Padarath.

Project Coordinator

Emma-Louise Mackie.

Editorial Advisory Committee

We extend sincere thanks to the Editorial Advisory Committee members: Peter Barron, René English, Andy Gray, Esther Kibuka-Sebitosi, Flavia Senkubuge, Thandi Puoane, Ziyanda Vundle and Thulile Zondi.

Their contributions helped to guide the development of the Review and uphold high standards of academic rigour.

Contributing authors

We appreciate the individual authors' commitment to the success of the Review and their co-operation in responding to editing requirements, often at short notice.

Peer reviewers

We extend our thanks to the peer reviewers for their insightful comments which strengthened the quality of the chapters in this Review.

Peter Barron, Mark Blecher, Sithembiso Blose, Lucille Blumberg, Gcinile Buthelezi, Terence Carter, Emmanuelle Daviaud, Candy Day, Marietjie de Villiers, Prudence Ditlopo, Ros Dowse, René English, Alison Feeley, Bernhard Gaede, Nelouise Geyer, Lucy Gilson, Susan Goldstein, Sithembile Gombarume, Andy Gray, Ashraf Grimwood, Bernice Harris, Stephen J. H. Hendricks, Jeanette R. Hunter, Champak C. Jinabhai, Neeran Jooste, Vishen Jugathpal, Sikhumbuzo A. Mabunda, Ozayr Mahomed, Thabiso Makola, Selaelo Mamejja, Carol Marshall, Thulani Masilela, Naomi Massyn, Pat Mayers, Themba Moeti, Natasha Morris, Alexandra Mumbauer, Neil Myburgh, Kogieleum Naidoo, Lizeka Napoles, Jabulani Ncayiyana, Thesandree Padayachee, Sophie Pascoe, Thandi Puoane, Shivani Ranchod, Tamlyn Eslie Roman, Christopher Seebregts, Sibusiso Sifunda, Shenuka Singh, Jackie Smith, Geetesh Solanki, Maria Stacey, Marion Stevens, Jeanne-Marie Tucker, Marije Versteeg-Mojanaga, Ronel Visser, Ziyanda Vundle, Joslyn Walker, Janine White, Gustaaf Wolvaardt.

Access to data

We are grateful to the National Department of Health for providing access to various data sets used in this Review.

Other support

Compiling the *South African Health Review* is a highly demanding undertaking that requires sustained collective input and support from a wide range of people. In particular, we thank:

Judith Annakie, Delene King, Sakhiwo Mahlumba, Melody Naidoo, Primrose Ndokweni, Nokuthula Nxele, Thesandree Padayachee, Kemona Pillai, Nompumelelo Xulu, and Duduzile Zondi. We are especially grateful to Julia Casciola for her meticulous editing and to Lynda Campbell of The Press Gang for the layout.

Funders

This publication was supported by a grant from the South African National Department of Health.

Cover art

Entitled 'Hope to the World', this tapestry was designed by Nozeti Makubalo, and embroidered by Ndileka Mapuma, Novukile Ndamo and Monfusi Deliwe of the Bodium Studio. The felt-work was done by Constance Gxamza. The tapestry was facilitated by the Art Project of the Keiskamma Trust, based in the Eastern Cape and currently hangs in the St. Thomas' Anglican Church Brooklin in Ontario, Canada. The tapestry was commissioned specifically for the church as an initiative of the St Thomas' AIDS Response Team. Special thanks are due to Carol Baker, Cathy Stanley, Robyn Bennett and the Reverend Claire Wade for assisting us in sourcing a picture and description of this rich piece of art.

Editorial

Human Resources for Health (HRH) are the personification of a health system, yet there is relative neglect of, and insufficient investment in the people who work to improve community health and wellbeing. This 21st edition of the *South African Health Review (SAHR)* begins to tackle the seemingly intractable challenge of how to ensure adequate HRH in South Africa – a challenge that requires innovative and practical solutions to enable sustainable progress towards universal health coverage (UHC).

In addition, authors interrogate a raft of salient health system issues facing South Africa today. For instance, could an overall quality-of-care framework reduce the gap between policy and implementation of quality improvements? Although the listeriosis outbreak that claimed many lives captured the public's attention, what surveillance systems are in place for major communicable diseases? How do we contextualise the Gauteng Mental Health Marathon Project (aka Life Esidimeni) within the quest for UHC in South Africa? What needs to be done to ensure that rehabilitation therapists utilise stroke guidelines in rural areas of South Africa? Could the assessment of food environments and access to healthy food outlets be used as a tool for public health action to ameliorate the structural drivers of non-communicable diseases? How does the performance of South Africa's research system compare with that of other countries in the Africa region?

This 2018 edition of the *SAHR* includes 15 chapters, three of which are accompanied by case studies that provide additional insights or ancillary information on the main chapter, from either a practical or complementary perspective.

In Chapter 1, Andy Gray and Yousuf Vawda offer a concise summary of health-related legislative instruments at national level. They provide a critical analysis of some of the landmark developments in the health sector since the 2017 *SAHR*, notably the National Health Insurance and Medical Schemes Amendment Bills that captured much media attention. Using the Gauteng Mental Health Marathon Project (GMHMP) or Life Esidimeni as an exemplar, they reflect on some of the shortcomings of health policy implementation, and highlight the devastating effects of maladministration and blurred boundaries between governance and management in the health system. Other issues covered in this chapter include transformation of the Medicines Control Council into the South African Health Products Regulatory Authority, and the provisional findings of the Competition Commission's inquiry into the private healthcare sector, which called for wide-ranging reforms of the sector.

In Chapter 2, Laetitia C. Rispel and colleagues used a health labour market framework to discuss the progress, complexities and contestations pertaining to HRH. The authors highlight both the strengths and weaknesses in the current HRH foundation, and the importance of addressing these weaknesses, and at times failures, in order to ensure high-quality health systems and the success of National Health Insurance (NHI). Key recommendations include enhancing HRH technical capacity and expertise in the National Department of Health to provide strategic leadership and support for

the entire health system; recruitment of public servants with the right skills, competencies, ethos and values; and the equitable allocation of resources to rural and underserved areas.

Chapter 3 entitled, 'Human Resources for Health planning and National Health Insurance: the urgency and the opportunity', makes the case for the institutionalisation of a co-ordinated, comprehensive health workforce planning process in South Africa. After providing a review of selected best practices in health workforce planning, Anja Smith and team call for a centralised database reflecting all cadres of healthcare workers in both the public and private health sectors. They argue for an inclusive approach to HRH planning that incorporates higher education institutions and other stakeholders to ensure greater coherence between the training and the service-delivery platforms.

In Chapter 4, Robert Mash and Klaus von Pressentin focus on family physicians, a health professional category recognised as a new speciality in 2007. They report that family physicians have been deployed in the health care system in a variety of ways. They argue that the various roles of family physicians reflect their breadth of training, but also confusion in national and provincial policy. Citing evidence, the authors suggest that in the short term family physicians have had a positive impact on health system performance and key clinical processes, but that there is little evidence of their impact on health outcomes. Recommendations include ongoing monitoring and evaluation of the impact of family physicians on the district health system in order to inform policymakers, district managers and educational programmes.

In Chapter 5, Steve Reid offers reflections on the evolution, implementation and operational challenges of compulsory community service (CS) for health professionals in South Africa over the past 20 years. He suggests that compulsory CS has been an effective strategy for recruiting professional staff to rural and underserved health facilities, but it has been ineffective in retaining them in the absence of complementary longer-term human resource interventions. Additionally, he points out that while CS has clear positive effects in terms of professional development and social investment, there have been some unintended consequences and a backlash to the compulsory nature of the programme. Reid suggests that current development of the National Strategic Plan for Human Resources for Health 2019/20–2024/25 provides a strategic entry point for developing a comprehensive long-term strategy ensuring access to health professionals in rural and underserved areas.

In Chapter 6, entitled 'A rural scholarship model addressing the shortage of healthcare workers in rural areas', Richard Gavin MacGregor and co-authors argue that the experience of the Umthombo Youth Development Fund has demonstrated that rural students from quintile 1 and 2 non-fee-paying schools can succeed at university if provided with the necessary financial, academic and social mentoring support, and that graduates will return to work in their local hospitals if it is a condition of support. Furthermore, they suggest that the training of healthcare workers in South Africa is an

economic investment, particularly if they are committed to public and rural service. The authors conclude that extension of the model may increase the number of health workers in rural areas, which is promising given that staffing rural areas is likely to be a major challenge in the successful implementation of the NHI system.

In Chapter 7, Helen Schneider and colleagues interrogate the developments, challenges and future trajectory of ward-based primary health care outreach teams (WBPHCOTs) in the country. They recap the history of the community health worker (CHW) programme in South Africa and review key dimensions of the 2017 WBPHCOT Policy Framework and Strategy. The chapter concludes with a set of recommendations addressing a number of significant constraints on performance and future development of WBPHCOTs in light of their intended role in NHI. Some of these recommendations have been earmarked for immediate attention, namely defining relationships between WBPHCOTs and governance structures at community level, defining realistic scopes of work for WBPHCOTs, and instituting systems of programme governance that enable feedback and learning across the system.

This chapter is accompanied by a case study written by Selby Maboko et al. who offer some perspectives on the factors influencing the motivation of CHWs in the Vhembe district. The case study shows that CHWs play an active role in the delivery of community-based primary health care (PHC) interventions linked to their local health facilities, but that their motivation is affected by a mix of monetary and non-monetary incentives. The authors conclude the case study with a call for adequate remuneration for CHWs, advanced training and clear career development pathways.

In Chapter 8, Andrew Scheibe et al. provide a synopsis of the global and local context for transgender women (TGW) from an HIV perspective. They describe the role of TGW outreach workers (a form of CHW) in South Africa's HIV response. They present three case studies to provide insight into how TGW outreach workers support their clients to cope with stigma and discrimination; the consequences of non-conforming gender expression; scarce employment opportunities; the inadequacies of bio-medically focused HIV services; and limited resource allocation for TGW programming. Using the case studies, the authors highlight how outreach can comprise mentorship between older and younger TGW and support community building among the women, and they conclude by identifying the uncertain funding landscape; limited interventions for socio-economic empowerment and harm reduction around substance use; and lack of access to hormone therapy and gender-affirming surgery. Recommendations are made for increased support of outreach services and initiatives that take a more multi-sectoral and comprehensive approach to TGW.

Recognising that quality initiatives to date have been uncoordinated and fragmented across the public and private health sectors, Kerrin Begg and colleagues report on the development process and content of a proposed strategic framework designed to improve co-ordination and implementation of quality strategies, including metrics to monitor and measure outcomes. They postulate that their proposed framework builds on and complements current policies and initiatives and provides stakeholders with a common language of quality, as well as a tool to facilitate policy coherence and locate initiatives in the quality cycle. Acknowledging that a significant limitation of their tool is that it remains untested, they remain

optimistic about its value in reducing the policy implementation gap. They assert that the tool's strength lies in its incorporation of the full spectrum of quality planning, control and improvement.

Chapter 10 provides an overview of surveillance of communicable diseases affecting South Africa. Vanessa Quan and Kerrigan McCarthy point out that communicable diseases constitute a significant disease burden, and they underscore the contribution of surveillance activities in strengthening health systems through providing data for action, monitoring progress, planning for service delivery, and allocation of resources. They advocate for greater surveillance of non-communicable diseases, including morbidity and mortality due to environmental and occupational harms, injury and violence. Finally, they reflect on the potential impact of the National Public Health Institute of South Africa Bill, which will broaden the activities of the National Institute of Communicable Diseases through the inclusion of public health monitoring activities that focus on non-communicable diseases and conditions.

In Chapter 11, Lesley Jane Robertson and co-authors offer a perspective on how to ensure UHC for people living with serious mental illness. They speculate that given the multiple competing health priorities in South Africa, there is a risk that the needs of those living with serious mental illness may not be addressed. Recommendations include the need for a paradigm shift in the organisation and financing of mental health services so that specialist-staffed community-based mental health services become the mainstay of psychiatric care; the development of national guidelines that describe pathways to care for people living with mental illness; and the need for health indicators to provide quality assurance regarding care outcomes and not only PHC headcounts or hospital-level data. Finally, the authors call for regular community-based clinical audits incorporating user-level outcome measures to prevent another tragedy such as the GMHMP.

As an adjunct to this chapter, the case study compiled by Romi Blumenau and Laetitia Petersen casts light on how nurses working in mental health wards cope with their jobs. They detail the experiences of nurses employed in the acute mental health care unit at Helen Joseph Hospital, including physical assault; emotional trauma, especially as a consequence of being blamed for the suicide of their patients; and inadequate security. The authors conclude with a call for more therapeutic and professional support for nurses working in psychiatric units.

Chapter 12: This year's winner of our Emerging Public Health Practitioner Award is Kganetso Sekome. He reports on the findings of a study investigating therapist perceptions and quality assessment of stroke clinical practice guidelines in a rural area. The findings suggest that the therapists had poor knowledge of the stroke clinical practice guidelines; they recognised the value of guidelines but there were numerous barriers to utilisation. Furthermore, guideline quality was rated low among all categories of rehabilitation practitioners. Recommendations emanating from the study include review and revision of the stroke clinical practice guidelines provided to rural therapists, taking into account the human and material resources in rural areas; and the development of a clear strategy and plan of action to disseminate and promote implementation of the guidelines.

The nutrition transition has contributed to increased incidence of overweight and obesity, resulting in a major public health risk. This is especially the case where dietary patterns are influenced by the

ready availability of fast foods, resulting in a high intake of fat, sugar and salt. In Chapter 13 entitled, 'Assessment of food environments in obesity reduction: a tool for public health action', Noluthando Ndlovu and co-authors describe their work in calculating the Modified Retail Food Environment Index (mRFEI) and assessing whether food environments change according to socio-economic status in Gauteng Province. The mRFEI is an environmental indicator of food access or the proportion of 'healthy stores' within a defined neighbourhood relative to all accessible stores. The premise of the authors' argument is that by measuring the food environment geographically, healthy food access gaps can be identified and nutrition-sensitive preventive interventions can be developed accordingly. The mRFEI revealed that Gauteng is a highly obesogenic environment: grocery stores are concentrated in higher socio-economic areas and unhealthier food is sold in the inner city and in poorer townships.

In Chapter 14, Flavia Senkubuge and colleagues set out to assess the four main functions of our national health research system (NHRS) in order to reach a composite score. The authors argue that South Africa's pursuit of UHC requires contextualised scientific knowledge to guide development of health system-strengthening strategies and interventions. They found that while South Africa scored considerably higher than other African countries (83.7%), there are deficits in the areas of human, financial and physical resources. They recommend urgent and concerted action to strengthen the NHRS in order to generate high-quality knowledge and promote its utilisation in population health development.

In an accompanying case study, Christopher Colvin and team share insights and lessons learned from a project that collects, synthesises and distributes health information and research to a diverse set of health system and community stakeholders. Hence, they bring together two seemingly disparate areas, namely community engagement, and health information. Insights shared by the authors will help to inform new ways of thinking about the production, circulation and use of health information as well as new forms of engagement between health systems and communities.

Chapter 15 provides a wide range of healthcare indicators, including socio-economic and demographic indicators, and indicators for specific health programmes and diseases such as HIV and maternal and child health, as well as some related to health systems, such as financing and human resources.

A new feature of this chapter is the accompaniment of an infographic for each of the 17 sections, which allows for easy access to and visual representation of key issues and trends. Additionally, Candy Day and team report on the calculation of South Africa's UHC service coverage index of 67 (marginally above the global median of 65), which is one way to measure the progress towards UHC.

While the range of data sources continues to expand, allowing greater opportunities for triangulation of data and attention to issues of data quality, reliability and timeliness, the authors note that one exception is the extent to which an accurate picture of HRH can be gleaned from routine sources. They echo the calls of many other authors for updated and accurate data for both the public and private health sectors, by specific category of health worker, and for greater inclusion of private-sector data at all levels of the health system.

The authors conclude by suggesting that for meaningful accountability, all measures of performance must be publicly accessible, transparent, vigorously interrogated, and result in effective remedial action.

This 21st edition of the SAHR remains true to its original vision, namely analysing progress in the transformation of South Africa's health system, and the extent to which health care is improved in the most vulnerable sections of our society. Common threads through all 15 chapters are the importance of accurate and quality information; strong government stewardship and leadership; and public accountability to improve population health, strengthen institutional capacity, and to enforce enabling legislation.

Importantly, we have underscored the critical importance of HRH, without which UHC will remain a pipedream. We have also demonstrated the value of different and independent perspectives on the various health sector reforms, thus enhancing the discourse on UHC. Finally, the values of equity, human rights and social justice must be central to South Africa's quest for UHC.

Laetitia C. Rispel and Ashnie Padarath
Editors

