

HSRC RESEARCH OUTPUTS

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THE ROLE OF NPOs IN PRIMARY HEALTH CARE IN SOUTH AFRICA

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BACKGROUND

- The National Department of Health, in collaboration with the European Union (EU) and the UK's Department for International Development (DFID) developed a six-year Partnership for the Delivery of Primary Health Care Programme (PDPHCP).
- The aim of the PDPHCP is to strengthen the delivery of PHC services (especially those addressing HIV/AIDS) by supporting the development of partnerships between government and NPOs.
- The programme involves contracting out some PHC services to NPOs in order to improve access, equity and service delivery.
- This study examines the role of NPOs in the delivery of PHC services in selected provinces.

SUMMARY OF METHODS

- An exploratory-descriptive study was conducted among district and sub-district health managers in five provinces participating in PDPHCP in South Africa.
- District (n = 10) and sub-district needs (n = 14) analyses were conducted in five South African provinces.
- In each case, the district/sub-district manager was interviewed using a semi-structured interview guide.
- The district and sub-district needs analysis tools used in the study (Tables 1 and 2) were developed and pilot tested in Gauteng by the Centre for Health Policy (2004).

- The tools covered the following domains: district management capacity, contextual factors influencing partnerships, Sub-district PHC coverage, access and quality and NPO partnerships
- Data Analysis was done using SPSS version 13.0
- Ethical clearance to conduct the study was obtained from the Human Sciences Research Council (HSRC) ethics committee, and access clearance was obtained from the Department of Health

RESULTS

Table 1: District Management Capacity

District Priorities	N
Potential role of NPOs can be articulated verbally by district managers	10
Potential role of NPOs in closing PHC service delivery goals written in planning documents	0
Governance and community participation	N
Mechanisms for communities and/or NPOs to participate in health services at district, sub-district and facility levels	8
Ability to partner with NPOs	N
SLAs with NPOs	8
Formal partnerships with NPOs	10
Informal partnerships with NPOs	10
NPO partnerships	10
NPO Policy	4
District mechanism for selection of NPOs	10
District mechanism to manage NPO contracts	8
Aggregated data on NPO contracts available at district and sub-district levels	8
Database of NPOs available at district level, and updated in the last year	10
Health Information System	N
Districts collect data from NPOs	8

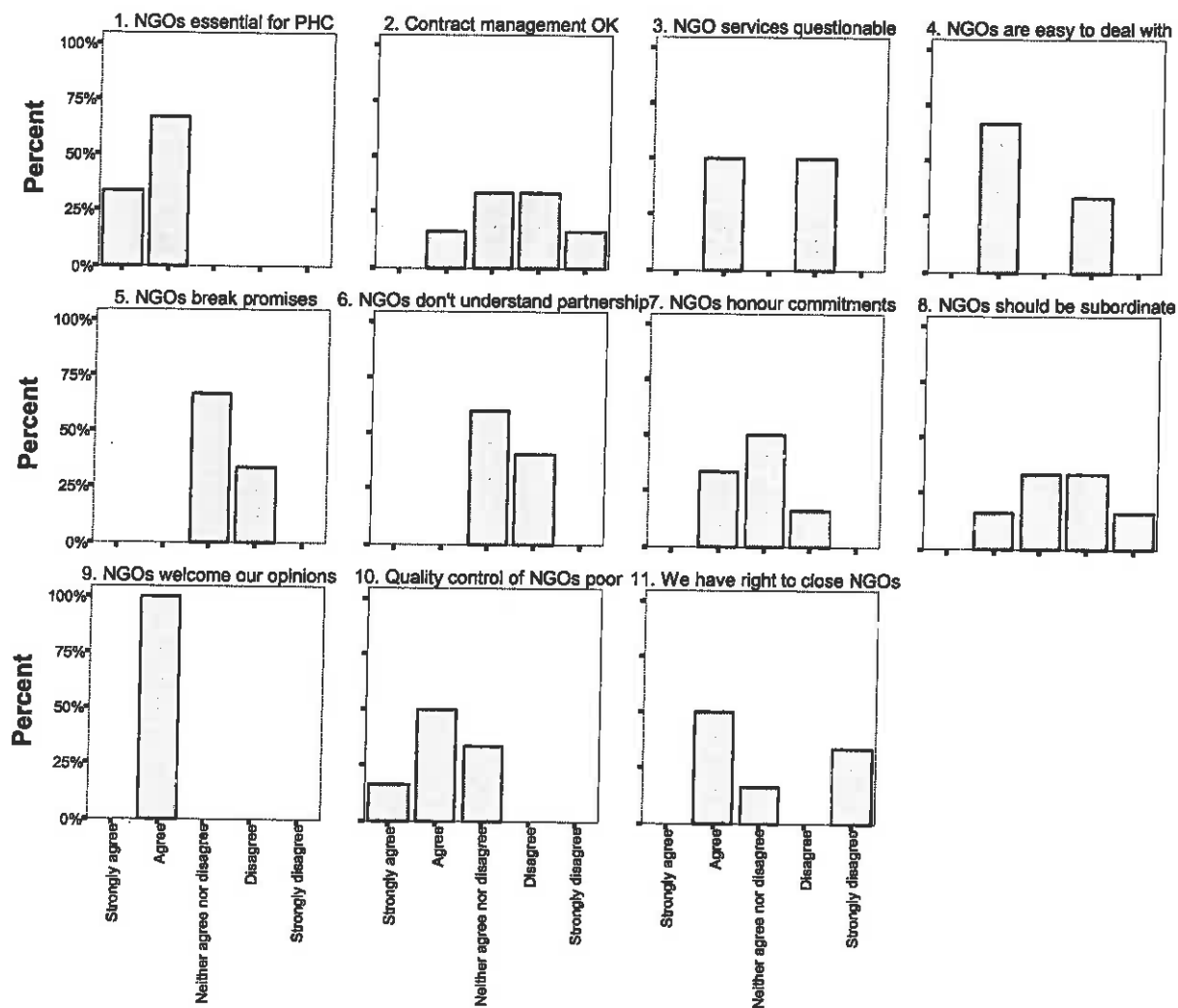
While the planning documents did not stipulate the potential role of NPOs in closing gaps for PHC service delivery, the district managers acknowledged that NPOs have a critical role to play in this regard. Service gaps identified across districts included understaffing/lack of capacity, difficulty in retaining and recruiting staff, challenges in implementing the PHC package, service disparities, inaccessibility of services/low service utilisation and limited funding. Districts generally believed that NPOs could fill their gaps in service delivery.

Table 2: The sub-district needs analysis tool included the following:

Domains	Elements	Indicators
Sub-district PHC coverage, access and quality	Government and NGO integration	Presence of integrated joint NPO management processes, n = 9
NPO Partnerships	Participation	Presence of forums involving NPOs in the sub-district, n = 14
	Referral and coordination	Existence of NPO database for the sub-district, n = 14: Referral links with NPOs: within facilities, referral outside facilities, n = 10
	Support	Provision of training or supplies to NPOs, n = 12

Districts had a good relationship with NPOs – presence of integrated management processes, existence of NPO database, referral links available and provision of training and supplies.

Figure 1: Attitudes towards NPOs - District Managers' view



- The majority of district managers felt that NPOs are essential to the delivery of PHC services
- Areas of the government/NPO relationship that appear unsatisfactory included contract management, quality of service, communication and quality control, all of which were rated poor by some of the district managers .

- Half of the district managers felt that government has the right to close NPOs, though the majority felt that NPOs should not be seen as subordinate to government (83.3%).

DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

District managers and sub-district managers involved in this study felt that the service gaps in PHC can be filled by NPOs. Therefore, all key stakeholders, including NPO service providers, need to be fully engaged, working collaboratively, if the vision of improved PHC is to be realized.

The fact that the majority of the districts had: district mechanisms to manage NPO contracts, a database on NPOs, SLAs with NPOs and either formal, informal or both formal and informal partnerships with NPOs, shows commitment of government in working with NPOs.

While the majority of district managers had positive attitudes towards partnering with NPO in the delivery of PHC services and the relationship between government and NPOs was generally perceived as good, there were areas of the government/NPO relationship that appeared unsatisfactory. These included contract monitoring, quality of service, communication and quality control, all of which were rated poor by some of the DMs as reflected in Figure 1. These shortcomings need to be addressed in order for NPOs to play their role in assisting government with the provision of efficient and effective PHC services without any obstacles. At sub-district level, all sub-district managers indicated that there was a referral system between NPOs and facilities in the sub-district in the provision of PHC services and there were forums involving NPOs in all the sub-districts that constituted the sample and there were joint management processes between NPOs and provincial and local government. Further, the majority of sub-districts in the study indicated that they provided supplies (e.g. HBC kits) to NPOs. Half of the sub-district managers perceived the relationship between the sub-districts and NPOs as good. Clearly, there is a functional relationship between sub-districts and NPOs which needs to be strengthened for the improvement of PHC services.