

- Report to the relevant chief whip on ward councillor attendance in health committee meetings.
- Report to sub-district managers in the City and the Cape Metro on facility manager attendance in health committee meetings.
- Strengthen communication between health committees and facilitate sharing of experiences.

#### Recommendations to health committees

- Improve accountability by ensuring proper financial management and adhering to a constitution.
- Strengthen relationship between health committee, facility manager and ward councillor.
- Strengthen relationship between community and health committee.

#### Recommendations to facility managers

- Attend and participate actively in health committee meetings.
- Include health committees in governance, monitoring and evaluation, and complaints.
- Recognise and support health committees.

#### Recommendations to ward councillors:

- Attend and participate actively in health committee meetings.
- Provide feedback between council and health committee.

## ADDITIONAL INFORMATION

The study on health committees can be found on the Learning Network on the Right to Health's website: <http://salearningnetwork.weebly.com>

*This webpage also contains a number of brochures and other relevant information.*

#### You can also contact:

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# Community participation in Health

A Study of Health Committees in Cape Town



THE LEARNING NETWORK

## WHY IS COMMUNITY PARTICIPATION IMPORTANT?

- Community participation helps to realise the right to health.
- Participation makes health services more responsive and improves health outcomes.

## COMMUNITY PARTICIPATION—WHAT DOES THE LAW SAY IN SOUTH AFRICA?

- The National Health Act (2003) says that all clinics or a cluster of clinics must have a health committee.
- A health committee must be composed of the facility manager, the ward councillor and representatives of the community served by the clinic.
- The provinces should stipulate the role and function of health committees in legislation.
- The Western Cape Province has yet to implement legislation for health committees.

## WHAT DID THE STUDY DO?

The Learning Network on Health and Human Rights, a network of universities and civil society organisations, conducted a study with health committees in the Cape Town Metropole.

The aim of the study was:

- To establish the number and distribution of health committees.
- To understand how health committees are functioning.
- To identify factors that affect the way health committees function.
- To make recommendations on how to strengthen health committees.

## KEY CHALLENGES FOR HEALTH COMMITTEES:

### The study identified four key challenges for health committees:

- **Reach:** The study found health committees in only 55 % of clinics – just over half. This falls short of the target in the National Health Act of all clinics having a health committee.

- **Sustainability and functionality:** There were huge variations in the functionality of committees. Many committees struggled with becoming functional and sustainable. This showed up in irregular meetings, poor attendance at meetings, difficulties in retaining members, and committees going through cycles of being dissolved and revived. Communities struggled to establish committees.
- **Role:** Health committees reported that they were unclear about their role and function.
- Mostly, what they did was to support and assist the clinic, often in a capacity of being voluntary community health care or social workers. They were to a much lesser degree involved in providing governance, ensuring that patients' needs, concerns or complaints were addressed or in monitoring and evaluating health services.
- **Representivity and legitimacy:** Health committees often struggled to be recognised as legitimate and representative structures. Processes for electing health committees were unclear. Many health committees reported the relationship with the community as a challenge. Health committees had an overrepresentation of middle-aged to elderly women and few younger people.

## Factors Affecting Health Committees:

- **Confusion about role and function and lack of clarity of their mandate:** Committees struggled to define their role and function. This was linked to lack of clarity of their mandate due to the fact that there is no legislation stipulating their role. Although the draft policy does set out roles, it has not been formally adopted or included in legislation, so most committees were not aware and did not use the policy.
- **Limited skills and capacity:** Health committees reported that they need more skills to carry out a meaningful role.
- **Limited attendance by facility managers:** Facility managers were observed to participate in only 44 % of health committee meetings.
- **Limited attendance by ward councillors:** Ward councillors were observed to participate in only 4 % of health committee meetings.
- **Lack of basic material resources and funding.** Health

committees frequently lacked access to a place to hold meetings, access to office space and equipment. Available funding did not always reach health committees.

- **Weak relationship between committee and community** made it difficult for committees to recruit members and thus impacted on their sustainability. It also impacted on committees' representivity.
- **Perceived lack of recognition and political will:** Many health committee members expressed frustration with what they perceived to be lack of recognition for their work and lack of political will to support community participation. This resulted in disengagement.
- **Lack of commitment from members** was also listed as a reason for difficulties with creating sustainable committees.

## RECOMMENDATIONS

The study made the following recommendations.

### Recommendation to all stakeholders:

- All stakeholders – policy makers, health officials, health committee members, ward councillors - should develop a shared vision for community participation.

### Recommendation to law-makers:

- Develop and implement legislation for meaningful community participation.

### Recommendations to the Department of Health:

- Develop and implement a capacity building programme, including training.
- Develop guidelines on how to form and run health committees.
- Ensure that sufficient funding reaches all health committees.
- Ensure sufficient institutional support for health committees.
- Recognize health committees.

### Recommendations to the Cape Metro Health Forum and sub- district health forums:

- Lobby for policies and support for meaningful community participation.
- Ensure accountability by ensuring that the CMHF functions according to its constitution, maintains proper financial management and reports to the Departments of Health.