

# DEPARTMENT OF HEALTH RESEARCH BRIEF

Verbal Autopsy with Participatory Action Research (VAPAR)  
Expanding the knowledge base through partnerships for  
action on health equity  
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## Local PHC decision-making: significant capacity exists and can be extended through cooperative learning

**RESEARCH:** VA PULANI VA LAHA KAYA  
VA NGA VA NJHANI VATUMBULUXI,  
VATIRHA KAHLE, VAHLAMULA?

- PHC yi lava vatrhi lava kotaka ku ngenisa pholisi eka maendlelo ya vona ya siku na siku. Leswi swi lava vurhangeri leyi endlaka leswaku vatrhi va frontline vav ana matimba yak u tihlawulela ku tarhana na swilaveko eka frontline
- Ndzavisiso lowu wu kongomisiwile ku twisisa leswaku vapulani va laha kaya van ga va njhani na vutumbuluxi, ku tirha kahle na ku hlamula eka swilaveko swa laha kaya ku antswisa khwalithi ya mphakelo wa vukorhokeri.
- Hi tirhisile rimba leri simekiweke eka swiboho na swona hi kambisisile swiyenge swinharhu swa vuswikoti byo tirha eka ndhawu ya rihanyo; district-sub-district and province levels:
  - ◇ capacity (what system needs to function, resources and capacity to use them);
  - ◇ authority (clarity in roles/responsibilities that enable staff to take action); and
  - ◇ accountability (mechanisms of responsibility within and outside system, i.e. planning, monitoring, reporting and audits, community engagement, clinic committees)
  - ◇ reporting and audits, community engagement, clinic committees)

**FINDINGS:** maqhinga lama ng ana vuswikoti kambe lama ng ariki ya xivumbeko ya hunguta, vulawuri byi le rivaleni, mintlhontho eka vutihlamuleri

- matimba ya vuswikoti → vutshila bya vulawuri lebyi nga riki bya xivumbeko na vuswikoti. Sisiteme yi tisa eka swo tala swa tipakani ta yona, na tindhawu ta ku humelela ka le henhla. Xiyimo xa le henhla xa vutlhari lebyi funghiweke na tindlela to tala to langutana na swiyimo let inga riki ta xivumbeko leti akiweke eka vuxaka bya ndhawu.
- Authority STRENGTHS → milayeni ya vulawuri leyi hlamuseriweke kahle eka swiyimo hinkwaswo, yi nyika matimba yo tirha hi ku tirhisaswiphemu na maendlelo yo hambana
- Accountability CHALLENGES → vutihlamuleri bya le handle lebyi pimiweke eka miganga. Vutihlamuleri bya le ndzeni byi tsanile etindhawini eka vanhu na swona byi kongomisiwile ngopfu eka ku fikelela swikongomelo swa matirhelo ya xiyimo xa le henhla na ku kongomisiwa ngopfu eka ku endlaka leswaku vurhangeri bya laha kaya byi koeka, ku tiyisela na vutlhari

**RECOMMENDATIONS:** CAPACITY EXISTS AND CAN BE EXTENDED WITH COOPERATIVE LEARNING TO SUPPORT ACCOUNTABILITY WITHIN AND OUTSIDE SYSTEM

- Hierarchical governance – yi tsandzeka ku hlamusela vutumbuluxi bya nkoka bya laha kaya, ku hlamula nak u tiyisela eka swiyimo swa le hansi
- Dyondzo ya ntirhisano yi nga endla leswaku k uva nak u khutaza ku tlangela ku suka ehansi kuya ehenhla nak u dyondza nak u ncinana loku simekiweke eka ntiyiso
- Tipulatifomo too dyondzati nyika swivandlanene swa vuhlanganisilebyi antswisiweke exikarhi ka xifundzankulu na xifundzantsongo, ku hlohlotela mbulavurisano lowu akaka eka swiphico na tindlela ro hlamula



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FRAMEWORK 1	STRENGTHS	CHALLENGES
<p><b>Capacity:</b> resources (administrative, technical, organisational, financial and human resources) and capacity to manage</p> <p><b>Staffing:</b> control over hiring, payment, performance assessment and management, and motivation</p> <p><b>Financial:</b> adequacy, regularity, flexibility, predictability</p> <p><b>Management:</b> (planning and management technical skills) staff, medicines and supplies and infrastructure, access to information and ability to use it</p> <p><b>Leadership:</b> ability to create and share organisational vision and motivate staff</p>	<p><b>Facilities</b></p> <ul style="list-style-type: none"> <li>Vuswikoti lebyikulu eka vufambisi bya ndhawa na nhlengeletano ku antswisa vukorhokeri</li> <li>Vaphakeri lava enerisiweke swinene hi muxaka wa ntirho wa vona na swona hi ku angarhela hi vuxaka na vatirhikulobye</li> <li>Ku tinyiketela loku tiyeke ka munhu hi xiyexe</li> <li>Ku hlamula eka ku pfumaleka, vatirhi van'wana va tirha ehandle ka xiyenge xa xiphurofexinali lexi lerisiweke</li> <li>Informal strategies: sharing supplies; shortening length of prescriptions; or ordering more supplies than warranted owing to regularly receiving less than is ordered</li> </ul> <p><b>District/sub-district</b></p> <ul style="list-style-type: none"> <li>Vupulani bya lembe na lembe lebyi nga na tshembo mayelana no fikelela swikongomelo loko byi ri karhi byi amukela ntiyiso wa sisiteme leyi nga riki na switirhisiwa na ley inga tirhiki kahle</li> </ul>	<p><b>Facilities</b></p> <ul style="list-style-type: none"> <li>Staffing ku pfumaleka ka va tirhi va rihanyo na swi vandal leswi swi nga enelangiki</li> <li>Competency gaps (e.g. in IMCI), ku pfumaleka ka nseketelo, nsusumeto lowu ng ariki wunene, vulawuri lebyi nga tollovelekangiki na ndzetelo.</li> <li>Infrastructure/supplies: ku pfumaleka ka makamara yo vulavurisana, ku yimisiwa ka mati. Vuhumelerisi vya le henhla ku tlula lebyi lawulaka. Ku tala ka vanhu, ku rindza nkarhi wo leha, ku hlwela/ ku tlheriseriwa endzhaku ka ku burisana.</li> <li>Ku pfumaleka ka vulawuri bya ku xava bya laha kaya → mphakelo wa mirhi lowu kavanyetiweke</li> <li>Ku pfumaleka ka vupulani bya vuhlayiseki. → hambi ku ri tihakelo letitsongo to hlayisa swa tika ku ti fikelela eka mpimanyeto wa le xikarhi.</li> <li>Ku pfumaleka ka ti ambulensi. Vaongori a va swi koti ku fikelela miganga ku seketela ti CHWs</li> <li>Information: rungula leri nga nyawuriki malunghana ni xivangelo xa rifu, ku pfumaleka ka rungula malunghana ni swiendlakalo swa nkoka leswi sivelaka.</li> <li>Vulawuri bya fayili ya muvabyi byi na xiphiqu, HMIS ku tirhisiwa ku hundziseriwe eka xiyimo xa rixaka</li> <li>Strategy: migingiriko yo tala hi ku angarhela ley inga tshamisekangiki/ ku tika-ngopfu → mbuyelo wu lawuriwa ku kombisa nhluvuko.</li> </ul> <p><b>District/sub-district</b></p> <ul style="list-style-type: none"> <li>Staffing: ku pfumaleka ka vatirhi, ku ncinca ka mali ya le henhla, ku ngavi kona entirhwani, xivumbeko xa nhlengeletano lexi ngariki xi nene, ku pfumaleka ka ku fikelela</li> <li>Ku thoriwa loku nga exikarhi hikwalaho ka maendlelo yo biha → ku hlwela ko leha ku thola hambi ku ri vatirhi va nseketelo va xisekelolo</li> <li>Swivilelo swa vatirhi mayelana nak u pfumaleka ka vuhlayiseki: nsirhelelo wa munhu hi xiyexe eka minhlaselo na tindhawa to tirhela eka tona let inga riki kahle.</li> <li>Infrastructure/supplies: swi tirhisiwa swankoka a swi kumeki hikwalaho ka swipimelo swa mpimanyeto</li> <li>Ku vekiwa exikarhi ka mpimanyeto wa vuhlayiseki, ku durha nak u fikelela nak u nga tshembeki → kuttsandzeka ka vu hlayiseki</li> <li>Vufambisi bya mphakelo byi nonoka na swona vuswikoti bya vatirhi byi kanakaniwile → ku hlwela kaku xava</li> <li>Ti CHC let inga phakeriwangiki kahle, let inga enelangiki na let inga hangalasiwiki kahle</li> <li>Ku tirhisana loku ka vukorhokeri bya rihanyo exikarhi ka PHC na swiyimo swa le henhla</li> <li>Finance and support services centralised → vuswikoti lebyi nga nyawuriki exikarhi ka vatirhela-mfumo va muganga</li> <li>Ku hava minongonoko leyi mpimanyeto yiy avelaka eka muganga na xifundzantsongo, ku hunguta maavelo eka xiyimo xa xifundzankulu</li> </ul>



FRAMEWORK 1	STRENGTHS	CHALLENGES
		<p><b>Province</b></p> <ul style="list-style-type: none"> <li>Staffing: ku thoriwa hakanyingi ku seketeriwe eka ti-network ta munhu hi xiyexe → ku pfumaleka ka vuswikoti. Ku thoriwa loku nga exikarhi hikwalaho ka maendlelo yo biha → ku thola ka yima, va tirhi lava nga seketeriwangikihi timali kumbe ku hangalasiwa hi Ndlela leyinene</li> <li>Swiphiqo swa mpimo wa vatirhi na vuswikoti, ndzetelo lowu nga enelangiki</li> <li>Infrastructure/supplies: ku xavisiwa ka tithendara, ku pfumaleka ka mphakelo, khwalithi ya le hansi, maendlelo yo biha ya vuhlayiselo na vulawuri bya switoko, switirhisiwa leswi ng ariki eka xiyimo lexinene xo tirha</li> <li>Information: hi ku ya hi DHIS na ndzavisiso wa nkarhi na nkahri, swivandla ku suka eka xiyimo xa vaaki.</li> <li>Strategy: vufambisi byo biha bya phurojeke , 'vulawuri bya xiphiqo</li> <li>Finance: mipimanyeto leyi averiweke nakambe handle ka xikongomelo lexi lulamisiweke → swi kavanyeta mphakelo wa vukorhokeri</li> <li>National Treasury reports misappropriation, Auditor General reported R310M irregular expenditure 2017/18</li> <li>Resource shortfalls/low spending per capita: initiatives (eg Ideal Clinic) come with no additional funding</li> <li>Annual budget not aligned with population growth, unequal expenditure across districts/ sub-districts</li> </ul>

FRAMEWORK 2	STRENGTHS	CHALLENGES
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FRAMEWORK 3	STRENGTHS	CHALLENGES
<p><b>Accountability:</b></p> <ul style="list-style-type: none"> <li>vertical systems within an organisation, such as planning, target setting, supervision, monitoring, reporting and audits,</li> <li>Community accountability to strength public accountability through direct involvement of clients, users or the general public in health service delivery. formal mechanisms such as health facility committees and hospital boards.</li> </ul>	<p><b>Facilities</b></p> <ul style="list-style-type: none"> <li>CEO/hospital management team report to hospital boards. Equivalent is clinic committee at PHC level. Committees should be made up of elected community representatives/health professionals allowing concerns to be heard/addressed</li> <li>Portfolio Committee report 2017/18 reports constraints to functionality in some hospital boards and that community protests have resulted in the removal of some CEOs, indicating a form of informal accountability claimed by communities</li> <li>Litigation becoming common, mainly has consequences for provincial budgets more than for facilities or practitioners.</li> <li>Audits/adverse event reporting/committees part of QA process, committees vary in activity</li> </ul>	<p><b>Facilities</b></p> <ul style="list-style-type: none"> <li>Ti bodo ta swibedlhele tina matimba ku katsa nak u ya eka vurhangeri bya xifundzankulu na swiphiqo kambe ti tala ku nga/ta ku kongomisiwa eka swilo swa nkoka swa tipolitiki → ti bodo ti nga pfumala vuswikoti</li> <li>Tindlela to hambana to seketela ku nghenelela ka vaaki: tisisiteme ta swilaveko, ndzavisiso waku eneriseka nak u vika minkarhi yo rindza, kambe a yi voniwi tanihi leyi heleke</li> <li>Titlilini leti lavekaka ku khoma masiku yo pfuleka tanihi xiphemu xa kungu ra titlilinkilerinene, hambiswiritano k uva kona loku nga nyawurikina ntikelo, miganga hi ntolovelose yi tiva vukorhokeri bya titlilini</li> <li>HBCs, CHWs and WBPHCOTs va hlanganisa miganga/ switirhisiwa. Hambiswiritano, swilaveko swotala, ku xiximiwa loku nga nyawuriki, ku hava switirhisiwa leswi engetelekeke, xileriso lexi ndlandlamukaka hi xihantla</li> <li>Titlayente ti tirhisa swiendlo swo kongoma k uku tlula tindlela ta ximfumo ku lulamisa swivilelo. Leswi swi ni swiphiqo, ku sindzisa swibalo swa sisiteme. A va yimeli swibumabumelo leswi ringaniseriweke/leswi akaka ku suka eka vaaki</li> </ul>



FRAMEWORK 3	STRENGTHS	CHALLENGES
	<p><b>District/sub-district</b></p> <ul style="list-style-type: none"> <li>Vutihlamuleri byo ya ehenhla - clear (quarterly reviews and annual reports against targets)</li> <li>Main accountability of the MCWYH programme coordinator is to DHMT, rather than to technical leads at provincial level</li> </ul> <p><b>Province</b></p> <ul style="list-style-type: none"> <li>Swivumbeko swa ximfumo swa vupulani, ku veka mpimanyeto na swikongomelo swa matirhelo eka APP.</li> <li>Range of structures/processes in provinces aligned to national governance</li> <li>Vutihlamuleri byo ya ehansi - designed to be bottom-up (district plans feeding provincial plans) however reverse happens in practice (see next column)</li> <li>Vutihlamuleri bya nhlangeletano-tindlela leti tiyeke</li> </ul>	<p><b>District/sub-district</b></p> <ul style="list-style-type: none"> <li>Vutihlamuleri byo ya ehansi – swihlanganisi swa switirhisiwa swi pimiwile, na swona kuvulavurisana loku yimisiweke hakanyingi ku titshege hi vuxaka bya munhu hi xiyexe</li> <li>Vutihlamuleri byo ya ehenhla – mbuyelo lowu humaka laha henhlla wu tala ku kongomisiwa eka swiphiko, ku tlula ku tiveka, ku twisisa, ku seketela nak u endla leswaku vurhangeri bya ndhawu byi koteka, vulawuri na vutumbuluxi</li> </ul> <p><b>Province</b></p> <ul style="list-style-type: none"> <li>Vutihlamuleri byoya ehansi -swifundzankulu swi veka swilo swa nkoka/swikongomelo leswi avaneke exikarhi ka swifundzankulu → swidundzha swi pfumala vun`wini bya swikongomelo, matirhelo ya xifundzankulu/vutihlamuleri a by vonaki</li> <li>Mpimanyeto leyi ku vuriwaka leswaku yi vekiwa ehansi ku ya ehenhla hi ku ya hi tipulani, entiyisweni yi vekiwile ehenhla-ehansi na vafambisi lava nyikiweke silingi yo tirha endzeni</li> <li>Mpimanyeto ya minongonoko yi avela ku ncinca ka swilo leswi rhangisaka emahlweni (ku katsa swa ti politiki), na vafambisi lava hlanganisiweke ku antswa hakanyingi va sirheleriwa eka ku hambana → switekela ehansi vutihlamuleri</li> <li>Switandzhaku swi nga ri swingani eka vufambisi byo biha/ku tlula nawu, nhlamulo yo biha eku lulamiseni ka swivangelo swa timintsu swa mimbuyelo yo biha ya oditi, nak u pfumaleka hi ku angarhela ka vulawuri bya nkoka</li> <li>Vutihlamuleri bya munhu hi xiyexe-hakelo na swigwevo swi hlawula</li> <li>Vutihlamuleri byo ya ehenhla – ku ya eka xiyimo xa rixaka (or technical support from it) slimited unless programmes recipients of national conditional grant (for HIV/AIDS, STIs and TB)</li> <li>Minongonoko yi`wana yi titshege hi ku hangalasiwa ka lembe na lembe ku ya hi APP ya xifundzankulu ku suka eka ali yo ringana yi kumeka u suka eka xiyimo ya rixaka.</li> </ul>



FRAMEWORK 4	STRENGTHS	CHALLENGES
<p><b>Context</b> Socio-cultural and political factors influence all these relationships, which together affect roles and responsibilities in the health system, its responsiveness and how resources are used</p>	<ul style="list-style-type: none"> <li>• Constitutional commitment to the right to health and community participation for PHC (National Health Act, 61 of 2003).</li> <li>• Significant pro-poor, equity-oriented reforms include: National Health Insurance PHC Re-engineering including Ward-Based Primary Healthcare Outreach Teams (WBPHCOTs) decentralising PHC to community level;</li> <li>• Kungu ra tlilini lerinene, leri nyikaka rimba ra khwalithi ya rixaka</li> <li>• Tipulani ta matirhelo ta lembe na lembe ta rixaka ti langutana na nhluvukiso wa vatrhi na ku pulana hi migingiriko eka ku thoriwa ka swichudeni hi ndlela leyi tiyisaka, swihlohoeri swa timali, ku thoriwa ka vatrhi va le matikweni mambe na vukorhokeri bya ndzetelowa le ndzhaku lebyi bohaka xikan'we na ku tinyiketelaku tiyisisa vatrhi va rihanyo ra vaaki hi ku tirhisa National Health Insurance (NHI) na National Development Plan (NDP)</li> </ul>	<ul style="list-style-type: none"> <li>• swivandla leswikulu swi kona exikarhi ka pholisi na ku tirhisiwa</li> <li>• ku vekisiwa ka mali loku nga heriki, xiphiso xa switirhisiwa swa vanhu, vukungundwana lebyi hangalekeke, vuhlayisi byo biha na switirhisiwa leswi onhakaka.</li> <li>• ndzhwalo wa 'mune' ewa ku fa loku ng ana xivumbeko xa ntshamisano lowukatsaka mavabyi lama tlulelaka la ma nga tshungulikiki, swiyimo leswi nga tlueleriwiki, ku fa ka va manana na vana, na ku fahikwalaho ka ku vaviseka na madzolonga</li> <li>• Ndzhwalo wa HIV wu le henhla na swona a wu ringani swinene. Ku hangalaka eka vaaki va ntima l 40-50 ku tlula eka valungu na swona eka vuhlangi makhombo ya tlakukile minkarhi ya ntsevu eka va xisati ku tlula vaxinuna.</li> <li>• Mpimo wa vusweti bya vana wu lehenhla swinene naswona Gini coefficient eka 63 yi le henhla swinene emisavenihinkwayo laha vunyingi bya vaaki va vantima va tshamaka va ri na swiphiso</li> <li>• ku pfumaleka ka mintirho exifundzeninkulu a ku ri 35% laha 51% a va hanya evuswetini</li> <li>• hi 2015, ku languteriwa ka vutomi bya vavanuna na vavasati a ku ri 50 na 53 wa malimbe hi ku landzelana, e hansi ka xiringaniso xa tiko xa 60 na 67 wa malimbe, naswona ku faehansi ka 5 a kuri 41 wa mafu eka 1000 wa ku velekiwa loku hanyaka hi 2012, leswi ringanisiwaka etikweni hinkwaro.</li> </ul>

FRAMEWORK 5	STRENGTHS	CHALLENGES
<p><b>Interactions</b></p>	<ul style="list-style-type: none"> <li>• Vuswikoti na vulawuri na swonaswi lava ku famba hi magoza loko switirhisiwa swi ta tirhisiwa kahle</li> <li>• Tindlela ta vutihlamuleri bya vukorhokeri hakanyingi a ti siveriwa matirhelo ya maendlelo ya vutihlamuleri bya le handle</li> </ul>	<p>Laha vuswikoti bya switirhisiwa byi welaka ehansi eka leswi lavekaka eka matirhelo ya nhlango, vafambisi van ga ha tirhisa tindlela to teka swiboho let inga riki ta xivumbeko ku hetisisa vutihlamuleri na ku hunguta xipimelo xa vukorhokeri</p> <ul style="list-style-type: none"> <li>• <i>Tindlela ta vutihlamuleri bya vukorhokeri ti talaku siveriwa matirhelo ya tindlela ta vutihlamuleri bya le handle/vutihlamuleri bya vukorhokeri by inga pfaela vutihlamuleri bya vaaki ku tumbuluxa "ndhavuko wa ku landzelela" lowu kongomisaka ngopfu eka mintirho ku tlula mimbuyelo.</i></li> </ul>