











"EQUITY GAUGE"

A TOOL FOR MONITORING EQUITY IN HEALTH AND HEALTH CARE IN SOUTH AFRICA

-  [Introduction](#)
-  [Background](#)
-  [Project Development](#)
-  [Aims and Objectives](#)
-  [Equity Gauge Contents](#)
-  [Sources of Information](#)
-  [Facilitating the Use of the Equity Gauge](#)
-  [Activities of the Project to Date](#)
-  [Project Evaluation](#)
-  [Reflections on the Project to Date](#)

Introduction

The Equity Gauge is a national project established to help South Africans measure if their health is improving. It also helps measure if health care is being provided in a way that is fair and equitable. The project is a partnership between South African Legislators and the Health Systems Trust, a Non-Governmental Organisation established in 1992 to support the transformation of the health system. The project is funded by the Henry J. Kaiser Family Foundation (USA) and the Rockefeller Foundation.

Background

South Africa is one of the most inequitable societies in the world. Since 1994 there has been some progress in provision of basic determinants of health to the most needy sections of society (access to water and electricity has increased, and provision of free primary health care to all, as well as free care at all levels for children under 6 has been introduced). However the picture of inequity is still bleak. Whilst the homelands no longer exist in any formal sense, their legacy remains, impacting harshly upon the lives of those who live in these areas. Whether equity in health and health care is measured by health status, by province, by race, or according to the urban/rural divide, it is almost exclusively, poor, African people, whose lives are most impoverished by inequity in South Africa.

South Africa does however have one of the most progressive constitutions of any country in the world. The South African government seeks to promote equity. To that end, the Constitution and policies of government commit the country to a national goal of "equity". The Reconstruction and Development Programme which is still regarded as the blueprint for social re-organisation in South Africa highlighted equity as one of the fundamental principles upon which the new unified health system should be based. The White Paper on Transformation of the Health System released by the Department of Health further expanded on this principle with a number of equity-based core objectives.

National and provincial legislators have a dual function that couples the development and ratification of policy, with an oversight function to monitor policy implementation. It is generally acknowledged in South Africa that many of the necessary policies are now in place to ensure the promotion of equity, and that attention needs to be focussed on implementation. However the legislative arm of government has very little access to technical support to enable it to undertake its oversight function. The National Assembly Health Portfolio Committee has one researcher, none of the nine provincial health committees have any

formal research support.

Project Development

The Equity Gauge Project was developed by the Health Systems Trust (HST), a non-governmental organisation established to support transformation of the health service, in conjunction with national and provincial parliamentarians. During 1998 consultations were held with the national health and finance portfolio committees. These meetings highlighted legislators' commitment to monitoring equity as well as their concern as to whether they had the capacity to do so. Subsequently a national meeting brought together legislators and technical experts and laid the groundwork for the project. The meeting identified indicators about which legislators required information. It also enabled legislators to articulate their need for support in using information. A smaller meeting held after this fleshed out project priorities and a project outline was developed. The project now represents a formal partnership between the legislators and the HST and the chairperson of the Health Portfolio committee chairs the project steering committee.

Aims and Objectives

The aim of the "Equity Gauge" is to establish a set of benchmarks by which progress towards equity in health and health care can be monitored over time, and to facilitate its use and application. Specifically, the Gauge seeks to achieve the following objectives:

- To define, measure and monitor a core set of indicators for assessing progress towards equity in health and health care provision;
- To facilitate the use of information provided in the "Equity Gauge" by national and provincial legislators, and local government representatives, to monitor equity;
- To instill the notion of monitoring equity as a key strategy for the promotion of equity among the media and the general population of South Africa;
- In addition, legislators are supported with information relating to how the health system functions and the processes followed within government for budgeting and resource allocation;
- A subsidiary aim of the gauge is to strengthen the accessibility and quality of health data.

Equity Gauge Contents

Key indicators for the determinants of health, health status, resource allocation (financial, human, drugs) and quality of health care provision are included in the Gauge. Wherever adequate information exists indicators are measured in such a way that they can be used to monitor differences and trends between the public/private sector divide, geographical areas (provinces and districts and rural/urban areas), race, gender and disability.

Sources of Information

The Equity Gauge draws from both primary and secondary data sources. Wherever relevant, up to date information is available this is used. Research is commissioned in areas where no reliable or up to date information exists. For example, following the introduction of the District Health System little information was available regarding infrastructure and quality of care in public sector clinics. A facilities survey covering 10% percent of the country's clinics and a large proportion of district hospitals was commissioned by HST to address this gap.

Facilitating the Use of the Equity Gauge

A number of strategies have been identified to encourage effective use of information contained in the equity gauge:

- Legislators, particularly within provinces are generally poorly resourced with regard to research capacity. With a view to strengthening information and research support to provincial health committees two information officers help identify specific information and research needs of legislators and develop appropriate corrective measures that will enable legislators to deal with information provided to them. Careful attention is given to ensuring that all information produced for legislators is presented in an accessible and inviting format. Material is pre-tested before it is published to ensure its relevance and comprehensibility.
- Support is provided to legislators to help them use information from the Equity Gauge and other relevant research. This support comprises workshops and seminars as well as written material on issues of concern to legislators.
- In order to increase legislators' understanding and knowledge of the reality of health care at a District level, visits are arranged for legislators to go to districts to gain a first hand impression of implementation at the primary care level.
- Research results are publicised to encourage debate about the issues and promote action where inequity persists. The Equity Gauge works with journalists from TV, radio and newspapers.

Activities of the Project to Date

The whole-hearted involvement on the part of national and provincial legislators indicates that the project has identified a real need and is contributing to meeting that need. Although a formal evaluation of the project is only due to commence at the beginning of 2000 the range of activities undertaken by the project demonstrate that some objectives are already being met.

Project Development

During the development phase of the project there was active participation on the part of members of key national and provincial legislative committees. This enabled the project to prioritise areas about which legislators needed more information and get clear guidance as to the areas in which legislators required support.

Project Management

The chairpersons of four key national committees and three of the nine provincial health committees are represented on the project steering committee. A technical advisory group supports the project in its work of measuring and monitoring equity.

Project Launch

A formal launch of the project took place in January 1999 when the findings from two HST publications focussing on Equity in Health and Health Care, the 1998 South African Health Review and the Facilities Survey, were published. There was coverage of the launch in eight newspapers, six regional radio stations and an item on the main news bulletin of the national radio and TV stations.

The June 1999 elections meant that interaction with legislators was constrained from the period between February and early September 1999.

Building the relationship between the project and legislative committees

Since September 1999, presentations about the project were made to two national committees and most of the nine provincial committees. The purpose of these visits was to meet with the committees, introduce the project to them and explore areas in which the project could be of assistance.

Workshops

During the developmental phase of the project, an issue that was continually highlighted by legislators was their need for support to enable them to participate effectively in the budget process. One of the first tasks of the project was to develop the curriculum and materials for a workshop to meet this need. To date workshops on the budget process have been organised and run for five of the provincial committees.

Site Visits

A key strategy of the project in empowering legislators to understand the realities of service provision is the arranging of visits for legislators to health districts. Two site visits have already taken place in which national and provincial legislators have been exposed to the impact of inequity on health care provision. Visits are accompanied by a workshop in which legislators have the opportunity to explore possible solutions to problems encountered as well as address policy implications of the findings from the visit. Feedback from participants has indicated that they have made use of the information gleaned on site visits during Parliamentary and Committee discussions.

General Support

The National Portfolio Committee on Health holds hearings for the national and provincial departments of health. The Equity Gauge project assisted in these hearings by working with the committee in developing questions to put to the department of health to ensure that issues of equity are foregrounded. The committee and the project are writing the report of the hearings jointly. At provincial level, the project is assisting committees by reviewing provincial department of health budgets and making submissions to the hearings.

Project Materials

The Equity Gauge and a booklet on the Budget Process have been developed and were launched at the beginning of December 1999. The launch was attended by the chairpersons of three national and seven provincial committees, two mayors along with committees members and media representatives. The 1999 South African Health Review, an annual publication of the HST with equity as one of its prime foci, was launched in Parliament in February this year. Chapters of the Review of particular import for legislators were summarised in short "Briefing Summaries". The Deputy Minister of Finance, committee chairs, and representatives from academic institutions and the media attended the launch which was covered on national and local TV and Radio as well as stories being run in many newspapers.

Project Evaluation

A formative evaluation is planned to commence in 2000. The purpose of the evaluation is threefold. Firstly, to record the activities and impact of the project; secondly, to ensure that lessons learnt are documented; and finally to highlight possible ways forward for the project.

The evaluation will aim to document:

- How legislators use the materials developed by the project including the equity gauge itself; and a booklet on the budget process as well as other material which may subsequently be developed;
- The impact of interventions made by legislators on the quality and equity of health care delivery;
- Any progress towards equity with regard to the determinants of health, and what might be attributed to the project;
- Problems experienced by legislators in attempting to fulfill their oversight function;
- Participation by, and role of media in the project;
- The design, management and implementation of the project.

An interim report will be available in 2001.

Reflections on the Project to Date

Legislators are extremely busy. Many provincial legislators sit on more than one committee, and most committees cover more than one area. For example, most provincial standing committees on health also have welfare as part of their remit. In addition, although the legislative agenda is now beginning to level off, until recently the agenda has been extremely full. These factors limit the time available to legislators to participate in training and site visits.

South Africa still has limited data available with which to measure and monitor equity. For example the first ever South African demographic health survey was undertaken in 1998. Much of the data that is available does not enable analysis of equity according to different racial groups or according to gender. While some data allows for comparisons between rural and urban areas, rarely is there information to analyse the situation in peri-urban areas. Additionally the slow process of establishing health districts is inhibiting the development of effective monitoring of resources at the district level.

A major challenge for the project is to develop tools and indicators for monitoring equity in the context of the HIV/AIDS epidemic in South Africa. Many health status indicators will become much worse over the next few years. For example life expectancy dropped from 65 to 55 years between 1995 and 1999. The project is participating in discussions searching for reliable indicators that are sensitive to progress in achieving equity in this environment.

The underlying aim of the project is to provide legislators with information that can assist them in policy formulation. It is not yet clear as to whether legislators will be able to influence the executive branch of government should information from the equity gauge point to the need for policy in conflict with that being pursued by the executive.

Last edited: 10 November 2000
