



Governance, Equity, and Health

An IDRC Program Initiative

ASSESSING THE IMPACT OF HIV/AIDS ON HEALTH SERVICE CAPACITY

Project Profile

South Africa has one of the fastest growing HIV/AIDS epidemics in the world, with over 5 million of its 42 million people HIV-infected. The resulting impact on South Africa's health sector has been profound. HIV/AIDS has directly affected—and infected—the health system's human resources, expected to lose one-fifth of its employees to the disease over the next few years. Absenteeism and high levels of attrition due to HIV-related illnesses and death have contributed to the enormous strain on South Africa's health sector.

This depletion of human resources in the health sector has been exacerbated by the disease's increased demands upon the system. Over the past several years, South Africa has seen the rapid introduction, piloting and expansion of HIV services at the primary and community level, including the provision of voluntary counselling and testing, prevention of mother-to-child transmission and home-based care programs. In August 2003, the South African government took the nation a crucial step closer to the roll-out of an antiretroviral treatment programme. The corresponding pressures on primary care services—typically nurse-driven—have increased dramatically.

This "double impact" of HIV on South Africa's health system, where depleted human resources must address a scaled-up HIV response, will be one of the defining challenges for South Africa's health system. If there is to be a more equitable and efficient use of health resources, then the way in which the scale-up of HIV services occurs in the context of general health service delivery is critical.

As primary health care services (PHC) form the basis of South Africa's HIV strategy, how will the scaling-up of HIV programs impact upon human resources and the quality of HIV services?

In the context of a health system that has the basic management and health infrastructure in place, this project is currently studying two sites rendering primary-level care, taking a comparative approach. One is an urban "township" site in Cape Town and the other is a remote rural site in the Eastern Cape.

Selected township areas in Cape Town have seen a progressive introduction of HIV services over the past few years, and have put in place a range of infrastructural and support measures. Assessing and tracking the implementation of HIV services in Cape Town provide evidence and lessons of a "best-case scenario" in the South African context.

Most rural areas of the Eastern Cape, on the other hand, have seen very little HIV-related activity, and are already struggling with the provision of even the most basic services, thus providing a "worst-case scenario". What lessons can be learned for all aspects of HIV treatment roll-out by comparing developments at both sites?

PROJECT OBJECTIVES

The overall objective of this project is to examine how HIV and the scaling-up of HIV programmes are impacting upon human resources and the quality of HIV services in an effort to strengthen primary health care.

Specifically, the project aims:

- To gain a better understanding of HIV/AIDS and intervention programmes on basic service delivery at the primary level.
- To reveal policy and governance processes impacting on HIV programme intervention.
- To use insights gathered from situational assessments for the development of assessment, advocacy and intervention methods and tools, which can be used by planners and managers at the district and provincial level.
- To share processes, insights, methods and tools with partners and interested institutions/health departments from countries in the region—including Namibia, Botswana and Zambia.

METHODOLOGY

This is an in-depth study, aimed at providing a textured, context-sensitive view of two different PHC sites, which each already cope with the dramatic impact of HIV on service delivery and which will in future be expected to provide expanded services. The study draws on and makes use of an increasing range of survey-type data and information, generated by the University of the Western Cape (UWC) and outside projects (Equity Gauge, WHO study, HSRC study), but it explicitly focuses an in-depth, micro lens on service delivery.

It will develop tools and methodologies aimed at assisting planners and managers particularly at the district level to read and understand the environment within which they will have to deliver services, to assess capacity and needs and to develop appropriate responses. In doing so, it should assist planners and decision makers at provincial and national levels to better understand aspects of policy implementation, thus enhancing planning and management capacity at higher levels of decision-making.

The project will take into account the political and policy context surrounding service delivery and will explore the existing and potential role of community awareness, mobilization and support in expanding and improving HIV/AIDS management.

The study aims to be participatory and action-oriented, involving all stakeholders actively in the research process through workshops, self-reflective data collection and feed-back sessions. Key role players will be health workers in selected sites, district managers, key policy makers at national, provincial and local authority level, district training officers, members of clinic or community health committee members.

It will interact with other projects in the region looking at similar issues—including the Cape Town Equity Gauge, UNICEF and WHO/Afro.

EXPECTED OUTCOMES

The project will make a contribution in strengthening issues of health personnel and their management in dealing with the issue of HIV/AIDS. Specifically, the project will provide:

- a set of tools to assess and plan integrated HIV programme development in generally accessible form;
- a process of awareness-raising and planning with policy makers and service providers
- a number of written policy briefs addressing systems aspects of HIV programme development, targeting mid-level managers, policy makers and legislatures at provincial and national levels;
- papers in policy- and academically-oriented publications.

PROJECT CONTACT

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