

# Recommendations

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**T**his issue of the *South African Child Gauge* outlines some of the key issues affecting children's health in South Africa. Described in simple lay terms, this information is designed to enable policy-makers, practitioners, educators and civil society to identify potential problems, draw on best practice and take action to realise children's rights to health in South Africa.

There were many challenges in putting this *Gauge* together. Recent and reliable data on child mortality are still not available, clinical problems could not be covered in scientific depth because of the diverse nature of the readership, and space restrictions demanded that some important causes of child mortality, such as neonatal deaths and malaria, could not be covered.

Nevertheless the essays indicate that, with commitment and focus, it is possible to address many of the key impediments to child health in South Africa. The following four steps are an essential part of the way forward.

## **Address the social determinants**

As indicated in the previous essay, and indeed throughout this issue of the *Gauge*, the most profound influences on children's health in South Africa are environmental and social factors – household and child-rearing behaviours (pregnancy spacing, hygiene, breastfeeding), food and water supplies, sanitation, housing and long distances from health facilities. As a middle-income country, South Africa should be doing far better, and there remain huge disparities in health between the well-off and the poor. Therefore, the first priority is for policy-makers, health professionals, researchers, teachers, and communities themselves to advocate for greater equity in these social and environmental determinants.

## **Improve delivery of health care services**

There is also much that can be done to improve the delivery of health care services in South Africa. The inequitable distribution of resources between the private and public health care system is part of the problem, but it is also essential to breathe new life into the public health services. Good governance, especially at district level, is essential to improve the quality and coverage of care. Children's health services also need to be prioritised, especially the promotion of exclusive breastfeeding and timely complementary feeding along with child spacing and the Integrated Management of Childhood Illnesses (IMCI).

## **Strengthen community-based care**

South Africa's problems are typical of a developing country, and priority needs to be given to diseases of the poor. This requires a shift in focus from doctor-centred curative medicine to a primary health care approach that prioritises community-based and preventative services. Community health workers have an essential role to play in improving the coverage of essential maternal, child health and nutrition interventions.

## **Build partnerships**

Ultimately, the health of South Africa's children is a collective responsibility. While the Department of Health has a key role to play in providing leadership and prioritising services for children; doctors, nurses and community health workers need to realise this vision through the provision of child-friendly services. Partnerships with other government departments and civil society are essential in addressing the underlying causes of childhood illness and injury. Communities, caregivers and children need to play an active role in promoting their own health and development. The following recommendations draw on the findings of the *South African Child Gauge 2009/2010* to point the way forward on how the Department of Health, together with other key role players, can help advance children's health in South Africa.

## **Policy-makers, planners and administrators**

### **Set priorities**

Work with child health practitioners to define a package of essential health care and nutrition services for children and their mothers.

### **Improve efficiency, accountability and quality of care**

Develop norms and standards that are clearly linked to budgets and performance criteria. Assist those most lagging in achieving these standards.

### **Build capacity**

Improve staffing ratios (especially community workers, nurses and paediatricians) and provide regular in-service training, using distance learning materials and local mentors.

### **Provide continuity of care**

Strengthen integration across programmes, especially IMCI, family planning, nutrition, tuberculosis and HIV. Increase the number of regional paediatricians to promote a 'seamless transition' between tertiary, regional and local health services.

## Eliminate inequities

Allocate more resources to districts, facilities and communities with the greatest need; prioritise services for children most at risk; and address the inequitable distribution of resources between private and public health care systems.

### Promote child-friendly services

Provide child- and family-friendly services at all health facilities, so that there is no needless waiting, no needless suffering and no needless death.

### Focus on prevention

Focus on health promotion and prevention to enable communities, caregivers and children to take responsibility for their health through enhanced knowledge and practices.

### Invest in community health workers

Train and support community health workers, prioritise maternal, child health and nutrition services, and strengthen integration at district level.

### Address the social determinants of health

Initiate inter-sectoral programmes to address the underlying causes of childhood illness and injury. Promote health equity at national, provincial and district levels.

### Monitor progress

Strengthen routine reporting and surveillance systems and use child-centred data to set priorities, monitor progress and identify programmes in need of support at national, provincial and district level.

## Doctors, nurses, community health workers

### Support children and families

- Enable their participation in health care decision-making by educating them about their choices, encouraging them to ask questions and respecting their views.
- Work with families, communities and other service providers to address the underlying causes of childhood illness and injury through improved environmental conditions, accident prevention and conflict mediation.
- Initiate activities to improve coverage and quality of care, and strengthen links between tertiary, secondary and primary care.

## Health educators and researchers

### Promote best practice

- Include child-friendly and community-based practice in the training of all health care personnel.
- Develop and test interventions to address barriers to child health both within and outside of the health care system.
- Disseminate research findings to promote and incentivise proven best practices.

## Parents and caregivers

### Create a healthy home environment

- Learn how to prevent illness and promote good health, and when to seek help from health and social services.
- Use positive discipline and build strong family relationships to support children's development.

## Schools

### Develop health promoting schools

- Build partnerships with health, social services, parents and the wider community to promote health and provide care and support for learners.
- Address local risk factors and promote healthy behaviour through school assemblies, after-school programmes and across the curriculum.

## The media

### Promote health

- Challenge current social norms that promote alcohol abuse, unsafe sex, and violence against women and children.
- Portray positive role models for children, adolescents, parents and teachers.
- Promote healthy choices such as exclusive breastfeeding, vitamin A supplementation, deworming and HIV testing.

## Civil society

### Advocate for children's rights

- Lobby for a package of basic health care services for children and improved quality of care at all health facilities.
- Advocate for greater equity in the delivery of health and other essential services.

## Key government departments

### Create a healthy environment for children

- Place health equity at the heart of local government planning and prioritise children's access to safe housing, water, sanitation, energy and transport.
- Alleviate poverty by creating jobs, ensuring household food security and improving access to social assistance.
- Strengthen inter-sectoral programmes between health, social services, education and law enforcement, and build partnerships with the media and civil society to promote health and reduce alcohol abuse and violence against women and children.