Overview

Part two contains 12 essays reflecting on progress towards realising children's rights to health in South Africa. The essays identify some critical issues that must be addressed both within and outside the health care system to ensure the survival, health and optimal development of all children in South Africa.

Introduction

Children's rights to health
(pages 22 – 28)

Children's rights to health are broadly defined in international law and extend beyond access to health care services to include a range of other services – such as water, sanitation, nutrition, education and social services – that are necessary to promote children's survival, health and optimal development. Although a number of laws, policies and programmes give effect to these rights in South Africa, these have not yet translated into improved health outcomes for children.

Status of child health in South Africa
(pages 29 – 40)

Children under five account for 80% of child deaths in South Africa. These deaths result from neonatal causes and childhood infections (HIV, diarrhoea and lower respiratory infections). Injury is the leading cause of death amongst older children. Most childhood deaths are rooted in poverty, which impairs children's immunity and increases their exposure to infection and injury.

Critical issues in child health

HIV, tuberculosis and child health
(pages 41 – 45)

HIV is the leading cause of death for children under five and TB rates are alarmingly high, and climbing. Preventative strategies include the promotion of safe sex and improved delivery of prevention of mother-to-child transmission treatment. Treatment guidelines should be regularly updated to align with international best practice. HIV and TB programmes of prevention and treatment must be integrated in order to optimise service delivery.

An integrated approach to malnutrition in childhood
(pages 46 – 52)

Malnutrition impairs children's growth, health and development. Sixty percent of children who died in South African hospitals were underweight for their age. The Integrated Nutrition Programme provides a comprehensive framework for addressing the causes of malnutrition, but additional staff, training and support are required to improve the coverage of key nutrition interventions. Access to social assistance and improved household food security are essential for achieving better childhood nutrition.

Mental health and risk behaviour
(pages 53 – 57)

Unsafe sex, interpersonal violence and alcohol abuse are leading drivers of death and disability in South Africa. These risk behaviours have their roots in childhood and adolescence and have a significant impact on children's physical and mental health. There is a need for integrated programmes that promote mental health and prevent risk behaviours in a variety of settings including the family, school, community and mass media.

Health services for children

Basic health care services for children
(pages 58 – 63)

While the Constitution provides for children's access to basic health care services, the content of this right has yet to be defined by the legislature or the courts. This essay outlines a potential package of services for children from conception to adolescence and stresses the need for vertical and horizontal integration of health services to enable universal access to, and continuity of, care.

Managing resources and building capacity in the context of child health (pages 64 – 70)

South Africa is failing to deliver quality care to children despite high national expenditure on health. This essay examines some of the systemic problems that hamper the delivery of health care services for children and proposes a range of potential solutions to improve leadership, accountability, efficiency and communication within public health care system.

Child health and community-based services
(pages 71 – 76)

Community health workers play an essential role in extending the reach of formal health services and in promoting health and preventing illness. Despite a proliferation of community-based services in response to the HIV and TB pandemics, few of these programmes focus specifically on child health. The sector is also largely unregulated and poorly integrated with the formal health care system.

Two draft frameworks offer potential solutions: standardising the management, training, supervision and financing of community-based programmes across the health and social development sectors; and defining a basic package of community-based maternal, child health and nutrition services.

Child- and family-friendly services
(pages 77 – 81)

Child-friendly services go far beyond painting children's wards in bright colours. Under the new Children's Act, health professionals have a legal obligation to facilitate children's informed consent and active participation in decision-making about health care. Actively involving parents and caregivers in children's health care also helps reduce unnecessary stress and trauma. As is evidenced by best practice in southern Africa, implementing child- and family-friendly services requires a shift in thinking, rather than additional resources.

A healthy environment

The social and environmental determinants of health
(pages 82 – 89)

The underlying causes of childhood illness and injury lie outside the formal health care system. Poverty and poor delivery of essential services such as housing, water and sanitation put children's health at risk. Unsafe sex, alcohol abuse and violence against women and children also have a significant impact on children's health. This essay calls on the Department of Health to initiate partnerships at national and district level to address deep-rooted inequalities, reduce poverty and improve living conditions so that all children in South Africa have the opportunity to develop their full potential.

The way forward

A vision for child health in South Africa
(pages 90 – 91)

In this essay, the Minister of Health provides a clear vision for child health in South Africa. The essay identifies the need to strengthen key programmes such HIV/AIDS, immunisation and the Integrated Management of Childhood Illnesses. It calls on health workers to bridge the gap between policy and implementation and urges all South Africans to work together to ensure that mothers and children not only survive, but thrive.

Recommendations
(pages 92 – 93)

This essay draws on the key findings of the preceding essays to outline key recommendations, including four essential steps towards realising children's right to health in South Africa: address deep-rooted poverty and inequality; improve the quality and coverage of child health services; strengthen community-based services; and build partnerships to create a safe and healthy environment for children.