

## **Approaches to Community Health in South Africa** IPBH-3000 (3 credits)

### **South Africa: Community Health and Social Policy**

#### **Course Description**

This course examines the social determinants affecting the burden of disease in South Africa. The course explores the pervasive effects of a history of racialized under-development and exploitation, then moves on to analyze the systems and policies that have been applied to redress inequities and improve health outcomes. The course will focus on how Social Determinants of Health affect outcomes in current epidemics of HIV and Coronavirus and is taught through facilitated engagements with local communities, schools, clinics and non-government organizations, and lectures by local experts on health, education, gender and law.

#### **Learning Outcomes**

By the end of the course students will be expected to:

- Elucidate the pillars and principles of a Primary Health Care approach that seeks to make health provision accessible, acceptable and sustainable at community level;
- Critically evaluate goals and principles coming out of International Health Conferences and to interrogate their feasibility in local contexts;
- Apply a critical lens to the approaches of governments, the World Health Organization and academics, in their suggested strategies to fight epidemics; and;
- Examine the influence and use of media and communication in social development, behavioral change and health promotion

#### **Language of Instruction**

This course is taught in English, but students will be exposed to vocabulary related to course content through in-South Africa expert lectures and field visits to a wide range of venues and regional locales.

#### **Course Schedule**

\*Please be aware that topics and excursions may vary to take advantage of any emerging events, to accommodate changes in our lecturers' availability, and to respect any changes that would affect student safety. Students will be notified if this occurs.

## **Module 1 – Primary Health Care**

### Sessions

Health-seeking and health-providing paradigms (Clive Bruzas)  
Models of health and wellness: Biomedical and ecological models (Clive Bruzas)  
Primary Health Care and health promotion (Clive Bruzas)  
Imagining and defining Community Health (Clive Bruzas)  
The assets-based approach – the example of The Valley Trust (Clive Bruzas)  
The National Strategic Plan 2030 (Clive Bruzas)  
Testing & Screening in the Coronavirus Pandemic (Zed McGladdery)  
Public Health Communication through the P-Process (Eliza Govender)  
Excursion to Pholela, the birthplace of Community Oriented Primary Care (Dr Gumede)

### *Required reading*

Avert. (2018). HIV and AIDS in South Africa. Downloaded from  
<https://www.avert.org/professionals/hiv-around-world/sub-saharan-africa/south-africa>

Bopp, M., & Bopp, J. (2004). Welcome to the swamp. Addressing community capacity in Ecohealth research. *EcoHealth*, 1, 24-34.

National Strategic Plan 2030 - Executive Summary (2020) Downloaded from  
<https://www.gov.za/sites/default/files/Executive%20Summary-NDP%202030%20-%20Our%20future%20-%20make%20it%20work.pdf>

Eriksson, M., & Lindstrom, B. (2008). A salutogenic interpretation of the Ottawa Charter. *Health Promotion International*, 23(2), 190-199.

Phillips, H. (2014). The Return of The Pholela Experiment. *Am J Public Health*, 104:1872–1876.

The Health Communication Partnership (2003). The new P-process. Steps in strategic communication.

STATS SA. (2019) Mid Year Population Estimates 2019. Downloaded from  
<https://www.statssa.gov.za/publications/P0302/P03022019.pdf>

WHO. (1978). Declaration of Alma Ata. Downloaded from  
[http://www.who.int/publications/almaata\\_declaration\\_en.pdf](http://www.who.int/publications/almaata_declaration_en.pdf)

WHO. (1986). Ottawa Charter for health promotion. Downloaded from  
[http://www.euro.who.int/\\_\\_data/assets/pdf\\_file/0004/129532/Ottawa\\_Charter.pdf](http://www.euro.who.int/__data/assets/pdf_file/0004/129532/Ottawa_Charter.pdf)

### *Recommended reading:*

South Africa's National Strategic Plan for HIV, TB and STI's 2017-2022. (2017) Downloaded from [https://www.gov.za/sites/default/files/gcis\\_document/201705/nsp-hiv-tb-stia.pdf](https://www.gov.za/sites/default/files/gcis_document/201705/nsp-hiv-tb-stia.pdf)

## **Module 2 – Communities and Traditions**

Durban Exploration Excursion - Traditional Muthi Market and Warwick Triangle (Cato Host guides)  
Zulu masculinities (S'bo Nkosi)  
Documentary and discussion: "Do girls want it?" The roles of religion, culture and peers. (Clive Bruzas)  
Problematizing virginity testing as a culturally appropriate HIV intervention (Zed McGladdery)  
Traditional healing (Nceba Gqaleni)  
A life story of a traditional Zulu Woman. (Qaphensile Zuma)  
Communities and traditions in practice: homestays in Cato Manor and Nzinga.

### *Required reading:*

Gqaleni et al (2007). "Traditional and Complementary Medicine". In A. Padarath, & R. English (Eds.), *South African Health Review* (pp. 89-101). Durban: Health Systems Trust.

Hlabangane, N. (2014). From object to subject: deconstructing anthropology and HIV/AIDS in South Africa. *Critique of Anthropology*, 34(2), 174-203.

Knight, L., Ranganathan, M., Abramsky, T. *et al.* Intervention with Microfinance for AIDS and Gender Equity (IMAGE): Women's Engagement with the Scaled-up IMAGE Programme and Experience of Intimate Partner Violence in Rural South Africa. *Prev Sci* 21, 268–281 (2020).

Leclerc-Madlala, S. (2001). Virginity testing: managing sexuality in a maturing HIV/AIDS epidemic. *Medical Anthropology Quarterly*, 15(4), 533-552. <https://doi.org/10.1007/s11121-019-01070-w>

Lewis, J. (Director). (2011, July). TAC - Taking HAART [Video file]. Retrieved July 1, 2017, from <https://www.youtube.com/watch?v=eGwvv0z7--Y>

Parry, C. D. H., Simmonds, J. E., & Freeman, M. (2020). Failing to respond to health promotion imperatives could scupper or hamper National Health Insurance efforts. *SAMJ: South African Medical Journal*, 110(3), 170-171.

South African History Online. (2014) Zulu. Downloaded from <https://www.sahistory.org.za/article/zulu>

The South African Bill of Rights (2017) Accessed from Chapter 2 of the Constitution of South Africa. <http://www.hsrcpress.ac.za>

## **Module 3 – HIV Health Communication and Behavior Change**

Behaviour change and health communication (Clive Bruzas)  
Body mapping as an approach for Health Communication – two sessions (Eliza Govender)  
Entertainment education (Eliza Govender)  
The history of HIV prevention in South Africa (Zed McGladdery)  
Non-communicable diseases (Stephen Knight)

Sexual and reproductive health and rights (Pranitha Maharaj)

### *Required reading*

Govender, E. (2011). Development and health communication for HIV/AIDS prevention. In K. Tomaselli, & C. Chasi (Eds.), *Development and public health communication* (pp. 51-76). Cape Town: Pearson Education South Africa.

Human Sciences Research Council. (2018). *The fifth South African national HIV prevalence, incidence, behaviour and communication survey, 2017: HIV impact assessment summary report*.

Lince-Deroche, N., Pleaner, M., Harries, J., Morroni, C., Mullick, S., Firnhaber, C., . . . Sinanovic, E. (2016). Achieving universal access to sexual and reproductive health services: the potential and pitfalls for contraceptive services in South Africa. In A. Padarath, J. King, E.-L. Mackie, & J. Casciola (Eds.), *South African Health Review 2016* (pp. 95-108). Durban: Health Systems Trust.

MacGregor, H. N. (2009). Mapping the body: tracing the personal and the political dimensions of HIV/AIDS in Khayelitsha, South Africa. *Anthropology and Medicine*, 16(1), 85-95.

Petraglia, J. (2007). Narrative intervention in behavior and public health. *Journal of Health Communication: International Perspectives*, 12(5), 493-505.

Puoane, T., Tsolekile, L., Egbujie, B., Lewy, M., & Sanders, D. (2017). Advancing the agenda on non-communicable diseases: prevention and management at community level. In A. Padarath, & P. Barron (Eds.), *South African Health Review 2017* (pp. 171-179). Durban: Health Systems Trust.

## **Readings**

Students are responsible for all the readings, and should be prepared to bring them to bear on discussions in class. The readings will place the classes and excursions in their contexts, enabling students to challenge and engage lecturers, to generate questions for class discussions and to deepen knowledge of particular aspects discussed in class. Supplementary reading materials, not mentioned on the list, will sometimes be assigned and made available.

## **Evaluation and Grading Criteria**

### **Assignments:**

Timely completion of all seminar assignments is expected. Unless otherwise stated, all assignments and

papers must be turned in on the due date, by 4 pm.

**ACH1: Pillars and Principles of Primary Health Care. (10 marks)** Students will be given a description of a social context and will identify and explain areas in which principles and pillars of Primary Health Care may be applied.

**ACH2: Health Plans and Strategies. (20 marks)** Students study the Executive

Summary of the National Strategic Plan 2030 and highlight areas in which it takes and adapts policies and practices suggested in International Health Conferences and Policy Statements.

**ACH3: Health Communication. (30marks)** Students design a Health Promotion piece designed to evoke behavior change and will present the piece to a panel of community members from Cato Manor, who will assess its acceptability and effectiveness.

**ACH4: Approaches to Community Health. (50marks)** Students write a final paper in which they critically analyze local and international approaches to a Health Issue they choose.

#### Grading Scale:

94-100%	A
90-93%	A-
87-89%	B+
84-86%	B

#### **Expectations and Policies**

- Show up prepared. Be on time. Have your readings completed and points in mind for discussion or clarification. Complying with these elements raises the level of class discussion for everyone.
- Have assignments completed on schedule, emailed as Word Documents, and done according to the specified requirements. This will help ensure that your assignments are returned in a timely manner.
- Ask questions in class. Engage the lecturer. These are often very busy professionals who are doing us an honor by coming to speak.
- Comply with academic integrity policies (no plagiarism or cheating, nothing unethical).
- Respect differences of opinion (those of classmates, lecturers, local constituents engaged with on the visits, etc.). You are not expected to agree with everything you hear, but you are expected to listen across difference and consider other perspectives with respect.

**Please refer to the SIT Study Abroad Handbook** for policies on academic integrity, ethics, warning and probation, diversity and disability, sexual harassment, and the academic appeals process.

**Disability Services:** Students with disabilities are encouraged to contact Disability Services at [disabilityservices@sit.edu](mailto:disabilityservices@sit.edu) for information and support in facilitating an accessible educational

experience. Additional information regarding SIT Disability Services, including a link to the online request form can be found on the disability services website at <https://studyabroad.sit.edu/health-safety-and-well-being/disability-services/>.