

People's Health Assembly 3 “NGO Workshop”

A look at NGOs from a civic/community based organization

Itai Rusike: Community Working Group on Health,
Zimbabwe



Accountability

- A working definition of accountability describes it as a “proactive process by which public officials inform and justify their plans of action, behaviour and results and are sanctioned accordingly.” (Ackerman, 2004:3).
- As resources for health become fewer and fewer, there are growing calls for health service providers to be more transparent in utilisation of the scarce public resources and accountable to the constituencies they serve.
- Failure by the state to provide the much needed health services has resulted in a plethora of non-state actors, including NGOs, stepping up to fill the gap

Role of NGOs in National Health Systems

- NGOs should provide a complementary instead of competitive role.
- Strengthening of the national health system is key.
- This is done by plugging, for example, skills gaps existing within the system. Training of health professionals could be offered in proper use of equipment and medicines.
- NGOs should provide mentorship to health professionals for continuous improvement and play a role in the supply of essential health goods such as medicines and sundries.
- In all their activities, NGOs should provide a supportive role to government in taking up its ultimate responsibility as the provider of goods and services required for the progressive realisation of its people's rights.



Role of NGOs in National Health Systems *cont...*

- Donor funding of health programs has increased over the years in comparison to funding from the Government of Zimbabwe (GoZ).
- Some of the challenges Zimbabwe faces as a result of reliance on donor funding are as follows



Vertical Funding and Creation of Parallel Structures

- With the emergence of new disease threats, among other issues, donors shifted funding to vertical programmes as they achieve rapid delivery of service, yield quicker results and are easier to manage.
- However, they often divert scarce human and financial resources from strained public health services.
- Vertical funding also results in creation of parallel structures for management and administration which could result in inefficiencies.

Lack of cultural knowledge

- The cholera epidemic that hit Zimbabwe in 2008 provides indications of what to do and what not to do for NGOs working with communities.
- International NGOs (INGOs) came and poured resources for the fight against cholera without partnering local NGOs. This resulted in a response lacking proper coordination and in some instances cultural sensitivity.
- More could have been achieved through partnering with local NGOs (LNGOs) who have roots within communities and are sensitive to local culture.
- Community health workers such as Village Health Workers have had an important role in the Cholera and Measles awareness campaigns. They are culturally knowledgeable and sensitive and INGOs should work with these cadres in developing their role

Distortions in Health Worker Salaries/Allowances

- INGOs offer to pay allowances for health workers within government as a means of staff retention.
- However, these allowances are often targeted towards high grade workers whilst ignoring the lower grade worker. This creates divisions amongst staff and greatly compromises service delivery as the lower grade worker feels unimportant.
- Incentive packages also differ between NGOs. Health workers/staff choose to be involved in the work of NGOs offering higher incentives thereby greatly compromising work of other NGOs, usually local, who cannot match the packages

Staff Attrition

- INGOs to some extent have created staff shortages within the public system.
- Health professionals are lured by hefty salaries offered by INGOs, enticing allowances and perks which the GoZ cannot match.
- Staff compliment in Mission Hospitals is employed by the Ministry of Health and Child Welfare (MoHCW) and salaries are paid by the MoHCW.
- However, they may get supplementary salary 'top-ups' from the mission, making it lucrative for health workers to work in church run institutions as opposed to government.
- This has resulted in staff leaving public institutions for NGOs

What is required from International NGOs?



Knowledge Transfer

- Partnerships between local and international NGOs can facilitate knowledge transfer between organisations thus strengthening the knowledge base.



Resource Sharing

- Partnerships also allow resource sharing and leveraging.
- Resource pooling enables parties to use what little resources they have to achieve the greatest impact.



North-South Solidarity

- Sometimes local NGOs require solidarity from international donors. This solidarity must translate into actions and activities that respond to the needs of the countries in the south



Brief Background on CWGH

- A network of 40 civic/community based organisations
- Organisations of various social groups such as women, youths, workers, informal traders, People Living with HIV/AIDS
- Formed in 1998 to take up health issues of common concern
- Present in 28 districts in all 10 provinces of Zimbabwe

CWGH Accountability / Checks and Balances

- Annual General Meeting
- National Network Membership
- Board of Trustees
- Elected Executive Committee
- Secretariat
- District Health Forums
- Health Centre Committees/ Health Literacy Facilitators/ Community Health Monitors

How we link with the Health System

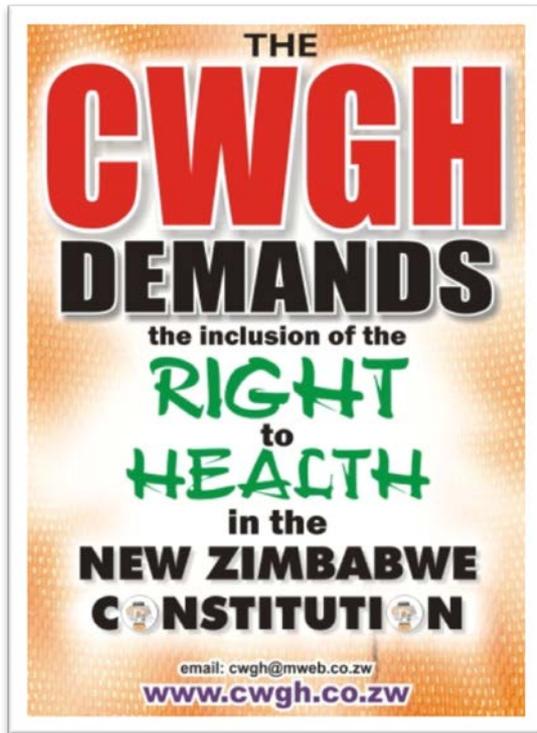
- Parliamentary Portfolio Committee
- Public Health Advisory Board
- Results Based Financing
- National AIDS Council (NAC)
- Health Literacy Program / Health Centre Committees / Village Health Workers



VHWs graduation ceremony



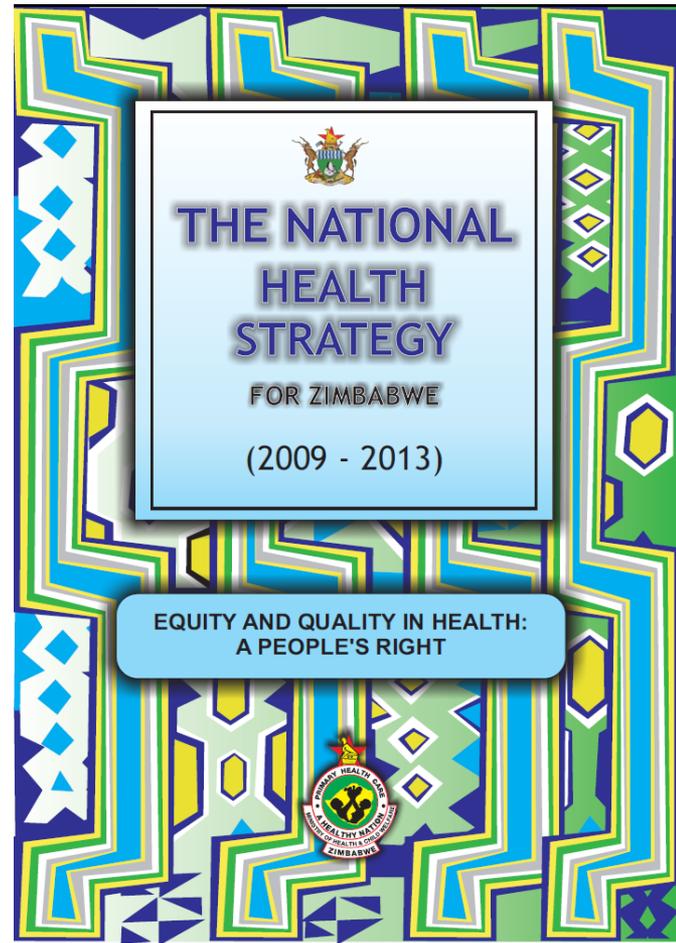
How we prioritise National Health



- Implementation of the Right to Health
- Review of the Public Health Act
- Participation in budget formulation

How we prioritise National Health *cont...*

- Input into the National Health Strategy
- Stimulate the formation of local structures for civic participation in health and support informed community participation in local health structures



Thank you!

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