

## 6. DEVELOPMENT OF MORE EFFECTIVE & EFFICIENT APPROACHES TO THE DELIVERY OF APPROPRIATE SERVICES TO PROMOTE URBAN HEALTH

### 6.1 Municipal health service delivery at the front line: environmental health practitioners (EHPS) and the implementation of public policy in Johannesburg, South Africa

As developmental arms of the state, local government is at the forefront of municipal health service delivery, with EHPS having responsibilities including communicable diseases prevention and control and premises health surveillance. However, little is known of the front line realities of policy implementation by EHPS, and the daily challenges they face in reducing poverty and inequality in urban settings.



Rob presenting a poster at the PHASA 2006 conference

This research aims to describe how EHPS implement environmental health policy at the front-line in Johannesburg and consider the policy implications of this. From a policy analysis theoretical framework, qualitative in-depth case studies of EHPS are completed using narrative analysis, to allow EHPS to describe implementation in their own words. This method is supported by interviews, non-participant observation and questionnaires.

Four pilot case studies (2 in London, 2 in Gauteng) support a conceptualisation of EHPS as 'state-agents' because: discretion seems inevitable for EHPS; self interest has the potential to dominate EHP decision making (especially in making their work safer and motivating); EHPS are effectively street-level policy makers (e.g. by awarding health certificates to non-compliant premises in informal settlements, or refusing to close non-compliant food premises in isolated informal settlements where no other food premises

exist); and controlling responses are made to EHP discretion by Metropolitan Municipalities. The case studies also support a conceptualisation of EHPS as 'citizen-agents' because: the influence of clients and their circumstances (especially socio-economic) appear dominant in decision making; EHPS sometimes go out of their way to help worthy clients (e.g. non-compliant premises awarded health certificates to enable access to social grants, then EHP works to improve premises); EHPS can be very pragmatic (especially in informal settlements); EHPS respond to unworthy clients in different ways.

Early conclusions and next steps: The pilot results support the argument that front line work for EHPS is as much a process of informing and enforcing identities as of delivering services and implementing policy. The researcher is currently analysing his Gauteng pilot study and aims to begin his main research with the City of Johannesburg Metropolitan Municipality at the end of January 2007.

This research project is being undertaken by Rob Couch as part of the requirements for completing a M.PHIL./PH.D. qualification at South Bank University, London.

