CHAPTER 5:   ANALYSIS AND FINDINGS OF SELECTED CASES IN THE SOUTH AFRICAN PUBLIC SERVICE

INTRODUCTION

The present debate in the South African public service on the issue of improving service delivery, takes place in the context of a changing public service. Analysts argue that service delivery is not being addressed at the pace that is needed in South Africa to redress service backlogs, especially in previously disadvantaged communities. This chapter examines service delivery by four selected South African public service departments, i.e. namely: Departments of Health, Justice and Constitutional Development, Housing, and Safety and Security. The service delivery initiatives and the outcomes thereof from 1994 to 2003 are examined to determine whether the public service has achieved the service delivery objectives set out by government.

A number of positive initiatives are currently being undertaken by all South African public service departments to redress service delivery imbalances and inequities, especially in previously disadvantaged communities. However, the study suggests that, although progress has been made, certain areas of service delivery do require improved performance by the public service.

The study suggests that effective approaches are needed. An effective leadership and governance framework is thus suggested for possible adoption by the South African public service. This proposed framework draws on the positive attributes of both Western and traditional African leadership and governance approaches. Every society has its distinct political, cultural and social traditions and principles, which are critical to that society's survival. It is these unique political, social and cultural benchmarks that form the bedrock for efficient, effective and economical public administration in society. This study highlights the importance of these unique benchmarks in the South African public service. In addition, this study points to the need to address factors impacting on the sustainability of the public service, which slows service delivery.

In this chapter, a selective overview of service delivery by the South African public service is thus discussed. The initiatives by the Departments of Health, Housing, Justice

and Constitutional Development and Safety and security are also discussed. An analysis and findings of the four cases are then examined and discussed extensively.

Selective overview of service delivery by the South African public service

Since 1994, a number of initiatives have been undertaken to improve public service delivery in South Africa. In 2003, the so-called cluster review, which was conducted by the Department of Public Service and Administration (DPSA) on the basic minimum service provision, found that the South African public service programmes to address deprivation in health, education, housing, land, basic services, such as water and sanitation, electricity and access to credit are well conceived and potentially well targeted (Department of Public Service and Administration 2003) (Access<http://www.gov.za/issues/imbizo/2002: *Retrieved: 20 October 2003*). In another review conducted by the South African government, it was found that service delivery programmes have broadened access to services, thereby improving the lives of millions of people in South Africa (Towards a Ten Year Review, 2003). Analysts argue however that service delivery still requires much improved performance by the public service (Molopo, 2003: Discussion). A number of programmes currently being undertaken by the South African public service are therefore outlined and analysed to determine the actual state of service delivery in South Africa.

At the level of local government, the Municipal Infrastructure Investment Framework (MIIF) was prepared in 1995 (White Paper on the Transformation of Public Service, 1995: 1). The MIIF set out to estimate public service backlogs. In addition, it aimed at assess the capital costs involved in removing service backlogs. The MIIF also focused on calculating the recurrent costs of operating and maintaining the services. It proposed a framework for financing the capital and recurrent costs of municipal infrastructure programmes, and methods of enhancing the institutional ability of municipalities, to ensure that services are delivered. The MIIF suggested how investment in, and the management of, municipal services could be used to promote the development objectives specified in the Reconstruction and Development Programme (RDP). This is an innovative approach to planning, policy-making, financing and implementation in the local sphere of government.

At the level of provincial government, an Integrated Provincial Support Programme (IPSP) was designed in 2003, to provide support to five provincial administrations in South Africa (Service Delivery Review, 2003). The aim is to improve the effective rendering of public services by public service departments at a provincial level. The programme focuses on capacity building and the sharing of experiences to promote effective public administration. For example, the IPSP has taken services provided by the South African Police Service (SAPS) by means of an effective mobile unit to remote rural areas in the former Venda area (South African Yearbook 2003/2004). Similar achievements are noted in other provinces, such as in the Eastern Cape, where a mobile mechanism for registering Child Support Grant beneficiaries in remote rural areas is managed through IPSP support. In this manner, services are brought closer to the communities, which also ensures that services are provided for a smaller group and a more homogenous community. This contributes to the overall efficiency and effectiveness of service delivery. It also provides for the depoliticisation of the provision of services at a community level, while promoting the participation and involvement of communities regarding service provision. This research study, however suggests that human resources constraints pose a major challenge in meeting service delivery outcomes objectives.

The South African public service is responding to service delivery challenges by exploring and implementing alternative methods of service delivery (Towards a Ten Year Review, 2003). There is a trend in both the provinces and the municipalities to use public-private partnerships (PPPs) as a way of meeting its service delivery objectives. This approach mainly uses the expertise, investment and management capacity of the private sector to develop infrastructure, as well as to improve and extend efficient services to communities (Van Niekerk, *et al*. 2001: 256). PPPs are increasingly being used in South Africa to provide services on a cost-effective and efficient basis. However, this study has found that South Africa is still at an early stage of learning which types of PPPs are appropriate for which programmes. It is thus critical for the South African public service to apply principles of effective governance to the future development of PPPs in South Africa, and to ensure that these principles are genuinely appropriate to the context in which PPPs are operational.

It is clear that a new view is emerging on the role of the South African public service. Van Niekerk, *et al*. (2001: 256) argue that the role of the public service is not to provide all the services to society but to make sure that everything that falls within its scope is done. This represents an important shift away from the classical public administration model in the South African public service as it implies that it is not only the public service's obligation to provide services but to oversee that they are actually delivered. The traditional inefficiencies of public service provision, fiscal constraints and scarce resources are the motivation for the South African public service embarking on this route. Consequently, the South African public service is embarking on partnerships with both business and civil society, including community organisations, voluntary organisations and non-governmental organisations (NGOs). At a practical level, however, trade unions in South Africa have resisted PPPs because they are apprehensive that PPPs will reduce jobs. Service users, too, have sometimes expressed concern about having service providers who are driven by profit motives.

The focus of the South African public service is now on collaborative partnerships and alliances to improve service delivery. The public service is also improving civic governance, which is the regular citizen interaction and participation of communities in service delivery (Van Wyk, *et al*. 2002: 3). It has become evident that these partnerships are empowering communities and encouraging economic development. The public service is focusing on practical implementation to ensure that communities become involved in matters that affect them. An example of this trend towards regular interaction with stakeholders outside government is the institutionalisation of both large- and medium- sized emerging contractor programmes in a number of municipalities in South Africa. In the project on the electrification of the Jouberton project in Klerksdorp, Gauteng for example, local township residents were trained to install power connections to twenty thousand households (Van Wyk, *et al*. 2003: 3). The municipality of Tekweni in KwaZulu-Natal, as another example, has transferred responsibility for refuse removal to a group of thirty-five small entrepreneurs, using local labour in newly incorporated Black suburbs. In 1999, the KwaZulu-Natal Provincial Department of Transport launched the Zibambele Road Maintenance System. This programme employs citizens from severely disadvantaged households in rural KwaZulu-Natal to maintain the gravel roads that give villages' access to the city. By

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means of innovative service delivery strategies, communities are empowered to take responsibility for the manner in which their quality of life is improved.

As another example, in the Northern Cape, the Department of Water Affairs and Forestry (DWAF), in partnership with provincial, local government and communities, subsidize the installation of toilets and the provision of health education for many rural villages (Van Wyk, *et al.* 2002: 4). Through such partnerships with the communities, service delivery is becoming more successful. In 2002, the South African public service has provided improved sanitation to approximately 2,3 million people. From June 1994 to July 2003 the Department of Water Affairs and Forestry has delivered water to a total of nine million people in rural areas in South Africa. (Service Delivery Review, 2003). Nationwide, the South African government has supplied water to approximately a total of sixteen million people through housing and urban programmes (South African Yearbook 2003/2004). These initiatives suggest that definite efforts are being made by the public service to ensure service delivery.

There has been tremendous growth in public projects that target the previously disadvantaged communities in South Africa, and public funds are being spent in order to promote infrastructural work (Van Wyk, *et al*. 2002: 3). In 2002, the President of South Africa, Mr. Thabo Mbeki, announced a new campaign in his State of Nation Address, called *'Vuk' uzenzele'*, which means 'to arise and act' (South African Yearbook 2003/2004). This campaign is aimed at getting as many people as possible in South Africa involved in public service delivery programmes (State of the Nation Address of the President of South Africa, Thabo Mbeki, Houses of Parliament, Cape Town, February 2002) (Access<http://www.sabcnews.state of the nation/address2: *Retrieved: 20 October 2003*). These efforts by the South African government are ultimately allowing communities to influence and take control of programmes and projects and in so doing encouraging them to become self-reliant.

In August 2003, the South African Cabinet approved the plan for the community development workers (CDWs) (State of the Nation Address of the President of South Africa, Thabo Mbeki, Houses of Parliament, Cape Town, February 2002) (Access<://www.sabcnews.state of the nation/address2: *Retrieved: 20 October 2003*). This is called the '*Letsema*' campaign, which means to volunteer. The CDWs are an

additional type of public servants; they act as skilled facilitators, filling the gap between government services and the communities (Post-Cabinet Lekgotla Briefing on Governance and Administration, Presented by Minister of Public Service and Administration, Ms Fraser-Moleketi, 4 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). The plan to deploy community development workers is intended to contribute to improved service delivery among previously disadvantaged communities (Towards a Ten Year Review, 2003). It is also intended to assist the poor to develop the capacity to organise themselves and participate in decision-making. With co-operative participation by public service and community, development in local communities can be ensured.

In accordance with this plan, members in the community are being trained as public servants to assist citizens with matters such as obtaining birth certificates, and identity documents, completing social-grant applications and starting up small businesses (South African Yearbook 2003/2004). The project involves that public servants go directly to the community (Interview of President Thabo Mbeki, SABC TV2, 16 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 23 October 2003*). For example, the South African public may not know about a child support grant that is being offered by the government. The project is thus designed to inform the public of services provided by the government. If a pensioner has not been receiving his or her pension, steps are taken to ensure that this happens. These public servants are working regularly in communities to redress public service imbalances and inequities. The reason for such an initiative is that there are often many people with low levels of education or who are illiterate in remote rural communities. This is a positive development towards responding to community needs by the South African public service. These new initiatives are indicative of innovative service delivery initiatives. However, the present study suggests has found a clear understanding of the social, political, economic and cultural profile of such a community is necessary to understand its specific characteristics and needs. It is also essential to analyse the resources already available within that community, and how these can, best be used to promote service delivery.

Between April and June 2002, another thirty thousand new child beneficiaries were registered for social grants (President's State of the Nation Address 2003)

(Access<http://www.gov.za/search97cgi/s97>:   *Retrieved: 23   October   2003*).
Communities in South Africa have heeded the call to participate in the *'Letsema'*
campaign   (President's   State   of   the   Nation   Address   2003)
(Access<http://www.gov.za/search97cgi/s97>: *Retrieved: 23 October 2003*). This means
that the citizens have been selflessly volunteering their services to improve the lives of
people in their communities. Research suggests that social grants are exceptionally well
targeted (Towards a Ten Year Review, 2003). In other words, the programme is
successful in achieving its goals and objectives. According to Soobrayan (2004:
Discussion), this is as a result of the direct engagement between the South African
public service and the citizens of the country. These engagements clearly demonstrate
that in many rural villages and urban townships, citizens have for various reasons not
been able to access the services and benefits offered by the public service. These
projects, which are being undertaken by the South African public service, are valuable
in assisting people who are unaware that they are entitled to certain benefits and
services. They are also helpful in assisting citizens who experience difficulty with the
complex procedures required by South Africa public service departments. These unique
practices by the South African public service increase accessibility to public services
and promote service delivery outcomes.

Moreover, through programmes, such as the *'Izimbizo'* (outreach programme), the
South African government, including the President, Cabinet Ministers, Premiers,
Members of Executive Councils (MECs), mayors and councillors have been interacting
with communities throughout South Africa to address service delivery needs in
previously disadvantaged communities (President's State of the Nation Address, 2003).
The South African public service is empowering people to take responsibility for the
manner in which their quality of life is improved (Service Delivery Review, 2004).
Community owned solutions are thus being encouraged (Chandu, 2003: Discussion),
which is important in identifying the true needs of the community and addressing them.
It also promotes trust between government and communities (Towards a Ten Year
Review, 2003). The need for the public service to become more customer-focused and
service oriented is emphasised.

There are numerous possibilities of improving service delivery, especially in previously
disadvantaged communities in South Africa. The South African public service is

currently redefining its role in executing its activities in a responsive manner (Chandu, 2004: Discussion). The *'Izimbizo'* and CDWs programmes have been introduced as a possible consideration in assisting the public service to cope with service delivery backlogs, especially in previously disadvantaged communities. The extent of success will however depend on the complex of political, economic and social realities that prevail in South Africa.

To present a balanced perspective of the South African public service, it is important to examine service delivery performance by selected South African public service departments. In examining the service delivery imbalances and inequities in previously disadvantaged communities in South Africa, one cannot simplify the magnitude of tasks that face the South African public service. Furthermore, it is recognized that, there cannot be instant solutions in light of the injustices and massive inequalities propagated by the apartheid government.

An analysis of service delivery in housing, electricity, water, sanitation, from 1995 to 2001, from 1994 to 2003 and at 2003 reflects progress with respect to redressing service delivery imbalances and inequities in South Africa (Statistics South Africa's 1995 October Household Survey and 2001 Labour Force Survey; Reports from public service departments - December 2003). These results are summarised in Table 5/1, Table 5/2 and Table 5/3 respectively.

Table 5/1

Selected service delivery programmes from 1995 to 2001

Increasing Access To Public Service	1995	2001
Households Living In Formal Housing	65,8%	72,6%
Household Using Electricity As Main Source Of Lighting	63,5%	71,7%
Households With Tap Water As Main Source	78,5%	84,3%
Households With Flush Or Chemical Toilet	56,9%	58,3%

(Statistics South Africa's 1995 October Household Survey and 2001 Labour Force Survey)

Table 5/1 reflects that the provision of formal housing, electricity, water and sanitation, by the South African public service between from 1995 and 2001. The provision of housing improved from approximately sixty five percent to approximately seventy two percent. The provision of electricity improved from approximately sixty three percent to approximately seventy percent. The provision of water improved from approximately seventy eight percent to approximately eighty four percent. Sanitation improved from approximately fifty six percent to fifty eight percent. These are significant achievements by the public service towards improving service delivery.

Table 5/2

Selected service delivery programmes from 1994 to 2003

Output of social programmes	1994-1998	1999-2002	1994-2003
People Gaining Access To Clean Water (Community Supply Programme)	3,0 million	5,4 million	8,4 million
Number Of Connections To The Electricity Grid	2,3 million	1,5 million	3,8 million
Subsidized Houses Completed Under Construction	0,7 million	0,7 million	1,4 million

(South Africa Yearbook 2003/2004)

Table 5/2 reflects the actual number of people who benefited from improved and increased access to water, electricity and housing. With respect to the provision of water, from 1994 to 1998, three million people received clean water, between 1999 to 2002 approximately five million received water and from 1994 to 2003 the total number of people that received water was approximately eight million. With respect to the provision of electricity, between 1994 to 1998, two million people received electricity, between 1999 to 2002 approximately one million received electricity and from 1994 to 2003 the total number of people that received electricity was approximately 3,8 million. From 1994 to 1998, three million people received clean water, from 1999 to 2002 approximately five million and from 1994 to 2003 the total number of people was approximately eight million. From 1994 to 2002, the number of subsidized houses that were completed under construction where 0,7 million. At 2003, the number of

subsidized houses completed under construction increased to 1,4 million. Again, these statistics reflect significant achievements in redressing service delivery imbalances and inequities.

Table 5/3 reflects that approximately 1,9 million subsidies were approved by the Department of Housing for new houses. Forty nine percent of these subsidies were awarded to women, while six million citizens received housing. The South African government has a policy, which focuses on empowering women and youth, by giving preference to them, in for example housing subsidies.

Table 5/3

Selected service delivery housing programmes from 1994 to 2003

Housing programmes	Quantity
Subsidies Approved	1,985 Million Subsidies
Subsidies: Women	49% Subsidies
Housing Received	6 Million Citizens

(Towards a Ten Year Review 2003)

In light of the above, Table 5/1, Table 5/2 and Table 5/3 reflect that progress is being made with respect to redressing service delivery imbalances and inequities in the provision of housing, housing subsidies, electricity, water and sanitation in South Africa. The South African public service has broadened access to a number of basic services to society. Most evidence suggests that government has made progress in terms of service delivery (Towards a Ten Year Review 2003). There are, however, factors impacting on service delivery performance by departments. It is important to present an overview of service delivery performance by selected South African public service departments (1994 to 2003). The initiatives in the Departments of Health, Housing, Justice and Constitutional Development and Safety and Security are investigated thoroughly.

Case study one: Department of Health

The National Department of Health is responsible for a number of objectives (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). The key objectives are discussed below. It is important to outline the main Department's objectives to determine whether these objectives have been achieved. The White Paper for the Transformation of the Health System in South Africa (1997) and the Health-Sector Strategic Framework 1999 to 2003 have committed the Department of Health to provide quality health care to all South Africans and to implement policies that reflect its mission, goals and objectives (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*).

The Department of Health is required to develop a comprehensive and integrated national health system that provides accessible and affordable health services to all South Africans (White Paper for the Transformation of the Health System in South Africa 1997). It is crucial for the Department to ensure equity and access, especially among previously disadvantaged communities (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). The Department is committed to providing basic health care as a fundamental right to all South Africans. Approximately forty eight percent of all South Africans live in poverty, and seventy five percent live in rural areas. The Department is required to improve human resources for policy, planning, management and service delivery. The Department is committed to reforming and revitalizing their services to the South African society, rebuilding them around the ideals of professionalism, accountability and the provision of acceptable quality services to citizens. Moreover, it is essential for the Department to improve the health and nutritional status, to prevent the spread of diseases. The plan also identified HIV/AIDS, sexually transmitted infections (STIs) and tuberculosis as crucial areas of focus for health care in South Africa. The objectives of the Department are listed in Table 5/4 and compared to the initiatives actually undertaken by the Department, in order to determine service delivery performance.

Table 5/4

Service delivery performance - Department of Health

Objectives	Initiatives	Outcome
To Provide Quality Health Care	Preparing A Patients Charter Improving Quality Of Services In Hospitals (although many people would say that services have declined dramatically in all state hospitals, exacerbated by the 'brain drain' of trained professionals leaving the country) Embarking On Rehabilitation and Revitalization Programmes Preparing National Drug Policy To Promote Safety And Efficacy	In Progress- (Hospitals Are Poorly Managed; Doctors are Overworked) In Progress- Physical Repairs of Hospital Equipment In Progress
To Develop A Comprehensive And Integrated Health System	Amalgamation Of Fourteen Health Departments Creating Mobile Clinics Which Form The Backbone Of Primary And Preventive Health Care Establishment Of Primary Health Care (PHC) And Building Of Clinics Establishing Hospital Boards	Completed Some Clinics Stand Unused (Inadequate Funds And Shortage Of Medical Personnel) Encountered Problems Some Clinics Stand Unused In Progress
To Provide Accessible Health Services	Improving Primary Health Care Usage Of Technology Such As Tele-medicine	Encountered Problems (Lack Of Easy Access) Encountered Problems With Technology Not Fully Utilized In Some Centres
To Improve Human Resources	Training And Redeploying Doctors And Nurses.	In Progress- (Lack of Skills And Expertise; Various Hospitals Under-Resourced)
To Improve Health And Nutritional Status	Extending Access To Safe Drinking Water To Remote Rural villages And Townships Launching Food Fortification Programme	In Progress In Progress (School Nutritional Programme Reaching Four Million Pupils)
To Reduce The Spread Of Diseases: **Polio And Measles** **Malaria** ***HIV/AIDS** ***TB** refers to Tuberculosis	National Immunisation Campaigns Reducing Polio And Measles Reducing Malaria Launching The Partnership Against Aids Campaign Experimenting With Alternative Methods of Treating HIV/AIDS, TB And Other Debilitating Diseases Launching the *DOTS Programme To Combat TB)	In Progress Reduced Polio and Measles Although Targets Not Reached Spread Of Malaria Was Reduced By Sixty-Four Percent HIV Infection Rate Levelling Out Among Pregnant Teenagers Although There is An Overall Increase In The Infection Rates (2002) Progress Has Been Slow (Treatment Rates Are Low)
To Provide Affordable Health Care	Provided Cost-Effective Services Primary Health Care (PHC) Is Provided Free Of Charge For Pregnant Women And Children	Successful Successful

(Source Naidoo: 2004)

(***HIV** refers to Human immune deficiency virus; **AIDS** refers to Acquired Immune Deficiency Syndrome; ***TB** refers to Tuberculosis; ***DOTS** refers to Directly Observed Treatment Short-Course)

The main objective of the Department of Health has been to improve access to healthcare through the primary health care approach (PHC) (Towards a Ten Year Review, 2003). A number of ongoing programmes, namely HIV/Aids, DOTS and PHC are in place to improve and redress health delivery in the provinces in South Africa. It is noted in Table 5/4 that the improvements in health care are identified. The implementation of the district health system and primary care initiatives were given utmost priority. Essentially, clinics are meant to assume a more central role, while hospitals are supposed to attend only to serious cases referred to them by the clinics (South Africa Yearbook 2003/2004). This has necessitated the reorganization of support services in the public health sector. The Department of Health has provided cost-effective services, and primary health care (PHC) free of charge to specific sectors (pregnant women and children) of the South African community (Towards a Ten Year Review, 2003). It has been successful in liaising with other countries and international institutions such as the World Health Organization (WHO) to improve health care in South Africa.

According to the Minister of Health in South Africa, the National Planning Framework for provincial health plans has proved to be successful, enabling a longer-term focused rehabilitation and revitalization programme in the Department (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). The rehabilitation and revitalization programme is meant to provide the necessary equipment and upgrade facilities in hospitals and clinics to improve health care. An assessment of developments and progress on service delivery from 1994 to 2003, suggests that progress continues to be made, especially with regard to PHC (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). The principle of equal access to services has required the equalization of geographical access and quality of services throughout the country. In this regard, the Constitution (1996) guarantees the right of equal access to public primary health care services for every South African. Moreover these initiatives aim to improve health care in previously disadvantaged communities in South Africa. According to the South Africa Yearbook 2003/2004, among the main priorities of the South African government's health budget was a rural clinic-building programme, the strengthening of PHC and the elimination of charges for pregnant women and children at clinics.

Prior to 1994, health care in rural areas has been non-existent (South Africa Yearbook 2003/2004). The Department thus prioritised the need to address the backlog in these areas (Pillay 2003: Discussion). This is important for promoting equity in a democracy. The evidence presented below suggests that the Department is indeed making an effort to improve service delivery throughout South Africa.

As an important step in developing an integrated health service, the fourteen existing health departments were amalgamated into a single health system. Disparities in health service delivery were reduced although not yet eliminated. Increased access was provided to integrate services based on primary health care (PHC) principles, and the care of children and women was prioritised (South African Yearbook 2000/2001). More importantly, the South African government increased the Department's health budget by twenty four percent in 1996/1997, six percent in 1997/1998, and one percent in 1998/1999 (Muthien, *et al.* 2000: 60). The budget was increased to reduce existing backlogs. There is much debate around funding being insufficient and inadequate to redress existing service delivery imbalances and inequities in previously disadvantaged communities. Given the limited funding available from national government, it is crucial that the Department uses its funds circumspectly. It can for instance examine innovative governance approaches to fund health care, such as public private partnerships (PPPs). In fact, this has already been undertaken in some provinces and at local government sphere.

In 1993, still under the previous apartheid dispensation, seventeen clinics were built, of which thirteen were prefabricated (Portfolio of South Africa Delivery 1999/2000, 2000: 12). Between 1994 and 2002, health services were brought within easier reach of about six million people through the building of additional clinics (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). Prior to 1994, under the former dispensation, most of these services had not been available to rural communities in South Africa due to the shortages of clinics. Furthermore, between 1994 and 1997, the redeployment of doctors and nurses enabled new clinics build by the post-1994 government to be opened in rural areas and townships (Presidential Review Commission Report, 1998: 27). Moreover, these services are accessible to the most vulnerable sectors of the South African society.

According to the Department, since 1994 more than five million South Africans have benefited from the 'Clinic Upgrading and Building Programme' and an average of hundred and twenty five thousand more patients per week are now making use of these essential services (Portfolio of South Africa Delivery 1999/2000, 2000: 12). This led to the building of five hundred and four new clinics and the upgrading of a further two thousand, two hundred and ninety eight, in previously under-serviced areas (South African Yearbook 2003/2004). A network of mobile clinics run by the Department furthermore forms the backbone of primary and preventive health care in South Africa.

In 2003, the issue of equity stood out as the most significant area of attention. The Department has made progress towards promoting equitable access to health services, particularly through the distribution of health facilities and staff, as well as the removal of fees for primary health care (Access<htpp://www.doh.gov.za/docs/pr/2004: *Retrieved: 30 September 2004*). The extent of the inequalities inherited from the previous government means that the Department has to increase the pace of addressing these disparities.

In an attempt to overcome these, primary health care (PHC) in South Africa is now provided free of charge at the point of use, although people who can afford to pay for prescribed medicines are required to do so (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). Moreover, persons who are members of a medical aid scheme are excluded from the free services offered by these clinics. The services provided by primary health care (PHC) workers include immunization treatment of communicable and endemic disease, maternity care, treatment of chronic illnesses, accident and emergency services and oral health care services. To improve these services, the Department's undertaking various training programmes, which are aimed at the re-orientation of health professionals towards primary health care (PHC). These initiatives target the poorest communities in South Africa.

In response to the Departmental objectives, a charter of patients' rights, as well as complaint and suggestion procedures was, developed at the provincial sphere (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). According to Chandu (2004: Discussion) it has contributed to the improvement of the quality of

services in hospitals, where it is being successfully implemented, for example in Pretoria General Hospital in the Gauteng Province. This operates in accordance with effective governance principles, such as customer care and satisfaction, which were outlined in the South African government's Batho Pele Policy. A service package with norms and standards has also been developed for hospitals. However according to Molopo (2004: Discussion) one seldom hears anything good in the media about state hospitals. They are always described as ineffective, badly managed and unclean. According to Pillay (2004: Discussion) nurses and doctors are overworked and underpaid.

The Department has identified the importance of mobilizing and allocating of resources. The new National Tertiary Services Grant was introduced in 2002/2003, to fund twenty-seven provincial hospitals to improve their level of service delivery. In addition, a budget of R129 million for the hospital management programme was provided to deal with health quality improvement (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). It targeted different quality systems (ISO 2000) and skills training needed by managers to drive the process of quality management in the Department of Health. This strategy began in 2002, at one hospital in every province (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). A further three hospitals per province have been included since 2003. These initiatives aim to promote effective governance by improving the quality of health services to the South African society.

The Department has also prepared a national drug policy, in order to ensure that essential drugs of effective quality and safety are made available to all South Africans (Portfolio of South Africa Delivery 1999/2000, 2000: 99). This is an important initiative in promoting total quality management (TQM) in the health sector in South Africa. In accordance with this policy the provincial health departments stock medicines at hospitals. The standard treatments for different levels were developed using World Health Organization (WHO) guidelines. Moreover, they are revised regularly to include new developments in the medical and pharmaceutical fields (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). This is an important initiative in promoting quality health care throughout South Africa. Moreover, it is noteworthy that the South African health sector is keeping abreast with

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the latest developments in quality health care. Lastly, this initiative is aligned with the South African government's Batho Pele policy of promoting quality services to society.

Since 1994 the Department of Health has also focused on preventive health care (South Africa Yearbook 2003/2004). Attempts have been made to rationalize hospital services, and facilities, to reduce staffing and capital investment (Pillay, 2003: Discussion). The Department did this to reduce so-called expenditure. To promote effective public administration, attempts have also been made to promote efficiency, and cost-effectiveness, and to decentralize hospital management. Decentralization is important, so that decisions can be made at the levels where services are provided. Since 1994, hospital boards have been established in an attempt to increase leadership participation, accountability and transparency in the public health sector in South Africa (Presidential Review Commission Report, 1998: 27). This also complies with the principles outlined in the Constitution of South Africa (1996) and other policy documents, as well as with leadership and governance practices in both Western and traditional African societies.

In 2003, a number of practices to improve service delivery were implemented in the public health services in South Africa. The Department for example, has promoted oral health care through its water fluoridation (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 17 October 2003*). Since 1994, the supply of safe drinking water had been extended to remote rural villages and townships in South Africa, to an additional one million seven hundred thousand further persons (Portfolio of South Africa Delivery 1999/2000, 2000: 12). The statistics reflect that the supply of drinking water and the provision of primary health care (PHC) have saved more lives than any other health project in South Africa thus far. Prior to 1994, piped water had not been available in remote rural communities in South Africa. Although not all rural communities have access to piped water yet, there have been substantial and impressive improvements.

The Department has undertaken a number of initiatives to curb the spread of diseases such as polio and measles (Towards a Ten Year Review, 2003). In this regard, national immunization campaigns were conducted in 1995, 1996, 1997 and 2000 (South Africa Yearbook 2003/2004). In 2002, the Western Cape Province conducted a mass polio immunization campaign. In 2003, routine immunization was continuing throughout

South Africa (Access<http://www.doh.gov.za/docs/pr/2002: *Retrieved: 17 October 2003*). This expanded programme of immunization has succeeded in reducing deaths due to measles and reducing polio in South Africa (Towards a Ten Year Review, 2003). In this regard, by 2000, the most drastic improvement has been the reduction of measles (South Africa Yearbook 2003/2004). Since 1995 to 1997, the Department's polio immunization programme reached more than eight million children (South Africa Yearbook 2000/2001 Analysis, 2001: 1). These programmes are therefore making great strides in reducing these diseases, although the targets are not yet reached (Access<http://www.doh.gov.za/docs/pr/2002: *Retrieved: 17 October 2003*). A toll-free line is available to report any suspected polio cases. Furthermore, since 1995, immunization drives against diphtheria, purtussis (whooping cough), tetanus (lock jaw) and other diseases have been stepped up as well.

By February 2002, seventy three percent of children from primary schools had been fully immunized (Access<http://www/doh.gov.za/docs/pr/2002: *Retrieved: 17 October 2003*). By 2003, the Department had reached a target of ninety percent by concentrating on those districts that were not doing well, particularly in the Eastern Cape Province and Limpopo Province (Service Delivery Review, 2004). The Department currently spends almost R80 million per year on vaccines to ensure that all children in South Africa are immunized.

In 1994, a comprehensive study was carried out by the Department on pre-school children from selected areas, namely poor communities, on their level of nutrition (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). The survey reflected that two out of three households do not have access to sufficient food (Access<http://www.doh.gov.za/doc/pr/2003: *Retrieved: 17 October 2003*). One of the steps that the Department has taken in this regard is to launch a food fortification programme. In terms of these regulations, all millers in South Africa are required to add specific amounts of vitamins and minerals to all maize meal and wheat flour produced in South Africa. In addition, the Department's school nutrition programme reaches nearly four million pupils at fifteen thousand schools, and has been sustained for more than eight years (South Africa Yearbook 2000/2001 Analysis). In 1994 it was reaching eighty-nine percent of targeted learners in 1994, but in 2003 this figure had increased to ninety-four percent representing almost four million children (Towards a Ten Year

Review, 2003). Recent studies have shown an improvement in school attendance and performance, as children are healthier and stronger if they receive proper meals. (Portfolio of South Africa Delivery 1999/2000, 2000: 12). All of the above are positive initiatives that improve service delivery in South Africa.

The nutrition programme was initially undermined by the misappropriation of funds in some provinces (Service Delivery Review, 2004). Evidently, the Department has to ensure that systems are in place to ensure the proper usage of departmental funds. This would comply with the Public Finance Management Act (PFMA), (2002), and the Treasury Regulations (2001), which require accountability and responsibility for public funding in the South African public service (Towards a Ten Year Review, 2003). They also require the process of spending public funds to be transparent. This conforms to effective administrative governance practices.

Like polio and measles, malaria too is a health risk that still poses a challenge both in South Africa and in the Southern African Development Community (SADC) region. There are mainly three malaria-affected provinces in South Africa, namely KwaZulu Natal, Limpopo and Mpumalanga, and the three most seriously affected neighbouring states outside South Africa, are Mozambique, Swaziland and Zimbabwe (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 17 October 2003*). The Department has been able to reduce malaria by approximately sixty four percent in KwaZulu-Natal. There is also a regional joint effort by the Department, with countries such as Swaziland and the southern region of Mozambique, to raise awareness about malaria. Moreover, efforts are steadily continuing to eradicate malaria in South Africa and other Southern African Development Community (SADC) countries by 2007. Forming partnerships with neighbouring countries is an important way of addressing malaria in the region (South Africa Yearbook 2003/2004).

The Department has furthermore established a national reference centre for traditional medicine (South Africa Yearbook 2003/2004). This is particularly important for promoting and valuing diversity in South Africa. The South African government has, for example been experimenting with alternative methods of health care to fight HIV, AIDS, TB and other debilitating diseases. According to the Medical Research Council (MRC), an estimated 80% of the population in Southern Africa already use traditional

therapies and many people reportedly derive benefits from their use (South Africa Yearbook 2003/2004). These therapies could alleviate the service delivery backlogs in health care, especially among previously disadvantaged communities in South Africa.

The Department has embarked on tele-medicine project in 1994 (Access<http://www.doh.gov.za/programmes/tele/tmstrdoc: *Retrieved: 16 October 2003*). Tele-medicine can be broadly defined as the use of information and telecommunication technologies, to provide medical information and services at a distance. The objective is to deliver health care and tele-medicine services to South Africans where the need is the greatest, i.e. mainly in remote rural communities. Tele-medicine has been identified as a strategic tool for facilitating the delivery of equitable healthcare and educational services irrespective of distance and availability of specialized expertise (South Africa Yearbook 2003/2004). The usage of such medical technology will improve health services in South Africa, and the Department needs to also consider other innovative technological mechanisms to increase access to health care in rural areas.

The evaluation report of 2002 by the Medical Research Council (MRC) in South Africa on the tele-medicine system indicated that there have been considerable improvements with respect to access to specialist radiologists in hospitals. However, some of the health care centres are not fully utilizing the technology efficiently (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). The reasons cited for this is the lack of skills and expertise in the usage of latest medical technology (Soobrayan 2004: Discussion). The Department should therefore train staff in the use of the latest equipment. In other centres, where the expertise is in fact available, the new tele-medicine technologies are providing much needed technical support to primary health care (PHC) centres, and the technologies are proving to be clinically efficient and cost-effective, especially rural clinics.

Efficiency has improved in those health centres where the technology is used (Pillay, 2003: Discussion). In this regard, reporting to patients can now receive a response to medical queries within an hour as opposed to a five to seven days, as previously (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). Moreover, there has been an increase in the competence of primary health care (PHC) providers

with regard to interpreting radiographic studies. This can be attributed to the training offered to radiographers by the Department and the effective usage of the technology. More importantly, there has been an improvement in the ability of community service doctors to diagnose and manage various medical conditions, particularly relating to trauma and chest diseases. The usage of the latest technology has thus definitely improved health services where it is used. Furthermore, the speed and level of reporting to patients has improved too. It can be argued that the usage of tele-medicine in South Africa should contribute to the wider development priorities of the Southern African Development Community (SADC) region and be a contribution to the African Renaissance.

Despite the abovementioned intentions and praiseworthy efforts by the Department of Health to improve basic health care, a number of significant challenges remain. The Portfolio of South African Delivery 1999/2000 (2000: 99) indicates that a percentage of the new clinics in rural communities are standing empty and are not being used. This can be attributed to the shortage of doctors and nurses in the Department. In 2003, there have been reports on the number of unfilled posts and other related staffing matters within the public health sector especially in previously disadvantaged rural communities in South Africa (Access<htpp://www.doh.gov.za/doc/pr/2002/pr: *Retrieved: 16 October 2003*). The Department is however trying to improve its human resources shortage.

Health workers and professionals are undeniably the most critical resource in the delivery and improvement of health care in South Africa. Their movement between rural and urban areas, public and private health sectors and across borders, impacts on efficient   public   health   delivery   in   South   Africa (Access<htpp://www.doh.gov.za/doc/pr/2002/pr: *Retrieved: 16   October   2003*). Furthermore, the majority of doctors in South Africa in fact practise in the private sector. There is also a growing tendency among South African doctors to emigrate, which   is   having   a   profoundly   negative   effect   on   the   health   sector (Access<htpp://www.doh.gov.za/doc/pr/2002/pr: *Retrieved: 16 October 2003*). In 2002, the Eastern Cape Province in South Africa, for instance, was confronted with challenges relating to human resources, particularly low staffing levels in some public health institutions. A massive recruitment effort was thus mobilized in 2002 by national and provincial departments, to assist the Eastern Cape Province in this regard. This is indeed

proving to be successful in addressing human resources constraints in the Eastern Cape Province. Other provinces can adopt similar initiatives to address human resources constraints.

In addition to recruiting more health care professionals, the Department is also addressing the uneven distribution of professionals between the private and public sectors, and their emigration to other countries by offering them better pay, improving working conditions, providing incentives (Access<htpp://www.doh.gov.za/pr/2003: *Retrieved: 16 October 2003*). This includes the improvement of working conditions in the public health sector. In this regard, in 2003, R500 million was been set aside by the South African government to retain health professionals, who are in particular short supply and to attract more medical professionals into the public health sector in South Africa. This allocation was increased to R750 million in 2004 and is expected to reach R1 billion in 2005/2006 (Access<htpp://www.doh.gov.za/pr/2004: *Retrieved: 30 September 2004*). The money will be used to introduce a system of allowances and to improve the salaries of medical professionals with scarce skills and those serving in rural areas in South Africa. The money will also be used to improve the salary structures of certain medical professions, mainly for doctors and nurses.

The use of foreign health care professionals has partly assisted in relieving some of the shortage of skilled medical practitioners in South Africa (Access<htpp://www.doh.gov.za/pr/2004: *Retrieved: 30 September 2004*). There are approximately seven thousand, two hundred and three foreign-qualified doctors working in South Africa (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). In addition, medical interns in South Africa are required by the South African government to do their compulsory internship or community service at public hospitals, before seeking registration with the Health Professional Council of South Africa (HPCSA). In fact, only after completion of this service are they allowed to register with the HPCSA, and only then are they allowed to practise privately by the South African government. This system of community service provides significant relief in rural areas in South Africa, where there is an acute shortage of personnel. In 2002, it has been estimated that twenty six percent of doctors', dentists' and pharmacists' posts were filled through the government's compulsory internship or community service.

In 2003, the Department expanded community service to include physiotherapists, radiographers, occupational therapists, speech and hearing therapists, clinical psychologists, dieticians and environmental health officers (Access<http://www.gov.za/yearbook/2002: *Retrieved: 30 September 2004*). These initiatives are excellent in addressing and alleviating human resource shortages in rural communities in South Africa.

The positive efforts made by the Department, such as, on the one hand, increase access to and improving health care in rural areas and, on the other hand, the complex nature of diseases such as HIV/AIDS, are some of the factors that have put a strain on financial and human resources in the Department (Access<htpp://www.doh.gov.za/pr/2003: *Retrieved: 16 October 2003*). Despite efforts made the Department of Health in South Africa in alleviating the human resource constrains, various provinces are still reported to be under-resourced in both terms of staff and finances (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*).

Significant progress is being made in human resources development (HRD), which includes the development of a human resources plan for the health sector. In addition, community service was extended to medical, dental and pharmaceutical interns to improve health care. There is a shortage of money to manage new clinics in rural areas in South Africa (Service Delivery Review, 2004). Furthermore, due to inadequate funds, these clinics are not functioning at a favourable level, which impacts their performance (Pillay, 2003: Discussion). The lack of funding has impacted negatively on the supply of staff, equipment and medicine to these new clinics (Portfolio of South Africa Delivery, 1999/2000, 2000: 12). In 2003, the Department looked at strategies to alleviate this challenge (Service Delivery Review, 2004). These strategies included the increase of funding for new clinics that were not fully operational and compulsory community service by medical personnel, as outlined earlier.

A further challenge is the lack of easy access to clinics (Portfolio of South Africa Delivery 1999/2000, 2000: 99). This could be attributed to various reasons, for example, the lack of adequate public transport to these centres. In comparison, however, approximately four hundred clinics are currently functional in rural areas in South Africa (Service Delivery Review, 2004). This is a significant accomplishment for the

South African health sector. Nonetheless, in spite of these achievements, the quality of services in primary health clinics is not comparable to general hospitals (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). Furthermore a significant proportion of households from disadvantaged rural communities continue to use public hospitals rather than clinics (Portfolio of South Africa Delivery 1999/2000, 2000: 99; Service Delivery Review, 2004), which places a tremendous burden on public hospitals.

There Department is encountering many difficulties with regard to the implementation of policies (Access<http://www.gov.za/yearbook/2002: *Retrieved: 30 September 2003*). This most significant is drastic cost cutting. Objections were received from doctors and hospital leadership, who argued that their ability to deliver essential health services is severely affected by cost cutting (Service Delivery Review, 2004). Furthermore, they argued that they are not adequately consulted on important issues impacting on the public health sector (Portfolio of South Africa Delivery 1999/2000, 2000: 99). They maintained that, although the broad shift to primary health care (PHC) has been welcomed, detailed policies have not had the intended effect (Access<http://www.gov.za/yearbook/2002: *Retrieved: 30 September 2003*). They have attributed this to inefficient policy implementation due to financial constraints (Pillay, 2003: Discussion).

In 2003, although hospital budgets have been cut, health care has not yet fully shifted to clinics to the extent envisaged; as a result, hospitals are increasingly burdened with huge demands from the South African public (Access<htpp://www.doh.gov.za/docs/pr/2004: *Retrieved: 30 September 2004*). As a result, they have not been able to provide the level or quality of service desired by the South African government and by patients (Moodley 2003: Discussion).

In 2003, it became evident that public hospitals were still providing the bulk of health care (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*). The Department therefore has to improve the accessibility of clinics in South African rural communities to avoid an overload on public hospitals. In this regard, it has to market the services provided by the clinics more widely amongst rural communities. It has to devise strategies to encourage the use of clinics among communities in South Africa.

Financial constraints inevitably impact on public health services in South Africa (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). The Department's policy of shifting limited financial resources from the previous apartheid-centred approach to primary health care in under-served areas is having a negative impact on South African hospitals, leading to staff cuts, the closure of some outpatient sections and a general deterioration of services (Portfolio of South Africa Delivery 1999/2000, 2000: 99). Due to the reprioritization of funding, health resources have been diverted from better-served provinces to under-served provinces (Moodley, 2003: Discussion). In 2003, this funding system was replaced by unconditional block grants to provinces and the termination of central control over health resource allocation (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*). It is also evident that the government has systematically provided funding to lessen staff cuts and prevent the further deterioration of service. In this regard, the provinces have to manage their financial resources more circumspectly to promote efficiency.

The state of health facilities and the availability of appropriate medical equipment are being urgently addressed by the Department (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*). To this end, it has introduced several major hospital revitalization projects. In 2002, the South African government awarded a budget of R528 million for the hospital revitalization programme. This grant is channelled into carefully planned initiatives to boost patient care. By February 2002, the revitalization programme had funded nine hundred and thirty six projects aimed at physical repairs of hospital equipment, and four hundred and forty-four of these projects had been completed by June 2003 (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). In 2002/2003, a total expenditure of R1, 2 billion had been budgeted for these specific projects.

In 2003, the capital investment project in hospital buildings and equipment under the hospital revitalization programme amounted to R717 million and it is expected to rise to R911 million in 2004 and to R1 billion the year thereafter (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). Eighteen new projects have been initiated, bringing the total to twenty-seven projects currently being implemented under the revitalization programme. It is envisaged that this

programme will go a long way towards addressing the challenges around equipment and facilities that confront the Department.

The prevalence of HIV amongst women attending public health sector antenatal clinics of 2002 suggests that since 1998 the HIV infection rate has been levelling out (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*). There has been a 1,7 percent increase in infections from 24,8 percent in 2001 to 26,5 percent in 2002. This figure has been sustained for four consecutive years (Towards a Ten Year Review, 2003). There has however been a slight drop in HIV prevalence among pregnant teenagers. The 2002 results indicate that the numbers are relatively stable, which contrasts with the steep increases each year prior to 1998. HIV among pregnant teenagers has decreased from twenty one percent in 1998, to sixteen percent in 2000.

In 1998, President Thabo Mbeki of South Africa launched the Partnership against Aids campaign, calling for a broad-based, multi-sectoral societal response to HIV and AIDS (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*). This initiative brings together all the relevant stakeholders and role-players, and creates the links between AIDS and development, needed for holistic interventions that tackle means required to effect lasting behavioural change (Pillay, 2003: Discussion). Four years later, on 9 October 2002, the government launched the 'Campaign of Hope', calling on all sectors of society to join hands in intensifying the campaign to prevent the spread of the HIV infection (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*). Non-governmental organizations (NGOs) at various levels are playing an increasingly important role in implementing the Department's policies (South Africa Yearbook 2003/2004).

In response to these challenges, a number of initiatives were undertaken by the Department to deal with the HIV/AIDS epidemic. For example, in 2001, a comprehensive education program on HIV/AIDS for schoolchildren, adolescents and teachers was launched in South Africa (Second Economic and Social Rights Report 1998/1999, 2000). In addition, there are no restrictions on the scale or distribution of condoms (South Africa Yearbook 2003/2004). The Department can still intensify its partnership with NGOs to play an increasingly important role in implementing priority programmes. It also ought to strengthen its home-based treatment for the care of

HIV/AIDS patients. There are joint initiatives by the government, the National AIDS Committee of South Africa (NACOSA) and civil society organisations (CSO) to develop education and prevention programmes (Moodley, 2003: Discussion). In this context, the national AIDS plan was developed. Furthermore, partnerships with private institutions and international institutions ought to be strengthened, and they should be actively encouraged to assist the Department in dealing with this challenge. They should also be encouraged to fund projects towards this end.

Despite these encouraging initiatives by the Department, AIDS is expected to account for fifty two percent of all deaths in South Africa by 2010 (Portfolio of South Africa Delivery, 1999/2000, 2000:12). In considering the scale of the HIV/AIDS problem in South Africa, it is envisaged that the initiatives to address this disease will impact on the available resources, especially the Department's capacity to deliver and sustain health care in this area. This is re-iterated by Pillay (2003: Discussion).

Tuberculosis (TB) has been prevalent in South Africa for over 200 years. South Africa has the ninth most serious TB prevalence in the world (Access<http://www.doh.gov.za/docs/sp/2002/sp604.html>: *Retrieved: 17 October 2003*). Moreover, the spread of the disease has been exacerbated by the unique patterns of mining, industrialization, urbanization and politics in South Africa. The epidemic continues to grow due to an increase in poverty (South Africa Yearbook 2003/2004). This is exacerbated by the fact that not enough patients are cured the first time they receive treatment (Moodley, 2003: Discussion). The drugs are becoming less effective if the treatment course is not completed. There are also resistance to strains and mutations of the existing TB strains. This is further complicated by HIV/AIDS, which is complicating the TB strain (Pillay, 2003: Discussion).

According to health experts, successful implementation of a treatment strategy is dependent on the establishment of a district health system in the various provinces and maximizing community involvement (Second Economic and Social Rights Report 1998/1999, 2000). The so-called directly observed treatment short-course (DOTS) is a comprehensive strategy for TB control, designed to curb the incidence of multi-resistant TB strains and stop the spread of the epidemic. In June 2002, the number of DOTS districts (where the treatment is offered) increased in South Africa

(Access<http://www.gov.za/yearbook/2002>: *Retrieved: 13 October 2003*). By 2003, DOTS has been implemented in seventy percent of all health districts (Towards a Ten Year Review 2003). The progress in the establishment of the system has been slow, although some hundred and fifty-three districts had been demarcated (Service Delivery Review, 2004). Treatment rates also remain below the target set by the Department (Towards a Ten Year Review, 2003). The low percent of patients cured reflects the compound effect of drug-resistant TB.

In 2002, the Department launched the Medium-term Development Plan for the National TB Control Programme (Access<http://www.gov.za/yearbook/2002>: *Retrieved: 13 October 2003*). The plan aims to achieve specific targets by 2005, such as a cure rate of between eighty and eighty five percent among TB cases. On the 24th March 2004, the Minister of Health in South Africa launched the Department's social mobilization and advocacy TB campaign, aimed at effective TB management. All of these are positive efforts towards TB control and treatment in South Africa, but they need to be accelerated to ensure a better success rate.

A particular problem that reduces the efficacy of the public health service in South Africa is the theft of medicine (Portfolio of South Africa Delivery 1999/2000, 2000:12). The Chief Director of the Department of Health estimates that theft of medicines was amounting to R50-million to R1-billion per year in public hospitals in South Africa. This excludes the theft of expensive equipment and linen. The Department thus planned to develop more effective management systems and strategies, such as computerized systems to track the distribution of medicines from procurement to patient, as well as better depot management (Moodley, 2003: Discussion). By 2003, it could not be ascertained whether such strategies had been set in motion yet.

Challenges have also been identified with regard to leadership in the Department (Pillay, 2003: Discussion). In the Health Summit of 2001, the Minister of Health indicated that policy implementation issues with respect to slow service delivery are critically affected by leadership decision-making and leadership commitment (Access<htpp://www.doh.gov.za/docs/pr/2003>: *Retrieved: 16 October 2003*). The South Africa Yearbook 2000/2001 indicates that the lack of effective leadership poses a

serious challenge in the Department and that it impacts negatively on public health delivery. This is re-iterated by Moodley (2003: Discussion).

From the above discussion it is clear that the Department of Health has experienced successes as well as failures in many of its programmes and initiatives. In short, among the successes are the numerous programmes to curb and reduce various diseases such as TB, HIV/AIDS, malaria, measles and polio. In addition, efforts are being made to improve total quality management through various initiatives such as, a patients' charter. Furthermore, there has been continued investment in improving the quality of health care by improving quality systems, providing skills training and encouraging the extensive usage of the latest medical technology. The most noteworthy achievement of the Department is the establishment of primary health care (PHC) and clinics in the rural areas of South Africa. Although there are challenges with regard to the accessibility of these clinics, this project has nonetheless proved to be beneficial for approximately six million South Africans in rural communities. In addition, the Department has undergone internal transformation such as the rationalization and decentralization of hospital services. Drastic cost cutting has however had a negative impact on the provision of services. Despite these negative impacts, the Department is confident that the decentralisation of hospital services is an important step. The decentralization of hospital services is an important step towards increasing leadership participation in hospital management. It is also aimed at promoting effective governance by improving accountability, transparency and participation in the Department. This is in accordance with the Constitutional principles and the various policy documents of the South African government.

From the above discussion it emerged that the challenges impacting on service delivery by the Department of Health are human resources constraints, financial constraints, normative challenges, policy implementation, inadequate technical competence, co-ordination and integration, and inadequate monitoring and evaluation systems to measure performance and evaluate outcomes. Human resources and financial constraints have impacted on the provision of services in a percentage of clinics and provincial hospitals. Various initiatives have been undertaken to address the human and financial resources challenges facing the Department. For example, funds have been provided to improve conditions for medical personnel and training has been provided.

Hospitals have entered into public private partnerships (PPPs) to alleviate the cost burden on government. Moreover, the South African government has instituted compulsory community service for medical staff. Foreign medical personnel have been appointed to alleviate the personnel shortage in rural areas in South Africa. On the downside, however, medical personnel in public hospitals in South Africa have complained about not being adequately consulted with respect to crucial issues impacting on them, such as the so-called 'roll-out plan' for HIV/AIDS drugs. Doctors have criticized the Department for not having a detailed policy for the implementation of the PHC strategy in South Africa. Tremendous demand is also being placed on provincial hospitals, and it is obvious that patients are not using the clinics to the extent envisaged by the Department. Various reasons can be cited for this, such as a lack of accessibility. It is also indicated that provincial hospitals provide a better service than clinics. The South African government is taking the necessary steps to address these weaknesses. The challenges impacting on service delivery performance by the Department of Health are summarized in Table 5/5.

Table 5/5

Challenges impacting on service delivery performance - Department of Health

1. Resources	Inadequate Hospital Supplies & Equipment Financial Constraints (Drastic Budget Cuts; Shifting of Funds From Better Resourced Hospitals To Poorly Resourced Hospitals) Staff Cuts
2. Leadership and Human Resource Issues	Shortage of Staff Lack Of Technical Ability/Skills Inadequate Decision-Making Skills Inadequate Leadership Support Lack Of Commitment Ineffective Industrial Relations With Medical Staff
3. Normative Challenges	Theft of Hospital Supplies (Medicines & Equipment Estimated At R50 Million to R1 Billion Per Year)
4. Governance Issues	Deteriorating Health Care (Closure of Outpatient Units In Some Hospitals) Lack of Maintenance Of Hospitals And Clinics Deterioration of Services And Equipment Lack Of Access To Clinics Poor Quality Of Services Uneven Standards
5. Gap Between Policy, Implementation and Sustainability of Existing Service	Policy Lacks Prioritisation Lack Of Proper Time Scales Lack Of Implementation Of Policy Interventions (Example Roll-Out Plan For HIV/AIDS Drugs) Failure To Sustain Policy Interventions Lack Of Co-ordination In Policy Implementation Lack Of Communication Between The Three Spheres of Government For Example With Regard Primary Health Care (PHC) Healthcare Not Fully Shifted To Clinics- Provincial Hospitals Are Burdened With Huge Demands

(Source Naidoo: 2004)

It can be argued that although weaknesses are evident, the real challenge lies in the Department's leadership ability to mobilize and focus its efforts to achieve its goals. Although much is being done at present, critical action is necessary to redress service delivery imbalances and inequities in the provision of health services to the South African society. The Department's policy on 'health for all' can only be achieved through the sustained and focused action of every public servant in the Department with an interest in health in South Africa. The Department's performance remains the key to

improving public health care in South Africa. In this regard, training is crucial, for medical personnel, in the use of the latest medical technology.

The Department should identify and document best practices in respect of workplace ethos and culture; training and education; and monitoring and evaluation. Training and education should be comprehensive and holistic and linked to priority health programmes. Examples should be drawn from top performing public and private sectors in South Africa and abroad. Quality care indicators should be included in performance management agreements. Performance measurement and management ought to be strengthened in the departments, and it should be reinforced by an increased focus on outcomes and impact. The need for such an increased focus on outcomes and for a move away from traditional concerns with inputs is essential. It is necessary for the Department to explore and develop the most useful designs for measuring performance, as well as developing mechanisms for benchmarking.

With respect to the human resources challenges, it is essential to conduct skills audits and training needs assessments. Training must be combined with ongoing support. It is necessary to evaluate the outputs, outcomes and impact of training. With regard to monitoring and evaluation, the Department should develop a set of audit tools (norms and standards) with basic performance indicators. These norms and standards should address major needs and priorities. They should be put into effect and the Department should generate quality audits. The health authorities should ensure that integration starts with joint planning, and the focus should be on inter-sector collaboration. With regard to public-private partnerships and collaborations, the Department plays a major role in providing leadership and clarity on the nature of the relationship between the Department, NGOs and business.

Complementary and coordinated actions by many other stakeholders are critical (Access<http://www.gov.za/yearbook/2002: *Retrieved: 13 October 2003*). The Department has formulated health policies and legislation together with norms and standards for health care. With respect to co-ordination and monitoring of policies, this clearly remains a challenge. The Minister of Health in South Africa has also indicated that co-ordination and monitoring remains a weakness in the Department.

The cluster arrangement is aimed to reduce the fragmentation of government in South Africa and to ensure that each public service department is familiar with what the other departments are doing (The Machinery of Government, 2003: 35). After 1999, the policy objectives of the South African government were consolidated into the priorities of five Cabinet clusters (Towards a Ten Year Review, 2003). In this respect, clustered Ministers are intended to be well-placed in conjunction with their colleagues. The cluster arrangement aims to improve implementation, co-ordination and monitoring of challenges. It also ensures that concerted action is taken towards speedy and thorough policy implementation by the public service in South Africa. These clusters are, in turn, intended to support the Directors-General, who works closely with the Policy Coordination and Advisory Services in the South African Presidency (Chandu, 2004: Discussion). The deliberations of the South African Cabinet clusters have as their overall purpose, being well informed and taking coordinated administrative action. The deliberations of the clusters of the Directors-General seek to improve the ability of the public service to deliver services to society.

The clustering of cabinet portfolios into larger co-coordinated portfolios (committees) is designed to forge greater co-ordination, co-operation and communication between line-function ministries, in terms of policy implementation and service delivery in South Africa (The Machinery of Government, 2003:35). The cluster identifies gaps and inconsistencies in policy implementation of the various programmes (Chandu, 2004: Discussion). The cluster also measures service delivery annually by assessing the impact of policies (Soobrayan 2004: Discussion). The introduction of the cluster approach has contributed to better co-ordination and programme implementation (Towards a Ten Year Review, 2003).

Although the South African government has made great strides with regard to HIV/AIDS projects, these could be extended to other areas of health provision. A more robust consultation mechanism between government, personnel and all other stakeholders is essential. In the area of communicable diseases the Department should create a map of every district across South Africa, depicting the available services and resources related in particular to HIV/AIDS and TB. This would lay the foundation for a more effective intervention consistent with the principle of securing a continuum of sustainable care. This would also enable the Department to identify service gaps

specific to these conditions, and to detect weaknesses in the system, such as deficient referral systems, weak laboratory support and inadequate drug supplies.

In conclusion, despite the challenges and constraints, highlighted above the Department of Health in South Africa has had a number of significant achievements from 1994 to 2003 in terms of public health delivery. It has undertaken a number of programmes to promote public health delivery in South Africa. However, the Department ought to focus on addressing its weaknesses and challenges so that it can rapidly improve public health delivery, especially among the previously disadvantaged communities in South Africa.

Case study two: Department of Housing

Increasing access to housing and secure accommodation is an important part of the South African government's commitment to reduce poverty and improve people's quality of life (South Africa Yearbook 2003/2004). The White Paper on Housing (1994) aims to give all South Africans access to a permanent residential structure, with secure tenure and adequate water, sanitation, waste disposal and electricity services (Muthien, *et al*. 2000: 122). In 1994, while the new government was committed to the speedy redress of past apartheid imbalances and inequities with respect to housing, it was still handicapped by unreliable data (Muthien, *et al*. 2000: 122). The housing backlog in South Africa, in 1994, was reported to be in the region of approximately 2,6 million (Muthien, *et al*. 2000: 122). The South African Department of Housing did not determine the exact figure for housing backlog in 1994, which hampered successful planning. However, the 1996 census made available the necessary statistics to allow for the Department of Housing to plan successfully. The Department now has a better picture of the housing needs in South Africa. The objectives of the Department are listed in Table 5/6 and compared with the initiatives undertaken by the Department to determine service delivery performance.

Table 5/6

Service delivery performance - Department of Housing

Objectives	Initiatives	Outcome
To Increase Access To Housing And To Provide Secure Accommodation	Implemented Secure Tenure For Households In Respect Of The Poor	Between 1994 and 1999 Progress Has Been Slow In 2001-Visible Progress
	Providing Funds For Construction Of Secure Tenure And Safe Homes	R8 Million Provided In 2003
	Constructing Houses For The Poor (Community and NGO Involvement)	1,45 Million Houses Were Constructed For The Poor By 2003
	Launching Urban Renewal Programmes	In Progress
	Launching Rental-Housing Options	In Progress
	Providing Subsidies	More Than R18 Million- Funding Inadequate To Address Housing Backlog
	Expansion Of Housing Credit For The Poor	In Progress

(Source Naidoo: 2004)

According to the 1996 census, South Africa had a total population of approximately forty million people, fifty four percent of who live in urban areas and forty six percent in rural areas (White Paper on the Transformation of the Public Service, 1995: 7). In 1996, it was estimated that in the urban areas, three million, six thousand and seven hundred and twenty households lived in formal settlements, whilst a very large proportion of the households lived in informal settlements and many households resided in backyards. According to the 1996 census, the last two categories are significantly smaller in urban areas than in rural areas (Second Economic and Social Rights Report 1998/1999, 2000). In the rural areas, forty two percent of households are settled in traditional dwellings.

Access to housing and secure accommodation has been difficult, notwithstanding the strenuous efforts put into the project to address the shortage of housing in South Africa. Firstly, the Department promised to deliver one million houses, in its first five-year term. In the pre-1994 election campaign, one of the African National Congress's (ANC) slogans was "Houses for all" (Second Economic and Social Rights Report 1998/1999, 2000). The African National Congress (ANC) is the present governing party in South Africa. However, two years into office, the Department was nowhere near meeting this target, and the national government finally realized that the promises it had made were extravagant and unrealistic.

In 2001, secure tenure for households was implemented for the poor (Speech delivered by Minister of Housing Sankie Mthembi Mahayele in Parliament, 17 February 2003) (Access<http://www. Gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). The United Nations Habitat Agency, in 2001, identified South Africa as a host to the launch of the 'Global Campaign for Secure Tenure', in recognition and support of the progress made by South Africa with regard to the provision of housing for the poor. In this regard, by 2003, eight million people in South Africa now have secure tenure and safe homes (Speech delivered by Minister of Housing Sankie Mthembi Mahayele in Parliament, 17 February 2003) (Access<http://www. Gov.za/search97cgi/s97: *Retrieved: 20 October 2003*).

To date, the Department of Housing has constructed 1,45 million homes, using affordable forms of tenure, to house the poor in South Africa (Service Delivery Review, 2004). Projects that the Department are engaged in through the urban renewal programme include housing delivery, which focuses on providing housing for private ownership, the low-income housing programme and the upgrading of existing low-income housing (Parliamentary media briefing by the Minister of Housing, Ms Sankie Mthembi-Mahanyele, 20 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*).

The Department is involved in the establishment of housing support mechanisms, which will include greater access to finance and technical advice (Parliamentary media briefing by the Minister of Housing, Ms Sankie Mthembi-Mahanyele, 20 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). This

programme involves the development of new housing through a variety of initiatives, such as public private partnerships (PPPs). It also seeks to create rental-housing options through a variety of delivery mechanisms. These include upgrading and redeveloping of appropriate informal housing. A proportion of informal housing that has been constructed in backyards and in freestanding locations, is thus retained, upgraded and redeveloped as rental accommodation. The Department is therefore exploring various options of addressing the housing shortage in South Africa.

The success of the Alexandra Renewal Project (Alexandra is a township in South Africa) provides insight into best practices regarding the South African government's urban renewal programme (Parliamentary media briefing by the Minister of Housing, Ms Sankie Mthembi-Mahanyele, 20 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). The objective was to create decent accommodation for three hundred and fifty thousand people within Alexandra Township by upgrading existing dwellings, upgrading and redevelopment of free-standing informal settlements, creating new housing, the redeveloping of hostels and removing households from unsafe areas.

There are other initiatives that have been undertaken by the Department. For example, the Riverpark housing project provides seven hundred and seventy seven affordable houses to people (Riverpark is one of the many suburbs in a larger city in South Africa). Approximately R30 million was invested for this project, which was completed in June 2002. The provision of houses is not restricted to the Department, though, and is open to a wide range of stakeholders. By involving various stakeholders, the Department can meet its policy objectives. Research suggests that where civil society organisations (CBOs) participate more fully, service delivery needs are better identified (Towards a Ten Year Review, 2003).

A core element of the housing programme by the Department was the subsidy scheme for land, housing and infrastructure, to those earning less than R3 500 per month (Parliamentary media briefing by the Minister of Housing, Ms Sankie Mthembi-Mahanyele, 20 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). This was supplemented by the expansion of housing credit to the poor, with the South African government assuming some of the risk inherent in lending

to low-income groups. In 1994 and 1995, it was evident that the provincial Departments of Housing had failed to spend its housing allocations, despite the huge housing backlog. This can be attributed to the Department having received their funding allocations very late in the year, which made it difficult to start new projects during this period. The South African government has subsequently introduced a medium-term expenditure framework (MTEF) for budgeting, which is presently being adopted by public service departments. In this regard, funds that are not used for a specific year are rolled over into the next financial year. This is done for a period of three years. This system should ensure sustainable funding for projects in South African public service departments.

In 1996, almost a hundred thousand new houses were built and three hundred and fifty thousand subsidies were provided (Portfolio of South Africa Delivery 1999/2000, 2000: 40). At the end of 1997, the Department had built over four hundred thousand houses, while approximately seven hundred thousand housing subsidies had been allocated. By 1998, six hundred and eighty thousand new houses had been built, and nine hundred thousand subsidies were awarded (Portfolio of South Africa Delivery 1999/2000, 2000: 12).

In 2002, the Department decided to increase beneficiary participation in housing delivery (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). In this respect, provisions were made for people to either contribute financially or participate in the physical construction of their houses. This approach is successful, in that South African communities are becoming more involved in housing process projects or self-building. There is an emergence of bigger and better structures. The self-building project is a positive step for housing programmes, as poor communities are being empowered with various skills.

The most benefits of self-building are gained by women and the youth, who together constitute more than ninety percent of people currently involved in this type of housing delivery (South Africa Yearbook 2003/2004). To further enhance the programme, the Department has sought additional assistance in the form of thirty-eight Cuban architects and engineers. They have been deployed in the provinces in South Africa to support increasing demand for this type of housing delivery. Cuba is one of the countries in the

world that uses a similar approach in housing construction, imparting skills to the community. According to Van Niekerk, *et al*. (2001: 256), the process of identifying the most effective and efficient service provider for each project also ensures value for money. It allows for competition between service providers, which ensures service delivery at the best possible price. It also contributes towards ensuring the flexibility of the Department in responding to continuously changing circumstances.

The Department has strengthened its working relations with interfacing ministries, such as Land Affairs and Provincial and Local government. The Departments of Housing and Land Affairs and Provincial and Local Government are assisting in ensuring the improvement   of   efficiency   within   local   housing   authorities (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). These partnerships, both with the communities and internally with other public service departments, are innovative governance approaches to improve service delivery. It is becoming abundantly clear that the South African government is governing in different ways than had previously been done.

The South African Department of Housing has invested more than R18 million in housing subsidies. Massive funding is being made available to address the housing imbalances   and   inequities   in   South   Africa   (GOVZA: Imbizo: 2002) (Access<http://www.gov.za/issues/imbizo/2002: *Retrieved: 20 October 2003*). However, due to the extent of the challenge, the funding is inadequate to rapidly alleviate housing shortages in South Africa at the necessary pace. Fiscal pressure has then forced the South African Department of Housing to use innovative governance strategies   such   as   public-private   partnerships   (PPPs),   thereby   incorporating   the expertise, investment and management capacity of the private sector to improve and extend services to all communities.

In 2003, the South African President, Mr. Thabo Mbeki, announced a new urban renewal and integrated sustainable rural development programme (Parliamentary media briefing by the Minister of Housing, Ms Sankie Mthembi-Mahanyele, 20 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). The programme is met with challenges, such as with inadequate budgeting. As programmes

are implemented, more money is often needed and sometimes housing projects are halted midstream, before funding becomes available.

It is apparent that financial constraints are acute in the Department of Local Government and Housing (DLGH) in South Africa (Muthien, *et al.* 2000: 122). An example is the Department of Local Government and Housing (DLGH) located in Kimberley, which is the central supportive agency for local authorities in the Northern Cape Province. Muthien, *et al.* (2000: 122) indicates that part of the problem is that the Department has had to build up its own financial resources. The municipalities including Kimberley are mainly responsible for raising their own revenues (Kuye 2004: Discussion). The provincial government, however, receives the bulk of its funding from national government. It can therefore be argued that local authorities in South Africa should opt more widely for innovative governance approaches, such as public private partnerships (PPPs). In this manner, services can be provided on a cost-effective and sustainable basis.

Resource constraints and changing demographics now necessitate a more rigorous leadership and governance approach by the Department to meet its objectives (South Africa Yearbook 2003/2004). There has also been a shift from rural to urban areas. Twenty percent of people in the main urban areas are migrants from rural areas. This trend has exacerbated the housing backlog. Furthermore, the Department also needs to focus on the quality of housing, and their sizes, as the size of the houses built by the Department are a source of discontentment and dissatisfaction amongst citizens (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). Moreover, unscrupulous contractors in South Africa have been defrauding many people by building houses with interlocking bricks and no cement at all, and these are very unstable.

The National Home Builders Registration Council (NHBRC) and the Consumer Protection Measures Act (1998) have been launched in South Africa, on order to protect housing consumers from corrupt developers (South Africa Yearbook 2003/2004). Since April 2002, all new government-subsidised houses have enjoyed protection against shoddy workmanship by building contractors. In this regard, action is clearly necessary against unscrupulous contractors to protect homeowners from inferior workmanship.

The Department of Housing must ensure that high standards are maintained in the provision of housing. More significantly the Department must ensure that housing contractors have the necessary skills to provide their services. The focus should therefore be on quality, rather than on a quantity-driven approach thus far adopted by the Department.

A further challenge confronting the Department of housing is its limited regional leadership capacity (Muthien, *et al*. 2000: 122). According to Muthien, *et al*. (2000: 122), public servants lack the leadership skills and experience to manage a provincial department effectively. In 1995, the Department suffered setbacks due to financial resources being mismanaged, and, even more seriously, the reputation of the Department suffered incalculable damage. It is very important for the Department to train public servants to avoid further setbacks. The overall result thus far at provincial level has been inadequate performance on the part of the Department, on various grounds pertaining to housing delivery. The public servants at the provincial level were often ineffective in responding to the needs of local governments (Muthien, *et al*. 2000: 122). It is thus necessary to ensure effective communication within the Department at all levels and between all levels. According to Chandu (2004: Discussion), it is important for local government in South Africa to be accorded greater authority. In this way, departments will be able to respond more effectively to the customer needs. According to Van Niekerk, *et al.* (2001:250), decentralization is more innovative than centralization. This is re-iterated by Friedman (2003: First South African Public Management Conversation), who argued that decentralization encourages service delivery, which ensures that the well being of the communities are promoted.

Muthien, *et al.* (2000: 122) indicate that, that there are not sufficient leadership skills in the Department of Local Government and Housing (DLGH), which causes enormous frustrations. The leadership often seems to be overwhelmed by the massive task they have to perform, in the context of numerous small local authorities with severe capacity constraints (Chandu, 2004: Discussion). In this regard, the DLGH is chronically under-funded and understaffed. In examining provincial and local Housing departments, Muthien, *et al.* (2000: 122) argue that the challenges faced by the Northern Cape Province's, Department of Local Government Housing, with respect to a lack of capacity and finances are shared by a number of other local government Housing

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departments in the other provinces in South Africa. The lack of capacity entails an inefficient workforce, which impacts of policy implementation, monitoring, evaluation and reporting (South Africa Yearbook 2003/2004).

It is clear that the Department must adopt a governance approach, which focuses on different forms of partnerships in the short- to medium- term. This would alleviate the fiscal and capacity challenges confronting the Department. However, there should also be capacity and skills transfer to public servants in the Department to ensure the future implementation and sustainability of projects. A win-win principle should be strived for, as opposed to a profit motive, so that the Department's interests are best served. Furthermore, the Department of Housing should ensure effective implementation of its strategy and guidelines for capacity building. This is crucial for improved service delivery. In addition, the Department should search for innovative ways to mobilise finance for housing from sources outside government. The Department can also use interventions to promote package finance for those delivering housing to low-income families.

Other challenges faced by the Department pertain to red tape and bureaucracy (Service Delivery Review 2000). Between 1997 and 1999, for instance, local governments in the Northern Cape Province of South Africa experienced intense frustration with the lack of response to their needs from the Department of Local Government and Housing (DLGH). The town of Springbok in South Africa, for example, had to wait four years for the Department to approve its structure plan. These long delays led to local authorities in South Africa interpreting the situation in party-political terms, which, in turn, worsened relations between local authorities and the provincial Department of Housing (Muthien, *et al.* 2000: 122). The Bo-Karoo District Council also experienced the sluggish policy implementation of the infrastructure development plan (IDPs). The Department had promised R50000,00 to each district council (at local government level) for designing such IDPs in rural areas. However, this money never came through, and the predominant impression was that the Department had insufficient funds. It is clearly crucial for the Department to focus on improving its own efficiency and effectiveness. In this regard, the Department has to improve its public administration model to promote efficiency and effectiveness. The classical public administration model adopted

by the Department is ineffective in promoting a sustainable Department, and it should examine new trends in public administration and adapt it to its current needs.

It is imperative for the different spheres of government that is national, provincial and local (municipalities), to improve intergovernmental relations (IGR). This is important to avoid red tape and bureaucracy and to improve policy implementation. The ultimate objective of the Department should be to transform itself from a bureaucratic mechanism into an innovative, flexible and responsive institution that is solutions oriented and continually seeks to identify mechanisms to improve service delivery, especially in previously disadvantaged communities in South Africa. Furthermore, the Department ought to improve its management and leadership skills to improve efficiency so that long delays in terms of policy implementation can be avoided. There is a need to review the skills base of personnel in the Department to enable the development of a small, but highly motivated and focused workforce. In this respect, the Department should integrate motivation principles discussed under the path-goal leadership theory in Chapter Four into its leadership framework. The recognition of individual effort and the systematic efforts to strengthen the workforce are fundamental to the current leadership and governance framework in South Africa.

It can be argued that this difficulty by the Department to promote the effective implementation of projects or programmes can be attributed to a number of causes (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). Firstly, it has proved difficult for provincial housing departments to adequately monitor municipal performance with respect to service delivery. Secondly, administrative capacity constraints are compounded by financial constraints, with most provincial and local departments lacking sufficient funds to implement or sustain service delivery projects. Frequently, provincial departments have discovered that a municipal council (local level) has financial constraints, only when it is too late in the year to implement effective remedial action.

An effective communication and co-ordination strategy is essential in alleviating these shortcomings. Even when provincial departments have experienced staff and effective leadership, there are massive housing backlogs that provincial departments are required to address. However, some provincial departments have leadership and staff that do not

have the necessary competencies to provide assistance. There remains a fundamental lack of clarity about what developmental functions local authorities are required to perform that makes support from provincial to local level difficult. It is important for each level of government to clarify its functions to avoid further confusion. Finally, there are departmental tensions at provincial level that can also prevent co-ordinated support for local government. The leadership should ensure that departmental tensions are dealt timeously to ensure efficiency within each department and between departments.

The Department should improve its human resources skills. In this regard, the necessary training and development ought to be provided to personnel. Furthermore, funding ought to be made available by the government to ensure the sustainability of projects. Moreover, an effective monitoring and evaluation mechanism is crucial to monitor the performance of the Department. Administrative inefficiencies should be dealt with and eliminated by improving processes, practices and systems within the Department. Furthermore, steps ought to be taken to clarify the respective roles of national, provincial and local authorities in South Africa. Intergovernmental relations between the different levels of government have to be improved to avoid tension between the different spheres of government.

In evaluating the progress of the Department on the whole in improving service delivery, over the last nine years, it can be concluded that the Department has made steady progress. In the first five years, the Department had been accused of being slow in the delivery of houses. However, since 2000, the statistics reflected in the discussion above indicate that there has in fact been visible progress with regard to housing delivery in South Africa.

The Department has embarked on various innovative projects to address housing imbalances and inequities in previously disadvantaged communities in South Africa. Furthermore, it has embarked on innovative governance strategies, such as creating partnerships with the communities to assist in addressing their own housing needs. In this regard, for example, communities can become physically involved in constructing houses. In this way, skills are imparted to communities and jobs are created for the poorest sectors of the South African society. Moreover, the Department has provided

housing subsidies for the most disadvantaged sectors of society. This has enabled many citizens to purchase housing, which had not been possible under the previous dispensation.

Financial constraints can be cited as a major impediment to service delivery performance in South Africa. The provinces are largely dependent on funding from the national government. The most important source of revenue for the provinces is their equitable share, to which they are entitled under the Constitution of South Africa (1996). In this respect, provincial governments have the largest spending budgets. They are responsible for service delivery of major social services such as education, health, social grants and welfare services, housing and provincial roads. These services have limited or no cost-recovery potential. Provinces are therefore largely dependent on transfers from nationally raised revenue. The local government sphere, in contrast, is partially dependent on funding from the provinces, but it raises about ninety percent of its own revenue through municipal taxes, such as rates and licensing.

In accordance with the Constitution of South Africa (1996), many national and provincial departments are considering which of their functions would be best performed at the local sphere, and should thus be devolved to local government. The functions under such review include housing delivery, health care and district health system, water and municipal policing. The decentralization of management is also being considered for functions like education (to regions), health (to districts and hospitals) and justice (cost-centres to local court level) (The Machinery of Government, 2003: 15). This proposed development would undoubtedly have implications with respect to improving and redressing service delivery in previously disadvantaged communities. It will also have implications for funding. The shifting of the proposed functions will involve a shift in funds, fiscal powers, assets and liabilities and human resources.

It has been argued in this study that public private partnerships (PPPs) could be an innovative governance approach in the short- to medium- term to curb fiscal pressure on the South African government. There are other pressing service delivery needs that the South African government needs to focus on, such as education, health and providing infrastructure (Service Delivery Review 2004). There is therefore less money to direct

to housing needs. The Department of Housing has however been looking at innovative governance approaches for funding projects to alleviate the housing shortage. For example, in 2002, the Department introduced a project whereby people could contribute financially to the building of their own homes. The Department is looking at a period of about fifteen to twenty years to achieve its goal of redressing the housing imbalances and inequities in South Africa (Portfolio of South Africa Delivery, 1999/2000, 2000: 12). The challenges impacting on service delivery performance by the Department of Housing are summarized in Table 5/7.

Table 5/7

Challenges impacting on service delivery performance - Department of Housing

1. Resources	Lack Of Human Resources (Capacities And Understaffing) Financial Constraints (Some Projects Are Under-funded)
2. Leadership Challenges	Limited Regional Leadership Capacity And Skills
3. Governance Challenges	Lack Of Clarity On Functions Of Different Spheres Of Government Poor Intergovernmental Relations Lack Of Communication Inadequate Co-ordination Administrative Constraints Adoption of Classical Public Administration Model (Bureaucracy And Red-Tape – Lack of Responses To Housing Plans) Inadequate Monitoring And Evaluation Mechanisms Housing Fraud Departmental Tension Urbanisation Inferior Quality Of Low Cost Housing-Shoddy Workmanship) Sluggish Policy Implementation (Slow Performance) Mismanagement Of Funding Under-funding (Northern Cape)

(Source Naidoo: 2004)

In conclusion there are leadership, governance, and human and financial resource constraints impacting on service delivery performance by the Department of Housing. With respect to leadership, there is limited regional capacity and skills. With regard to governance, there is an obvious challenge with poor and tension-filled intergovernmental relations (IGR) between the different levels of the Department. Furthermore, there is obvious confusion over the roles and functions of each sphere of government, which clearly affects and hampers communication and the co-ordination of projects between different departments.

The Department cites administrative constraints as another challenge impacting on housing delivery. In this respect, the adoption of the classical public administration model has slowed down service delivery tremendously. The model involves red tape and bureaucracy, which is inefficient and ineffective for improving service delivery. A challenge in the Department, are inadequate monitoring and evaluation systems. In this regard, the provincial departments have not been able to monitor projects at local government effectively. Inadequate funding compounds these challenges cited above.

The improved relations between the Housing Ministry and the commercial banks, the decline in the culture of non-payment and the willingness by the poor to honour their debts, bodes well for the mammoth task of providing houses for the poorest communities in South Africa (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 30 September 2003*). Furthermore, by 2003, the Department has secured approximately eight million houses. Nonetheless, it is evident that the housing demands in South Africa far exceed the available resources. The Department has adopted innovative strategies to address the challenge of resource constraints. These include involving the communities in housing projects, and bringing communities and non-governmental institutions (NGOs) together to build low-income housing. In the same light, there are instances where the Department has entered into public private partnerships (PPP) to redress service delivery imbalances and inequities in previously disadvantaged communities. These are excellent governance approaches adopted by the Department. It is however essential for the Department to increase its partnerships, so that it will be in a stronger position to meet its long-term objectives.

Case study three: Department of Justice and Constitutional Development

In terms of Section 165 of the Constitution of South Africa (1996), the judicial authority of South Africa is vested in the South African courts. The courts include the Constitutional Court, established in terms of Section 98(1) of the Constitution (1996) and the Supreme Court of Appeal, established in terms of Section 101(1). In terms of Section 166, the other courts include the high courts, as well as any high court of appeal that may be established by an Act of Parliament to hear appeals from other courts; the magistrates' courts and any other court established or recognized by an Act of Parliament.

The Constitutional Court outlawed corporal punishment and the death penalty (Access<http://www.doj.gov.za/about/adminjustice2002.html: *Retrieved: 17 October 2003*). These are important measures in promoting democratic governance in South Africa. The Constitutional Court is the highest court in South Africa for the interpretation, protection and enforcement of the Constitution (Service Delivery Review, 2002). The courts are independent and subject only to the Constitution (1996) and the law (Van Niekerk, *et al*. 2001: 67). The establishment of a wide array of judicial authorities contribute towards ensuring that the rights of individuals are protected. Each branch of the judiciary has clearly defined areas of jurisdiction in relation to the manner in which it upholds the principles of democracy. The principles contained in the Constitution (1996) are upheld in the best interest of the citizens.

The Department of Justice and Constitutional Development in South Africa is responsible for the administration of the courts and constitutional development (Access<htpp://www.doj.gov.za/about/adminjustice2002.html: *Retrieved: 17 October 2003*). It performs these functions in conjunction with the judges, magistrates, the National Director of Public Prosecutions (NDPP) and the Directors (DPP) of Public Prosecutions, who are independent (South Africa Yearbook 2003/2004). The Department's responsibilities include the provision of adequate resources for the proper and efficient functioning of the criminal and civil justice system in South Africa. It provides legislation and gives administrative support for the establishment of institutions required by the Constitution (1996). It is independent of the legislative and executive branches of government, thereby ensuring that everyone, including the government itself, follows the laws of the country.

It is clear that the separation of power in terms of the legislative, executive and judicial authorities in South Africa contributes towards ensuring and upholding the tenets of democracy and ensuring effective governance in a manner prescribed by the Constitution (1996). According to Van Niekerk, *et al*. (2001: 68), the independence of the judiciary ensures that all disputes arising from the principle of the separation of powers can be dealt with by the courts of law, which are empowered to pass judgments on their interpretation of any dispute that arises.

The mission of the Department of Justice and Constitutional Development is to uphold and protect the Constitution (1996) and the rule of law (Access**<http://www.doj.gov.za/about/strategy.html**: *Retrieved: 17 October 2003*). The Department's goals are to improve service delivery to the public in order to enhance customer satisfaction (Portfolio of South Africa Delivery 1999/2000:12). It also aims to ensure that its business is conducted efficiently and in a cost-effective manner, with the primary focus being on the courts. This includes improving efficiency in the courts and making justice more accessible and affordable (South Africa Yearbook 2003/2004). The objectives of the Department are listed below in Table 5/8 and compared with the initiatives undertaken by the Department to determine the level of service delivery performance.

Table 5/8

Service delivery performance - Department of Justice and Constitutional Development

Objectives	Initiatives	Outcome
To Uphold And Protect The Constitution (1996) And The Rule Of Law	Enforcing Punitive Measure Of Law (Example Amendment Of Bail Applications And Mandatory Minimum Sentence Was Introduced For Serious Crimes)	Successful
Improve Service Delivery	Prioritising Crimes Against Women And Children	In Progress
	Implementing National Crime Prevention Strategy (NCPS)	Reduced The Rates of Serious Crimes
	Integrating The Justice System To Improve Management Of Courts And Cases	Improved Courts And Case Cycle (Reduced From 145 Days to 75 Days)
		Conviction Rates Increased
		Huge Backlogs of Cases
	Usage Of Technology	In Progress
	Strengthening Management And Leadership Through Training	In Progress
	Informal Structures Set-up (Authorized Headperson Or Deputy Within His/Her Area Of Jurisdiction May Hear And Determine Civil Claims Arising From Indigenous Law And Custom)	In Progress
		Progress Slow

(Source Naidoo: 2004)

Before the 1980s, there was a clear differentiation in the South African legal system, which was based on race (Access**<http://www.doj.gov.za/about/strategy.html**: _Retrieved: 17 October 2003_). South Africa had a dual legal system, in that, within the state legal system there was a body of law applicable to Black South Africans and another applicable to other racial groups (that is White, Indian and Coloured). The former was referred to as the African customary law and the latter as the Western law. From the 1980s onwards, there had been an opening up of the Western law to include Black South Africans as well. In 1983, the Hoexter Commission condemned the existence of courts for Black South Africans in the urban areas. As a result the Commissioner Courts and their appellate wing were abolished in 1987 (Special Courts for Blacks Abolition Act 1986, Act 34 of 1986). This was an important development in

attempting to integrate the majority of the population into the mainstream of the justice system in South Africa and to promote democratic governance.

There are many factors that impact on the service delivery performance by the Department (Naidoo, 2004: Discussion). One of the greatest remaining challenges for the Department of Justice and Constitutional Development in South Africa is its successful transformation (Part 4 - State of the Nation Address of the President of South Africa, Thabo Mbeki, Houses of Parliament, Cape Town, February 2003) (Access<http://www.sabcnews.state_of_the_nation/address2: *Retrieved: 20 October 2003*). This is re-iterated in the Service Delivery Review of 2004 and the South Africa Yearbook 2003/2004. The Department of Justice and Constitutional Development has to deal with the difficult issues of the transformation of South Africa's prosecutorial services, the magistrates and judges fraternity, and the introduction of legislation to ensure that the country's legal system are in line with the Constitution (1996). The Department, which controls at least R1,6 billion (0,86 percent of the total state budget), had to transform itself into a legitimate, accessible, accountable and effective state department, while at the same time striving to reduce the levels of crime and enhance stability and security.

Efforts to promote representivity constituted an important element of the transformation process (Towards a Ten Year Review, 2003). According to the Service Delivery Review (2002), during the 1990s, the justice system had been the domain of White Afrikaner male South Africans, as far as staffing was concerned. Section 195 of the Constitution (1996) stipulated that public service departments should reflect the composition of the population in management positions and other occupational groups. In addition, the post- apartheid South African government (since 1994), had introduced a policy to promote employment equity in the South African public service (Access<http://www.doj.gov.za/about/adminjustice2002.html: *Retrieved: 17 October 2003*).

According to Van Niekerk, *et al*. (2001: 11), such representivity was necessary to represent the public, to be able to empathize with them, and to view challenges from their perspective. According to Naidoo (2004: Discussion), the state of affairs in the Department in 1994, when apartheid was officially abolished, would have undermined

the legitimacy of the Justice System in South Africa, if it had continued and not been changed. There was a need to ensure legitimacy of the Justice System in South Africa by promoting representivity. This was especially necessary in a new democracy to uphold the Constitution and the rule of law. It would also be important in promoting equity, impartiality and fairness in government, and thereby encourage effective governance principles as discussed in Chapter Four of the study.

Although the past four years (1999 to 2003) have seen the appointment of more Black judges than South Africa has ever had before, the Department remains largely unrepresentative (Service Delivery Review, 2004). In May 1994, there were only one Black male judge and two White female judges. In 1999, the President of South Africa, Mr. Thabo Mbeki, described the need for visible transformation as the greatest crisis facing the judiciary in South Africa (Portfolio of South Africa Delivery 1999/2000, 2000: 12). In 2003, the President echoed similar sentiments, arguing that an effective, representative and efficient Justice System was indispensable in a democratic society. These words clearly show the commitment of the South African government towards that goal.

By July 2003, out of two hundred and fourteen judges of the Superior Courts, sixty percent were White males, fourteen females, forty-two African males, eight African females, eight Coloured males, one Coloured female, eleven Asian males and two Asian females (South Africa Yearbook 2003/2004). However, despite this intention to promote equity, progress is slow in promoting representivity in the Department of Justice and Constitutional Development. There is, for example a shortage of skilled and experienced Black lawyers who could be considered for appointment to the Bench (Towards a Ten Year Review, 2003). Nonetheless, there are strategies in place to promote equity in the Department. There are appointment procedures conducted by the Department.

One of the challenges facing the South African government, and the justice sector in particular, has been to create a stable society, in which all communities are able to live in peace, safety and security (Service Delivery Review, 2004). Immediately after the first democratic elections of 1994 in South Africa, there had been concerns were expressed about the rise of crime (Service Delivery Review, 2002). The blame was

openly placed on the new post-apartheid South African government and the new Constitution (1996) (including the Bill of Rights). As a result of these concerns and criticisms by the South African public, there was a move by the Department of Justice and Constitutional Development towards more punitive measures of law enforcement. Examples of such punitive measures were the amendment of bail laws, to make it difficult for suspects to be successful in bail applications with respect to serious cases (Service Delivery Review, 2003). The introduction of strict bail laws in South Africa was to prevent those arrested for serious crimes from getting away easily. Furthermore, mandatory minimum sentences were introduced for serious crimes (Portfolio of South Africa Delivery 1999/2000, 2000: 12), which required the presiding officers to impose specific sentences in respect of serious offences.

On an encouraging note, the Department had indeed made progress towards curbing crime. Crimes against previously disadvantaged sectors of the South African society, namely women and children, have been prioritised since 1994 (Service Delivery Review, 2004). More significantly, eleven Sexual Offences Courts were launched in 2003 in South Africa (Part 4 - State of the Nation Address of the President of South Africa, Thabo Mbeki, Houses of Parliament, Cape Town, February 2003) (Access<http://www.sabcnews. state_of_the_nation/address2: _Retrieved: 20 October 2003_). Furthermore, the National Policy Guidelines for Victims of Sexual Offences were published in September 1997. These guidelines serve to educate police officers, health workers, welfare workers and public prosecutors on how to work with victims of sexual offences. The emphasis in working with victims of sexual violence within the criminal justice system in South Africa was directed at the elimination of secondary victimization.

A further step to protect women and children in the new South Africa, the Domestic Violence Bill was introduced in the South African Parliament in 1998, to broaden the scope of the existing Prevention of Family Violence Act of 1993 (Portfolio of South Africa Delivery 1999/2000, 2000: 12). In addition, strategic interventions pertaining to violence against women include the introduction of one-way mirrors; closed circuit televisions sets and separate waiting rooms (Portfolio of South Africa Delivery 1999/2000, 2000: 12). This protected the victims from having to confront their

offenders face to face when having to identify them (Naidoo, 2004: Discussion). These are important measures to protect women against secondary harassment.

The improvement of the witness protection programmes and the creation of a separate juvenile justice system were further significant steps (Service Delivery Review, 2002). The Domestic Violence Act, among other things, imposed positive duties on police officers in South Africa to effect arrest under particular circumstances (Govender, 2004: Discussion). The Department had to restore the rule of law, address serious violent crimes and create accountability for human conduct and behaviour. The Department also expeditiously had to remove laws that had been used by the previous National Party government in South Africa to entrench apartheid prior to 1994 (Naidoo 2004: Discussion). The Department is still making an effort to ensure that effective governance practices are being promoted.

A number of initiatives are being undertaken by the Department to promote speedy service delivery. The South African Parliament has approved seven hundred pieces of legislation since 1994, to promote justice in the South African society (Portfolio of South Africa Delivery 1999/2000, 2000: 12). This legislation covers a wide range of areas. One of the first pieces of legislation, tabled by the Justice Ministry and approved by the South African Parliament, was the law that abolished the death penalty and that which established the Truth and Reconciliation Commission (TRC). The TRC was established by the South African government in 2002 to focus on atrocities that had been committed during the apartheid era (pre-1994) (Naidoo, 2004: Discussion). It was also established to compensate victims or families of victims that had been tortured or experienced wrongful acts from perpetrators during that time. According to Naidoo (2004: Discussion), the TRC was very effective in doing this.

Other efforts to improve service delivery include initiatives to combat crime. Due to the high level of crime in South Africa, the South African Cabinet approved the National Crime Prevention Strategy (NCPS) (Portfolio of South Africa Delivery 1999/2000, 2000: 12). This is a long-term comprehensive and multi-sectoral strategy, which requires shared responsibility for crime prevention and a shift in emphasis from reactive crime control to pro-active crime prevention (Naidoo, 2004: Discussion). The NCPS is managed by an inter-departmental committee, consisting of the Ministers of Safety and

Security, Justice, Correctional Service and Defense (Portfolio of South Africa Delivery 1999/2000, 2000: 12). The two elements of the NCPS that have been the most successful are the National Crime Combating Strategy (NCCS) and the Integrated Justice System (IJS) (Towards a Ten Year Review, 2003). Since 1999, the rates of serious crime in targeted areas in South Africa have either been reduced or stabilized (Service Delivery Review, 2004). For example, murder has been reduced by almost seventeen percent since 1999 to 2003.

The Department of Justice and Constitutional Development brought about far-reaching changes in the legal system (Naidoo, 2004: Discussion). With respect to transformation and reform, the Department has revamped and streamlined its departmental structures (Portfolio of South Africa Delivery 1999/2000, 2000: 12). The Department has taken a holistic view and reviewed the existing structures and processes with a view to improving the efficiency of the courts (Service Delivery Review, 2002).   The Department is still currently undergoing a restructuring process. To this effect the Department has established the *'Re aga boswa'* (Business process reengineering) project. This project looks at business process reengineering, with a view to revamping the current inefficient structures and processes in the South African courts.   The development of a common architecture, focusing on re-engineering business processes in an integrated manner was one such initiative. Project *'Re aga boswa'* is part of the overall Criminal Justice Strengthening Programme (CJSP). The CJSP is a strategic partnership initiative, to support and strengthen the management and leadership capacities of the Department of Justice and Constitutional Development's core business (that is, Prosecution, Court Services and Adjudication), in order to transform the Criminal Justice System to a swift, effective, accessible, efficient and sustainable system (Service Delivery Review, 2003). *'Re aga boswa'* focuses on rebuilding new structures and processes at the courts, to improve the standard and quality of service delivery at the courts (Naidoo, 2004: Discussion). The first provincial office to benefit from this project was the province of KwaZulu-Natal in South Africa. Other measures implemented to empower the legal system against crime and promote effective practices, were legislative measures to increase the criminal jurisdiction of the lower courts (South Africa Yearbook 2003/2004). The Department is clearly making steady progress in achieving its priorities.

Another important initiative to improve service delivery was the establishment of the necessary infrastructure to promote the Integrated Justice System (IJS). This was established in 1997 to integrate the activities of departments in the Justice cluster in a coordinated manner (Access<htpp://www.doj.gov.za/about/adminijustice2002.html: _Retrieved: 17 October 2003_). The objective of the IJS Court Centre project is to enable the courts to deliver swift and efficient justice and aims to improve court and case management, thereby reducing the case cycle time (Naidoo, 2004: Discussion). Since the start of the project, the average cycle time for a case in court has been reduced from hundred and forty-five days to seventy-four days (South Africa Yearbook 2003/2004). By 2003, the average case preparation cycle time was reduced from seventy-four to seventy-one days (Towards a Ten Year Review, 2003). Conviction rates increased from about seventy-eight percent in 1999 to eighty-one percent in 2002. Productivity in the courts is increasing. The IJS resulted in the speedy finalisation of cases, an improvement in the quality of dockets and an increase in conviction rates (Towards a Ten Year Review, 2003). A combination of such factors has resulted in improved performance by the Department.

The Department has embarked on a project to re-engineer its own business processes through the use of necessary technology to ensure the effective integration of departmental activities. A number of major initiatives were undertaken to give effect to this goal. The establishment of a Virtual Private Network was one of the major initiatives undertaken by the Department, and it was assigned to the South African State Information Technology Agency (SITA) (e-Gov News, Oct/Nov 2001: 1). The advances in cyberspace, business pressures, and developments in information technology, globalisation and service delivery backlogs in South African communities required the Justice System of South Africa to be re-evaluated. This initiative intends to improve service delivery to the public. Electronic justice or e-justice in South Africa was thus instituted, with the objective to improve the effectiveness and efficiency of prosecutors. The e-justice system in South Africa seeks to transform the justice administration system from a manual to an automated system and it is a crucial component of promoting effective service delivery.

Current information reveals that the Department of Justice and Constitutional Development lacks the human resources and technological capacity, despite its e-justice

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initiative (Access<htpp://www.doj.gov.za/about/adminijustice2002.html: *Retrieved: 17 October 2003*). The courts in South Africa have huge backlogs of cases and prisons in general are overcrowded with a large number of awaiting-trial prisoners. E-justice is one of the ways that the Department could use to alleviate service delivery backlogs (e-Gov News, Oct/Nov 2001: 2). The Department's use of technology is an important tool to improve service delivery but this is not happening at the moment.

A serious challenge that the Department of Justice and Constitutional Development is grappling with is corruption and white-collar crime (Service Delivery Review 2004). Approximately R47-billion has been lost through theft and corruption in South Africa (Portfolio of South Africa Delivery 1999/2000, 2000: 12). The tabling and approval of the Heath Special Investigation Unit by the South African cabinet has been particularly positive in this regard. The unit had recovered at least R61-billion stolen state money by March 1999. Furthermore, the national anti-corruption forum (NACF) was established in June 2001 to support the development of a national anti-corruption programme (Fanaroff, 2002: First South African Public Management Conversation). Its establishment indicates the willingness of the South African government to deal decisively with corruption in government.

According to Fanaroff (2002: First South African Public Management Conversation), despite these initiatives to promote effective governance, corruption has inevitably had a debilitating impact on service delivery in South Africa. The South African government needs to collaborate with non-governmental institutions (NGOs) and the media to report and expose corrupt elements and individuals who wrongfully benefit through corrupt means. With respect to corruption within the public service, management has to make sure that employees who are found guilty of corrupt deeds are not only exposed, but also disciplined.

A range of integrated leadership and governance approaches is needed for success, including a sound ethics management system. According to Van Niekerk, *et al*. (2001: 122), the effectiveness of this ethics infrastructure depends on whether it is implemented, understood and consistently applied. More importantly, ethics should be seen as an integral part of all management systems in the South African public service. The synergy between the different components of the ethics infrastructure will depend

on cultural values and political traditions, and the overall approach to public administration in promoting ethical conduct.

Punitive measures against corrupt elements should send a clear message about the South African government's zero tolerance towards corruption. Those South African public service departments that have fallen prey to fraudulent acts, should not only dismiss the perpetrators, but should also retrieve assets that have been stolen. The current demands of the South African public service places an emphasis on ethical behaviour and requires professional leadership and followership. In addition, a culture of service ethos in the South African public service is essential. The leadership in the South African public service must clearly demonstrate their commitment to a value system that is based on the fundamentals of honesty and integrity, as highlighted in Chapter Four of this study.

The approach of the Criminal Justice System in South Africa has been to focus attention on violent crimes and, to a certain extent; there has thus far been less focus on commercial crimes (Access<http://www.doj.gov.za/about/adminjustice2002.html: _Retrieved: 17 October 2003_). This has resulted in backlogs in commercial crime cases. To address these backlogs, a specialized commercial crimes court and prosecuting unit, was established as a pilot in Pretoria in 2000, and a second pilot site was established in Johannesburg in 2002 (Access<http://www.doj.gov.za/about/adminjustice2002.html: _Retrieved: 17 October 2003_). In 2002, this unit registered nine hundred and seventy nine cases (South Africa Yearbook 2003/2004). Of these, two hundred and seventy cases were enrolled for trial, and these resulted in hundred and nineteen convictions and ten acquittals. The Department has subsequently launched a 'roll-out plan' of the Pretoria Commercial Crime Unit to other major centres.

In examining service delivery by the Department of Justice and Constitutional Development, it is evident that court hours in District and Regional Courts improved (Media Statement by Dr Penuell Maduna, Minister for Justice and Constitutional Development: Parliamentary Media Briefing, 11 September 2003) (Access<http://www.gov.za/search97cgi/s97: _Retrieved: 17 October 2003_). As a result, there has been a significant reduction of court rolls and case backlogs (South Africa Yearbook 2003/2004). In this regard, in 1999, the national average of cases was

hundred and fifty-seven in District Courts per year. This decreased to hundred and forty-two in 2002. In Regional Courts, the rolls decreased from hundred and forty seven to hundred and twenty five in the same period. In addition, there has been a dramatic increase in cases finalized with a guilty verdict. The conviction rate in the District Courts is over eighty percent and in the Regional Courts approximately seventy percent. These are impressive achievements by the Department in addressing service delivery backlogs and improving efficiency in the Justice System.

An increase in average court hours meant that the courts were able to finalize more cases (Media Statement by Dr Penuell Maduna, Minister for Justice and Constitutional Development: Parliamentary Media Briefing, 11 September 2003) (Access <http://www.gov.za/search97cgi/s97>: *Retrieved: 17 October 2003*). This has been supported by an increase in the conviction rate of cases that went to court (Naidoo 2004: Discussion). The District Courts improved slightly their conviction rate; the Regional Courts improved theirs dramatically, whereas the High Courts improved theirs significantly. At the end of March 2003, the High Courts in fact exceeded their target of eighty-five percent (South Africa Yearbook 2003/2004). As at 03 June 2002, there are hundred and thirty-nine Small Claims Courts, and they do not sit in all magistrates' courts (Service Delivery Review 2003). These courts are cheap and informal in procedure, they are inquisitorial, and they sit after working hours. These initiatives have improved the delivery of justice services by the Department.

A number of further efforts are being made to address service delivery backlogs by the Department. In 2003, the Department introduced an integrated case flow management system in the court environment (Media Statement by Dr Penuell Maduna, Minister for Justice and Constitutional Development: Parliamentary Media Briefing, 11 September 2003) (Access<http://www.gov.za/search97cgi/s97>: *Retrieved: 17 October 2003*). This initiative was launched in response to the need to deal proactively with the huge number of outstanding civil and criminal cases (South Africa Yearbook 2003/2004). The programme is intended to contribute to the objective of streamlining court cases and to provide modern and efficient administration of justice in South Africa (Naidoo, 2004: Discussion). Furthermore, case flow management will proactively manage cases by taking control of the pace of litigation. Nonetheless, despite improvements in service delivery by the Department, Naidoo (2004: Discussion) indicates that there is still a

need for a more effective court management system in South Africa to redress prevailing service delivery backlogs.

In addition to the above initiatives, there has been additional management and leadership training, especially for magistrates, prosecutors and other justice personnel who occupy key strategic positions in the Department, to promote efficiency (Service Delivery Review, 2004). The objective is to raise levels of skills to ensure better management of cases and courts and the expeditious finalization of trials (Media Statement by Dr Penuell Maduna, Minister for Justice and Constitutional Development: Parliamentary Media Briefing, 11 September 2003) (Access< http://www.gov.za/search97cgi/s97: *Retrieved: 17 October 2003*). Training should increase efficiency in the Department, which would have a positive impact on service delivery.

At the heart of reform by the Department, lies the quest to improve the accessibility of the Justice System (South Africa Yearbook 2003/2004). The most pertinent question is whether these reforms have indeed improved access? The study suggests that many cases that are reported to the police, do not reach prosecution stage (Media Statement by Dr Penuell Maduna, Minister for Justice and Constitutional Development: Parliamentary Media Briefing, 11 September 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 17 October 2003*). The reasons for this can be attributed to the Justice System being inaccessible to many South Africans for geographical reasons (people live far away from the courts, for example in rural areas), economic reasons (people whom are economically disadvantaged cannot afford litigation) and psychological reasons (the incongruence between Western law and African traditional practices, as well as perceptions about the ineffectiveness of the law) (Portfolio of South Africa Delivery 1999/2000, 2000: 13). However, in some areas of the country efforts to improve the accessibility of the legal system include the introduction of multi-lingual services. Court proceedings are thus available in the language preferences of people being served (Naidoo, 2003: Discussion). In this regard, the wide usage of indigenous African languages is evident. Court interpreters are specifically appointed for this purpose.

The above measures focus on improving the state justice system, but have in many ways left the majority of citizens outside the fold of the Justice System. The Department has an obligation to ensure that all value systems are contained in formal mechanisms within the Department. Given the past policies of human rights violations in South Africa, and the subsequent protection of individuals and communities, the integration of African value systems is vital in order to prevent the infringement of basic rights and freedoms. More importantly, it has been a difficult transition from the apartheid form of justice, to a more inclusive and human rights-based form of justice in South Africa. The Department should ensure the integration of African value systems, in accordance with national legislation and policy direction.

In this regard, the Department is tapping into the resources that communities, especially Black communities, use for social control (Portfolio of South Africa Delivery 1999/2000, 2000: 13). The South African Law Commission acknowledges the role played by informal structures, and the need for interaction between the state and non-state forms of justice (Media Statement by Dr Penuell Maduna, Minister for Justice and Constitutional Development: Parliamentary Media Briefing, 11 September 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 17 October 2003*). Relevant value systems are thus taken into account and integrated into already existing provisions. For example, an authorized African headman or his deputy may hear and determine civil claims arising from indigenous law and custom (South Africa Yearbook 2003/2004). An African against another African within his area of jurisdiction can bring the civil claim to the headman or deputy. The proceedings of this Chief's Court are informal (Naidoo, 2004: Discussion). An appeal against a judgment is heard in a Magistrate's Court.

Despite such measures to redress service delivery imbalances, some South African communities have occasionally taken the law into their own hands or resorted to organized groups of crime control which are generally referred to as vigilante groups (Media Statement by Dr Penuell Maduna, Minister for Justice and Constitutional Development: Parliamentary Media Briefing, 11 September 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 17 October 2003*). The main challenge faced by the Department in this regard is the lack of communication and inaccessibility of services (Service Delivery Review 2004). The Justice System and its

functionaries, as well as many citizens' unfamiliarity with the procedural basics of the courts are another challenge. This further feeds and reinforces the perceptions that result in a lack of confidence in the system. The informal Chief's Courts can alleviate these challenges, especially in remote rural areas.

In light of the abovementioned, it is imperative for the Department of Justice and Constitutional Development to improve its accessibility among previously disadvantaged rural communities. In this regard, mobile law clinics can be used in rural communities and the Department should be proactive in its outreach programmes, which could be used to inform and educate communities on court procedural matters. This will improve the services offered to rural communities in South Africa, as well as improve the image of the Department, and it may instil confidence in the Justice System. With regard to inaccessibility that is based on financial reasons, the legal aid clinics can be extended to rural communities in conjunction with the mobile law initiative. Legal aid is free for persons earning under R2000 a month in South Africa (Naidoo 2003: Discussion). The South African government can further enhance the use of informal structures, such as the Chief's Court to alleviate the service delivery backlogs by the Department.

In examining the operational issues in the Department since 1994 to 2003, the study has found that the finances of the courts have never reconciled (Service Delivery Review, 2004). This has put the Department of Justice and Constitutional Development in a negative light, especially when it appears before the South African Parliamentary Standing Committee on Public Accounts (SCOPA) (Service Delivery Review, 2003). The challenge for the Department is to turn this situation around, and court managers stand at the forefront of this challenge. In this regard, training on financial management is essential for managers (Soobrayan, 2004: Discussion). Moreover, court managers have to be able to manage public funds circumspectly, and must be held accountable for any mismanagement of funds. In this regard, the Public Finance Management Act of 1999 (PFMA) is an important mechanism that can be used to hold managers accountable. The necessary financial management systems ought to be efficient in the Department to ensure that the PFMA is fully operational.

The study has found that there are governance, leadership, human resources and normative challenges impacting on effective service delivery by the Department of Justice and Constitutional Development. These challenges are summarized in Table 5/9.

Table 5/9

Challenges impacting on service delivery performance - Department of Justice and Constitutional Development

1. Governance Challenges	Transformation With Regard To Promoting Representivity Is Slow
	Rural Communities Lack Access To The Court (Geographical Reasons, Economic Reasons, Psychological Reasons For Example An Incongruence Between African Traditions and Customs And Western Justice System)
	The Public Is Not Educated on Procedural Court Issues
	There is Ineffective Ineffective Communication
	Perceptions About The Ineffectiveness Of The Law (Lack Of Confidence)
	Huge Backlogs In Remote Rural Communities
	Weak And Inefficient Institutional Structures In Courts
	Poor Co-ordination
2. Leadership And Human resources Issues	Court Officials And Managers Have Inadequate Skills & Capacity
	Shortage Of Leadership Skills (Mainly At Senior Managerial Level)
	Managerial Skills (Particular With Regard To Financial Management Are Lacking)
3. Normative Challenges	Grappling With Corruption, Theft And White-Collar Crime
	Maladministration And Mismanagement Of Funds

(Source Naidoo: 2004)

From the abovementioned discussion it has emerged that the Department has both strengths and weaknesses, which impact on the level of service delivery. In this regard, legislation has been passed to promote the principles of the Constitution (1996) and the rule of law. Particular emphasis has been placed on protecting the rights of women and children, as two groups are the most vulnerable sectors of the South African society. Furthermore, the Department is implementing a multi-sectoral approach to curbing

crime, which is effective to a limited extent, in reducing the rate of violent crimes in South Africa.

There are difficulties around transformation in the Department. In this respect, much more has to be done to promote representivity in the Department. The Departments' personnel are predominantly White and male, which is not suitable for a democracy. Furthermore, the Department still has to improve existing processes and revamp current structures to promote fairness, efficiency and the cost-effective administration of justice. There has been an improvement in productivity, as a result of a reduction in the time for prosecutions. This has led to a reduction in court rolls and case backlogs. Efforts are being made to make justice more accessible and affordable, especially among previously disadvantaged communities. Moreover, the Department has embarked on using electronic technology to further reduce service backlogs and improve efficiency. However, capacity is clearly inadequate in addressing the massive service delivery backlogs facing the Department. Training is thus being undertaken by the Department to improve human resources capacity, which is essential for improving service delivery performance by the Department.

Despite the establishment of Chief's Courts, the accessibility of the Justice System remains a challenge for previously disadvantaged communities in remote rural areas of South Africa (Naidoo, 2004: Discussion). The South African Justice System has to go beyond improving the state justice by opening it up and making it more accessible to South African society, especially to previously disadvantaged communities. While acknowledging the progress made in improving the accessibility of the Justice System as its effectiveness thus far, much remains to be done to promote effective service delivery in South Africa set out in the South African government's Batho Pele policy.

Making the justice system more accessible to previously disadvantaged communities would be a major step in addressing the immediate and urgent needs of the majority of South Africans. The widespread responsibility of the Department is to ensure that the courts, tribunals and related institutions function effectively and efficiently. This is a basic requirement of democratic and administrative governance (Service Delivery Review, 2002). More significantly, this research study suggests that greater leadership capacity and skills is required mainly at the senior levels of the Department. This is

essential to fully affect the Department's mandate of facilitating the enactment of appropriate legislation, creating the necessary policy frameworks and ensuring that courts and the prosecutorial services function in a way that serves the new democratic dispensation. The Department has also been erratically restructured, resulting in weak and ineffective institutional structures in the courts (Service Delivery Review, 2003). This has negatively impacted on co-ordination of various programmes within the Department (Naidoo, 2004: Discussion). On the whole, it can be argued that improvement has occurred but huge backlogs are still evident mainly in remote rural communities in South Africa. This is re-iterated in documents such as the Service Delivery Review of 2004.

Case study four: Department of Safety and Security

In accordance with the Constitution of South Africa (1996), the Department of Safety and Security is responsible for internal security and crime prevention. The Department is required to account to the South African Cabinet and Parliament on all matters relating to policing (South Africa Yeabook 2003/2004). From the outset, the main priority of the Department of Safety and Security since 1994 has been to change the mindset of South African society from a militaristic to a civilian approach (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). Before 1994, the primary focus of national security of South Africa has been to secure and advance the interests of White minority rule and the apartheid regime (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). The opposition to the previous political dispensation (pre-1994) was thus seen as a threat to national security in South Africa. These were, however, mainly organisations that were promoting the ideals of freedom and democracy in South Africa. The objectives of the Department are listed in Table 5/10 and compared with the initiatives undertaken by the Department to determine their level of service delivery performance.

Table 5/10

Service delivery performance - Department of Safety and Security

Objectives	Initiatives	Outcomes
To Ensure Internal Security	Restructured Police Management And Structures And Functions	Improvement In Efficiency And Effectiveness
To Prevent Crime	Activating Automated Fingerprint Identification System (AFIS) To Improve Capacity Of Police	Improved Efficiency And Effectiveness (SAPS Traced Three Million Previous Conviction Reports)
	Recruiting Reservists From The South African Defence Force (SANDF) To Improve Service Delivery	In 1999, Murder Decreased By Almost Seventeen Percent
	Partnerships With Communities And Businesses In Combating Crime	Between 1994 and 2003, There Was A Decrease Of 30,7 Percent In Murder. (This Amounts To 67 Murders A Day And Almost 3 Murders Per Hour)
	Using Technology (Surveillance Systems) In Combating	In 1999, Attempted Murder Decreased By 1,3 percent
	Encouraging Volunteers To Participate In The Government's '*Letsema'* (Volunteer) Campaign	In 2003, Crimes Involving Explosives Dropped By Forty Five Percent
		Bank Robberies Decreased From Six Hundred And Forty Two To Four Hundred And Ninety Seven, Or By 22, 6 Percent
		Eighty Percent Decrease In Street Crimes In Targeted Areas
		Increase In Cash In Transit Heists, Hijackings, Robberies, Public Violence, Burglary, Stock-Theft, Shoplifting, Death Due To Violence (Statistics Are A Serious Cause For Concern)
		More Than Seventy Five Thousand Volunteers Participated In '*Letsema*' (Volunteer) Campaign

(Source Naidoo: 2004)

The mandate of the Department of Safety and Security (prior to 1994) has often been vague and ambiguous (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access< http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). There was a duplication of functions and the execution of extra-judicial activities (Govender 2004: Discussion). Furthermore, prior to 1994, there had been gross human rights violations both within South Africa and beyond South Africa's borders. Since 1994 the Department has fundamentally transformed the approach to national security, with a view to attaining peace and stability both within South Africa and within the region. The Department has positioned itself within the ambit of a human rights security paradigm, which is aligned with democratic principles.

Since 1994, the Department of Safety and Security has undergone far-reaching reform and transformation, with the intention of enhancing the safety and security of all South Africans. It has focused on the restructuring of police management and structures and functions to improve its efficiency (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access< http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). In this respect, specialized units were restructured to fit into multidisciplinary units focusing, mainly on organized crime, serious crime and commercial crime.

The investigative and detective capacity of the police has been improved with the activation of the Automated Fingerprint Identification System (AFIS) (South Africa Yearbook 2003/2004). This has furthermore enhanced the relationship between crime intelligence and the detectives (Towards a Ten Year Review, 2003). The AFIS system has enabled the South African Police Services (SAPS) to process cases more effectively and more efficiently (Govender, 2004: Discussion). The introduction of the AFIS system has enabled the South African police to trace approximately three million previous conviction reports in 2003, compared to 2002, where the figure was only one million, six thousand three hundred and sixty nine. This technology is very effective in improving service delivery by the Department.

Although interventions are being undertaken by the Department of Safety and Security, there is still a need to improve the capacity of crime intelligence, as well as the numbers

of detectives and investigators to reduce the crime rate in South Africa (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). The challenges that face the Department of Safety and Security are not only related to transformation, but also to redressing service delivery imbalances and inequities in previously disadvantaged communities in South Africa (Govender 2004: Discussion).

In 1998, there was still an absence of a clear transformation strategy in the Department (Portfolio of South Africa Delivery 1999/2000, 2000: 168). Almost daily, newspaper headlines in South Africa reported on hijackings, murders, house breakings and rapes. Nonetheless, the South Africa Yearbook 1998/1999 reported that murders had declined by 4,6 percent from twenty five thousand seven hundred and eighty two in 1996 to twenty four thousand five hundred and eighty eight in 1997. This amounts to sixty-seven murders a day, which is almost three murders an hour. In 1999, murder decreased by almost seventeen percent. Although murders declined, these figures are serious cause for concern.

They have been brought about primarily because of concentrated actions by the Department on specific crime tendencies such as gang and taxi violence (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 17 February 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 February 2003*). Furthermore, attempted murder had gone down by 1,3 percent from 1997 to 1999. This indicates that the Department is working hard to reduce crime situation in the country.

From 1997 to 1999, robbery with aggravating circumstances, which includes cash in-transit heists, hijacking and truck hijackings, increased by 3,6 percent from sixty seven thousand two hundred and forty nine to sixty nine thousand six hundred and ninety three (Portfolio of South Africa Delivery 1999/2000, 2000: 168). Other categories of robberies rose by 2,3 percent, while public violence grew by fifteen percent. Rape and attempted rape increased from fifty thousand four hundred and eighty one to fifty two thousand one hundred and sixty, representing an increase of 3,3 percent.

Burglary on business premises and in residences went up by 0, 9 and one percent, respectively, while stock theft and shoplifting rose by 2, 6 percent each (Portfolio of South Africa Delivery 1999/2000, 2000: 168). There was also an increase in deaths due to violence, of members of the South African Police Services, since 1994. Furthermore, abductions rose by thirty four percent. While there are positive strides by the Department in curbing murder, other crimes, such as robbery, rape, attempted rape, burglaries, shoplifting and deaths due to violence are on the increase. This was re-iterated by the Minister of Safety and Security in South Africa (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 February 2003*). The same was evident with stock theft and shoplifting. Murder against police officer was also on the increase. Abductions were also amplified. The Department's efforts to combat crime in these areas were not effective. This meant that the Department was not meeting its objectives of promoting internal security and preventing crime.

On a positive note, in 2003, crimes involving explosives dropped by forty five percent (Service Delivery Review 2004). Bank robberies decreased from six hundred and forty two to four hundred and ninety seven, or by 22,6 percent. During 2003, the Department issued warrants of arrest for two hundred and eighty six thousand criminals (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). It is, however, not clear how many criminals have been convicted and sentenced. The data of 2003 suggests that, with the exception of common assault and other types of theft, all serious crime trends of robbery have recently stabilised or are decreasing in comparison with the figures in 1994 (Towards a Ten Year Review, 2003). The data further reflects, that between 1994 and 2003, there was a very constant and significant decrease of 30,7 percent in murder. These trends have been achieved since the implementation of the NCPS in the Department in 2000.

There are human resources, budget management and leadership challenges impacting on effective service delivery (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). Human resources skills and leadership capacity are in short supply and reform and transformation is slow, as there is no clear transformation strategy in the Department.

The challenges impacting on service delivery performance by the Department of Safety and Security are summarized in Table 5/11.

Table 5/11

Challenges impacting on service delivery performance - Department of Safety and Security

1. Human Resources & Leadership Constraints	Inadequate Capacity & Skills (Example With Crime Intelligence, Detectives And Investigators)
2. Governance Challenges	Slow Transformation Absence of Clear Transformation Strategy Increase In Service Delivery Needs And Demands No Clear Policy Implementation Strategies (For Example Social Crime Prevention Remains A Challenge) Fiscal Constraints Poor Co-Ordination And Co-operation

(Source Naidoo: 2004)

A review of the Department of Safety and Security's key priorities indicate that the Department has undertaken a number of initiatives towards meeting its objectives. The Department of Safety and Security together with the Department of Justice and Constitutional Development, has developed the National Crime Prevention Strategy (NCPS) (South Africa Yearbook 2003/2004). The NCPS is an umbrella framework with the purpose of addressing the causal factors of crime in a holistic way (Portfolio of South Africa Delivery 1999/2000, 2000: 168). The strategy actively involves other public service departments as well, such as Social Welfare, Home Affairs, Correctional Services, Education, Defense and all intelligence services (Naidoo, 2004: Discussion). The emphasis on forming collaborations and partnerships in the Department is an important way of dealing with crime in South Africa (Govender, 2004: Discussion).

Different departments thus share resources and expertise (Service Delivery Review, 2004). This promotes cost effectiveness and service efficiency, and it encourages an effective working relationship between the various public service departments in South Africa. It also leads to skills transfer from one department to another, which improves

capacity. Furthermore, it promotes effective administrative governance practices in the Department.

A clear transformation strategy is urgently needed for the Department. Furthermore, leadership has to embrace an attitude of serving the public within the framework of the effective governance principles as espoused by the South African government (Portfolio of South Africa Delivery 1999/2000, 2000: 168). For example, the Department needs to embrace the South African government's Batho Pele principles, by making its services more responsive and accessible to previously disadvantaged communities in South Africa.

The Department has embarked upon various initiatives and plans to overcome service delivery imbalances and inequities (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). The programme of restorative justice proved successful, as prisoners came out to demonstrate to communities that they had been reformed, by building schools in the country. The issue of improving the leadership core is addressed by recruiting new leadership with the required competencies and drive to realise the strategic plans of the Department. Additionally, there needs to be intensive training of other staff as well to capacitate them to deal with crime intelligence effectively.

The creation of effective governance structures is paramount for promoting efficiency within the Department. Moreover, the South African Police Services (SAPS) has to operate within a human rights culture, which however immediately debilitates many of the detectives, who entered the service during apartheid (pre-1994). Most of these detectives were required during the apartheid days to extract confessions by any means necessary including torture (Govender, 2004: Discussion). These methods have no place in the new human rights culture and in promoting democratic governance in South Africa.

To improve service delivery, a new detective academy was established in 1998 (Portfolio of South Africa Delivery 1999/2000, 2000:168). The crime intelligence and internal security components were merged to boost intelligence gathering capacity

(Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access<http://www/gov.za/search97cgi/s97: _Retrieved: 20 October 2003_). The merging of these two components made the Department more effective in carrying out its mandate. Training of detectives was increased from six-month courses to one-year courses. In addition, from 2003, a phasing out began of certain in-between ranks, to reduce vertical stratification of the service, which will continue until 2009. This is necessary to create a more decentralized system of management in the Department, which should improve communication. The old system is therefore being replaced by a new South African Police Services (SAPS) recruitment system.

To improve service delivery, further reservists were recruited from the South African Defense Force (SANDF) and more than seventy five thousand volunteers participated in the government's _'Letsema'_ (Volunteer) campaign (Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access<http://www/gov.za/search97cgi/s97: _Retrieved: 20 October 2003_). The recruitment of reservists is linked to various initiatives, which form the national combating strategies. These are practical implementation strategies by the Department to ensure that communities become involved in matters that affect their daily lives. The Department is effectively facilitating community owned solutions to the challenges of crime. These initiatives have been fairly effective in alleviating service delivery backlogs.

Other initiatives by the Department include a drastic increase in South African Police Service (SAPS) personnel over the next three years, the restructuring of specialized investigation units, the implementation of sector policing in each area and the establishment of crime combating units for each police area (Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access<http://www/gov.za/search97cgi/s97: _Retrieved: 20 October 2003_). These initiatives by the Department should be effective in combating crime, in the long term (Govender, 2004: Discussion).

Although the Department had identified priorities, it did not initially have corresponding and clear implementation strategies, nor did it have sufficient resources

(Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). It is important for the Department to formulate clear implementation strategies to ensure the success of these initiatives. More importantly, the Department must provide the necessary human and financial resources so that it can effectively implement and sustain these programmes. The Department should ensure that the personnel also have the necessary expertise that is required to fulfil these tasks.

The implementation of the NCPS was predicated on the assumption of sound co-operation and co-ordination between the SAPS and the Department of Justice and Constitutional Development (Safety and Security Media Briefing by the Minister of Safety and Security, Charles Nqakula, 8 September 2003) (Access<http://www.gov.za/search97cgi/s79: *Retrieved: 17 October 2003*). Unfortunately, though, co-operation among the three spheres of government (national, provincial and local spheres) in South Africa is uneven (Naidoo, 2004: Discussion). Despite these constraints, the NCPS has resulted in important projects that have borne effective results. The police have, for example, established partnership with communities and businesses to curb crime (South Africa Yearbook 2003/2004).

There are numerous benefits for the Department, with the involvement of communities in combating crime in South Africa. Firstly, according to Van Niekerk, *et al.* (2001: 268), such projects often result in ownership by the communities involved. Secondly, the project is needs driven and demand oriented. Thirdly, there is continuous evaluation of results, resulting in greater service delivery performance. Furthermore, there is an acknowledgement of resource constraints and the identification of strategies to overcome these challenges in innovative ways. Moreover, the wishes of society are adhered to, which results in a greater satisfaction with levels of service being rendered. The research found that the community-policing framework has markedly improved the relationship between police and communities (Towards a Ten Year Review, 2003). The partnership with business has led to an eighty percent decline in street crimes in targeted city centres and has furthermore increased the police's response time. The partnerships with businesses have improved the implementation of crime prevention programmes, for instance in respect of promoting safety in schools and communities. The implementation of social crime prevention, however, remains a challenge (Govender,

2004: Discussion). According to Chandu (2004: Discussion), this is largely due to poor co-operation and co-ordination between departments and across the different clusters and spheres of government.

In addition to the above programmes, the Department has increasingly been using technology to alleviate crime (Portfolio of South Africa Delivery 1999/2000, 2000: 168). In this regard, the projects that are actually using the necessary technology are proving to be particularly fruitful; for example surveillance systems were installed in some urban areas in South Africa, leading to an eighty percent decrease in street crimes and reducing police response time to less than a minute. More importantly, the video footage of these surveillance systems constitutes admissible evidence in courts of law.

The crime level in South Africa shows that most crimes are related to poverty and other social problems (Portfolio of South Africa Delivery 1999/2000, 2000: 168). It is therefore important for the Department to strengthen inter-sectoral collaborations and partnerships with other departments, communities and the private sector in South Africa, to deal with this challenge more holistically. It is difficult for the South African government to address these challenges in the short- to medium- term (Binza, 2003: 2). Furthermore, budgetary limitations have also placed a moratorium on hiring new police officers and effectively implementing programmes to curb crime in South Africa (Govender, 2004: Discussion).

The police needs to continue improving the levels of resources in previously disadvantaged communities in South Africa. Such an exercise should be accompanied by a vigorous implementation of social crime prevention initiatives and strengthening of partnerships with civil society and community-based organizations (CBOs). These are important in fighting crime, particularly at the local sphere of government. The success of the Department depends on strengthening partnerships with communities and businesses that volunteer to assist security agencies in their work. From the above discussion, it is obvious that the Department has already embarked on a number of initiatives in this respect. However, greater effort is required to address the massive service needs and demands by the South African society, especially in previously disadvantaged communities.

An important statistic that has a direct bearing on the issue of effective service delivery, on the part of the Department of Safety and Security, is that eighty six percent of all permanent police stations are located in previously White areas of South Africa (Theron, *et al*. 2000: 30). To achieve a similar density in the predominantly African, Coloured and Indian areas in South Africa, together with the human material resources attached to each station, would, require each public service department to find innovative ways of eliminating the legacy of apartheid. The issues that have emerged are the need for institutional leadership capacity with the necessary competencies in the African, Coloured and Indian areas, which actually constitute eighty five percent of the population and the need for an efficient and effective leadership and governance framework. There is, however, no extra money available to fund the massive institution building that is required of the Department (Theron, *et al*. 2000: 30).

The implication of this lack of financial resources is that service delivery is impeded. The Department's leadership thus has to review its functions and should decide on issues as to 'when' and 'how' to steer these programmes, in order to improve service delivery. Furthermore, financial resources must be used circumspectly. With respect to the building of institutional capacities, the Department must step-up its mentoring programmes, which will prevent each department from embarking on separate training programmes for subordinates. This would be a massive saving on the departmental budget.

From the afore going discussion it has emerged that leadership, governance, human resources and financial constraints are hampering effective service delivery in the Department of Safety and Security. There is a dearth of leadership skills and human resources capacity to effectively address service delivery imbalances and inequities in previously disadvantaged communities. The Department clearly has to develop the necessary competencies to address imbalances and inequities in service delivery. The initiatives that have been taken by the Department from 1994 to 2003 have not been very effective in drastically reducing crime in South Africa. Although there are excellent projects in the form of the NCPS, greater efforts are required by the Department to reduce crime.

There are additional challenges revolving around co-operation and coordination among the three spheres of government (national, provincial and local spheres). Administrative governance must be improved by enhancing systems, structures and processes within the Department. Furthermore, trust has to be built through collaborative efforts by the different spheres of government in South Africa and the Department ought to clearly spell out the necessary duties for each sphere of government. This should be accompanied by comprehensive implementation strategies within the necessary timeframes. The Department needs to improve its monitoring and evaluation system with regard to its projects. It is essential to give constant feedback to each unit in the Department. Where there are shortfalls, corrective action should be instituted immediately. Finally, managers in the Department must be held accountable for outcomes in their units, and this should be linked to a comprehensive performance management system in the Department.

ANALYSIS AND FINDINGS OF CASES

In this section the performance of four selected South African public service departments in terms of service delivery since 1994 to 2003 is analysed. The successes and challenges faced by the Departments of Health, Housing, Justice and Constitutional Development and Safety and Security were outlined in the four previous sections of this chapter. There is a range of perspectives from government to analysts on service delivery in the South African public service. The findings of this study are drawn from a range of service delivery programmes undertaken in the four cases examined herein. This analysis and presentation of the findings of the case studies are comprehensive. This analysis has been done throughout the discussion under the respective cases and throughout the study. Some statements may be controversial, but this analysis has been written to stimulate further debate on the issues at hand and to find joint solutions to the challenges confronting the South African public service.

There are different degrees of success in the cases examined in this chapter. Despite the enormous strides made between 1994 and 2003, there are service delivery constraints in many departments of the public service (Towards a Ten Year Review, 2003). The performance of the public service reflects great unevenness, with some departments doing well, while others are not achieving even the basic service delivery objectives.

With respect to the Department of Safety and Security, for instance the gains in crime preventing and combating crime have not very been impressive (Towards a Ten Year Review, 2003). In the case of the Department of Justice and Constitutional Development, too, progress has been slow. Despite significant efforts in both of these, the issue of crime clearly requires further attention. This is re-iterated by Naidoo (2003: Discussion). However, crime prevention strategies are beginning to take effect (Soobrayan, 2004: Discussion). In a study by the Institute for Democracy in South Africa (IDASA), of public service delivery between 1996 and 2003, respondents indicated that the overwhelming majority felt that health and crime were major challenges facing South Africa. The respondents were not satisfied with the level of progress by the public service. However, all evidence from the present research study suggests that the public service has met some of its most immediate objectives (which were listed in the previous section in the Tables under each respective case).

In 2003, the Minister of Safety and Security, Mr. Nqakula stated that the South African public service had met its most immediate objectives set out in the Reconstruction and Development Programme (RDP) (Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access< http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). This is evident with the Department of Health, Housing and Justice and Constitutional Development, but in the case of the Department of Safety and Security, it is still facing challenges to meeting its most immediate objectives. With the Department of Health the Department, for instance, PHC was established, drinking water was extended to remote rural villages and townships, malaria and polio was reduced, campaigns to combat TB was established, and free health care to pregnant women and children were provided. To meet its most immediate objectives, the Department of Housing provided houses for the poor (approximately eight million by 2003), rental options were launched, houses subsidies provided to communities and housing credit were expanded to the poor. The Department of Justice and Constitutional Development enforced punitive measures, such as bail applications to uphold the law. In addition, it prioritised decreasing crimes against women and children. A NCPS was launched to reduce the rates of serious crime and an integrated Justice System was established to improve court and case management. The Department of Safety and Security improved efficiency, by reducing murders, crimes involving explosives and bank robberies. To improve service delivery

reservists were recruited from the SANDF and the government launched a *Letsema* Campaign, developed partnerships with businesses and communities and increased the use of surveillance systems. However, the research reflects crimes such as robbery and burglary, are on the increase.

There are three different phases with respect to service delivery that can be broadly identified in the cases examined. The first phase of service delivery (1994 to 1996) included a definition of the overall policy direction, capacity challenges, lack of clarity on the role of the three spheres of government, transformation and reform and learning to deliver on a larger scale to previously disadvantaged communities in South Africa. During this period, the implementation of large-scale programmes in all cases examined, were often experimental and innovation was encouraged. The second phase of service delivery (1996 to 1998), involved learning the lessons of the first phase through evaluations, policy amendments and refinements, adoption of service delivery strategies through different approaches such as clustering, greater devolution of authority (some to provincial and some to local government), and the adoption of various innovative governance models such as public private partnerships (PPPs), civic participation and outsourcing. The devolution of authority is aimed at promoting decisions making at the level were services are delivered. This is mainly evident in the Departments of Health and of Housing. During the third phase (1998 to 2003), there was a greater emphasis by the South African government on accelerating public service delivery. Analysts however argue that service delivery is too slow to redress effectively the service delivery imbalances and inequities that exist in previously disadvantaged communities in South Africa.

In 2003, the Minister of Safety and Security, Mr. Charles Nqakula, indicated that there had been progress by the South African public service in promoting effective governance practices by building a democratic state in South Africa (Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). This is evident from the establishment of different institutions to promote democratic governance, such as the Public Protector's office (Naidoo 2003: Discussion). These issues are detailed in Chapter Four of the study. However, Mr. Nqakula (2003) also indicated that many leadership and governance challenges remain

in South Africa which impact on the sustainability of the public service to deliver services effectively. Mr. Nqakula (2003) argued that, these challenges reflect the legacy of apartheid and the consequences of the development the new state has introduced.

At the heart of these perspectives is the complex nature of the challenges faced by the South African public service. Any attempt to improve service delivery must confront challenges that revolve around leadership and governance weaknesses. There are other constraints, i.e. inadequate financial and human resources, inadequate human resources management, ineffective policy implementation, lack of effective co-ordination, poor intergovernmental relations (IGR), ineffective communication and deficient monitoring and evaluation systems.

Various models of governance have been adopted by the South African public service to overcome these challenges. The new approaches to service delivery in the South African public service share a concern with different role-players, customers and outcomes. The transformation of service delivery models by the South African public service aims to involve 'less government' but 'more governance'. An increasing network of role-players is becoming involved in the delivery of public services. In this case, bureaucratic accountability can no longer be specific to a department but must fit the substantive policy as well as the several institutions or role-players contributing to it. This is particularly relevant when examining the Departments of Health; Housing; Justice and Constitutional Development; and Safety and Security in this study.

Although the Reconstruction and Development Programme (RDP) and subsequent documents have set out the public service priorities, these pronouncements still need to be integrated into a comprehensive, coherent and co-ordinated public administration model (Towards a Ten Year Review, 2003). In this study, it is evident that some public service department are still operating within the classical public administration model as reflected in Chapter Three of the study. Other departments, however, have already integrated some elements of the new public management (NPM) paradigm. This is discussed extensively in Chapter Three of the study. The classical public administration model has been inherited from the previous system (pre-1994). However, since 1994, the new South African government has embarked on a process of reform. In respect of the cases examined above, public service departments are in the process of adopting

certain elements of the NPM model, such as public private partnership (PPP). This changing trend in the classical public administration model is causing uncertainty in departments. However, in some cases, public service departments have adapted to changing circumstances and their progress is reflected accordingly. For example, the Department of Safety and Security has formed partnerships with communities and businesses to curb crime. These are examples of effective governance practices, which have been highlighted in Chapter Four of the study.

NPM principles are evident in the cases examined, especially with regard to the initiatives taken by the departments to develop a closer relationship with their customers. An example of this is the Department of Housing, which has been empowering its citizens by involving them in the delivery of services to their communities. The decision of the public service to define the citizens as customers or clients represents an important shift in paradigm. The Department of Health is improving the quality of services through citizen's charters and improved responsiveness towards their consumer (Access<htpp://www.doh.gov.za/doc/pr/2002/pr: *Retrieved: 16 October 2003*).

With regard to the Department of Safety and Security, the public servants that were inherited from the old dispensation (pre-1994) had been trained under a militaristic mindset (Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). Under the new democracy (since 1994), however, public servants are required to operate within a human rights culture (Naidoo, 2004: Discussion). This clearly presents a challenge for the Department of Safety and Security. Changing the mindset of public servants from the old dispensation, but it is essential in a democracy to promote legitimacy. In the Department of Housing, similarly the Chief Director, who had been inherited from the previous dispensation, did not have the capacity to transform and manage his department effectively (Muthien, *et al*. 2000: 122). This resulted in serious maladministration in the Department of Housing, which hampered efficient service delivery.

The Department of Justice and Constitutional Development and the Department of Housing (pre-1994) have inherited approaches from the previous dispensation. The Department of Justice and Constitutional Development, for instance, is unrepresentative in terms of the demographics of South Africa (Part 4 - State of the Nation Address of the President of South Africa, Thabo Mbeki, Houses of Parliament, Cape Town, February 2003 (Access<http://www.sabcnews.state_of_the_nation/address2: *Retrieved: 20 October 2003*). In that it remains the domain of White males. The Department is currently taking corrective measures to promote equity (2003) by the implementation of its affirmative action strategy. In this regard, targets have been set to attain representivity.

In respect of the Department of Housing, too, the characteristics of the classical model of public administration are still operational, which is evident from the amount of red tape and bureaucracy (Muthien, *et al*. 2000: 122). These cause delays in administrative issues in the Department, for example, the long delays with the approval of housing plans by the provincial housing Department. In all four Departments (Safety and Security, Housing, Justice and Constitutional Development, and Health) human resources are scarce. In the Department of Health there is a severe shortage of medical personnel (Access<htpp://www.doh.gov.za/doc/pr/2002/pr: *Retrieved: 16 October 2003*).

Despite the weaknesses and challenges confronting the South African public service, in giving effect to initiatives to improve public services in South Africa, departments are succeeding in delivering services to society (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). The cases examined in this study suggest that, where there is strong, willing and capable leadership, definite progress has been made with respect to service delivery outcomes, irrespective of capacity issues. For example, in the Department of Health, despite critical shortages of personnel, a number of positive initiatives are undertaken, for example malaria and polio prevention programmes (Access<htpp://www.doh.gov.za/doc/pr/2002/pr: *Retrieved: 16 October 2003*). This is also evident in the Department of Health in respect of its initiatives on HIV/AIDS.

In terms of the Department of Health's human resources plan, efforts are being made to improve the working conditions of medical personnel to encourage them to continue working in the hospitals and clinics rather than leaving the profession or even emigrating (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). This is further evident with other programmes in the cases examined. In the Department of Justice, case backlogs have indeed been reduced and efficiency has been improved (Access<http://www.doj.gov.za/about/adminjustice2002.html: *Retrieved: 17 October 2003*). In the Department of Housing, too housing backlogs have been reduced (Parliamentary media briefing by the Minister of Housing, Ms. Sankie Mthembi-Mahanyele, 20 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 20 October 2003*).

The challenges relating to human resources capacity and skills have faced the South African public service for some time, in the sense that they are the result of South Africa's history of apartheid (Soobrayan, 2004: Discussion). The shortage of leadership and human capacity and skills is evident in all the departments examined herein. Given the kinds of qualities and competencies that have, in the past, characterized the leadership in the South African public service, it must be examined whether these are in fact still relevant in meeting the needs of a post-apartheid society. It therefore depends upon the South African public service to develop a new competency profiling methodology that will breed public servants with the kinds of competencies that can match the challenges demanded by the new service delivery environment. The capacity of all departments must be systematically enhanced in order to improve and accelerate service delivery. This requirement is urgent, particularly with regard to the need to sustain the interventions that have already been implemented to alleviate service delivery backlogs.

Some leaders in the South African public service departments confront challenging situations daily. In all four departments studied herein the work- load far exceeds the available time and resources (Molopo, 2003: Discussion). The resources certainly include money, but also information, and skills (Soobrayan, 2004: Discussion). The cases examined suggest that most public servants in these departments have too much work and not enough time to complete it effectively, nor the necessary attention to detail (Chandu, 2004: Discussion). This is particular evident in the Department of

Health, where there are severe human resources constraints. As a result, medical staff work long hours to alleviate service delivery backlogs (Pillay, 2004: Discussion). Furthermore, some clinics in rural communities in South Africa do not have the necessary funding to improve primary health care (PHC) services, nor to employ additional medical personnel. Fiscal constraints have also had a ripple effect on obtaining other resources, such as medical equipment.

The picture that emerges from examined cases is that there is a shortage of skilled staff (Second Economic and Social Rights Report 1998/1998, 2000). The Departments of Health, in the Northern Province and Eastern Cape Province, for example, have a serious lack of human resources. In certain hospitals, medical personnel had not been trained on the use of the latest medical technology (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). Medical personnel in particular have been overwhelmed by the weight of service delivery challenges facing the provinces (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). In this regard, in the Department of Health, the doctors on the apparent lack of consultation voiced dissatisfactions by hospital authorities on important human resources issues (Pillay, 2003: Discussion). Furthermore, doctors complained about the lack of policy implementation strategies for primary health care (PHC) (Chandu, 2003: Discussion).

It was found that the provincial Health departments in the Western Cape Province and Gauteng Province in South Africa have functioned better than those in other provinces (Second Economic and Social Rights Report 1998/1999, 2000). There are, however, concerns about representivity and transformation in the Western Cape Province Health Department (Pillay, 2003: Discussion). The Departments of Health and Justice and Constitutional Development are confronted with a shortage of professionals from previously disadvantaged groups in all provinces (Soobrayan, 2004: Discussion). The deficiency of human resources skills is a constant challenge in all four cases studies examined. The reasons for this, is a shortage of qualified people in the professional and legal sectors. Training and development is therefore crucial to alleviate these shortages.

Mokgoro (2000: 12) argues that a stronger degree of institutional certainty will help improve service delivery. In this regard, Mokgoro (2000: 12) states that any further

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public service reforms in the South African public service should be carefully considered. Above all, the leadership ought to have the intellectual capacity to convert government policy into efficacious strategies, that can be implemented and to utilize resources allocated to them more effectively.

To promote effective human resources management in the examined cases, a number of initiatives have been undertaken by the departments. The Department of Health, for example, instituted training of medical personnel to improve their competence on the usage of the latest medical technologies. In other departments in the South African public service, training initiatives are also being undertaken to improve competences (Part 2 - State of the Nation Address of the President of South Africa, Thabo Mbeki, Houses of Parliament, Cape Town, February 2003) (Access<http://www.sabcnews.state of the nation/address2: *Retrieved: 20 October 2003*).

By 2003, the national and provincial governments of the South African public service completed the process of auditing their personnel to determine the personnel needs for each department, in relation to service delivery needs and demands (Part 2 - State of the Nation Address of the President of South Africa, Thabo Mbeki, Houses of Parliament, Cape Town, February 2003) (Access<http://www.sabcnews.state of the nation/address2: *Retrieved: 20 October 2003*). This exercise was undertaken by to ensure that the public service has the people with the right skills that correspond to the job requirements. The introduction of greater mobility to enable the public service to deploy individuals across departments at national and provincial sphere is essential. Another important intervention is to review management structures, with a key focus being the appropriate grading and competency assessment of senior leadership executives.

By 2003, almost all of the departments in the South African public service had completed their internal matching and placing process, and inter-departmental matching and placing are proceeding (Post-Cabinet Lekgotla Briefing on Governance and Administration, Presented by Minister of Public Service and Administration, Ms Fraser-Moleketi, 4 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). This project will ensure that an individual is placed in a position that is commensurate with his or her skills and competencies. This will also help to improve service delivery performance by the South African public service.

In 2003, there was a surplus of approximately twenty four thousand employees and fifteen thousand vacancies in the South African public service (Post-Cabinet Lekgotla Briefing on Governance and Administration, Presented by Minister of Public Service and Administration, Ms Fraser-Moleketi, 4 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). In this regard, eighty percent of the vacancies were at managerial and professional levels, especially in the health sector (Service Delivery Review 2004). Seventy percent of all the employees at the lower echelons are in surplus. For example, these include secretaries, receptionists and clerks. A new framework for ongoing restructuring of the South African public service has been developed in response to these imbalances. In this respect, employees are being redeployed to various posts within the South African public service. In cases were employees had not been successfully redeployed, they were placed in special programmes and retained within the public service, until June 2004. This is an important initiative in streamlining the South African public service to ensure optimal efficiency.

The ideal would be for the South African public service to evaluate the jobs of all senior managers, in order to establish at what level the jobs ought to be graded and what key competencies are required of the incumbents. Once the correct grading of these positions and the job requirements, have been ascertained public servants ought to be assessed. These assessments should look at the core existing managerial and functional competencies, of employees in order to assess the suitability of the managers and professionals in their current positions and their future training needs.

It has become something of a truism in many quarters to say that the South African public service frequently develops policies that are ambitious and developmentally sound, but cannot be fully implemented for various reasons, including a lack of capacity and skills and budgetary challenges. In some instances this criticism is fair. In others, however, it misses the mark. The gap between policy and implementation and its impact on service delivery was highlighted by the President, the Minister of Health and the Minister of the Department of Public Service and Administration (DPSA) of South Africa (Post-Cabinet Lekgotla Briefing on Governance and Administration, Presented

by Minister of Public Service and Administration, Ms Fraser-Moleketi, 4 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*).

President Thabo Mbeki indicated on national television in South Africa that the critical challenge that the South African public service faces is the capacity to implement policies (Interview of President Thabo Mbeki, SABC TV2, 16 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 23 October 2003*). This is reiterated in the Service Delivery Review (2004), which states that ineffective policy implementation by the South Africans public service impacts on service delivery performance. President Thabo Mbeki indicated that the critical factor is to improve the quality of leadership in the South African public service (Interview of President Thabo Mbeki, SABC TV2, 16 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 23 October 2003*). President Mbeki stated that there is a need to radically increase the capacity of leadership on all levels of the South African public service. The President maintains that the lack of effective leadership is a central issue impacting on public service delivery outcomes in South Africa. The second issue is to ensure that monies are actually spent properly by relevant departments (Interview of President Thabo Mbeki, SABC TV2, 16 February 2003) (Access<http://www.gov.za/search97cgi/s97: *Retrieved: 23 October 2003*).

Bardill (2000: 104) echoes Mbeki's words, arguing that an effective leadership framework is needed. Bichard (1998: 331) in a similar vein argues that in the South African public service, the focus of the leadership approach is on management rather than leadership. Bichard (1998: 331) suggests "what is needed is not just effective management in the South African public service, but leadership." In the cases examined herein, elements of transformational, transactional and team leadership began to be adopted in public service departments from 1994 onwards. Van Wyk, *et al*. (2002: 3) concedes that since 1994, the South African public service has also been using project teams. Moreover, these departments have adopted certain elements of democratic, administrative and civic governance (Naidoo, 2003: Discussion). These developments have led to the scale of change that can be seen in the South African public service over the last nine years (1994 to 2003). It is evident that all public service departments in South Africa have been involved in extensive restructuring, reform and transformation initiatives.

In 2002, the Human Sciences Research Council (HSRC) of South Africa proposed that leaders in South Africa, including leaders in the public service ought to develop more of their transformational leadership abilities and focus less on transactional leadership or management. Their findings were based on research data of seven thousand five hundred and sixty two leaders in South Africa. Transformational leadership involves change and transformation (Ozaralli, 2003: 335). It also involves vision setting and defining goals and strategies. The South African public service departments are constantly transforming and improving, but this ought to be integrated into a holistic leadership and governance framework that is appropriate and effective in the South African context. Furthermore, local narratives, such as culture, socio-economic factors and diverse political perspectives must be considered within this framework.

Maritz (2000: 18) states: "…To excel, public service leaders in South Africa will need to spend more time leading and developing their people, as well as doing less checking and controlling." Transactional leadership deals largely with red tape and bureaucracy, which overlaps with the characteristics of the classical public administration model. This was evident in the cases examined, for example in the Department of Housing, where there was an emphasis on transactional leadership. There is an urgent need to develop public servants in South Africa to lead rather than control. Transactional leadership is dominant in the cases examined, whereby public service departments still operate within a rule-bound culture.

Bryman (1992: 23) argues that sound transactional leadership is, however, the only base, from which transformational leadership can be attempted. Transactional leadership should thus not be completely discarded. Its positive attributes are essential to promoting a sustainable public service as they ensure attention to detail, maintain operational systems and improve productivity and cost efficiency. According to Heracleous and Langham (1996: 24), transactional leadership deals with day-to-day issues in a department. Many of these tasks may take place at the operational levels of public service departments (Bryman 1992: 23). In other words, many tasks will take place where the actual services are delivered.

In examining the findings of project teams of government programmes, policies, legislation and structures, it is evident that the South African public service often makes

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mistakes by giving project teams excessively challenging assignments while giving very little institutional support to enable teams to accomplish these assignments (Chandu 2004: Discussion). Clearly, even the most well intentioned goals, the best team members and their commitment will not mean much if the public service does not finance or resource the project to accomplish the goals. Moreover, a report on the state of the South African public service (2003) indicates that the public service does not adequately reward teams in terms of raises or bonuses when they do succeed. The South African public service has since established a performance management system to address the issue pertaining to rewards.

In view of the above, the South African public service can draw on the positive aspects of team leadership to promote effective service delivery. The most salient aspect is the setting of clear goals. These will allow managers to evaluate whether performance objectives have been realized. In this regard Adair (2002: 5) suggests that teams often fail when they are given a vague task and asked to work out the details themselves. Hackman and Walton (1986: 87), point out that teams often fail because they allow personal agendas to interfere with and replace team goals. In addition, the goal should be motivating, so that members feel that it is worthwhile to achieve.

Another important aspect that the South African public service ought to take cognizance of, as espoused by the various authors on team leadership, relate to the need for results-driven departmental structures. In this regard, teams in the South African public service have to find the best structure to accomplish their goals. As pointed out earlier, teams have different work content with which they deal. In the South African public service, all teams need to have clear roles for group members, a good communication system and methods of evaluating individual performance.

A crucial component of teams, are competent team members. As a group, the members should possess the requisite technical competence to accomplish the team's goals. Members should be personally competent in interpersonal skills or teamwork as well. Goleman (2003: 233) suggests that people who have the technical skills do not necessarily have the interpersonal skills to work together effectively in a group. Team members ought to know how to engage in collaborative work and to communicate effectively with one another.

Another fundamental facet that the South African public service ought to consider is the need for effectiveness in teams. According to Taylor (2003: 106), effective group norms are important for team functioning. Hackman and Walton (1986: 106) concede that team members' performance needs to be regulated, so that actions can be coordinated and tasks completed. It is vital that the South African public service set up mandatory targets and timeframes so that members feel pressured to perform towards attaining them (Soobrayan, 2004: Discussion). The guidelines should be clear and specific, and all team members should be required to perform to standard. In this respect the South African government's 'Batho Pele' policy should go a long way in promoting service delivery excellence by the South African public service. This in turn will lead to the better use of human resources and an increase in innovation and creativity in the South African public service. Furthermore, decision-making of the public service should be shifted downward, from the traditional hierarchy to more self-managed teams. This should empower teams in new ways. This is likely to lead to better decision-making and problem solving in the South African public service.

A unified commitment from team members is also important. Teams need to have a sense of unity or identification with a common purpose to promote the objectives of the group. Team spirit must develop a climate of collaboration by involving members in all aspects of the process. Larson and Lafasto (1989: 170) argue that trust based on honesty, openness, consistency, and respect are essential for building such a collaborative climate in which members can remain focused on the problem. They state that team members can then be open with one another, listen to each other, and feel free to take risks and willing to compensate for each other. In this respect, the principles of traditional African leadership such as *'ubuntu'* should be considered by the South African public service.

Leadership in the South African public service should thus incorporate the principles of *'ubuntu'*, which focus on consensus building, inclusiveness, participation and caring. This may promote the idea that striving to reach departmental goals should enable public servants to reach their personal goals. There should thus be a bottom-up approach to leadership that starts with the public servant's needs. Leadership in the South African public service can focus on the fulfilment of subordinates' goals and needs and for the realization of the larger purpose or mission of the public service. Naidoo (2003:

Discussion) points out that effective leadership is not just needed at the top of the South African public service, but at many different levels within the public service.

Leaders should be able to react well to all situations, and should be able to manage their departments efficiently, effectively and economically. It is important for the leadership in the South African public service to create a sense of purpose and direction. The South African scenario demands that leaders have the ability to analyse complex situations, to anticipate problems and to inspire their followers. The leadership should enable their departments to meet their service delivery commitments and even to excel beyond the required objectives. Public service leaders should also have the ability to provide leadership to the wider communities of South Africa. Public service leadership should have the insight to inspire and empower citizens throughout South Africa to become actively involved in the drive to redress, improve and sustain services to its communities.

The leadership in the South African public service ought to demonstrate a strong personal commitment to service delivery. More importantly, leaders should believe that they are the managers of the programmes and be motivated to deliver them. Schacter (2000:8) claims that when the local perception is that service delivery programmes have been designed and imposed by external agencies, there will be no ownership by followers. Conversely, when leaders within public service departments take the lead in both recognizing the need for transformation of service delivery and in designing the necessary mechanisms and interventions towards this end, the sense of ownership amongst public servants will be high. It is important for the South African public service to take heed of this argument.

An ineffective and inappropriate leadership framework is a significant constraint on efforts to improve and sustain service delivery by the South African public service. A lack of leadership capacity (needed to design, manage and implement public programmes) is recognized as a key constraint to effective service delivery. In some instances, this has led to public service departments in South Africa struggling with responsibilities they cannot fulfil and at the same time being unable to develop themselves in technical and managerial terms (A Report on the State of the Public Service, 2001: 9).

An emerging trend is that the dearth of leadership capacity is not only a cause but also a consequence of the sluggish progress in some public service departments to improve and redress service delivery backlogs in South Africa. However, an important feature of the South African public service is that qualities such as responsiveness to citizens and attention to public service delivery are being systematically valued and encouraged by leaders. Responsiveness is concerned with the degree to which citizens' preferences are met. It refers to the extent that the service satisfies the needs, preferences or values of particular groups (Van Niekerk, *et al*. 2001: 96). There is a strong motivation by the South African public service to invest in building leadership capacity to improve and redress public service imbalances and inequities in previously disadvantaged communities in South Africa.

In 2003, the Minister of Safety and Security in South Africa, Mr. Charles Nqakula, had similar concerns, and indicated the need to improve leadership capacity of public servants, particularly to ensure continued policy implementation. This was re-iterated by Kuye (2003: 1), who states "leadership constraints have had an impact on policy implementation." An example given is the need for competent leadership with a vision to promote an Integrated Justice System (IJS) (Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). The purpose of an IJS would be to overcome service delivery backlogs by the Department of Justice and Constitutional Development. The Department of Justice and Constitutional Development is undertaking this programme in collaboration with the Department of Safety and Security. Mr. Nqakula further stated that public service departments would require additional human and financial resources to meet the most important service delivery priorities, especially in previously disadvantaged communities in South Africa.

In 2003, the Minister of Health in South Africa, Dr. Manto Tshabalala-Msimang, further stated that the 'Cabinet *Lekgotla*' (the word *Lekgotla* refers to deliberation), had identified gaps and inconsistencies in the implementation of various policies and programmes by the South African Department of Health (Social Cluster Post-Cabinet Lekgotla Media Briefing, Presented by Dr. Manto Tshabalala-Msimang, The Minister of Health, 31 July 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). Theron, *et al*. (2000: 24), similarly had argued that ineffective policy

implementation is one of the major obstacles to effective progress in service delivery. Ineffective implementation is caused by a number of factors, the most important of which is the lack of financial resources (Pillay, 2004: Discussion). Other obstacles include a lack of sufficient human resources (people, expertise, and experience), and a lack of technological resources (Moodley, 2004: Discussion).

A 'Report on the State of the Public Service' (2001: 19) indicates that, although policies are well designed and well structured, specific challenges have arisen in the policy implementation phase. Furthermore, the measures and processes that are set in motion at the central legislative level in South Africa are not adequately implemented as planned by its bureaucratic leadership at provincial and local spheres of government (Van Niekerk, *et al.* 2000: 15). There are apparent inconsistencies between policy and implementation. Van Niekerk, *et al.* (2000: 15) indicate that interventions to address these challenges are often neither integrated nor supported within departments. The challenge that confronts the South African public service is to ensure that the necessary technical, institutional and human resource capacity exists amongst public servants, in order to improve policy implementation (Xio, 1998: 273).

If policy implementation is the major challenge in the South African public service, then leadership ought to focus on the objectives of the departments, to address how individual public servants can best be utilized to fulfil these objectives. These assessments need to be done properly and on a regular basis. This includes the basic activity of setting manageable, achievable targets, and using effective monitoring and evaluation systems to continually assess progress. A strong degree of institutional certainty will help this process. The renewed focus on core principles would thus add value to the public service.

In 2003, the Minister of Health indicated that administrative and institutional barriers in South African public service departments are curtailing the impact of policy implementation (Social Cluster Post-Cabinet Lekgotla Media Briefing, Presented by Dr Manto Tshabalala-Msimang, The Minister of Health, 31 July 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). This has been re-iterated by the Minister of Public Service and Administration in South Africa. In this regard, she has indicated that, the South African public service faces major

administrative challenges in terms of policy implementation (Service Delivery Review 2003). Furthermore, the Department of Public Service and Administration's (DPSA's) Provincial Review Report of 2003, highlights a number of critical administrative and institutional weaknesses in most provincial administrations in South Africa.

The challenges of policy implementation are evident in the four departments analysed in this chapter, i.e. the Departments of Health, Housing, Justice and Constitutional Development and Safety and Security. This is re-iterated in the Second Economic and Social Rights Report of 2000. It could be argued that some policies in these departments were formulated without fully consulting with key actors, who would have to implement them, such as the hospital superintendents, in the case of the Department of Health, and the heads of departments in the other departments (Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*). Moreover, policy implementation in public service departments, such as hospitals in South Africa, has lacked proper prioritisation and time scales (Pillay 2004: Discussion). Similar gaps are evident in the Departments of Housing, Justice, and Safety and Security. Furthermore, there is inadequate communication and co-ordination of policy implementation. This is especially evident within the three spheres of government (national, provincial and local) in South Africa.

There is also a lack of clarity of the roles and functions of each sphere of government, although these are clearly spelt out in the Constitution (1996). Friedman (2003: 2) argues that these have not effectively communicated to the provincial and local government spheres by national government. This problem was detailed in Chapter Three of this study. In addition, there is inadequate co-ordination of policies between the three spheres of government (Kuye, 2004: Discussion). Again, this could be attributed to leadership and human resources constraints. There are also factors pertaining to ineffective governance practices (Soobrayan, 2004: Discussion). For example, structures and resources have not been put into place to ensure effective policy implementation. This is evident with some clinics in rural communities in South Africa (Pillay, 2004: Discussion).

Other policy deficiencies are the lack of clear strategies for policy implementation (Access<htpp://www.doj.gov.za/about/adminjustice2002.html: *Retrieved: 17 October*

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2003). This is evident, for example, with the Departments of Justice and Constitutional Development and Safety and Security (Naidoo, 2004: Discussion). This has certainly impacted on the pace of transformation in the Department of Safety and Security (Govender, 2004: Discussion). This has hampered effective service delivery in both departments. Policy implementation also lacked co-operation among different departments, at national, provincial and local spheres governments (Post-Cabinet Lekgotla Briefing on Governance and Administration, Presented by Minister of Public Service and Administration, Ms Fraser-Moleketi, 4 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*).

The lack of trust between the three spheres of government in particular was highlighted as hampering service delivery (Access<htpp://www.doj.gov.za/about/adminjustice2002.html: *Retrieved: 17 October 2003*). The lack of co-operation is a constraint that was constantly mentioned in the discussion earlier. This is evident in all cases examined. Furthermore, this was clearly reflected by key role players in South Africa. For example, the Minister of Health and the Minister of the Department of Public Service and Administration (DPSA) repeatedly indicated that the lack of co-operation between the three spheres of government was a massive challenge impacting on effective policy implementation by the South African public service.

Schacter (2000: 8) re-iterates that there is distrust, a lack of accountability, and intransigence in the relations between the different spheres of government (national, provincial and local). Within the Department of Housing, for example, relations were strained between the provincial sphere of government and the local sphere of government (Muthien, *et al*. 2000: 122). This can be attributed to the lack of a clear description of the roles of the different spheres of government. However, efforts are been made to improve intergovernmental relations (IGR) between the spheres of government. In this regard, an IGR policy, are prepared by government. The aim is to overcome the challenges currently experienced.

Another challenge that the South African public service departments experience a rapid staff turnover (Soobrayan, 2004: Discussion). In respect of the Department of Health, doctors are constantly moving from the public sector to the private sector

(Access<htpp://www.doh.gov.za/docs/pr/2003: *Retrieved: 16 October 2003*). Many doctors and nurses from the South African public health service are also emigrating to other countries (Pillay, 2004: Discussion). This can be attributed to higher salaries and better working conditions and benefits. This creates a huge vacuum in terms of human resource capacity in the public health sector in South Africa (Soobrayan, 2004: Discussion). The Department of Health has however been taking active measures to address this, by appointing foreign doctors (Moodley, 2004: Discussion). Furthermore, efforts are being made to improve salaries, working conditions and benefits. To a limited extent this has assisted in alleviating the staff shortages in clinics and hospitals. This is elaborated earlier in the discussion earlier.

Mokgoro (2002: 12) reports that, "policy implementation, monitoring and evaluation is the major challenge in the South African public service." Mokgoro (2002: 12) states that: "the major focus needs to shift to addressing how individual workers are utilized in the South African public service." This ought to include the basic activity of setting manageable, achievable targets, and using monitoring and evaluation systems to assess progress in terms of public service delivery. Nonetheless, policy implementation in the Department of Safety and Security is clearly problematic.

Despite these shortcomings and challenges facing the South African public service, procedures and manuals have been developed for those responsible for policy implementation (Van Niekerk, *et al.* 2000: 16). The standards are clear and ought to be effective. However, it is not used to the extent envisaged by public servants. This is attributed to it not being effectively communicated by managers. It is important for public servants to use these procedures and manuals to ensure effective policy implementation. Furthermore, policy implementation in the South African public service is linked to a performance management system. According to Van Niekerk, *et al*. (2000: 16), public servants are responsible for meeting policy objectives and accountable for the outcomes. The South African public service has also considered rewarding public servants. This comes at a time of growing concern at the ability of public service leadership to convert policy into practice and to utilize the resources allocated to them effectively.

Some of the lessons learnt and the recommendations thereof for the policy process in the South African public service are, firstly, that the context of policy implementation and service delivery should be borne in mind when the leadership and those who implement policies in public service departments formulate them. Secondly, policies should be seen as starting points by public service departments in South Africa rather than final goals, in order to promote a willingness to modify policies that do not work in reality. Thirdly, leaders and managers who are involved in the implementation of policies should also have a say in developing such policies. A lack of continuity between policy development and implementation undermines both policy-making and its implementation. Moreover, the leaders or managers who develop policy are likely to be familiar with the policy and its implications, and thus are able to implement it successfully.

Fourthly, it is crucial that affected interest groups in South Africa, such as civic organizations and non-governmental organisations (NGOs) be actively involved in monitoring and evaluating the policy implementation processes. Monitoring and evaluating mechanisms in the cases examined are weak. The strengthening of these mechanisms in the South African public service is likely to promote effective service delivery. The monitoring and evaluation mechanisms will identify weaknesses in the process, which be promptly addressed.

The Minister of Health argues that there is a need for increased co-ordination and integration in the delivery of Health services, as this is clearly lacking in the department (Social Cluster Post-Cabinet Lekgotla Media Briefing, Presented by Dr. Manto Tshabalala-Msimang, The Minister of Health, 31 July 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). A study on the South African public service that was initiated by the South African Public Service Commission (PSC) (2000) clearly indicates a weakness in the current structures and mechanisms for coordination, both within departments and provinces and between the different spheres of government. The inefficiencies in terms of policy coordination at the national level have 'knock-on' effects on the provincial departments; with the Department of Housing, for example this was clearly evident.

Dr. Manto Tshabalala-Msimang indicates that inter-sectoral coordination within the provinces is limited and that the development of integrated programmes is not taking place at the level required to address service delivery imbalances and inequities among South African communities (Social Cluster Post-Cabinet Lekgotla Media Briefing, Presented by Dr. Manto Tshabalala-Msimang, The Minister of Health, 31 July 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). She argues that this is also due, in part, to the confusion that prevails in particular provinces over the coordinating role of the provincial leaders, mainly the Director-General. Furthermore, it is also due to a failure to coordinate policy formulation, and to ensure that policies are implemented collaboratively. In 2003, the Minister of Safety and Security also indicated that there is a need to effect significant improvements in cooperation and coordination between different departments and different spheres of government (national, provincial and local) in the South African public service in general, and in the Department of Safety and Security in particular (Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*).

Viewpoints expressed by Ncholo (2000: 25) indicate similarities with respect to inadequate coordination in the South African public service. This often occurs between leadership in decision-making positions and leadership in administrative positions. Moreover, Ncholo (2000: 25) indicates that few structures have been set up to promote coordination between municipal (local) government departments and the other two spheres of government (provincial and national). This clearly becomes evident with the Departments of Health, Housing and Justice and Constitutional Development. Ncholo (2000: 25) argues that, despite the provisions of the Constitution (1996), municipal authorities have yet to be integrated as a distinct sphere into the broader system of governance in South Africa. The formal public service has been created by the South African government to promote inter-governmental relations (IGR) between municipal (local sphere), and national and provincial governments. This is presently still evolving and not yet fully operational (Friedman, 2003: First South African Public Management Conversation).

As a consequence, where concurrent responsibilities extend to the municipal (local) sphere in South Africa, these are generally not integrated with national and provincial programmes (Friedman, 2003: 3). Although part of this has to do with the fact that the focus of IGR thus far has been on relations between the national and provincial governments, rather than including relations with local government as well. It also has to do with the variable financial and human resources capacities of municipal (local) governments (Service Delivery Review, 2001).

Effective coordination within and between the three spheres of government is clearly vital, especially if the South African public service is to contribute meaningfully to the kind of integrated approach to reconstruction and development that has been advocated in the Reconstruction and Development Programme (RDP), the White Paper on Transforming the Public Service (WPTPS) and other policy papers, as well as to the system of co-operative governance spelled out in the Constitution (1996). Furthermore, the necessary financial, human and technical resources have to be provided by the South African government to improve service delivery.

Long - term sustainable development objectives, of the South African public service is important. However, the sustainability of services depends on their ongoing affordability. This requires that appropriate technology and levels of service be designed to ensure low-cost maintenance, such as electricity where overhead cables are easier and more cost-effective to maintain, even if technology and aesthetics dictate that underground systems are preferable. Conversely, in other cases, the development of high-cost, high-quality infrastructure, such as in the building of schools or clinics, can ultimately ensure lower costs in maintenance. The ongoing impact of service delivery projects in the South Africa public service ought to be appropriately focused on the longer terms. Training, for instance, should focus on the leadership and human resources capacity around each project. This avoids the project being short-lived because of leadership and human resources incapacity. It is therefore in the interest of the project leader to promote leadership and human resources training in order to ensure the sustainability of the project.

This is re-iterated in the Report on the State of the Public Service (2001: 2), which reports that monitoring and evaluation remains a challenge in South African public

service departments.   The Report (2001: 16) further states that, the institutional arrangements in some departments lack effective monitoring and evaluation systems to measure performance and evaluate policy outcomes (Report on the State of the Public Service 2001: 16). In this regard, one of the issues of concern with the Public Service Commission (PSC) in South Africa is the fact that many development programmes aimed at addressing service delivery backlogs are not properly monitored and evaluated (Chandu 2004: Discussion). This is a consistent concern with the Minister of Health. In this regard, the Minister claimed that there is a general weakness in terms of monitoring and evaluation in the South African public service (Social Cluster Post-Cabinet Lekgotla Media Briefing, Presented by Dr. Manto Tshabalala-Msimang, The Minister of Health, 31 July 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*).

There is corruption, maladministration and white-collar crime that are impacting on service delivery (Service Delivery Review, 2004). Corruption is evident in the Department of Health, and the Department of Safety and Security is also confronted by a rise in corruption, maladministration and white-collar crimes (Fanaroff, 2002: 3). Theft within the Department of Health is also a major concern (Pillay, 2004: Discussion). The Department has taken steps to improve control measures to curb these practices where they are prevalent (Service Delivery Review, 2003). By 2003, it could not be determined how effective these control mechanisms were. Similar sentiments can be echoed for the Department of Justice and Constitutional Development, where corruption, theft, white-collar crimes and maladministration are evident as well (Access<http://www.doj.gov.za/about/adminjustice2002.html: *Retrieved: 17 October 2003*). The South African government has embarked on a number of initiatives to curb corruption, which were outlined extensively earlier in the chapter (Naidoo, 2004: Discussion). The importance of an ethical framework for the South African public service is stressed. In this regard, accountability, transparency, honesty and integrity are considered important to promote an efficient public administration. This was discussed extensively in Chapter Four of the study.

Public servants should exercise their authority properly, responsibly and democratically. Better accountability is seen as imposing restraints on power and authority and creating incentives for appropriate behaviours and actions. Thus, the sense that the public service

needs to improve, that its power should be circumscribed, and that its actions should be exercised according to the will of the citizens, puts accountability at the centre of current leadership and governance issues (Van Wyk, *et al*. 2002: 293).

There is a development of a structure of administrative law aimed at enhancing the scrutiny of bureaucratic decision-making (Service Delivery Review, 2004). Critics suggest that the mechanisms designed to improve accountability in the South African public service, have, however, failed to keep pace with the speed of public service change (Lungu and Esau, 1999: 44). Bardill (2000: 105) indicates that, traditional notions of accountability in the South African public service (prior to 1994) emphasize process and prescription, whereas the present South African public service (post 1994) emphasizes results or outcomes in terms of service delivery.

According to Ncholo (2000: 30), the balance between maintaining the accountability required of the South African public service and developing a performance culture is not easily attained. Unlike the private sector, where the bottom-line rationale is profit, the public service often finds itself having to balance different objectives, the relative importance of which may shift over time (Lungu and Esau, 1999: 44). Ways should, therefore, be found to strengthen the commitment of leadership, especially leaders in their capacity as senior politicians, decision-makers and managers, to build sustainable capacity. Projects aimed at building professional capacity should not overlook the importance of training senior officers to lead and utilize scarce staff resources better (Cohen and Wheeler, 1997: 310).

Politicians and public servants should be accountable for their actions to their constituencies and superiors. They should also be accountable to the public. Accountability in the South African public service should focus on compliance with rules and ethical principles and the achievement of outcomes. Accountability mechanisms thus need to be strengthened within the South African public service. Furthermore, this should be extended to South African society in general. Mechanisms promoting accountability should therefore be strengthened to provide adequate monitoring, reporting and feedback within the South African public service. In this way, control will be strengthened and sustainability will be improved.

There is inadequate infrastructure in previously disadvantaged communities, especially in rural areas in South Africa which impacts on effective public service delivery. For example, in the case of the Department of Justice, the courts are only found in city centres (Access<http://www.doj.gov.za/about/adminjustice2002.html: *Retrieved: 17 October 2003*). This has had a ripple effect in that services have been inaccessible to previously disadvantaged communities in South Africa. The Department of Justice has however embarked on the use of mobile law clinics, which has partially alleviated this challenge.

Inaccessibility is also the case with the Department of Health in South Africa (Access<http://www.gov.za/structure/pubserv.htm: *Retrieved: 17 October 2003*). Some of the health clinics are situated in remote rural areas, which are inaccessible to the community (Pillay, 2004: Discussion). Communities have, therefore, continued to use hospital services to a greater extent (Moodley, 2004: Discussion). With respect to the Department of Safety and Security there are insufficient police stations in previously disadvantaged communities (Post-Cabinet Lekgotla Media Briefing, Presented by Minister of Safety and Security, Mr. Charles Nqakula, 5 August 2003) (Access<http://www/gov.za/search97cgi/s97: *Retrieved: 20 October 2003*). The statistics reflected in the discussion above clearly indicate this. The majority of police stations in South Africa are found in previously White areas (Govender, 2004: Discussion).

Despite these challenges, constrains and lessons, policy implementation has continued to be satisfactory in three of the four cases examined. However, it is clearly evident that the public service departments have not achieved optimal results, especially in respect of previously disadvantaged communities' massive service delivery imbalances and inequities. The public service has also not adequately addressed service delivery imbalances and inequities at the pace that is required in South Africa. As a result huge backlogs are evident in previously disadvantaged communities, especially in rural areas in South Africa.

According to the Minister of the South African Public Service, Ms. Geraldine Fraser-Moleketi (2003: School of Public Management and Administration, University Of Pretoria), effective leadership and governance approaches for improving service

delivery, are crucial for success. Against this background, leadership must provide direction, so that people can invest their energy synergistically to attain service delivery goals. In order to meet these objectives, leaders in the South African public service will, however, be challenged to work within multiple dimensions to promote effective service delivery.

A question can be put forward as to whether particular leadership attributes are required for the South African public service. The South African public service, after all, comprises a diverse group of people from different races, ethnicities, traditions and political groupings (Naidoo, 1996:13). Each grouping has it own idiosyncrasies (Kuye, Discussion: 2003). The public service ought to focus on the diversity of leadership approaches for the possible adoption by the public service. Although the South African public service is heterogeneous by nature, the focus thus far has been on Eurocentric approaches (Naidoo, 1996: 1). To develop a more effective and holistic leadership framework, the focus should be on the positive attributes of leadership approaches from different traditions and systems. In South Africa, the positive attributes of both Western and traditional African leadership models should be integrated to bring about meaningful change in the South African public service (Moleketi, 2003: School of Public Management and Administration, University of Pretoria).

All cases studied failed to consider the need for a uniquely South African leadership and governance framework. As indicated, the current framework has to be strengthened, by integrating unique attributes of the South African scenario. The political, economic, social and cultural context ought to be considered by South African public service when designing an appropriate framework. An encompassing framework should provide the basis for improvement in service delivery performance in the South African public service. Furthermore, the public service ought to address the numerous challenges and weaknesses that are hampering its effectiveness.

Moreover, the public service ought to concretise its public administration model, to avoid ambiguity. The public service has made significant progress in adopting a new public administration model. These efforts need to be consolidated with greater attention being focused on improving service delivery, especially in previously

disadvantaged communities. When the basic approaches are consolidated, this should promote a sustainable public service for improved service delivery performance.

The study thus suggests that an integrated model of transformational, transactional, team and traditional African leadership framework would be appropriate for the South African public service to improve and redress service delivery performance. The leader also ought to adapt his or her leadership style to the particular context. These approaches focus on processes that change and transform individuals for the betterment of society (Naidoo, 1996: 7). Transformational and traditional African leadership are concerned with ethics, values, long-term goals and standards (Northouse, 2001: 130). Transformational and traditional African leadership involves assessing followers' motives, satisfying their needs, and treating them as full human beings. According to Northouse (2001: 131), transformational leadership describes a wide range of leadership, from very specific attempts to influence whole institutions and even entire cultures. Although transformational leadership plays a pivotal role in precipitating change, followers and leaders are inextricably bound together in the transformation process.

Rost (1993: 121) and Naidoo (1996: 8) reiterate that both transformational and traditional African leadership is concerned with end-values such as equity. Leaders and followers are engaged in a common enterprise, and are dependent on each other. The pay-off is both predict a higher level of performance across a diversity of cultures and scenarios. The South African society is diverse in terms of race, gender, ethnicity and political perspectives (Kuye, 2004: Discussion). It would therefore be appropriate to examine the positive attributes of different leadership approaches that would be appropriate and effective for the South African public service.

Although a number of initiatives are presently being undertaken by the South African public service to improve public service delivery, the approaches that are applied have not been very effective in accelerating service delivery at the pace that is needed in South Africa. The public administration model comprises varied elements of the classical and new public management (NPM) paradigm, transactional, transformational leadership and team leadership, in a transforming South African public service. This has not been effective in accelerating service delivery to the South African society at the

pace that is needed to eradicate the massive backlogs in previously disadvantaged communities.

Future trends

The starting point in improving and accelerating service delivery by the South African public service should be that leadership and governance must serve the common purpose of ensuring effective, cost-efficient and equitable service delivery. Effective leadership and governance in the South African public service depends on a thriving policy environment, which is built upon the bedrock of reliability and predictability in public administration. Moreover, it requires that sufficient time be allocated for South African public service departments to execute their commitments. It also assumes that there ought to be some level of continuity in decision-making and a sustained commitment to service delivery over an extended time-span. This can be achieved through a professional, highly skilled public service, as well as sustained investment in public infrastructure.

Policy analysis and prioritisation should be done in an integrated manner. It is assumed that what guides the work of each public service department is the electoral mandate, which, in turn, translates constitutional obligations into programmes. These imperatives inform the South African public service's priorities and should ensure congruence across sectors and spheres of government. In addition, integrated planning systems should be put into place to guide the operational work of all public service departments. Integrated policy priorities should then inform human and financial resources allocation. However, the integration can only work in instances where there is effective monitoring and evaluation of performance in public service departments. An overall philosophy should guide the South African public service towards improved and accelerated service delivery, especially in previously disadvantaged communities.

An integrated approach to policy planning and implementation in the South African public service requires that outcomes be directed at changing the totality of people's lives. Moreover, successful policy implementation in South Africa ought to be measured by political accountability bureaucratic accountability, and transparency. In

this regard, a number of provisions have been made by the Constitution (1996) and other policy documents, which ought to be adhered to.

It is important to recognize that effective public service delivery will not just happen in South Africa. It is something that has to be nurtured and developed over time. According to Muzvidziwa (2001: 15), "leadership ought to be entrusted in the hands of men and women who are proud of their African identity and yet humble enough to serve those of their society who need their service and expertise." There ought to be an environment created to nurture and foster the development of positive leadership qualities and skills in public servants in the South African public service. The South African public service needs leaders who can commit themselves to a life of personal integrity, accountability, responsibility, loyalty, selflessness, honesty, and willingness to sacrifice themselves for the future betterment of South Africa. Failure to develop sound leadership attributes amongst South African public servants will mean on-going service delivery weaknesses and persisting challenges.

There is diversity among South African public service leaders with respect to personalities, styles, abilities and interests. Effective leaders, however, have one thing in common: Their followers produce high quality results. Since public servants produce the results in the South African public service, it is necessary to redirect our inquiry and ask what public servants require, to make service delivery successful. The study suggests that leaders in the South African public service need six conditions in order to make them effective: Firstly, they should know what to do. Secondly, they ought to have the know-how to complete the task at hand. Thirdly, they should understand why they are doing it. Fourthly, they should be motivated to do the work. Fifthly, they ought to have the resources for doing their work. Sixthly, they should believe they have the competence to do the work.

It is the responsibility of leadership in the South African public service to ensure that these six conditions are met. When each person in the South African public service understands the what, how and why of his or her job, and when each has a personal commitment and the resources to get the job done, it is anticipated that the expected result would be improvements in service delivery performance. An alignment of these components should result in effective service delivery by the public service. In the same

light, a strengthening of leadership and governance in the South African public service is essential for improving and accelerating service delivery performance.

Leaders in the South African public service, especially those in senior management and high-level professional positions, must concretise its vision of a better life for all, through effective implementation strategies and efficient utilization of resources. In view of the service delivery backlogs, there is no place for mediocrity or lack of commitment on the path of leadership. The leader's talents are utilized to the best advantage of the South African public service. Training and development should be essential for public servants, and the training should be designed to address the skills needed by departments. It is also essential that employees be specifically trained to meet service delivery objectives.

Collective decision-making, which is participation in decision-making at a primary level, and which is an aspect of traditional African leadership, will be enabling and empowering among the South African community. In this regard, leaders in the South African public service ought to make information available through collective decision-making. This will develop the ability of people to make decisions that are in the best interest of both individuals and the public service. Collective decision-making will also contribute to the development of the skills and abilities of public servants in South Africa. The degree to which leaders empower others will affect their legitimacy and the influence they have. Leaders should thus create an inclusive culture, which fosters the feeling of being part of a community.

In the South African public service, there is a diversity of public servants, from varied local cultures and traditions (Naidoo, 1996: 6). In view of the diversity of cultures and traditions and the need for greater efficiency in the South African public service, an inclusive approach to leadership and governance will be highly beneficial to promote service delivery performance. The new South African public service recognizes the potential of each and every culture (Naidoo, 1996: 2). The South African public service ought to draw on aspects that contribute to the principles espoused in the various policies in South Africa, such as the promotion of democracy.

In this respect, equality and unity in diversity ought to be considered as crucial in South Africa. The leadership and governance framework can draw on the positive attributes from every culture, including from African traditions that would be beneficial in the South African public service. It could sharpen those attributes that make for an effective leadership and governance framework, by incorporating positive components from the diverse traditions and systems. A diversity of positive leadership attributes, such as *'ubuntu'* ought to be infused into the leadership and governance framework of the South African public service. This has been discussed extensively in Chapter Four of the study.

It could be argued that there is a need for a pragmatic transformational African leadership and governance model that is tentatively referred to as a hybrid model. This model is derived, to respond to the unique circumstances faced by the post-apartheid public service, which would require a conception of public service leadership and governance that draws on relevant approaches. This hybrid model blends traditional African leadership and governance, transformational leadership and team leadership. It is also essential for leadership to adapt his or her leadership style to a particular context or situation. The model should encompass effective governance approaches. It should also comprise accountability, transparency and public participation. It is considered necessary to locate this integrated approach to leadership and governance within the new public administration model. Furthermore, the South African public service should incorporate political, cultural, spiritual, social and personal dimensions within its unique leadership and governance framework. The leadership and governance framework should be flexible enough to accommodate the unique diversities in the South African context. This should promote a sustainable public service, which ought to improve and redress service delivery, especially in previously disadvantaged communities in South Africa.

At the same time, caution and not an uncritical total acceptance of one culture or values as givens, are essential. Undoubtedly, issues of appropriate management, leadership and governance practices require extensive exploration by South African public service before they can be adopted. The argument in this study is not about changing public administration approaches, or whether values do change or not, in the South African public service but the main goal is the improvement of service delivery by the South

African public service by the adoption and implementation of an effective leadership and governance framework.

SUMMARY

Efforts are being made by the four South African public service departments examined in this study to redress service delivery imbalances and inequities. There are notable achievements with the Departments of Health, Housing, Justice and Constitutional Development and Safety and Security. However, despite the South African public service focus on improving service delivery, they are faced with many challenges. There are areas of service delivery that requires improvement. The current public administration model is a mixture between the classical and post-modern one, which contains elements of transformational, team and transactional leadership approaches to redress service delivery imbalances and inequities.

In other words, although the traditional bureaucratic model of public administration is still evident in the departments herein examined, some elements of the new paradigm have already been adopted. A number of efforts are being taken by the South African public service to replace the traditional model of public administration. There is a shift towards the new models of public administration, which, it is hoped, will have a positive impact on service delivery everywhere in the country. The current public administration model, with mixed elements of leadership and governance has not been able to alleviate the massive imbalances in service delivery at the pace that is required. It is clear that there are also challenges with the current leadership and governance approaches adopted within the public administration model. The current pace of reforms in the departments is not fast enough to eliminate the backlog in services, particularly among previously disadvantaged communities. The current leadership and governance framework needs to be strengthened, so that the pace of service delivery can be increased.

It is proposed that the South African public service should carefully consider the importance of valuing the diversity in departments. It is also important to create a work environment that is conducive to promoting service delivery. In this regard, it is important for the South African public service to promote accountability, transparency

and public participation. Although several provisions have been made to promote these principles in the South African public service, they are not very effective in practice. Leaders will need to connect new ideas into an effective framework to accelerate their performance and to meet the government's commitments of redressing service delivery imbalances and inequities in South Africa. Much more needs to be done by the South African public service to address the massive imbalances and inequities in previously disadvantaged communities. These issues are further elaborated in Chapter Six of the study, which will male some viable recommendations for the South African public service.