

AN IMPROVED MODEL FOR PROVISION OF RURAL COMMUNITY-BASED HEALTH
REHABILITATION SERVICES IN VHEMBE DISTRICT OF LIMPOPO PROVINCE, SOUTH
AFRICA

By

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ABSTRACT

Client satisfaction with healthcare and community-based rehabilitation service delivery is a key outcome indicator because it measures multiple domains of quality. Although there are many domains of satisfaction, none of the studies, to date, has sufficiently explained the relationships among the variables that influence it. A community-based health rehabilitation programme was introduced in 1991 in Limpopo Province. So far, no empirical evaluation of its effectiveness has been carried out. Thus, this study sought to fill this gap. The objectives of the study were to (a) explore the experiences of clients regarding community-based rehabilitation (CBR) services; (b) determine whether community rehabilitation workers were empathic, reliable, assuring, responsive and produced tangible results when providing community-based rehabilitation services; and (c) suggest an improved model for the provision of the CBR services. In-depth one-to-one and focus group interviews were conducted to collect qualitative data while quantitative data was gathered through administering questionnaires. The study population consisted of 2 850 disabled clients that community rehabilitation workers (CRWs) served. Fifty-two per cent of the randomly sampled 357 clients were female. The findings from the qualitative study revealed that experiences of people with disabilities were varied. In general, highly significant differences ($P < 0.001$) in reliability, assurance, tangible and responsiveness of CRWs existed across types of disability and rehabilitation centres. Clients were satisfied that CRWs were empathic (83%) and assuring (80%). In contrast, 78%, 72% and 67% of the respondents indicated that the CRWs produced tangible results, were reliable and responsive, respectively. Using the results of this study, a reconfigured model with CRWs and supervisors as primary and secondary agents of CBR services, people with disability, district policy framework, intergration strategy, implementation procedure and empowerment approach is proposed. The Theory in a Practice Discipline, which includes agents, recipients, context, procedure, dynamics and terminus, informed the development of the improved model. Considering the fact that the CBR model was not tested, it is imperative to validate it through further empirical studies. While the experiences are varied from the perspective of the clients, the role of the CRWs is critically important because they enriched the lives of disabled people. Overall satisfaction per domain shows that all the five domains of satisfaction score less than 90% ranging from 67% to 83% which is a concern. The improved CBR model is recommended in order to improve practice.

Key words: Community-based rehabilitation, client satisfaction, model, rural, services, community rehabilitation workers