

Lecture: Pholela and the U.S. Community Health Centers- Differences between the U.S. and developing countries

Learning Objectives

By the end of this session participants will be able to:

1. Describe the origins of the community health center in Pholela as an adaptation of the principles developed in Ding Xian
2. Discuss the transformation of the Pholela experience into a template for change in CBPHC in the U.S. during the "Great Society" and "War on Poverty" programs of the Johnson administration
3. Explain the expansion of roles to include new health professionals—such as nurse practitioners and community health workers—to provide CBPHC services in a health system dominated by specialty care

Focusing Paragraph

In the late 1960's in the United States the hopes and promises of a lasting progressive reform of society were beginning to unravel under the strains of the expanding war in Vietnam. The achievements of the Civil Rights movement were not yet consolidated, and many of the programs launched as part of Lyndon Johnson's "Great Society," were threatened with rollbacks or dismantling by the Nixon administration. The Office of Economic Opportunity (OEO) is still funding new health centers, however, and often directs the support to local Community Action Project (CAP) agencies. You have been asked to serve as medical director by a CAP director who hopes to contract for a full range of clinical and public health services by the local Academic Health Sciences Center.

Reflective Questions

1. Where would you begin? Who are the first five people you would contact and why?
2. How would you determine staffing needs at the new community health center(s)?
3. What lessons from Pholela might apply to your new duties?
4. The CAP director wants to recruit, hire, and train all of the community health workers, receptionists, and appointment clerks while leaving you responsible for nurses, physicians, social workers, pharmacists, dentists, and public health professionals. What opportunities and what barriers does this decision present?

Readings

Required Readings

Case Studies in Primary Health Care (221.635) On-Line
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- Geiger, H J. *The First Community Health Centers. A Model of Enduring Value.* J Ambulatory Care Manage 2005 Vol 28, No 4, pp 313-320
- Mullan, F & Epstein, L (2002). Community-Oriented Primary Care: New Relevance in a Changing World. *American Journal of Public Health* November 2002, Vol 92, No. 11
- AJPH (2003). Editorial on Community Research
- Yach, D. and S.M. Tollman, *Public health initiatives in South Africa in the 1940s and 1950s: lessons for a post-apartheid era.* Am J Public Health, 1993. **83**(7): p. 1043-50.
- Susser, M., *Pioneering community-oriented primary care.* Bull World Health Organ, 1999. **77**(5): p. 436-8.

Optional Reading

- Kark, S.L. and J. Cassel, *The Pholela Health Centre; a progress report.* S Afr Med J, 1952. **26**(6): p. 101-4; contd.
- Kark, S.L. and J. Cassel, *The Pholela Health Centre: a progress report.* 1952. Am J Public Health, 2002. **92**(11): p. 1743-7.
- Kark, J.D. and J.H. Abramson, *Sidney Kark's contributions to epidemiology and community medicine.* Int J Epidemiol, 2003. **32**(5): p. 882-4.
- Gofin, J, *On "A Practice of Social Medicine" by Sidney and Emily Kark.* Social Medicine Volume 1, No. 2, August 2006