

ABSTRACT

Background

An increasing number of people are migrating to South African urban centers (GJMC, 2000). There are various reasons that can be attributed to this migration; including the hope of finding employment and better living conditions. Recent urban migrants find themselves faced with the basic problem of lack of shelter and, depending on the migrant's situation, they may choose to live in indoor shacks within the city center, backyard shacks in the black townships or join the growing number of informal settlement dwellers (GJMC, 2000).

The number of informal settlements continues to grow at an alarming rate in Johannesburg (CEROI, 2000). This poses unique health care challenges as well as presenting the health care system with unusual disease conditions associated with general lack of infrastructure and services (CEROI, 2000). It has been established that the proportion of HIV infected patients is higher in people living in informal settlements when compared to people living in private houses (SAHR, 2000). Thus, it is expected that more people will be presenting with HIV and AIDS

related illnesses in an informal settlement health center as compared to well-developed residential areas.

This study aimed at exploring the prescribing patterns of health care givers for patients attending a health center in an informal settlement as well as to determine the major disease patterns prevalent in the area. The study was carried out in Davidsonville and OR Tambo clinics as well as Bophelong and Hikhensile clinics in Ivory Park. The study covered regions five, one and two respectively according to Gauteng metropolitan services area classification (GJMC, 2000).

The findings of the study will help the appropriate policy makers improve the Essential Drug List and inform public health officials in formulating strategies that may lead to health status improvement for people living in informal settlements.