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# Exploring the governance of maternal health: the case of migrant women living in Jeppestown, Johannesburg South Africa

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# Abstract

The post-Apartheid South African government has made significant changes in terms of policies, including access to health through The National Health Act of 2003 in which people were to gain access to health care services in the public healthcare system regardless of nationality. The Act made ground breaking provisions that pregnant and lactating women and children below the age of six are eligible for free treatment in public health care facilities regardless of nationality and residence status (National Health Act; 2003). Despite these progressive clauses in legislative framework that upholds the right to access healthcare for all in South Africa, access to maternal health care for both internal and cross-border migrants remain a stressful challenge, particularly in public health care facilities. My study explores the governance of maternal health using the case of migrant women who often experience the difficulties of accessing health services in public health care institutions. Migration is a form of geographical or spatial mobility between one geographical area and another, and it can be categorised as permanent or temporary. The study identifies Jeppestown as the study site. Jeppestown is situated in the outskirts of the city of Johannesburg (Gauteng Province) in South Africa and it falls under Region F of the city of Johannesburg Metropolitan Municipality. Migrant percentage in Jeppestown (internal and cross-border) is estimated at 47% and to this Jeppestown is migrant dominated and most of them are poor and depend on public clinics and hospitals. Jeppestown is migrant populated city with internal migrants coming in from all the nine provinces of South Africa as well as cross-border migrants from Zimbabwe, DRC, Malawi, Mozambique, Tanzania and Kenya among others. The study targets health governance actors including frontline healthcare staff. Informed by the access to health care framework, the overall methodology employed is qualitative approach and research design is a case study. Drawing from the non-probability sampling technique, respondents were identified and selected purposively. Semi-structured interviews were used to source ideas from the selected actors and an interview schedule was the research tool. Thematic content analysis was employed to analyse the data. This study therefore serves the critical function of informing the scholarship and various stakeholders in the public healthcare institutions on issues related to maternal healthcare and problem of governance of maternal healthcare at facility and District level focusing on migrant women. It also serves to inform recommendations for improving the accessibility of maternal healthcare services to migrant women particularly in Jeppestown, Johannesburg South Africa and South Africa as a whole adding nuance to migration and health discussions showing the similarities and differences in types of migration and the need for health policy to engage more broadly with mobility.