

HEALTH GOVERNANCE FROM GROUND UP

COMPLUS Updates

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This is the third issue of the COMPLUS newsletter. The project, Community Voices in Health Governance: Translating Community Participation into Practice in a World of Pluralistic Health Systems (COMPLUS), is an action research initiative funded by the National Institute for Health and Care Research (NIHR). It brings together four partners from three countries: Brazil – Brazilian Center for Analysis and Planning (CEBRAP) | South Africa – University of Cape Town (UCT) | India – The George Institute for Global Health (TGI) and Society for Promotion of Area Resource Centres (SPARC)

Research and analysis >> Summary >> Two-page infographic

Issue highlight: Scoping reviews

A key aspect of the COMPLUS project was to better understand the existing literature. To do so, the team conducted three scoping reviews to assess and summarise the evidence. The reviews highlighted the gaps and made recommendations. The three reviews examined different topics – universal health coverage with plural health systems, role of people's participation in improving healthcare, and role of contracting systems and participation in primary care. The reviews discuss key concepts and promote a deeper understanding of community participation in health.

The COMPLUS communications team has produced colourful two-page summaries using images, graphics, and simple, everyday language. The aim is to make a complex academic project accessible to a much wider audience—especially the communities whose experiences and efforts are at the heart of this work.

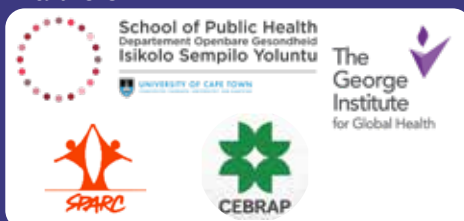


- UCT presented the scoping review on community participation at the Australian Public Health Conference
- Published article for the global media outlet The Conversation highlighting findings from scoping review on contracting, and implications for South Africa's National Health Insurance
- Scoping review on Plural Health Systems to be published in the International Journal for Equity in Health
- A new scoping review on citizen participation and health system responsiveness is in the making

Funded by:

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Top to Bottom: Eastern Cape delegates on their way to the COMPLUS National Colloquium 2025, SA; Sub-District leadership holding a meeting after the COMPLUS Capacity Building session, SA; Discussing issues with Governance Actors, Mumbai, IN; Health Camp Feedback discussion in Mumbai, IN.

South Africa UCT: Building Bridges Between Users and Providers

The South African team continues to work at the intersection of research, relationship-building, and practical engagement with both public and private health actors. A central focus has been understanding how community participation structures can function effectively in a context where many people rely on private providers.

A rapid review conducted in the Western Cape highlighted strong interest among community members in engaging with health governance, but they face significant information gaps. Across 58 respondents in Manenberg, Gugulethu, and Khayelitsha, the study found high reliance on private healthcare due to perceptions of better quality, shorter waiting times, and convenience, alongside low trust in public services. While awareness of National Health Insurance was moderate, informed understanding was limited. Many participants said they would consider joining user committees if they received clearer information, training, and assurance that their input would influence decision-making. These findings are now shaping plans for co-design processes involving both users and providers.

Engagement with private providers remains challenging. The team noted that more providers join when meetings are held online, and hence is adapting its approach by planning online engagement sessions. The team is also strengthening collaboration with existing Department of Health structures. Meetings with provincial and district health managers have opened new opportunities to align the project with ongoing health system discussions.

At home, the team is working to translate research findings into accessible formats for community actors, ensuring that evidence flows back to those whose experiences shape the work.

- Roundtable discussion at European Public Health Association Conference in Helsinki with presentations from all the three countries

India SPARC: Health Committees as Drivers of Local Change

Over the past few months, SPARC's work has continued to deepen the role of community-led health committees as active actors in local health governance. Across multiple neighbourhoods, 12 committees have been consistently engaged in strengthening their relationships with municipal public health offices, improving their knowledge of health issues, and advocating for better infrastructure and services.

A key initiative has been linking community-run health committees with data emerging from medical camps held in their areas. Rather than camps being one-off charitable events, SPARC is helping committees analyse camp findings. This has sparked strong interest, with at least seven committees now using local health data to guide discussions and plan follow-up actions. In some places, the committee members are being trained in using portable blood pressure instruments and taking blood sugar readings on glucometers as an exploration of ways to building curiosity and therefore



Top to Bottom: Medical camp knowledge exchange between committees, Mumbai, IN; Picture from Sao Paulo, BR; Picture from Fortaleza, BR; Picture from Sao Paulo, BR.

knowledge around commonly known health issues, as a starting point.

Exposure visits to municipal offices have also helped demystify the public health system. In some areas, this has already led to more confident engagement with officials. Health education sessions — on topics like menstrual health, infectious diseases, hypertension and diabetes — have been met with enthusiastic participation.

SPARC is also responding to committee requests to better understand government welfare schemes available to people in informal settlements. A new partnership with a knowledge-focused organisation SNEHA is helping translate complex schemes into usable information that communities can act on.

SPARC plans to launch quarterly exchanges between committees across the city. These spaces will allow members to share experiences, learn from one another, and strengthen their collective voice in demanding equitable health services. In December, SPARC undertook one exchange of all committees.

Brazil CEBRAP: Listening to Communities to Strengthen Health Systems

In Brazil, CEBRAP's work has been driven by an intensive phase of field research designed to centre community voices in evaluating primary health care. Across São Paulo and Fortaleza, teams conducted multiple focus groups with health service users, health council members, civil society organisations, and residents in highly vulnerable situations. These conversations are helping the team understand how communities experience the health system.

The fieldwork is closely linked to the development of a participatory evaluation model for primary care. Insights from the focus groups are being used to refine tools and indicators that will later be piloted as part of an intervention to strengthen community participation and health system responsiveness. Planning meetings with health councils, researchers, and partners in both cities are laying the groundwork for this next phase.

CEBRAP has also been active in knowledge sharing. The Complus Brazil Series was launched, with its first volume exploring how Brazil's plural health system — where public, private and community actors coexist — shapes governance and participation. A second volume is in preparation. Researchers presented the project at international forums, including the European Public Health Association conference (see above) and Salzburg Global Seminar, where insights from Brazil were shared with a group of global practitioners dedicated to finding ways to transform information pathways between health systems and the public.

Capacity-building of team members has been another thread, including training in research project management and artificial intelligence tools to strengthen data analysis. Meanwhile, a scoping review on citizen participation and health system responsiveness is moving toward publication.



Top to Bottom: Photo from Fortaleza, BR; Hegganahalli MAS groups mapping its strengths, challenges, external opportunities and threats in December 2025, Bangalore, IN; The Pillaganahalli MAS group in October 2025, discussing how success would look if the COMPLUS interventions worked, Bangalore, IN; Over 80 attendees at the the Yashassina Sambrama (celebration of success) event in Sandeep Layout in October to commemorate 2 years of community participation and collective agency with the MAS group, Bangalore, IN.

India TGI: Women’s Health Collectives in Action

TGI’s work with Mahila Arogya Samitis (MAS) — women’s community health groups — continues to show how local organising can evolve into confident and sustained civic engagement. Across September to December, 14-15 MAS groups meetings were held monthly, with support from partner organisations Sangama and SIEDS. The monthly thematic discussions engaged hundreds of MAS women in actively shaping TGI COMPLUS interventions. These dialogues highlighted relationships with frontline health workers and access to services, while housing and land security, particularly eviction risks and title deeds, and the need for SRH awareness resonated strongly with the community. The groups also expressed pride in their unity and persistence through MAS, even as local leaders remain a significant barrier, underscoring how MAS members are critically reflecting on the power structures that shape their functioning

A major focus has been on helping MAS members work towards structured action. In September and October, groups reflected on proposed community-led interventions emerging from this research project and the team’s learnings and observations. In November, the MAS groups practiced an activity on learning how to write clear, specific and effective petitions to government authorities. Women practised turning vague complaints into concrete demands — a key step in making institutions respond.

The MAS groups are also shaping the intervention design itself. Through participatory exercises MAS members identified what “success” would actually look like in their daily lives. These grounded indicators will guide how the project measures change, ensuring that the final intervention follows a ground- up approach at every step and the evaluation reflects community priorities, not just external metrics.

One highlight was the “Yashassina Sambrama” celebration organised by the Sandeep Layout MAS, marking two years of collective work. With over 80 participants — including local leaders and officials — the event showcased how women are articulating community health concerns and engaging in local governance.

TGI team is now gearing to ensure increased documentation and outreach through various forms of written outputs – academic papers, blogs, reflection pieces, reports, and petitions and letters from the community members.

Click on these links to see more of our work:



[COMPLUS’ article in The Conversation](#)



[Scoping Reviews](#)



[COMPLUS Brazil Series](#)



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