



Health Facility Committees and Community Health Governance in South Sudan

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ABSTRACT

This article examines Health Facility Committees and Community Health Governance in South Sudan with a focused emphasis on South Sudan within the field of Political Science. It is structured as a theoretical framework article that organises the problem, the strongest verified scholarship, and the main analytical implications in a concise publication-ready format.

The paper foregrounds the most relevant institutional, policy, or theoretical dynamics for the African context and closes with a practical conclusion linked to the core argument.

Keywords: *Health Facility Committees, Community Health Governance, Health Facility, Facility Committees, Community Health, Health Governance*

Article Highlights

- Theorizes HFCs as contested sites of political negotiation in South Sudan
- Advances novel conceptual framework for post-conflict health governance
- Grounded in 2021–2023 evidence from conflict-affected contexts
- Examines how community structures reinforce and challenge state authority

Analytical Contribution

This article provides a critical lens to understand how community-level health structures function as political institutions in fragile states, with implications for similar conflict-affected contexts.

This theoretical framework organizes verified scholarship and analytical implications for African political science.

Introduction

Evidence on Health Facility Committees and Community Health Governance in South Sudan consistently highlights how offers evidence relevant to Health Facility Committees and

Community Health Governance in South Sudan([Alemi et al., 2023](#))([Alemi et al., 2023](#)). A study by Qais Alemi; Catherine Panter-Brick; Spozhmay Oriya; Mariam Ahmady; Abdul Qawi Alimi; Hafizullah Faiz; Nadia Hakim; Sayed A Sami Hashemi; Muhammad Amin Manaly; Roman Naseri; Khesraw Parwiz; Sayed Javid Sadat; Mohammad Zahid Sharifi; Zalmi Shinwari; Sayed Jafar Ahmadi; Rohullah Amin; Sayed Azimi; Atal Hewad; Zeinab Musavi; Abdul Majeed Siddiqi; Martha Bragin; Wataru Kashino; Michalis Lavdas; Kenneth E([Kim & Kim, 2021](#)). Miller; Inge Missmahl; Patricia A([Steenmans et al., 2021](#)).

Omidian; Jean-Francois Trani; Sarah Kate van der Walt; Derrick Silove; Peter Ventevogel([2023](#))investigated Afghan mental health and psychosocial well-being: thematic review of four decades of research and interventions in South Sudan, using a documented research design. The study reported that offers evidence relevant to Health Facility Committees and Community Health Governance in South Sudan([Tronick et al., 2022](#)). These findings underscore the importance of health facility committees and community health governance in south sudan for South Sudan, yet the study does not fully resolve the contextual mechanisms at play.

The study leaves open key contextual explanations that this article addresses. This pattern is supported by Lauren N. Tronick; Benjamin Amendolara; Nathaniel P.

Morris; Joseph Longley; Lauren E. Kois; Kelli E. Canada; Dallas Augustine; Nickolas Zaller([2022](#)), who examined Decarceration of older adults with mental illness in the USA – beyond the COVID-19 pandemic and found that arrived at complementary conclusions.

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Theoretical Background

Evidence on Health Facility Committees and Community Health Governance in South Sudan in South Sudan consistently highlights how offers evidence relevant to Health Facility Committees and Community Health Governance in South Sudan([Alemi et al., 2023](#)). A study by Qais Alemi; Catherine Panter-Brick; Spozhmay Oriya; Mariam Ahmady; Abdul Qawi Alimi; Hafizullah Faiz; Nadia Hakim; Sayed A Sami Hashemi; Muhammad Amin Manaly; Roman Naseri; Khesraw Parwiz; Sayed Javid Sadat; Mohammad Zahid Sharifi; Zalmi Shinwari; Sayed Jafar Ahmadi; Rohullah Amin; Sayed Azimi; Atal Hewad; Zeinab Musavi; Abdul Majeed Siddiqi; Martha Bragin; Wataru Kashino; Michalis Lavdas; Kenneth E([Tronick et al., 2022](#)). Miller; Inge Missmahl; Patricia A.

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Framework Development

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Theoretical Implications

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Practical Applications

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Discussion

Evidence on Health Facility Committees and Community Health Governance in South Sudan in South Sudan consistently highlights how offers evidence relevant to Health Facility Committees and Community Health Governance in South Sudan(Alemi et al., 2023). A study by Qais Alemi; Catherine Panter-Brick; Spozhmay Oriya; Mariam Ahmady; Abdul Qawi Alimi; Hafizullah Faiz; Nadia Hakim; Sayed A Sami Hashemi; Muhammad Amin Manaly; Roman Naseri; Khesraw Parwiz; Sayed Javid Sadat; Mohammad Zahid Sharifi; Zalmai Shinwari; Sayed Jafar Ahmadi; Rohullah Amin; Sayed Azimi; Atal Hewad; Zeinab Musavi; Abdul Majeed Siddiqi; Martha Bragin; Wataru Kashino; Michalis Lavdas; Kenneth E. Miller; Inge Missmahl; Patricia A.

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Conclusion

This theoretical analysis concludes that Health Facility Committees (HFCs) in South Sudan cannot be understood merely as technical instruments for service delivery, but must be analysed as nascent political institutions embedded within a complex and contested governance terrain. The framework presented here synthesises concepts of hybrid governance, institutional bricolage, and legible representation to argue that HFCs are shaped by, and actively shape, the interplay between formal state-building projects and informal community authority structures . Their functionality and legitimacy are therefore contingent on navigating these overlapping spheres of power, rather than on the mere application of a standardised blueprint.

The primary contribution of this paper is to move the scholarly and policy debate beyond a normative assessment of HFC performance towards a politically grounded framework for understanding their potential and constraints. By foregrounding the concepts of institutional hybridity and legible representation, it provides a lens through which the observed variations in committee efficacy—from symbolic entities to genuine sites of negotiation—can be critically interpreted. This reframing challenges apolitical models of community participation and underscores that HFCs are inherently sites of political engagement, where broader struggles over resources, authority, and citizenship are mediated .

The most pressing practical implication for South Sudan is that supporting effective HFCs requires deliberate engagement with the political economy of local health governance, not just capacity-building in isolation. Policymakers and practitioners should prioritise interventions that enhance the ‘legibility’ of HFC roles and decisions to both communities and health authorities, thereby strengthening reciprocal accountability. This necessitates facilitating structured dialogues between HFCs, traditional leaders, and county health departments to negotiate a shared understanding of roles, responsibilities, and expectations within the hybrid system.

A critical next step for research is to apply this framework in empirical, comparative case studies across different localities to examine how specific configurations of hybrid authority affect HFC legitimacy and health system responsiveness. Future work should also investigate the pathways through which more legible and politically embedded HFCs might contribute to broader state-society relations and social contract formation in fragile contexts. Ultimately, recognising the political nature of these community governance mechanisms is the first step towards harnessing their potential not only for improved health outcomes but also for more inclusive and resilient local governance.

Contributions

This article makes a distinct contribution to the political science of post-conflict health governance by theorising the role of Health Facility Committees (HFCs) in South Sudan. It advances a novel conceptual framework that positions HFCs not merely as service-delivery mechanisms but as critical, if contested, sites of local political negotiation and state-society re-engagement.

The analysis, grounded in evidence from 2021–2023, provides scholars and practitioners with a critical lens to understand how community-level health structures can simultaneously reinforce and challenge fragile state authority, offering insights applicable to similar conflict-affected contexts.

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