

Supporting community health workers in fragile settings: evidence from Sierra Leone, Liberia and Democratic Republic of Congo

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Introduction

- Community health workers (CHWs) are essential to achieving Universal Health Coverage. They make particular contributions to health systems in fragile and conflict-affected settings, where human resource shortages are acute.
- Research on CHWs in fragile contexts is lacking, so evidence is needed to inform programmes.
- In Sierra Leone and Liberia, the recent Ebola outbreak emphasised the importance of CHWs' understanding of their communities in managing the outbreak. In both countries, new CHW programmes have recently been introduced.
- In Democratic Republic of Congo, CHWs play an important role in providing health services to communities and in insecure areas, often the only health care workers who stay.
- Yet health planners do not make best use of what CHWs have to offer. This requires better integration into the wider health system and supporting CHWs to both stay in the job and carry out their work effectively.

Methods

We developed 3 case studies: Sierra Leone, Liberia and Democratic Republic of Congo. Using multiple methods (document review, in depth interviews with supervisors and decision makers, life histories with CHWs, photovoice and community mapping – see figures 1-4) we have explored how CHWs are supported and managed, how they interact with their communities and health systems, the challenges that they face and how they solve these. Data were analysed using the framework approach and synthesised across the three contexts.



Figure 1: CHWs draw maps to show how they work in their communities

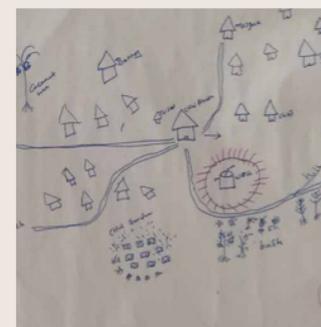


Figure 2: Community map



Figure 3: CHW lifeline developed during a life history interview



Figure 4: CHWs discussing photographs that they had taken in their community

Results

Seven themes emerged from the data about health systems support for CHWs to do their work (Table 1).

Theme	Key findings
Selection	<ul style="list-style-type: none"> Policy preferences need discussion and engagement at community level Communities have preferences for certain services by a specific gender, e.g. sexual and reproductive health and rights Develop strategies to empower women to come forward e.g. women's groups
Training	<ul style="list-style-type: none"> Should be flexible, near to home, ongoing, problem solving and practical Build a sense of cohort - CHWs support each other Build literacy training into CHW training Understand gender norms in accessing and delivering training
Supervision	<ul style="list-style-type: none"> Supportive and responsive problem-solving supervision is needed Positive feedback and rewards play an important role Innovate with different models: peer or group supervision, intermediary supervisor Supporting the supervisors at all levels is critical Supervision structures should capture local issues and innovations and inform health system priorities
Incentives	<ul style="list-style-type: none"> Communicate clearly about the incentive package Deliver on promises otherwise CHWs are compromised CHWs should not be impoverished through undertaking this role Encourage community structures to support and value CHWs Incentives are critical to sustaining this cadre and addressing attrition
Supplies	<ul style="list-style-type: none"> They are critical to roles, reputation and community recognition and trust CHWs are compromised if not renewed
Career pathway	<ul style="list-style-type: none"> Opportunities for skill upgrading and progression are needed Ensure gender equity in pathways
Sustainability	<ul style="list-style-type: none"> Develop strategies to enhance government ownership Coordination of different players is important - CHW hub in Sierra Leone is good practice Integrating CHW programmes into the health system can support sustainability if strong coordination and adequate resourcing

Table 1: Key findings

Conclusions

Integration into the wider health systems and effective management and support is vital to ensure that CHWs make the critical contribution needed, especially in fragile settings.

Continued political will and sustained national investment in the programmes are needed.

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