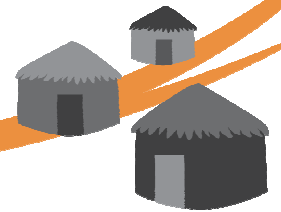


# Institutionalizing Community Health Conference



27-30 March 2017 | Johannesburg, South Africa



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# Effectiveness of CHW platforms for delivering community-based interventions for MNCH

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# Background

- An appropriate mix of interventions can significantly reduce the burden of maternal and child mortality and morbidity.
- These interventions often do not reach those who need them most.
- An integrated approach that includes community-based care as an essential component has the potential to substantially improve maternal, newborn, and child health outcomes.
- It is widely agreed that communities should take an active part in improving their own health outcomes and that CHWs can play a vital role.

# **Community based intervention package**

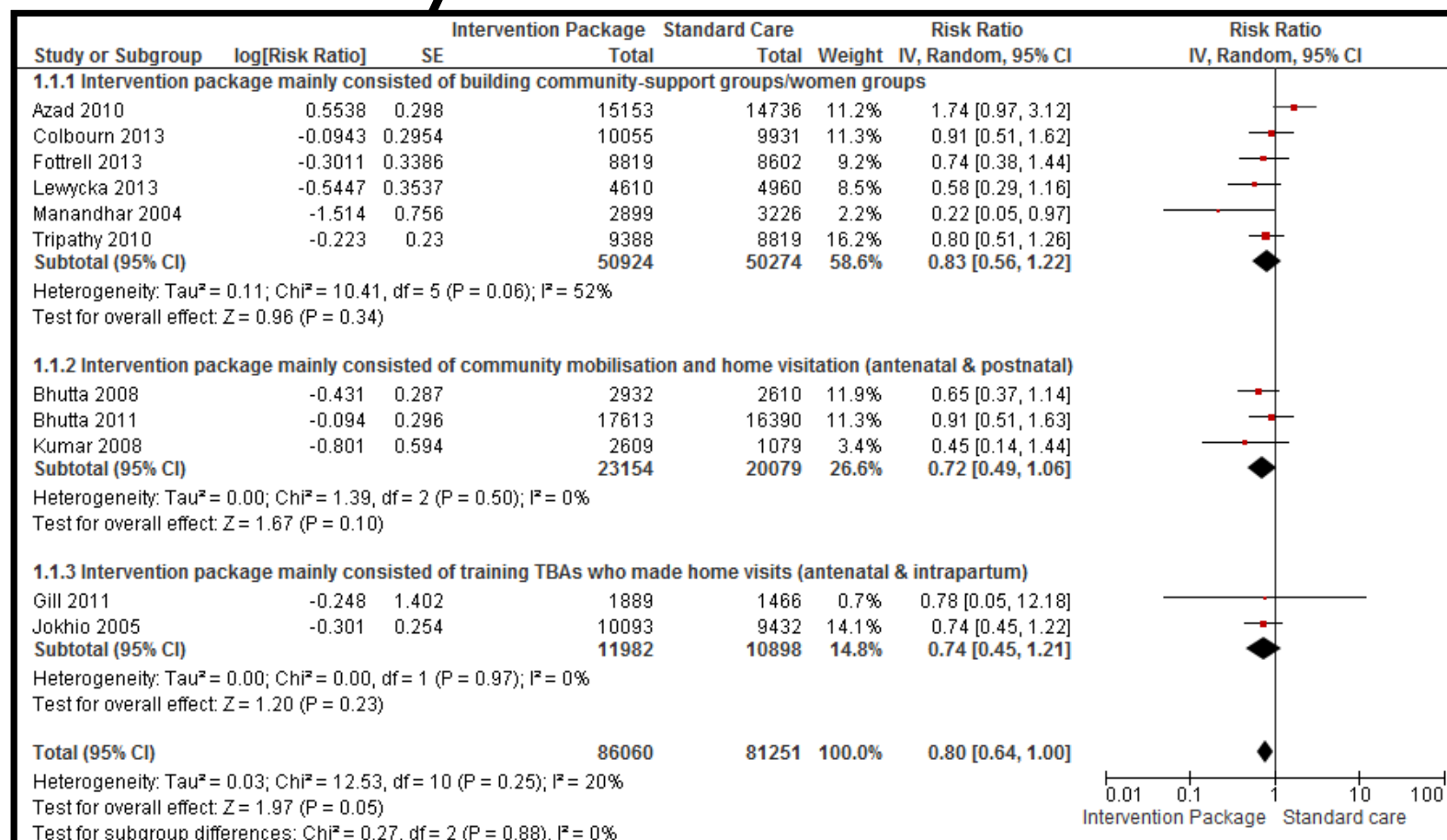
Home visits

Community mobilisation

Combination of both

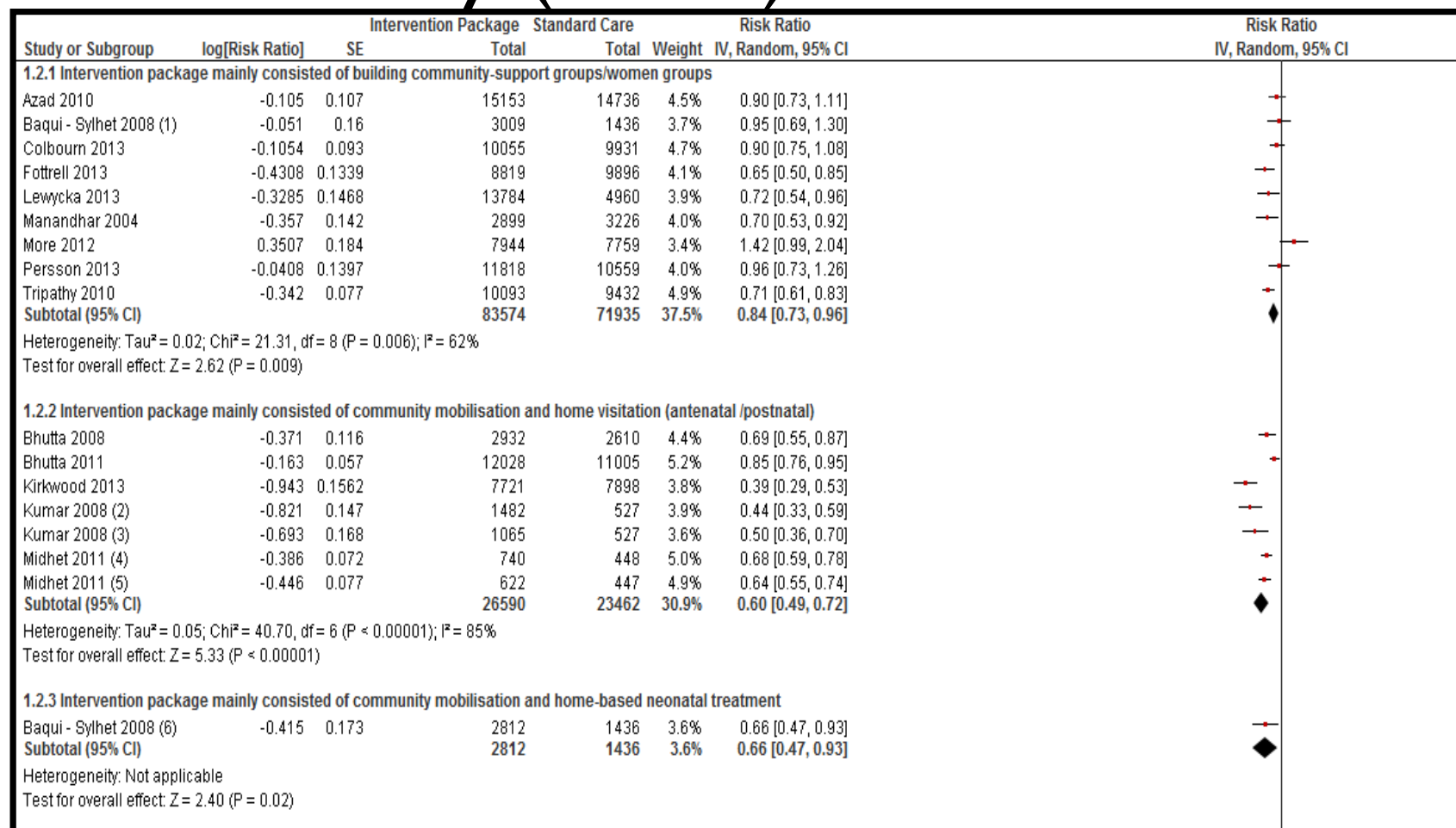
# Impact of Community-based Intervention Packages

## Maternal Mortality

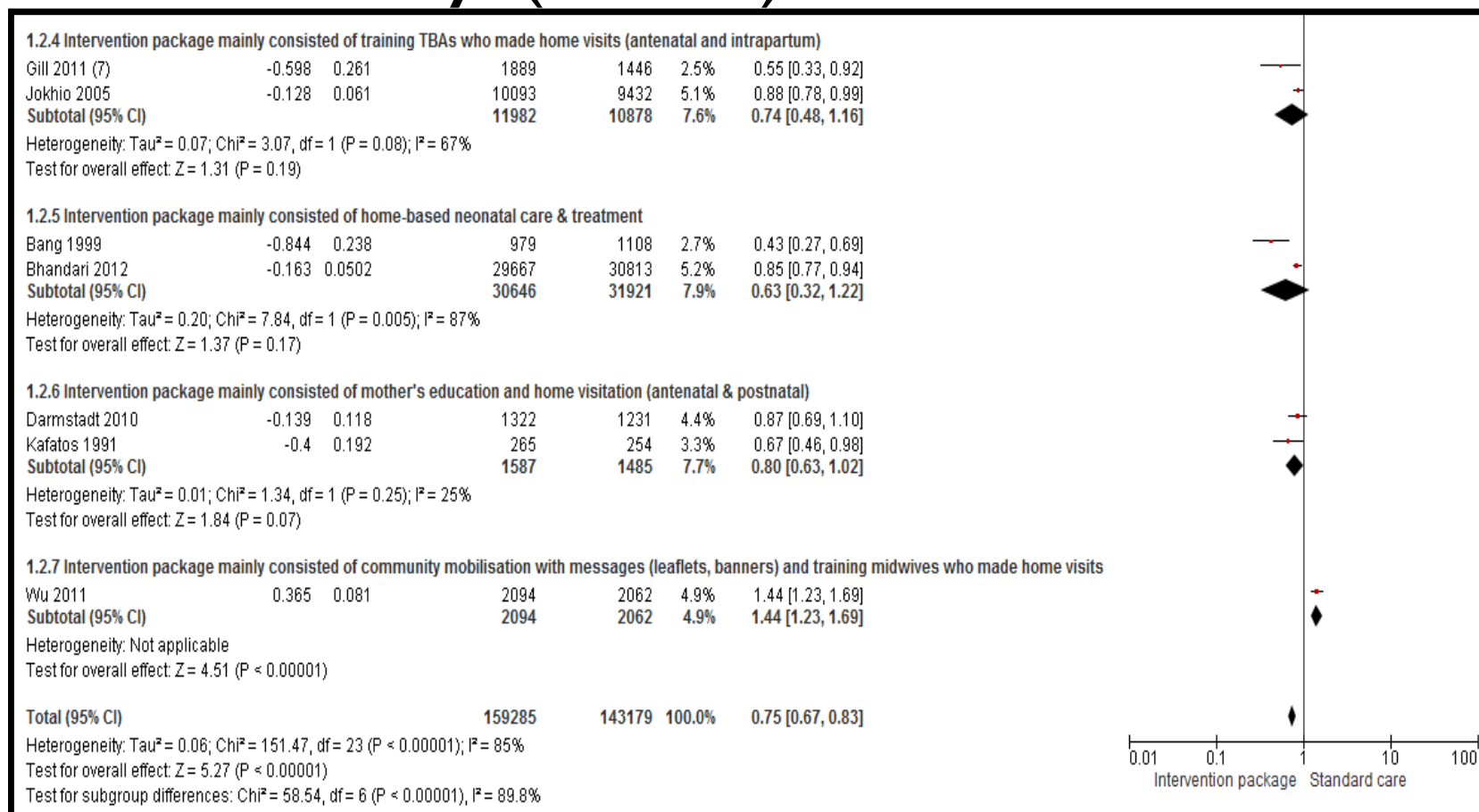


# Impact of Community-based Intervention Packages

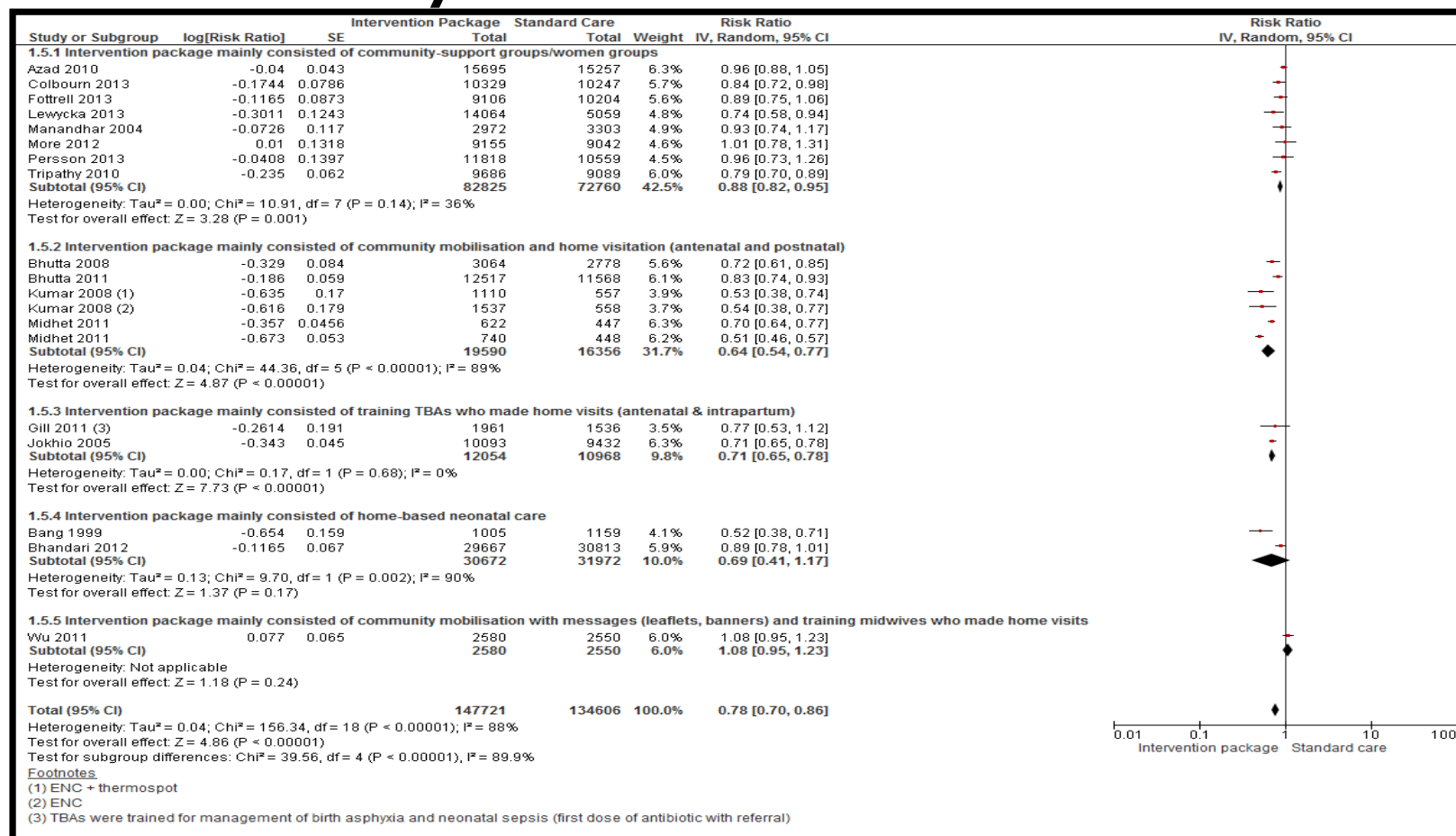
## Neonatal Mortality (1 of 2)



# Impact of Community-based Intervention Packages Neonatal Mortality (2 of 2)

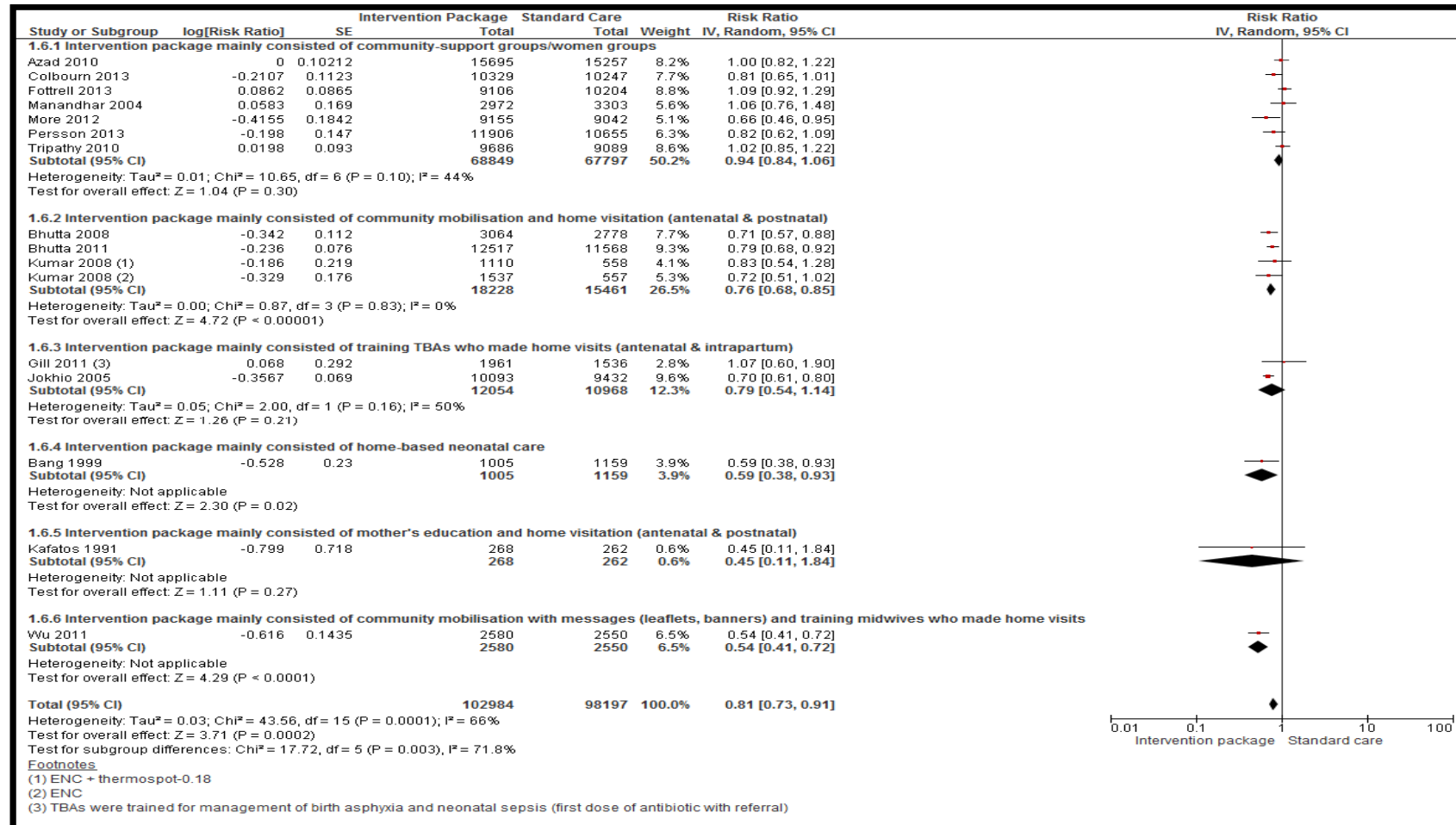


# Impact of Community-based Intervention Packages Perinatal Mortality



# Impact of Community-based Intervention Packages

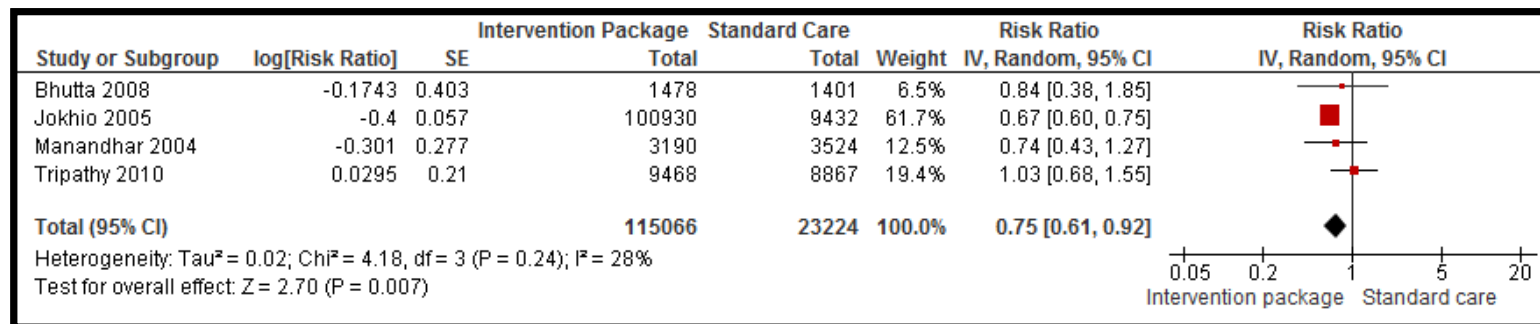
## Stillbirths



## Impact of Community-based Intervention Packages

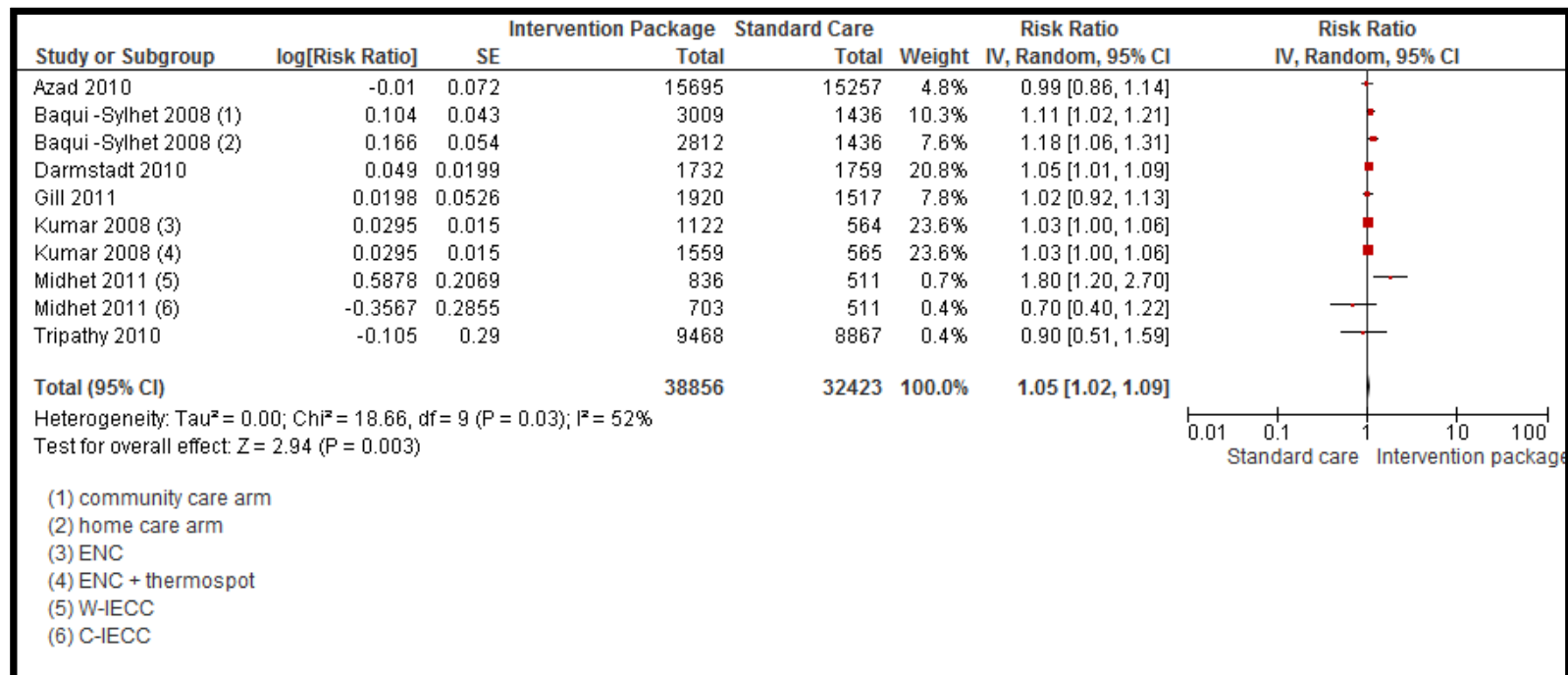
# Maternal Morbidity

Community mobilization and home visitation



# Impact of Community-based Intervention Packages Tetanus Toxoid Immunization

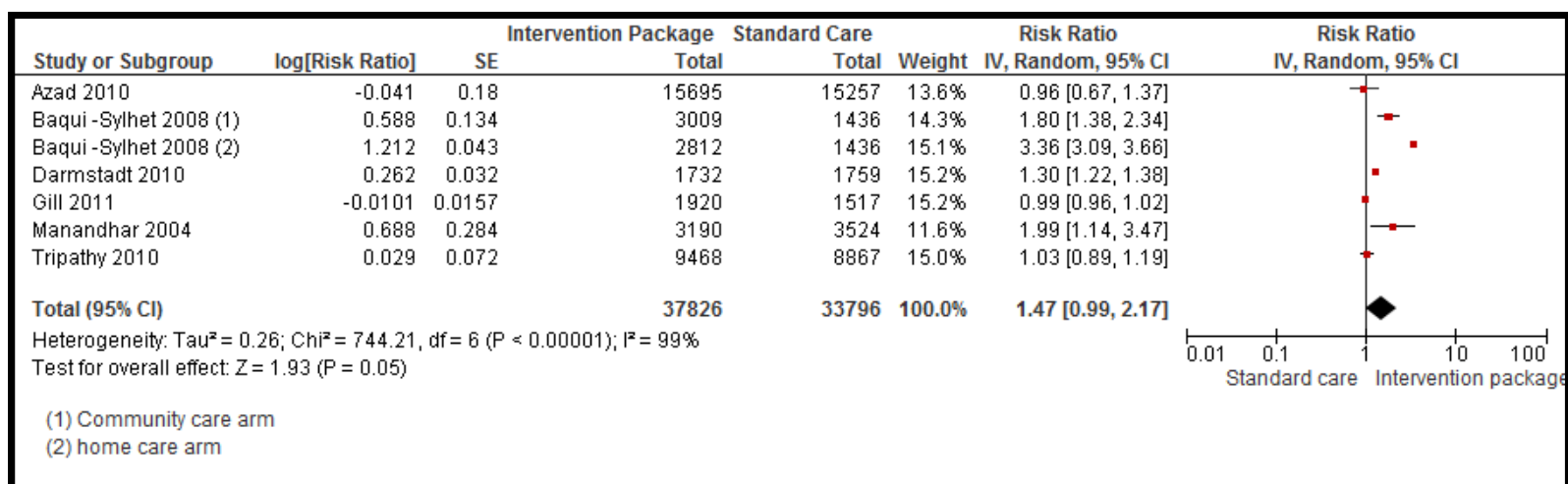
## Community mobilization and home visitation



## Impact of Community-based Intervention Packages

# Iron\follic acid supplementation

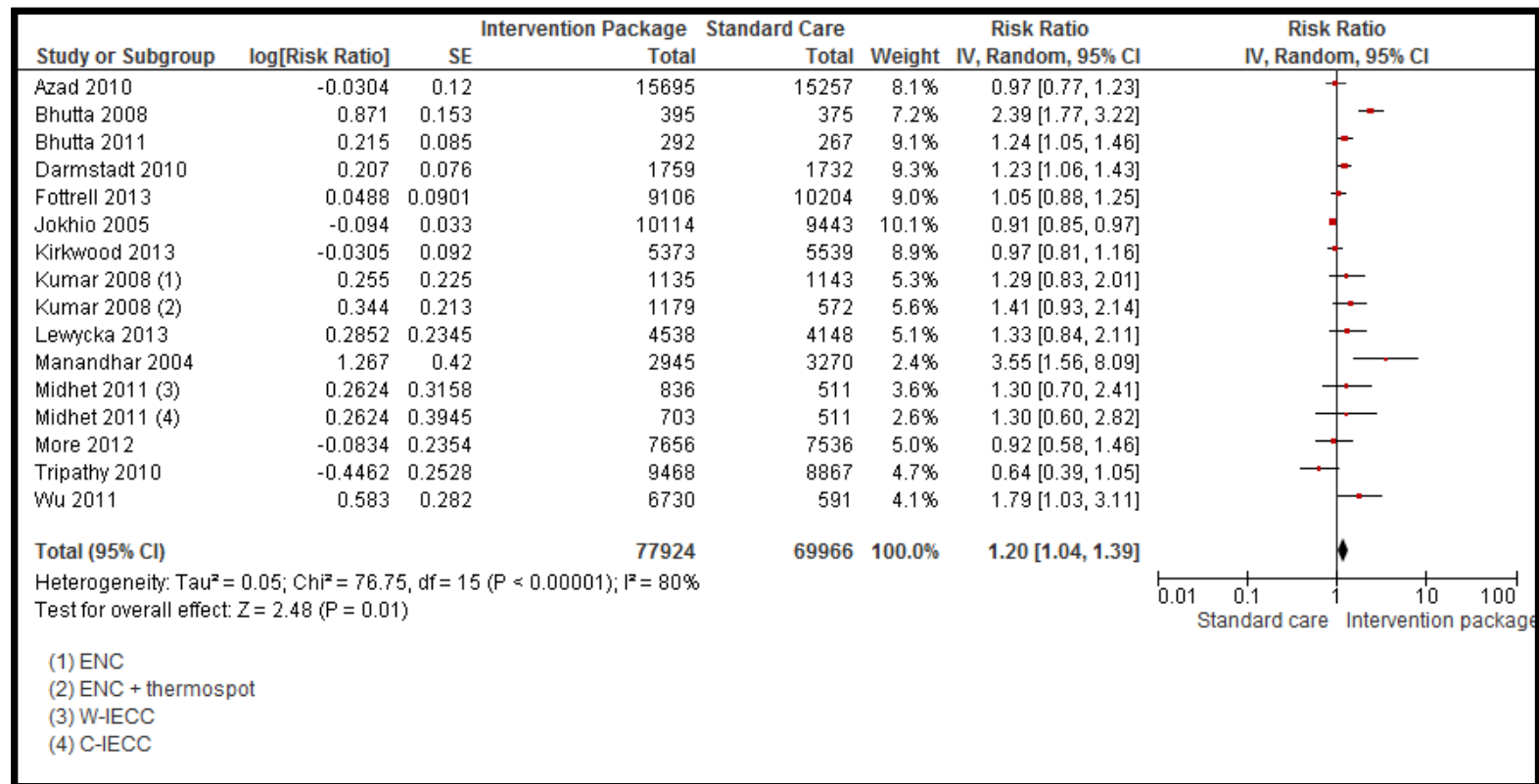
Community mobilization and home visitation



## Impact of Community-based Intervention Packages

# Institutional Deliveries

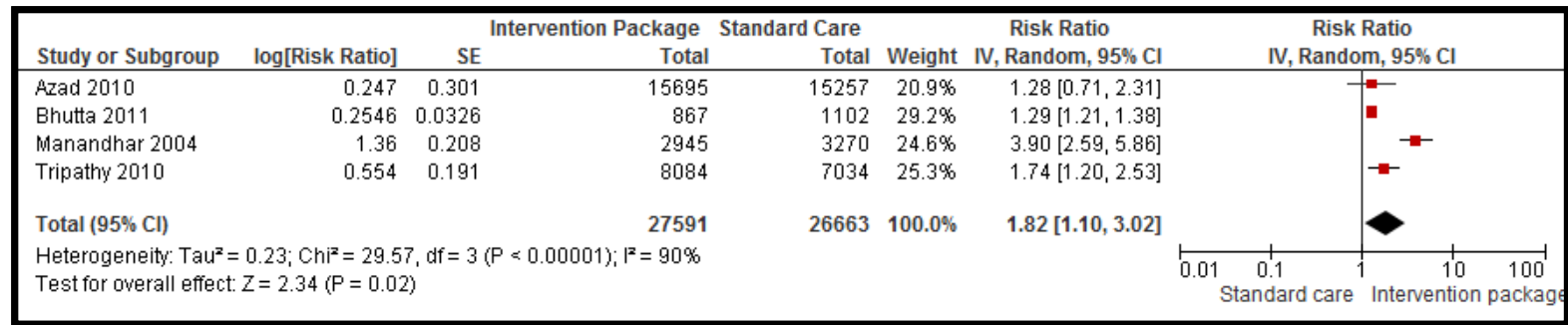
## Community mobilization and home visitation



## Impact of Community-based Intervention Packages

# Use of Clean Delivery Kits

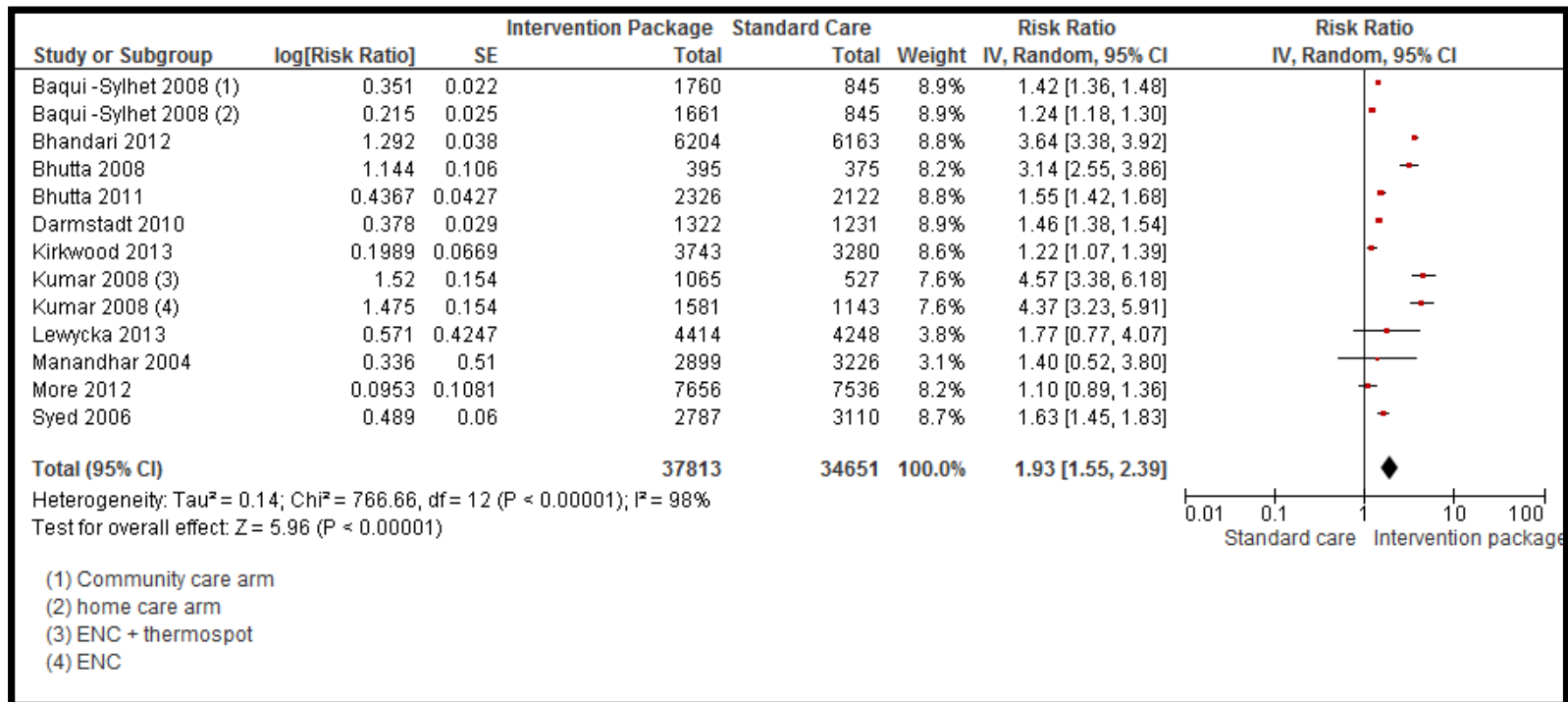
Community mobilization and home visitation



## Impact of Community-based Intervention Packages

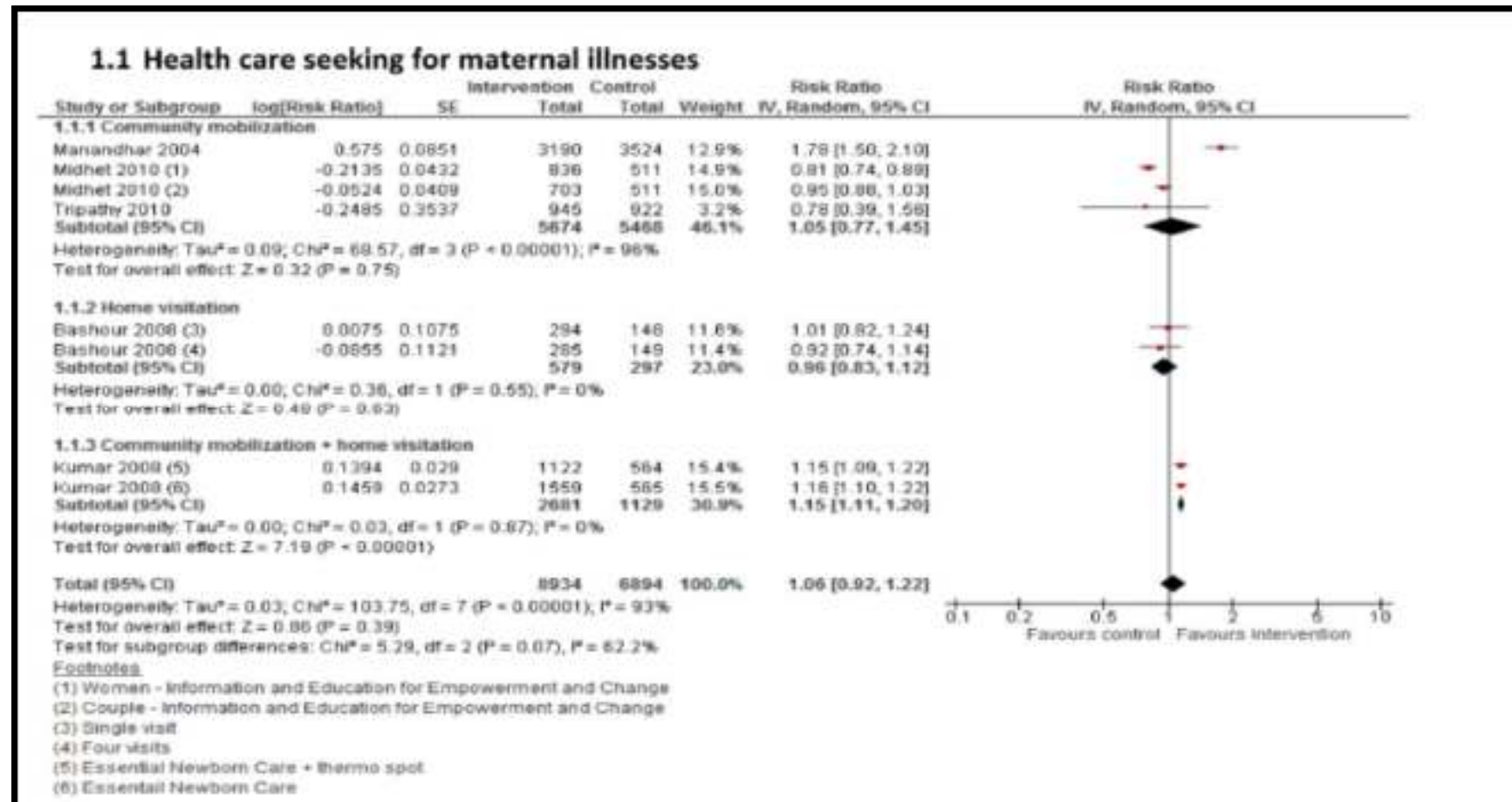
# Initiation of Breastfeeding within an Hour

Community mobilization and home visitation



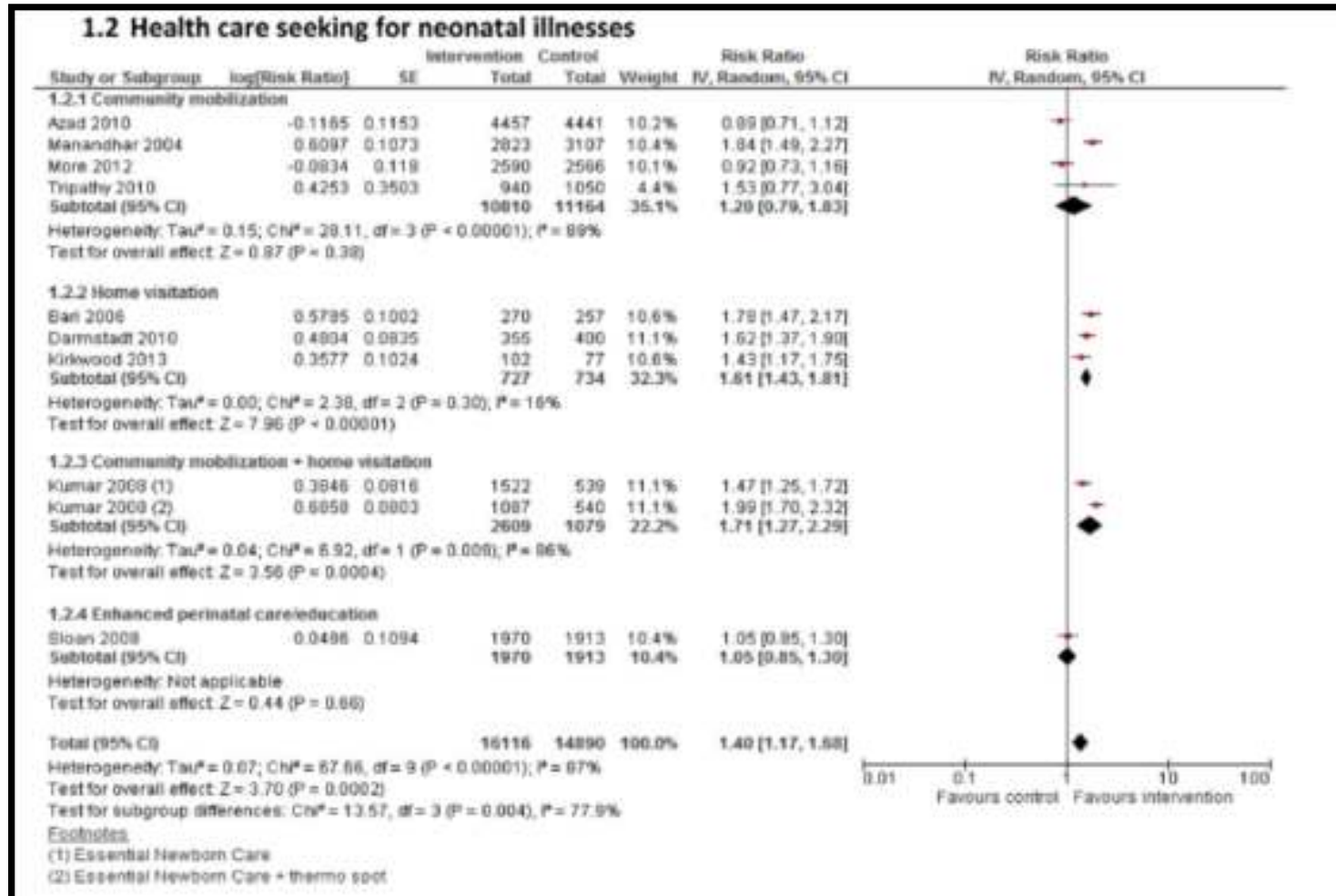
## Impact of Community-based Intervention Packages

# Health care seeking for maternal illnesses



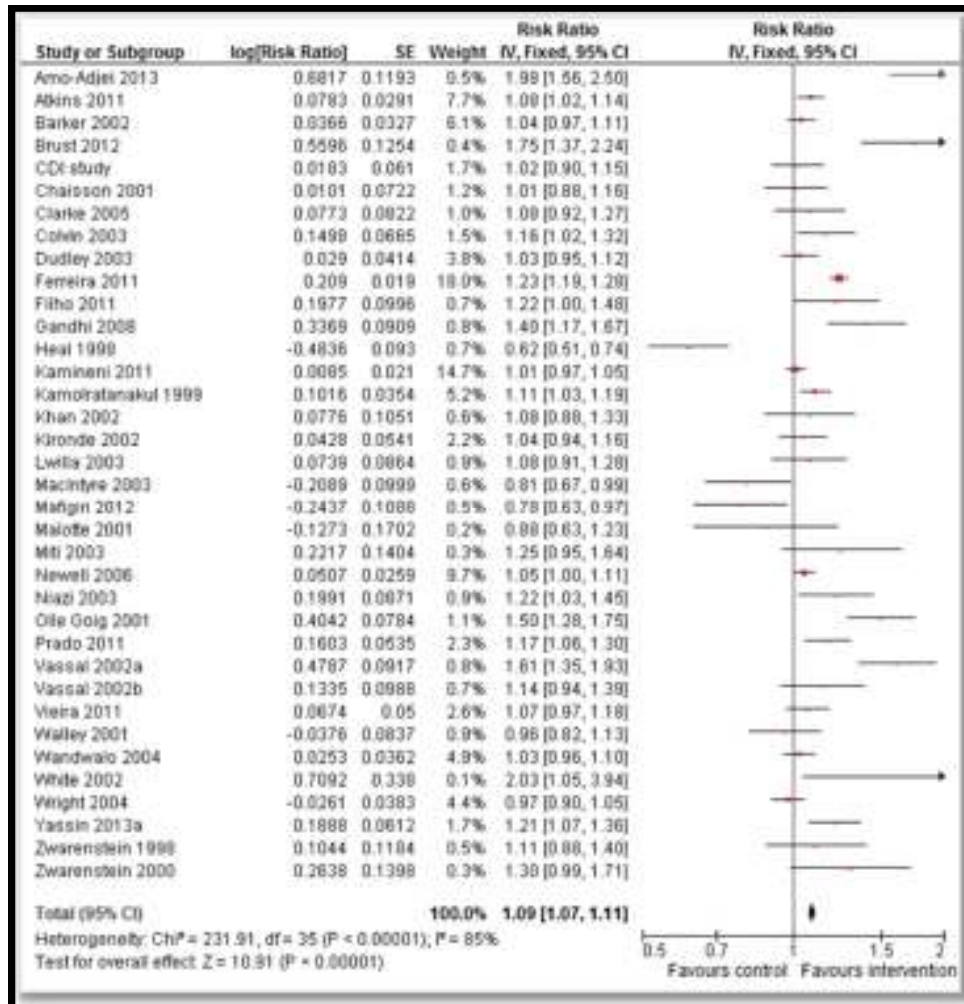
## Impact of Community-based Intervention Packages

# Health care seeking for neonatal illnesses



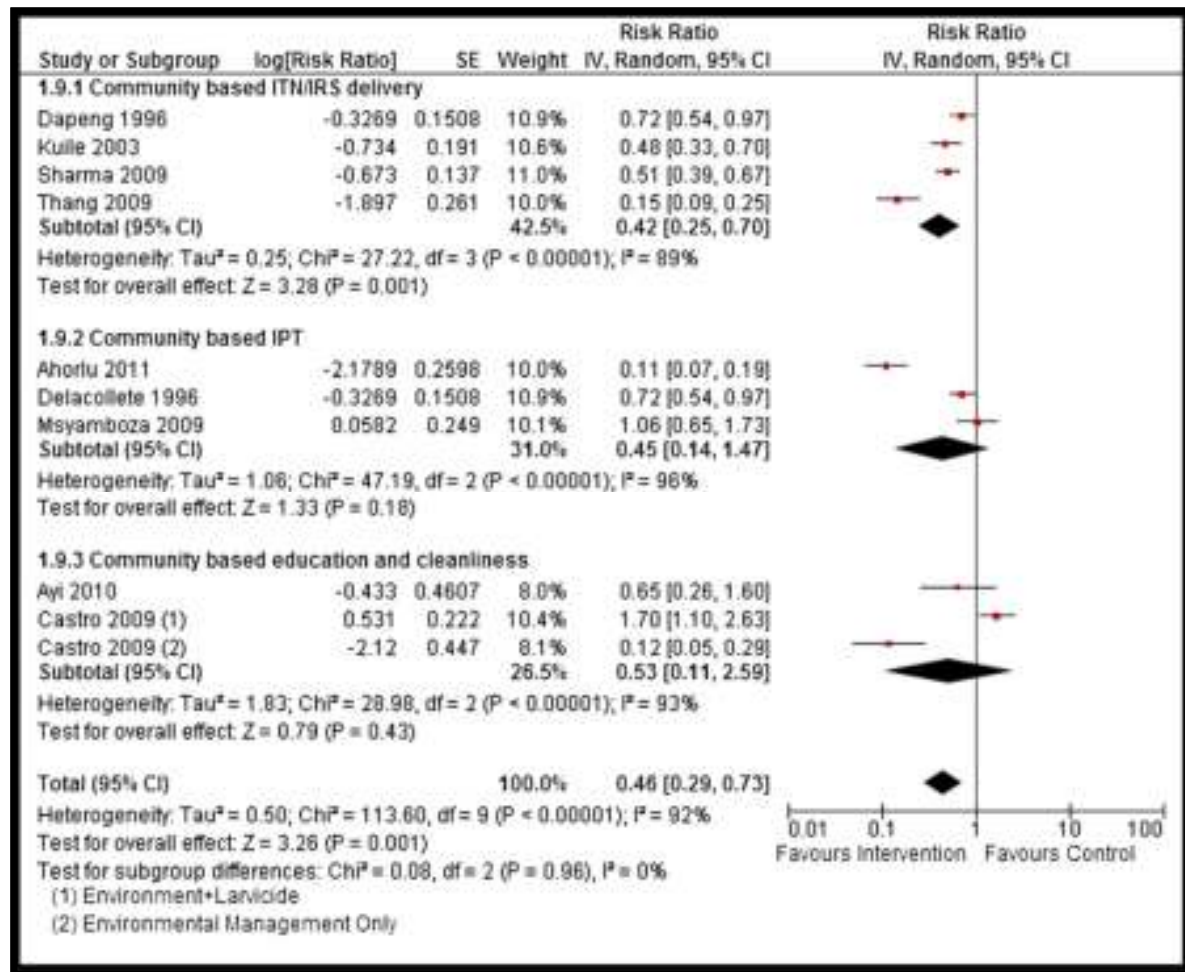
## Impact of Community-based Intervention

# Tuberculosis treatment success



Arshad et al. Infectious Dis of Poverty. 2014

# Impact of Community-based Intervention Prevalence of Malaria



# Expanding the Community Health Worker Mandate

- Task shifting may allow CHWs or less trained TBAs to receive training and perform interventions that might have reserved for highly trained professionals.
- No global consensus exists on the appropriate package of services for CHWs
- Neonatal resuscitation, the administration of intravenous antibiotics, and the management of postpartum haemorrhage with uterotonics are some of the interventions that may be appropriate for CHWs.

# Improving the Quality of Community-Based Care

- Ensuring that care provided in communities meets quality standards
  - training and supervision are crucial mechanisms for ensuring quality care.
- Training styles to stimulate training to less educated or illiterate CHWs (interactive sessions, including small group discussions, clinical vignettes, and field training).
- Training should take into account differences in cultural and religious beliefs and particular practices of communities.
- A program tailored to communities' specific needs and health concerns is preferable.

# Mobile Technology

- Use of mobile health (mHealth) tools may increase the effectiveness of CHWs
- Mobile technology can be used for a variety of purposes, from helping CHWs collect comprehensive, timely, and precise health data to providing CHWs with information and reminders about health care practices and protocols via text messaging.
- Mobile technology can also play a role in training, peer-to-peer learning, and monitoring of the performance of CHWs
- Regular follow-up and evaluation of training courses will reinforce knowledge and skills as well as provide opportunities to acknowledge problems and issues that have arisen.

# Improving Referral System

- For referral systems to be effective, transportation and communications capabilities must be in place, and CHWs must be integrated into the primary health care system.
- Integrating CHWs into the primary health care system, as well as ensuring sufficient staffing at facilities, is vital for ensuring strong referrals and for alerting facilities of the imminent arrival of patients.

# Enhancing Motivation

- In the absence of appropriate compensation, along with weak supervision and monitoring systems, a lack of effort and decline in performance among CHWs has been noted.
- Although some may serve on a voluntary basis, full-time status would help improve performance and encourage CHWs to exert the effort necessary to deliver quality care.
- Nonfinancial incentives can also play a key role in the overall satisfaction and motivation of CHWs

# **Building Links with Community and Local Health Facilities**

- Primary care services need to be well linked with the community
- Effective communication must be present along with feedback mechanisms.
- Community concerns may be conveyed to higher authorities/channels.

# Research Gaps

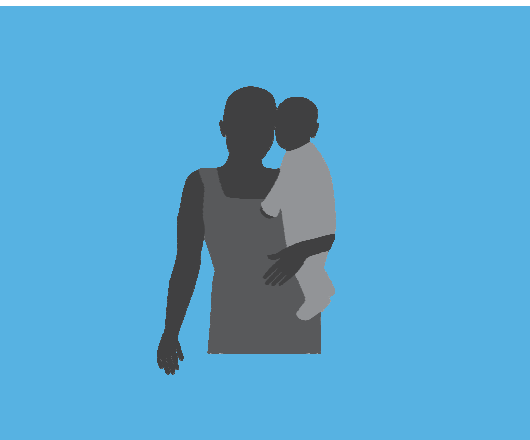
- The studies available for review are mostly program evaluations without comprehensive and high-quality study designs.
- RCTs are limited to evaluation of interventions to improve newborn, child, and maternal outcomes.
- The majority of community-based health programs are based in South Asian and Sub-Saharan African countries, and CHWs remain the core of the community based care concept.
- Very few studies has studied the quality of life and satisfaction among the CHWs themselves.

# Research Gaps

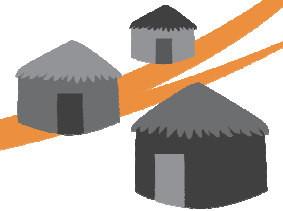
- Scarce evidence about whether the CHWs are over- or underutilized, and the impact of incentives, work hours, and job-related satisfaction on the performance of CHWs.
- Evidence is also needed on the cost-effectiveness of small and large nutrition and other community-based programs, the role of public and private partnerships, and the effect of political will and stability on health care delivery.
- More learning is also needed from community-based programs from HICs, with lessons adapted to LMICs.

# References

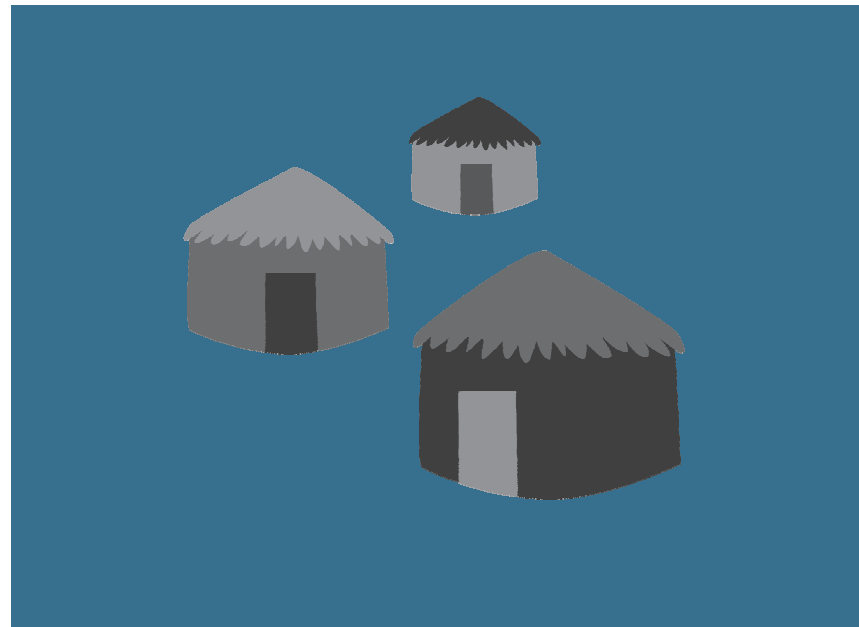
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