Institutionalizing Community Health Conference
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#HealthForAll
ichc2017.org
MOZAMBIQUE

Linkages between PHC Systems and Communities

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Minstry of Health
Topics

- Background
  - Community worker structure and CHW cadres
    - Institutionalization of APEs program
    - Revitalization of PHC movement
  - Current geographical distribution of APEs and TBAs
  - Package of services delivered at community level
  - Contribution of community health workers for service delivery

- Linkages and referral systems
  - Referral Tools
  - Lesson learned on referral
  - Challenges
  - Ways forward
Community workers’ structure (1)

- CHW as part of the principles of PHC
- PHC has been built up since the war for the country’s independence
  - 1978 – Alma Alta Conference
- In 2016 - MoH relaunched primary health care movement
  - To ensure coordination around social determinants of health
  - To strengthen the integration of health issues in line of the ministry policies

The structure of the Health Community Workers
- Agentes Polivalentes Elementares (APEs)
- Traditional Birth Attendants (TBAs)
- Traditional Healers (PMT)
- Activists
- Volunteers
The community workers' structure is managed by Local Advisor Councils.

In Mozambique, community worker structure is key for delivery of services and ensuring community engagement.

Community health workers are part of a larger structure supported by line ministries.
• 3,380 APEs provide health care in communities living 8 km or more from health facility
  – Covering 48% of people
• By 2019
  – The plan is to expand to 7,300 APEs
• Other Communities Health Workes
  – 3,654 TBAs provide assistance
  – Activists and Volunteers
### Package of services delivered at community level

<table>
<thead>
<tr>
<th>Intervention</th>
<th>APEs</th>
<th>TBAs</th>
<th>Activists</th>
<th>Volunteers</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health Promotion and prevention</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health Education Sessions</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Home Visits (Hygiene promotion; counseling for ANC, PNC, chlorhexidine, immunization)</td>
<td></td>
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<tr>
<td>Screening of SAM/MAM and referral</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Vit A supplementation 6-59 months</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Counseling for adherence to ARV and TB Treatment and referral</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Counseling for FP and referral</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Administration of modern contraceptive methods</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PPH prevention with Misoprostol</td>
<td>X</td>
<td>X</td>
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</tr>
</tbody>
</table>
# Package of services provide by CHWs

<table>
<thead>
<tr>
<th>Intervention</th>
<th>APEs</th>
<th>TBA</th>
<th>Activists</th>
<th>Volunteers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diagnostic and Treatment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diarrhea treatment and referral</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Malaria treatment and referral</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Pneumonia treatment and referral</td>
<td></td>
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</tr>
<tr>
<td>First Aid and referral</td>
<td></td>
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</tbody>
</table>
Contribution of Community Platform in the Service Delivery

Homes visited by APEs to deliver health promotion package, Mozambique 2016

- Existing Homes: 1,710,376
- # of Home Visits: 1,446,792

Proportion of cases managed at community level by diseases, Mozambique 2016

- Malaria: 53%
- Diarrhoea: 27%
- Pneumonia: 20%

Distribution of reported cases of malaria and diarrhoea by provider, Mozambique 2016

- Malaria: 20%
- Diarrhoea: 49%
Linkages and referral systems (1)

- Community health worker program in Mozambique link the communities with the nearby health facility.

- APEs use a specific tool to refer cases to health facility.

- Evaluation shows that 85% of health facilities monitor referrals sent by APEs.
  - Health facilities keep list and phones of APEs for reference.

Save the children (2017)
### Linkages and referral systems (2)

#### Cases identified and referred by APFs, Mozambique 2016

<table>
<thead>
<tr>
<th>Service</th>
<th>Cases Identified and Referred</th>
</tr>
</thead>
<tbody>
<tr>
<td>SAMMAM</td>
<td>23,087</td>
</tr>
<tr>
<td>Family planning</td>
<td>128,082</td>
</tr>
<tr>
<td>Incomplete PNC</td>
<td>38,977</td>
</tr>
<tr>
<td>Incomplete ANC</td>
<td>98,844</td>
</tr>
<tr>
<td>Incomplete Immunization</td>
<td>135,014</td>
</tr>
<tr>
<td>Newborns with danger sign</td>
<td>88,676</td>
</tr>
</tbody>
</table>

#### Cases identified and referred by APFs, Mozambique 2016

<table>
<thead>
<tr>
<th>Referral Type</th>
<th>Cases Identified and Referred</th>
</tr>
</thead>
<tbody>
<tr>
<td>TB referral</td>
<td>2,955</td>
</tr>
<tr>
<td>ARV/PMTCT referral</td>
<td>2,179</td>
</tr>
</tbody>
</table>
Linkages and referral systems (3)

• **Challenges of the community** health workers programs
  
  – Lack of comprehensive **community information system**
  
  – **Data generation and utilization** for program design by the communities
Linkages and referral systems (4)

• Lessons Learned

– The following are essential for strengthening linkages between PHC system and communities
  • Ensuring recognition of community CHW by MoH
  • Training of community councils and community health worker
  • Continuous technical support to CHW
  • Resource allocation to community platforms
Ways forward

• Mozambique will continue working to revitalize the PHC movement towards universal access to health care

• Through
  – Policy review to strengthen community intervention
  – Integration of community interventions
  – Reinforce community engagement
  – HMIS
THANK YOU!