



# Supporting community health worker systems to improve the care of mothers and newborns in 3 countries in East Africa

Global Maternal Newborn Conference  
October 18 -21, 2015, Mexico

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World Vision **East Africa**



# Session outline



- Overview of program
- Description of CHW-AIM tool
- Methodology of CHW-AIM tool
- Results
- Conclusions

**Australian  
Aid**



**EAMNeCH project**

World Vision



East Africa Maternal Newborn Child Health project (EAMNeCH):

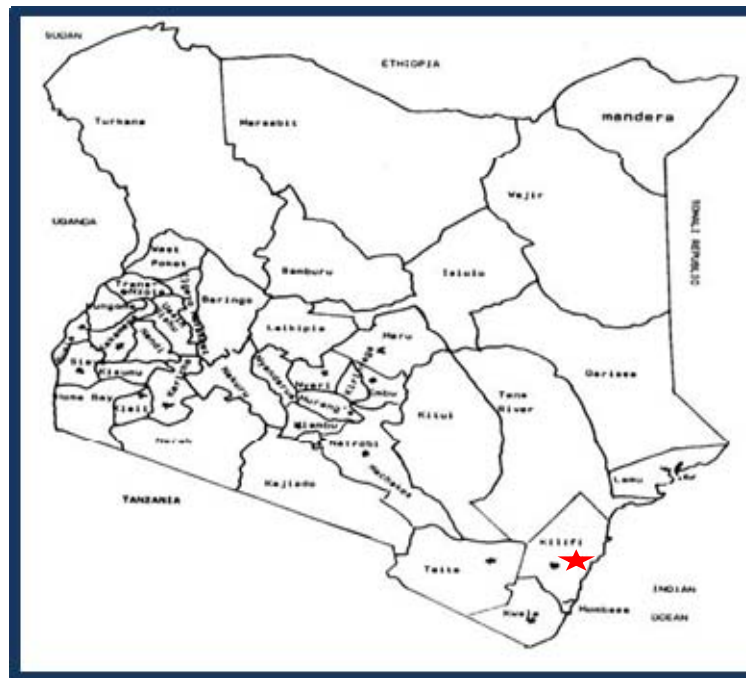
- Funded by the Australian Government through the Australia Africa Community Engagement Scheme (AACES) involving 10 Australian NGOs in 11 countries.

- A program to reach the most marginalized including in remote locations

- Implements maternal newborn child health (MNCH), food security and WASH



# Project area



Country	# beneficiaries (children under 5)	# beneficiaries (pregnant & lactating women)
Kenya	6834	8534
Uganda	2600	1950
Tanzania	20113	3067



- Working with marginalized people
- Strengthening health systems (facility level & community using CHWs)
- Encouraging behaviour change using community groups
- Building advocacy using WV's Citizen Voice and Action (CVA) model
- Influencing policy

## Strengthening the CHW system

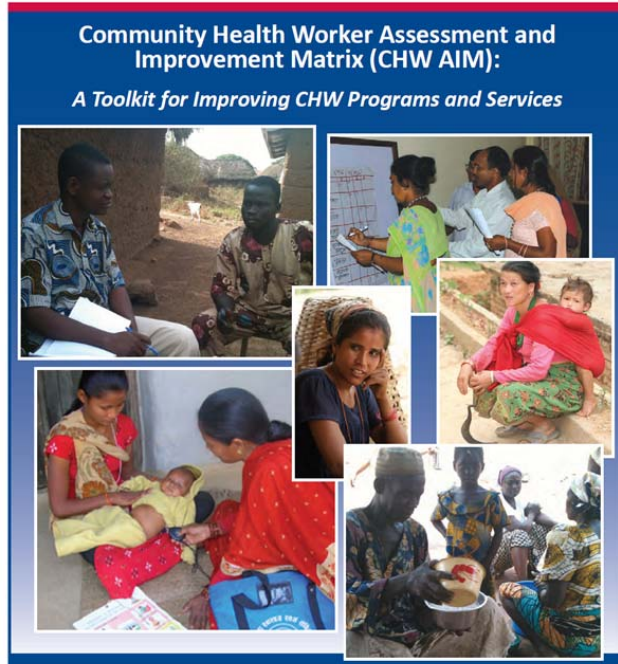


- Globally recognized for their success in reducing morbidity and averting mortality in mothers, newborns and children.
- They also represent a strategic solution to address the shortages of highly skilled health workers to help meet the growing demands for health services among rural populations.
- They are a vital part of primary health systems.
- Used WV's timed and targeted counselling (ttC) model working with 700 CHWs to pregnant and lactating women and their households



# CHW AIM Tool (1)

(Community health worker assessment improvement matrix)

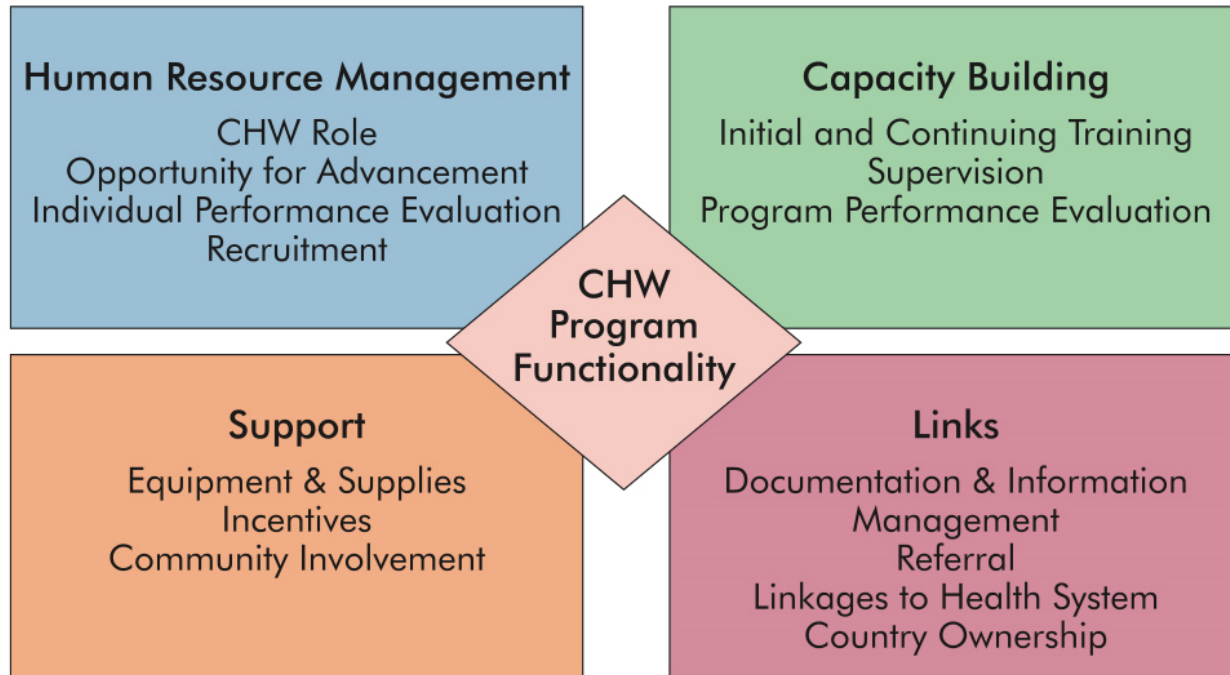


MARCH 2011

This toolkit was prepared by Initiatives Inc. and University Research Co., LLC (URC) for review by the United States Agency for International Development (USAID) and was authored by Lauren Cigler (Initiatives Inc.), Kathleen Hill (URC), Rebecca Furth (Initiatives Inc.), and Donna Bierregaard (Initiatives Inc.).

- Adopted from USAID's Health care improvement project (HCI) and contextualized for each country
- Evaluates a CHW program against 15 components
- <http://www.who.int/workforcealliance/knowledge/toolkit/50.pdf>

## Functionality Model



Scoring Levels of Functionality*			
0	1	2	3
Non-functional	Partially Functional	Functional	Highly Functional



- Stakeholders were invited to the stakeholders workshop- including MoH (facility, district, national), CHWs, NGOs, CBOs, community leaders
- Improvement plan was developed and monitored
- Repeated in 1- 2 years, to monitor progress and further refine action



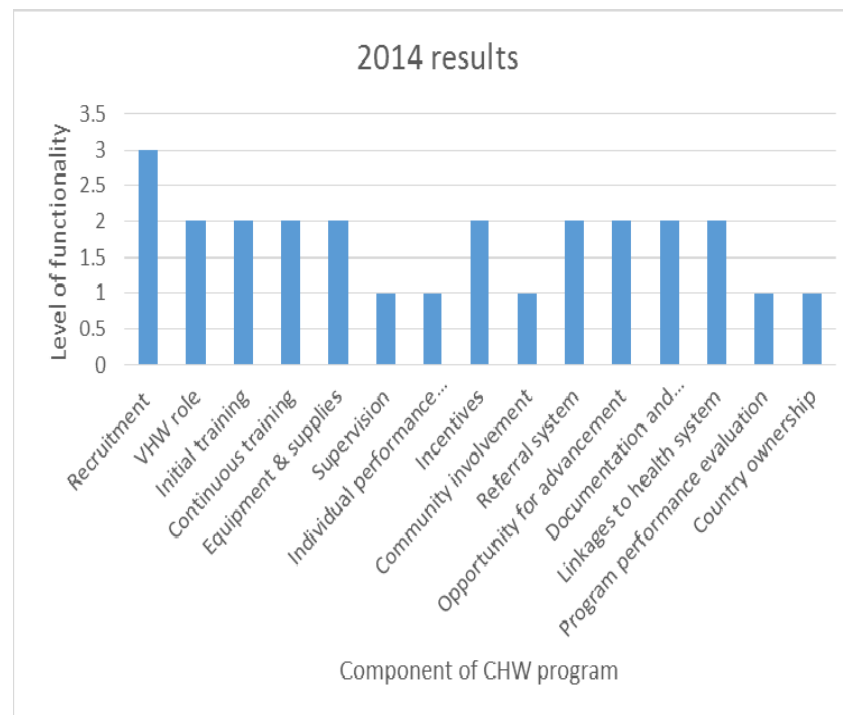
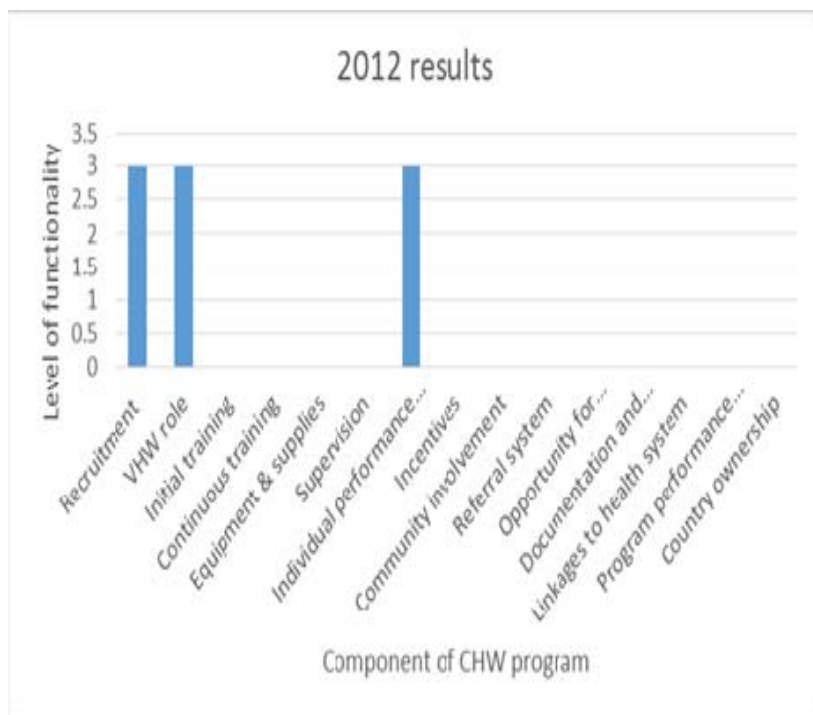


# Results in Tanzania



**2012: Score = 0.2, non-functional system**

**2014: Score = 1.7, functional system**

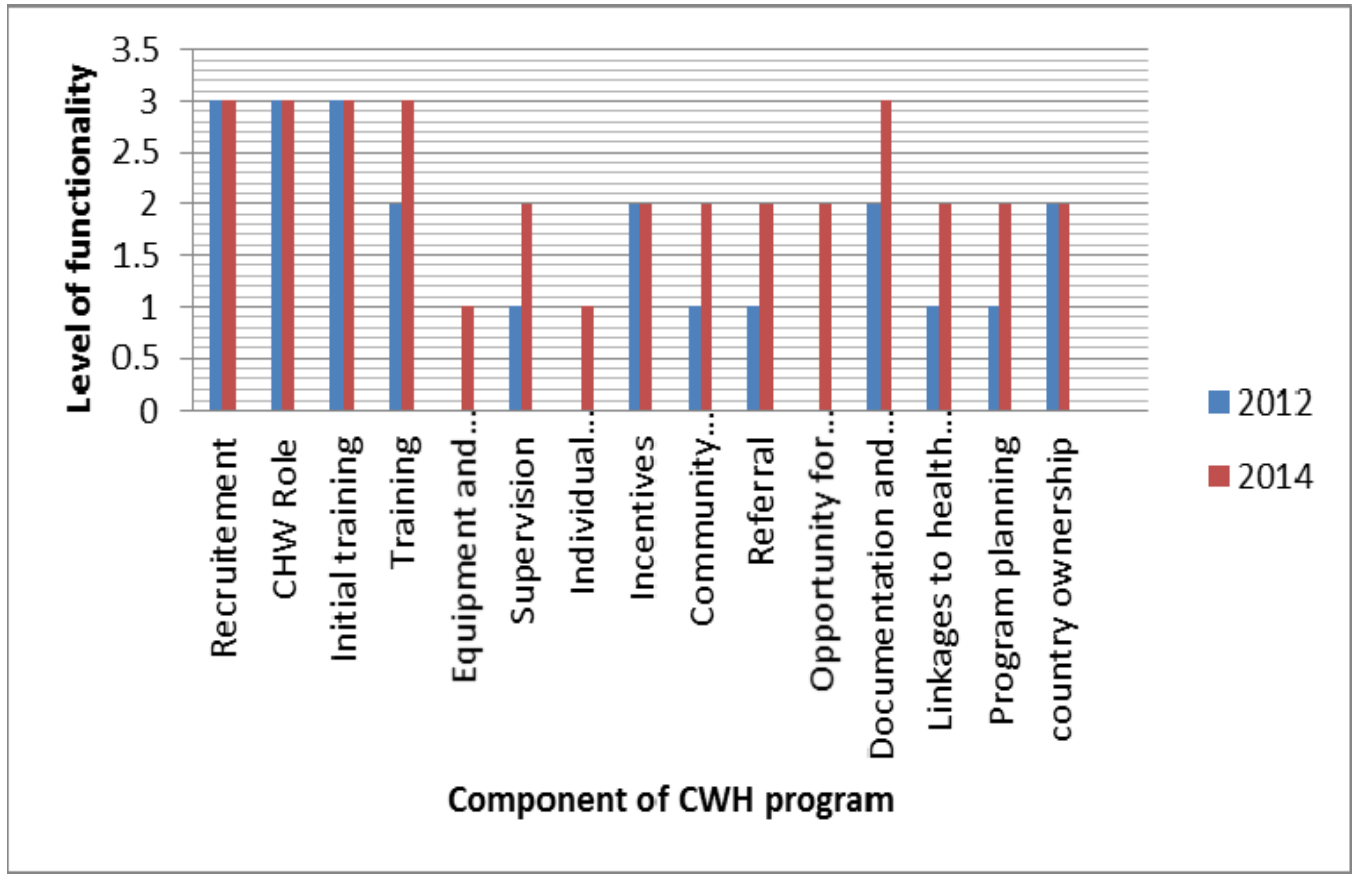




# Results in Kenya



2012: score=1.4, partially functional system  
2014: score= 2.2, functional system

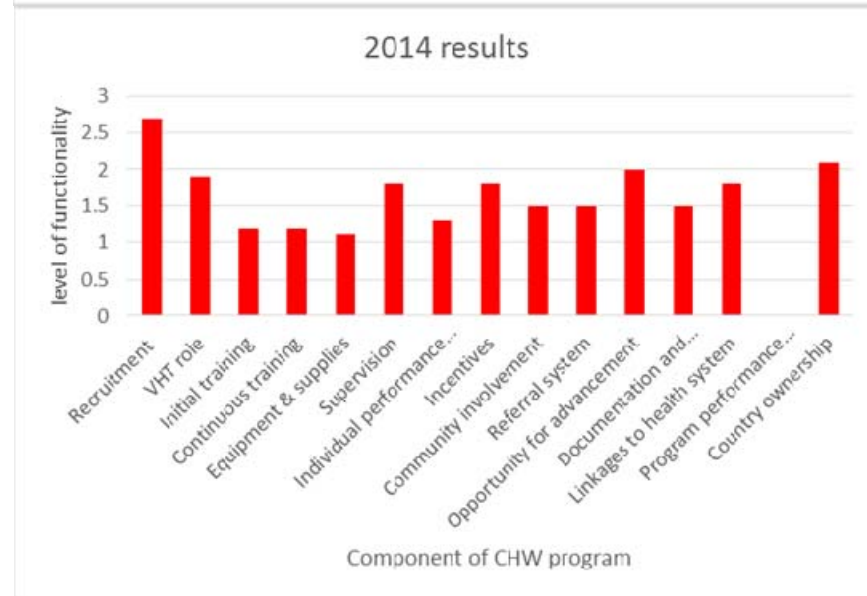
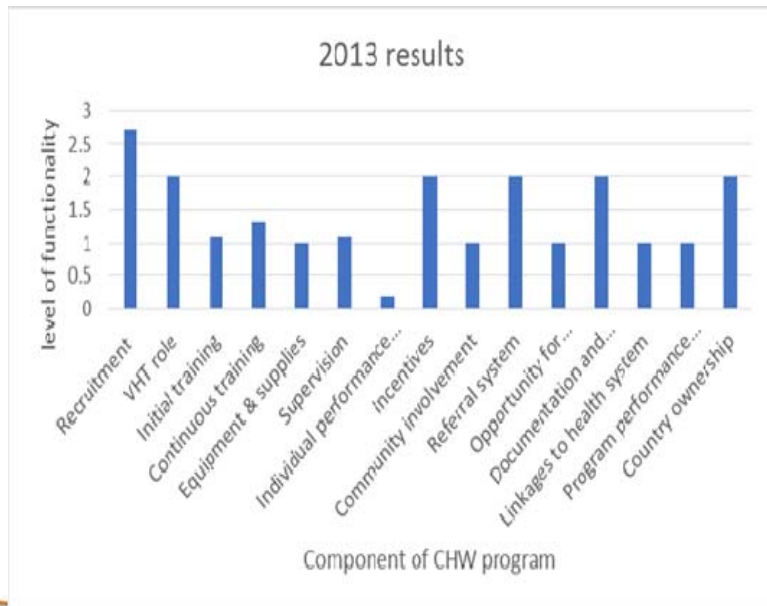
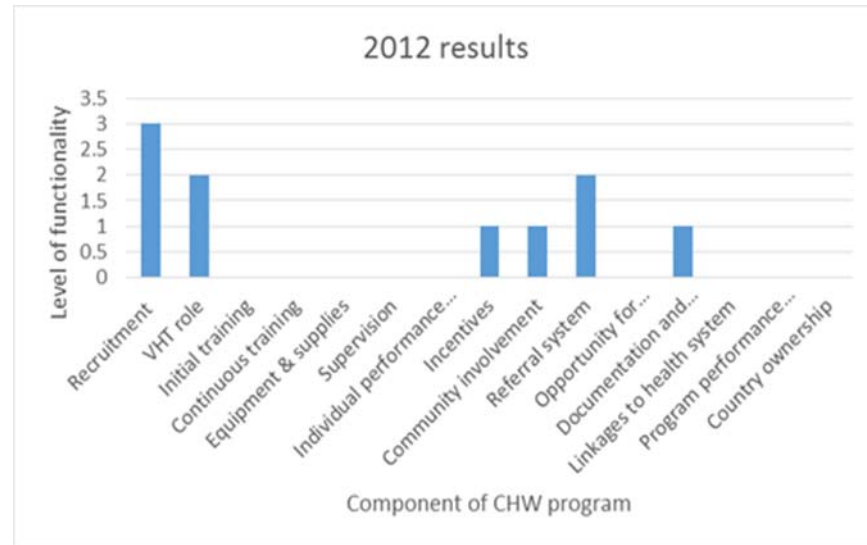


# Results in Uganda

**2012: score= 0.2, non-functional**

**2013: score= 1.4, partially functional**

**2014: score= 1.7, functional**





# Conclusions



## We learnt

- This tool allows participation of all stakeholders, which is critical for ownership and strengths based approach for a stronger health system
- Close monitoring of the improvement plans is a good platform for collaboration of partners
- Repeating exercise highlights areas which need more follow up



# Acknowledgement



- DFAT
- World Vision
- Governments of Kenya, Uganda & Tanzania
- EAMNeCH staff
- Project beneficiaries
- Co-authors: Sue England, Margy Dowling & Dr Asrat Dibaba



# Thank you

## Questions?

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