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Community health workers - pioneers of health for all

Contribution of training institutions in the coastal region Community health workers to support universal health coverage in Kenya

By Michaela Verling, Diana Ombelli and Ann Soita

By implementing a national community health strategy, Kenya aims to overcome the burden of accessible healthcare for all. Thereby, community health workers are the foundation for the successful implementation of this strategic plan. Their proximity to the communities enables them to address specific needs and promote healthcare at all levels. In this regard, training institutions that originate skilled health professionals play an essential role: Two educational institutions at the Kenyan coast serve as an example how educational institutions engage in various activities with the ambition to provide universal health coverage (UHC) in Kenya.



ODF (Open Defecation Free) Celebration for the participating villages held in Chirima Chahuha village, Kinango Subcounty. Photo: © Chris Mabonga

The national community health strategy

Affordability of healthcare is included as one of the major pillars in Kenya's 2030 Vision. Currently, covering basic health care costs is a burden for many Kenyans. Early 2020 Boniface Mwangi, a Kenyan activist, tweeted "We, the middle class are only a sickness away from poverty." For instance, collecting money for relatives to pay hospital bills is common practice and healthcare has a strong financial impact on the population of the low-middle income country.

In 2006, Kenya adopted the community health strategy. This is a national strategic plan to improve and invest in community health in every county and consequently provide access for healthcare needs at the source i.e., at home and in the villages. The strategy is part of a plan for Universal Health Coverage and aims to balance the resources put into facility and hospital-based care along with community-based care. The goal is to understand the health needs at community level. That includes the collection of health data, raising awareness of healthcare challenges within the community and liaise with the health care system. By focusing on

education in areas of hygiene and preventive measures such as universal use of mosquito nets, mother and child needs and health promotion for elderly people, among others, proactive preventive and treatment-based health interventions can be established (Ministry of Health, Kenya Community Health Strategy 2020 – 2025).

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Despite the well documented value of employing a vigorous community health strategy, involving the training of community health volunteers (CHVs), establishing community health committees, and engaging in healthcare education, the experience in Kenya is very varied. From county to county there are different challenges. In many cases there is not enough support through the allocation of appropriate funds, that allow to create community units, train workers, pay stipends and support the community at every level. Some counties therefore rely on non-governmental organizations (NGOs) to carry out this policy so as to promote the primary healthcare especially in the remote areas.



Student helps pupils to build a tippy tap installation for hand washing at the primary school in Bodoi. Photo: © Rebekah Makau

A glimpse at Kenya's coastal region

Kwale County has been active in its implementation of the community health strategy by establishing community health units (CHUs). This has been one of the foci in ensuring the success of the national universal health coverage. It is approximated that the county needs

around 200 community health units for it to be fully covered. The county government together with different NGOs has established around 160 CHUs around Kwale county.

Kilifi County witnessed an increase of health facilities from 91 in 2013 to 150 in 2020, meaning that access to health services in the county has greatly improved (Kilifi County, 2020). A qualitative study of rural Kilifi depicts challenges faced by community health volunteers (CHV's) and identifies attrition as the main one (Lusambili et al., 2021). The paper explores a sustainability approach, which eventually could impact positively the continuity of community health care services. "There is a need to remunerate CHVs work as well as provide support in the form of basic training and capital on entrepreneurship to implement the identified income generating activities such as farming and events management" advise the authors of the study as viable countermeasures to retain CHV's.

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Training institutions as drivers for community healthcare

For a positive development of accessible, affordable, and effective healthcare for all Kenyans, education and training of healthcare professionals is essential.

The two TVETA (Technical and Vocational Education and Training Authority) accredited institutions Kenya School for Integrated Medicine (KSIM) in Kwale County and the North Coast Medical Training College (NCMTC) in Kilifi south sub-county have been actively training healthcare professionals, including community health workers during the last decade.

Kenya School for Integrated Medicine (KSIM) trains community health assistants and assistant community health officers in a comprehensive way. The graduates become key workers in the Ministry of Health, for instance within the Public Health and Sanitation Department focusing on community health strategy establishment. Additionally, the institution is playing a major role in implementing community health strategies in Kwale County. The college has established and supported a total of 24 CHUs with the help of a European Union funded project during a period of five years from 2015-2020 (Burgos J, 2016).

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The large amount of community health data accumulated at those community health units (CHUs) are used to assess specific healthcare needs of the communities. Consequently, those needs can be prioritised, addressed with appropriate strategies, and considered for planning and decision making. Also, direct linkages of community members to healthcare service providers are facilitated. As a result, community health information systems (CHIS) are strengthened and help to respond to specific issues rather than addressing general topics. Accordingly, for example, open defecation, which is a huge burden in the rural areas of Kwale county (Legge et al., 2021) can be addressed specifically. Therefore, the spread of certain communicable diseases is aimed to be reduced.

Furthermore, through the establishment of CHUs there are more job opportunities, that create new perspectives for Kenyan youths.

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Student practises blood pressure measurement in a community outreach. Photo: © Rebekah Makau

In the Kilifi South sub-county, the **North Coast Medical Training College (NCMTC)** has been conceived in 2009 to be community-based both in the set-up of the training and in provision of services to the surrounding community.

The community programs have been set up to cover different target groups: children at school (School Health), mothers and their babies (Mama na mtoto), elderly people (Health in old age, funded by the Swiss NGO “Comundo”) and the community in general (Environmental Health).

Mr. Reuben Waswa Nabie, Academic Director at the NCMTC envisions that five Health Information Points (HIPs), implemented in cooperation with the Kenyan NGO “Community Health Promotion Fund”, will make healthcare accessible and affordable. Health Information Points (HIP’s) are located in primary schools and provide health promotion and prevention, as well as rehabilitation and palliative care services to the local community. The proximity healthcare is expected to increase the individual responsibility for health along with a reduction of costs and time effort.

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NCMTC Students support the HIP’s and train their skills in the field by collecting data and delivering health promotion and disease prevention services to the communities.

Rebekah Makau graduated at NCMTC and is currently the coordinator of the HIP in Mirimaminne, Junju Ward (Kilifi county). The activity she likes the most is engaging with the elderly people. The major challenge she encounters is when clients are issued referral forms but do not go to the hospital for treatment and they just stay at home. The causes are several: financial issues, lack of medication at the local dispensary, belief that an herbal treatment would be more beneficial and lack of interest for own healthcare. That is where an individual and personal approach fills the gap: the HIP coordinator with the CHVs follows up the case, even at the clients’ homesteads.

Community health - the way to accessible healthcare

Kenyan public and private actors agree about the importance of community health, as an essential piece of the public health ecosystem.

According to Dr. Githinji Gitahi, CEO Amref Health Africa “In the African context, community health workers (CHWs), are a critical cadre in achieving UHC. CHWs bridge the gap between their communities and the formal health system, bringing health care as close as possible to where people live and work. Yet they are often treated as volunteers. Their role must be integrated into health systems if those are to successfully respond to the disease burden that exists in African countries.”

Institutions like for example NCMTC and KSIM are already working towards a strong development of community-based healthcare in Kenya. However, overall, there is still a lack of training and reputation of community health workers, and it becomes apparent that the sector needs to get resources more suitable to the purpose: accessible and affordable healthcare close to the needs of communities as a mean to improve community health and prevent poverty.

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