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Community Health Worker survey results – April, 2023

CHW Survey






Objective

- To explore knowledge and training interests/needs among community health workers (CHWs)

Context

- Facilitated through CHIC (Community Health Impact Coalition)
- Conducted March 2023

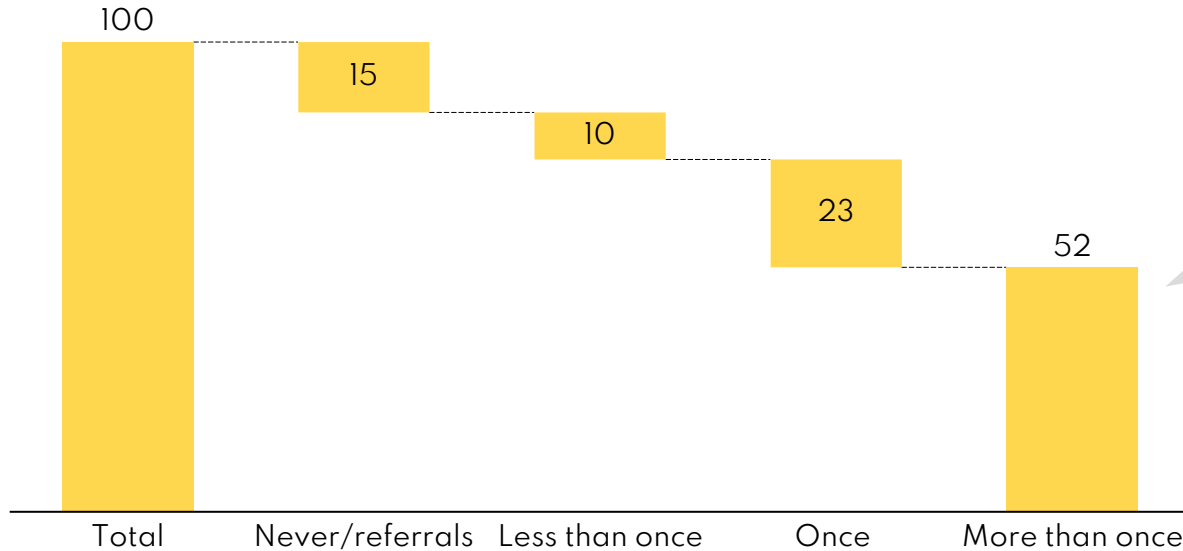
Participants

- 322 responses
 -  Kenya: 296 (93%)
 -  Malawi: 12 (4%)
 -  Uganda: 8 (3%)
 -  Sierra Leone: 2 (1%)
 -  Liberia: 2 (1%)



Frequency of CHWs providing services to persons with disabilities

Services provided per week, in % of total CHWs answered (n= 242)



The majority CHWs meet and provide services to at least 2 persons with disabilities per week

Typical cases for CHWs

Description of types of disabilities, health conditions and services provided by CHWs – (322 responses)

Types of disabilities reported

- Cleft Lip & Palate cases for both adults and children
- Autism
- Epilepsy
- Blindness
- Deaf blindness
- Physical impairment (e.g. wheelchair-user, amputee)
- Intellectual impairment
- Visual impairment
- Down syndrome
- Cerebral palsy
- Mental health challenges

Services provided to persons with disabilities (examples)

General healthcare

- Health treatment (malaria, diarrhea and malnutrition)
- Medication for joint pains, and skin rash
- Support for ANC clinic attendance during pregnancy
- Referrals to other facilities

Specialized services

- Eye screening for visual impairment
- Provision of assistive products
- Assistance with daily activities such as dressing wounds, administering medication, and physiotherapy exercises

Wide ranges of types of disabilities; provision of services includes mostly general health services and assistance in some specialized need areas

Note: Some CHWs also reported sharing food with persons with disabilities and other livelihood support

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Challenges in providing services to persons with disabilities

Mentioned by more than 30% of respondents (96 CHWs)

“Supporting delivery for a mother with physical disability. She is not able to flex her limbs and I didn’t know how to assist”

1. Communication
2. Lack of knowledge and experience about providing care
3. Transport (availability and affordability)
4. Poverty leading to poor health and health behaviour, inability to pay for medication etc
5. Mistrust of person with disability, mental health challenges
6. Stigmatization by community
7. Lack of tools (assistive technology, PPE, etc.)
8. Inaccessible facilities
9. Lack of information about referral facilities
10. Lack of available referral facilities

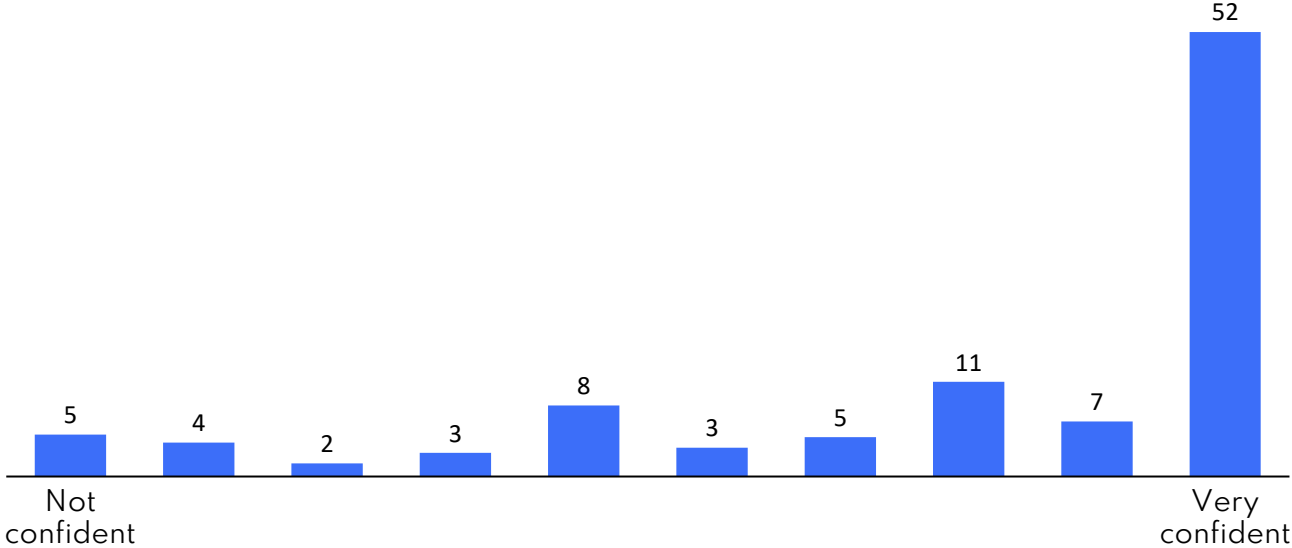
“Lack of tools because these people have been forgotten by the health system”

**Top 10
challenges
mentioned**

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Confidence in providing services to persons with disabilities

% of total CHWs answered (n= 322)

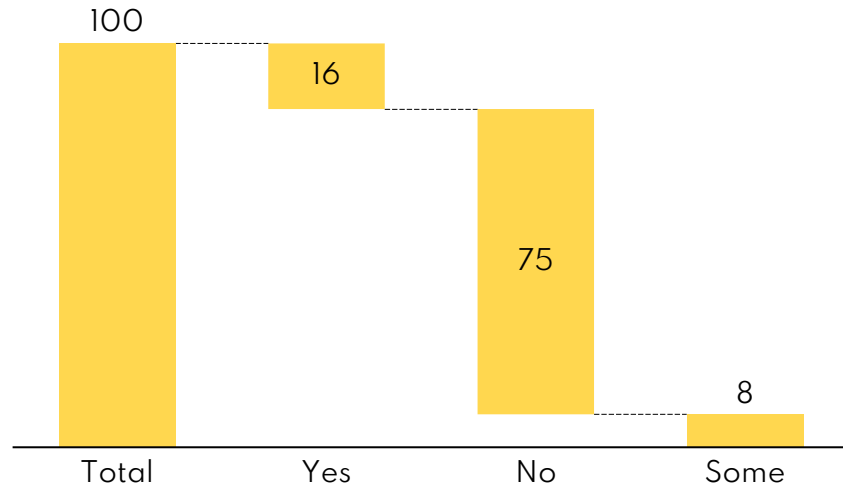


Majority of CHWs feels confident to provide services to persons with disabilities



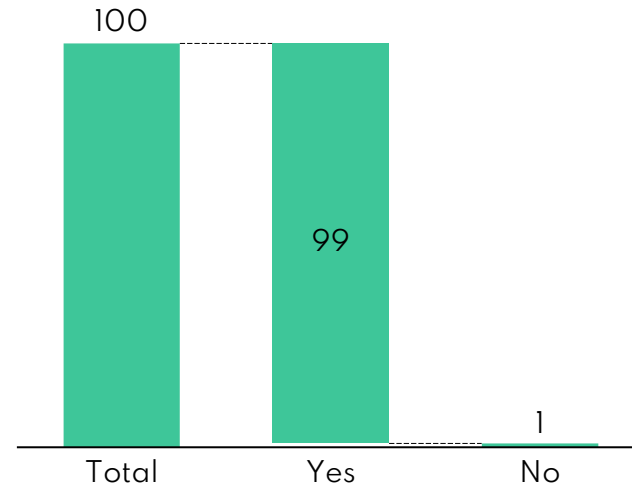
Training on disabilities

Training received on disabilities, % of total CHWs answered (n= 319)



75% of all CHWs have **never received any training** about disabilities

Training desired on disabilities, % of total CHWs answered (n= 321)



99% of all CHWs **would like training on disabilities**



What should the training look like?

Summary of responses from 322 CHWs

Objective

- Empower community health workers with knowledge and skills to better support/assist ~~handle~~ people with disabilities, address challenges, provide appropriate care and support, while promoting inclusivity in the community

Type of delivery

- **Type:** Mix of in-person and online/computer delivered ~~technology and~~
- **Location:** In-person training in the community/at site of work ‘
- **Duration:** Range suggested – from 2-3 days with follow-up sessions to longer time-frames (e.g. 2 weeks)
- **Facilitators:** Qualified health personnel, and persons with disabilities

Content

- **Knowledge on disability & health**
 - Understanding of different types of disabilities, including diagnosis of ~~disabilities~~ health conditions-(e.g. what is epilepsy, down-syndrome, etc.), and how the condition impact a person’s health needs
 - Rights of persons with disabilities
 - Referral pathways, available services
- **Skills to provide effective care**
 - Overall communication skills, including basics of sign language
 - Addressing mental health issues in persons with disabilities
 - Basic understanding about maintenance and assembling of assistive devices
- **Other**
 - Educating the community about disabilities and addressing stigma
 - Promoting inclusions of persons with disabilities in the workplace to improve their livelihoods



Reflections by the Missing Billion team/LSHTM

- **Desire to provide quality services:** Many CHWs highlight the challenging situations persons with disabilities experience and live in; CHWs use their own funds and extra time to help with daily activities and support
- **Expressed confidence might not reflect awareness, skill and knowledge:** Most CHWs indicate strong confidence in dealing with persons with disabilities; yet 75% haven't received any training and 99% desire training. CHWs often highlight the complexity in addressing certain cases, so the expressed confidence might not fully reflect their limitations to provide high quality care for general health services
- **Societal stigma:** While many CHWs express strong understanding and empathy, some answers might reflect an imbedded societal stigma and negative attitudes towards disability (“cripples”, “the dumb”, “they don't listen”, “they can't express themselves”)
- **Desire for training:** 99% of all respondents indicate that they would like training on providing care for persons with disabilities. This is something health systems should/have to enable.
- **Need for tools, transport:** Many CHWs comment on the lack of PPE, gloves, transport opportunities for patients
- **Functioning continuum of care:** CHWs often highlight challenges of appropriate referral sites. CHWs require support within a functioning health system that addresses their need for referral networks to effectively meet the needs of persons with disabilities.

