Community Health Workers’ role in improving child health through proven low cost interventions in underserved areas of Burundi

Conference Paper

Background

Concern Worldwide has been implementing a health and nutrition project from 2014 to 2016 in Cibitoke, a rural, underserved province in northwest Burundi. The objective of the project is to implement and manage proven, low-cost interventions to reduce child illness and death at community level, whilst simultaneously increasing families’ capacity and resources to sustain improved health at the household level.

The aim of this paper is to share evidence on how Community Health Workers (CHWs) can contribute to health system strengthening by improving health service coverage and community access to life saving treatment.

Methods

Concern launched a train-the-trainer programme involving 3,984 health personnel. The methodology is a “cascade” approach, whereby Concern and the Burundian Ministry of Health train 7 district health team members, who in turn train 37 health facility staff, who train 393 CHWs, who finally train 3,547 Care Group Volunteers (CGV). CGV are mothers from the community who visit households to disseminate mother, young infant and child caring practices and refer sick cases to CHWs.

Results

Employing this approach, Concern implemented “community case management” (CCM), a globally-recognized strategy to increase access to treatment. Working with 393 CHWs, 58,036 children under-five were examined and treated for malaria, pneumonia and diarrhoea in one year (October 2015 - 2016). Among those who were treated, 35,703 (61.5%) visited the CHW within 24 hours following sensitisation through home visits by CGVs and 37,320 (64.3%) were treated by CHWs at home.

Conclusion

Monitoring results of our 2014 - 2016 project demonstrate that community interventions can contribute to timely and adequate case management for greater than half of the under 5 children in Cibitoke province. CCM and Care Groups reduce the distance mothers must walk to seek life-saving curative services for children, which has increased timely health care-seeking behaviours, further saving lives.

1 This paper was developed by Zenon Ndikuriyo and Celestion Ndayahoze. It was presented at the 1st International Symposium on Community Health Workers that was held at Makerere University, Kampala, Uganda. The conference proceedings can be found here.