Integration of community based health services (TB, HIV, MCH, Malaria)

• DRC,
• Tanzania,
• Mozambique,
• Nigeria,
• Ethiopia,
• Kenya
Integration of community based health services (HIV, MCH, Malaria)

• Ethiopia
  - CHW are paid
  - Under MOH
  - Package of activities: TB, HIV, MCH, Malaria etc
  - Not voluntary but are part of the system
  - Data management integrated
Integration of community based health services (HIV, MCH, Malaria)

• Kenya:
  - Training package
  - Coverage: 55%

• Mozambique:
  - No formal structure
  - MOH is not leading the process
Integration of community based health services (HIV, MCH, Malaria)

• Tanzania:
  - Community volunteers
  - Each program has its own people
  - Each program is paying differently
  - Undergo a 9 month training from 2015
  - Coverage is around 20%
  - Country: around 27000 villages with 2 CHW/Village
Integration of community based health services (HIV, MCH, Malaria)

• Nigeria
  -existence of policy from integration (TB, HIV, Malaria, MCH etc)
  -Integration is not formalized

• DRC
  -Policy is already existing but implementation not effective
1. Opportunities

- Development of national health system strategy plan
- MoH leading strategy with involvement of stakeholders (equity, planning, sustainability, geo distribution)
- Joint technical working group for TB, HIV, and malaria for planning, coordination, M&E
- Coordinated efforts between different partners supporting CHW at different levels
- Harmonized and simplify referral form at community level to reduce confusion for CHW

2. Community health

Strategy varies by and within country; formal strategy is needed and harmonized

A) TB, HIV, Malaria, immunization, and others ........
B-D) Dependent on the country because of funding, strategy, involvement of country
- 25% to 100% coverage (Ethiopia)
- Expansion needed to increase coverage
3. Ratio of TB-specific
- Difficult to have ratio
- TB specific: coverage varies from partial to entire country
- TB sensitive: coverage is 50% with attempt to refer

4. Mapping
- 3/6 countries (Tanzania, Kenya, Nigeria) have completed mapping for HIV, Malaria, Immunization, TB
- 2/3 (Kenya and Nigeria) used mapping to strengthen strategy

5. Increase integration
- Community engagement and involvement in decision process
- Development of national health system strategy plan
- MoH leading strategy with involvement of stakeholders (equity, planning, sustainability, geo distribution)
- Harmonized and simplify referal form at community level to reduce confusion for CHW
- Cross training of CHWs for multiple diseases (TB, HIV, malaria, hygiene, etc)