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HEALTH SYSTEM DETERMINANTS AND WORK PERFORMANCE OF COMMUNITY HEALTH WORKERS IN DECENTRALIZED SERVICES IN CAMEROON: AN OVERVIEW OF OBALA HEALTH DISTRICT

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Abstract:

This study investigated the health system determinants of community health workers performance in the decentralized services in Cameroon in order to develop a management framework that could be used to improve performance. Context: According to the 2006 World Health Organization (WHO) Report, the shortage of professional health workers is one of the key reasons in the growing crisis of providing health services, particularly in low income countries. In view of this shortage, community health (workers) workforce was adopted as a component of cost-effective strategies in addressing the health needs of rural communities at the lowest level of the health system. Objective: to identify the health system determinants of work performance of CHWs in the Obala Health District. Methodology: This study adopts a mixed research methodology and is descriptive. Pearson's correlation and ANOVA test were used in bivariate analysis of quantitative data with the outcome variable being work performance of community health workers. Results: The study reveals that 59.3% of CHWs are supervised once a month by the Health Center Workers (41.9%) or MOH officials (38.4%). The provision of feedback is an important component of the CHWs strategy; unfortunately, over 65.1% of CHWs do not receive feedbacks from their supervisors to improve their work. Conclusion: CHW programs require regular and reliable support as well as supervision in order to obtain better results. However, supervision is often one of the weakest links in a CHW program consequently the quality of supervision needs improvement.

Keywords:

Determinants, Performance, Community Health Workers, Obala Health District

Introduction

Health thus task- shifting to less well-trained community health workers. Many countries in Sub-Sahara Africa face the challenge of organizing health service delivery in a manner that provides quality and accessible health care to their populations against a background of economic recession and limited resources. In response to these challenges, different governments have been implementing health sector reforms; Kenya, Uganda, Ghana and South Africa have implemented national programs for community health workers (WHO, 2010).

Context

In Cameroon, the government adopted the Bamako Initiative strategies, introduced by African Ministers of health in 1987 to strengthen primary health care services with a goal of achieving universal access. It adopted five strategies to achieve this goal, which include;

- Revitalization of public health systems by renovations and extension of peripheral health care delivery systems.
- Decentralization of decision-making from the national to district level; -
- Co-management of basic health services with the community, and
- To define and provide a minimum package of essential health services.

Objective

To determine the health system determinants of work performance of community health workers in the Obala Health District.

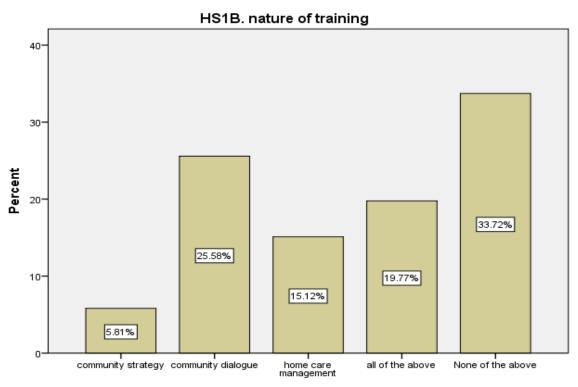
Methodology

To carry out this scientific work, we employed a descriptive cross-sectional study design with the combination of both quantitative and qualitative approach of data collection. For the quantitative dimension, prepared structural questionnaires were used to survey the knowledge and practices of the 87CHWs on how related health system determinants affects performance. This later approach was considered because of its ability to provide diverse range of baseline information. While on the qualitative dimension, we conducted interviews with 24 key

informants. This later approach was adopted because of its ability to provoke in-depth opinion from the community members.

Results

Health system determinants and work performance of CHWs



HS1B. nature of training

Figure 4.3 Type of training

Source: fieldwork analysis by the author

From our findings, 66.3 % of the respondents have had training to effectively carry out their job, that is, community dialogue (25.6%), home care management (19.8%), community strategy (5.8%) or in all the three (19.8%).

Table 4.3 Feedback from supervisors

HS5. feedback from supervisor							
					Cumulative		
		Frequency	Percent	Valid Percent	Percent		
Valid	no	56	65.1	65.1	65.1		
	yes	30	34.9	34.9	100.0		
	Total	86	100.0	100.0			

Source: fieldwork analysis by the author

This study revealed that, (59.3%) of CHWs are supervised once a month by the Health Center Workers (41.9%) or MOH officials (38.4%). 65.1% of CHWs do not get feedbacks to improve on their work.

Correlation between Health System determinants (IV) and performance of CHW (DV)

The results of this study, revealed that there is a statistically significant strong correlation (Pearson r = 0.57 at p = 0.000) between Health system determinants (IV) and performance of CHW (DV) as seen in table 4.4 below.

Table 4.4 Correlation between Health System Determinants and performance

Correlations

		TPER. Total Performance of CHW	THSD. Total Health system Determinant
TPER. Total Performance	Pearson Correlation	1	.568**
of CHW	Sig. (2-tailed)		.000
	N	86	86
THSD. Total Health	Pearson Correlation	.568**	1
system Determinant	Sig. (2-tailed)	.000	
	N	86	86

^{**.} Correlation is significant at the 0.01 level (2-tailed).

Source: fieldwork analysis by the author

Conclusion

The functionality of the health system as a whole has an influence on CHW performance. From our literature review, it is clear that necessary arrangements regarding supervision, supply kits and training are often inadequate and that CHWs' expectations regarding these issues do not correspond with reality. Hierarchal structures and vertical programs within the health system hampers communication among CHWs, other health staff and management committee members negatively affects the work performance of CHWs. CHW programs require regular and reliable support and supervision in order to demonstrate better outcomes.