

Notes from the field

Supporting community health officers on the front lines: skills building and mentorship to increase test-based malaria treatment in Ghana

The Ghanaian public health expert shared his concerns: “Many of our workers at peripheral health facilities—along with those working at the community level—do not have access to skills training for appropriate diagnosis and management of malaria and other febrile illnesses. As a result, treatment of febrile conditions, such as malaria, is given without a confirmed diagnosis. To increase the effectiveness of our health services, it is critical that we change this situation.”

Adherence to negative malaria test results remains a major challenge in Ghana and contributes to inappropriate prescribing and use of antimalarial medicines and failure to effectively treat non-malarial febrile diseases.

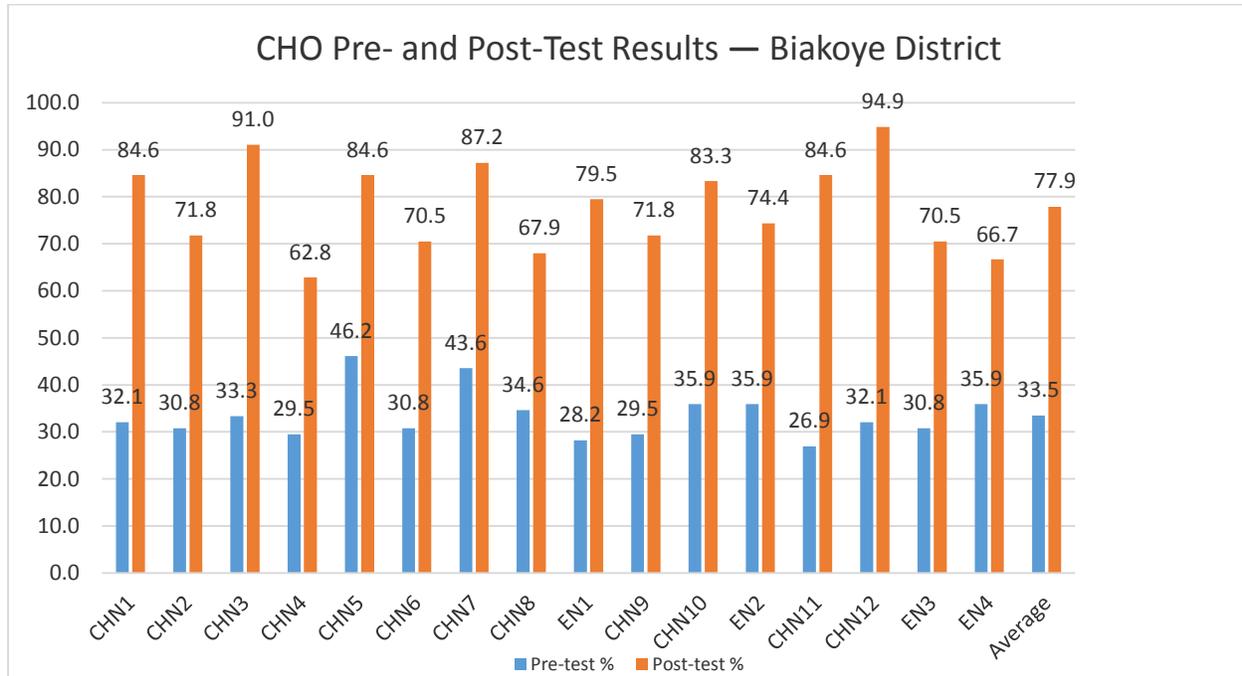
In Ghana, healthcare providers and community health officers at peripheral level facilities often are a patient’s first point of entry into the health system. In 2004 the Ghana Health Service (GHS) and the National Malaria Control Programme launched the Community-based Health Planning and Services Initiative (CHPS) to improve access to quality health care. But without adequate staff training in key skill areas, impact has been limited. One Community Health Officer (CHO) from Atebubu district described a common practice: “When rapid diagnostic tests are negative, we do not know what to do. So we give the patients malaria treatment because they have come to us for care and must be given something to take home.”

“I wish I had had this training opportunity prior to my original posting. It has indeed been an eye-opener! Henceforth I’m going to be a great ambassador for test-based treatment.”

CHO from Amansie West District

But now, with support from the US President’s Malaria Initiative, MalariaCare is working closely with Ghana Health Service clinics and communities to improve health services and to assist CHOs on the front lines. MalariaCare is supporting Ghana’s efforts to build health provider skills at lower levels of the health system by linking CHOs with opportunities for mentorship at district health facilities. As Dr. Samuel Ayamba, a technical lead for the project explains, “Through the new program, CHOs are offered an intensive five-day skills building and mentoring internship with district health facility staff. District health officials select the participants, then clinicians at referral health facilities conduct the training. A variety of health topics are covered, and we are able to assess performance in all those areas after training is over.”

The internship curriculum covers malaria; common ear, nose, and throat infections and mouth disorders; respiratory infections; gastro-intestinal infections; skin infections; and malnutrition and anemia. A primary goal is to strengthen CHO abilities to correctly diagnose and treat fevers, while improving communication and referral linkages between lower and higher level health facilities. **Program pre- and post-test results show marked improvement—the average pre-test result for competence in managing febrile ailments was 33.5 percent in one representative district. After the program, participant scores more than doubled, with an average post-test result of 77.9 percent** (see chart below).



Post-program evaluations of trainee knowledge and skills demonstrated significant improvement—the average participant score increased 116 percent in a representative district. Each column represents an individual trainee.

The Ghana Health Service, which monitors the training and mentorship program, has hailed it as an effective strategy to prepare CHOs prior to sending them to their respective communities and CHPS compounds. Following a review of program results, the GHS committed to adapting and expanding the program nationwide.

For more information or to request program or technical assistance:

CONTACT MALARIACARE

Phone 202.822.0033

Email MalariaCare@path.org