



khanya-aicdd
African Institute for Community-Driven Development

CBW National Workshop Report Kenya

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Community-Driven Development
(Khanya-aicdd)**

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Kenyan partners and members of the national steering committee

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- AU/IBAR CAPE Unit
- Farm Africa
- Heifer International
- Kenya AIDS Consortium(KANCO)
- Kenyatta University (HIV)
- National Council for Population Development
- The Department of Livestock Production
- The Department of Veterinary Services
- Wajir South Development Association (WASDA)

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The report is available from www.khanya-aicdd.org

Contents

| | |
|--|-----------|
| Acknowledgements | 1 |
| Contents | 2 |
| Glossary | 3 |
| 1 Background | 4 |
| 1.1 Introduction | 4 |
| 1.2 Objectives | 4 |
| 2 Workshop Opening and Welcome | 6 |
| 2.1 An overview on the CBW action research project in Kenya | 6 |
| 2.2 Overview of the 4-country CBW Action Research Project | 6 |
| 2.3 Official opening remarks | 9 |
| 3 Workshop presentations | 11 |
| 3.1 Advocacy community change and communication | 11 |
| 3.2 Community Based Animal Health Workers - Practical Action in Eastern Africa | 11 |
| 3.3 Findings from the Evaluation of Community-Based Worker Systems in Kenya | 12 |
| 3.4 Plenary Discussion - Issues emerging from presentations | 15 |
| 4 Group work and presentations | 16 |
| 4.1 Appointment, accountability, management and involvement of the community | 16 |
| 4.2 Coordination of CBW systems | 17 |
| 4.3 Reward systems for CBWs | 18 |
| 4.4 Roles and linkages required | 18 |
| 4.5 Support and supervision | 19 |
| 4.6 Training | 19 |
| 5 The Way Forward – Vision of the CBW system in Kenya | 20 |
| 6 Closing Remarks | 20 |
| ANNEXES | 21 |
| Annex 1 Programme | 21 |
| Annex 2 Participants List | 22 |
| Annex 3 Workshop Expectations | 24 |
| Annex 4 Participants evaluation feedback | 24 |

Glossary

| | |
|--------|--|
| AIDS | Acquired immune-deficiency syndrome |
| CBW | Community-Based Worker |
| CAHW | Community-Based Animal Health Worker |
| CBCE | Community-Based Civic Educator |
| CHW | Community-Based Health Worker |
| CDA | Community Development Assistant |
| CDF | Community Development Funds |
| CDP | Community Development Plan |
| CSO | Civil Society Organisation |
| DO | District Officer |
| DSG | District Steering Group |
| ECK | Electoral Commission of Kenya |
| ELCI | Environmental Liaison Centre International |
| EVK | Ethnoveterinary Knowledge |
| FA | Facilitating Agency |
| FBO | Faith-Based Organizations |
| FGDs | Focus Group Discussions |
| HBC | Home-based Care |
| HC | Health Care |
| HIV | Human Immunodeficiency Virus |
| IED | Institute for Education in Democracy |
| IGA | Income Generating Activities |
| KARI | Kenya Agricultural Research Institute |
| KENDAT | Kenya Network for Draft Animal Technology |
| KHRC | Kenya Human Rights Commission |
| NR | Natural Resource |
| NSC | National Steering Committee |
| PA | Practical Action |
| SA | South Africa |
| SL | Sustainable Livelihoods |
| SSRL | Sustainable Rural Livelihoods |
| VSO | Voluntary Services Overseas |

1 Background

1.1 Introduction

For the past three years Khanya–African Institute for Community-Driven Development (Khanya-aicdd) has managed a four-country action-research project involving Kenya, Lesotho, South Africa and Uganda. The project focuses on Community-based Worker (CBW) systems in the natural resource and HIV sectors. The project objective was to develop revised approaches to the use of CBWs in service delivery, building on existing experience in-country.

The project has involved experience sharing, national and 4-country workshops and a visit to Peru to learn from another fifth country implementing a CBW system. These approaches were piloted, evaluated and the economic and legislative issues involved in these approaches analysed. The results were continuously peer reviewed and fed back into policy and practice in relation to service delivery. An evaluation to gauge the impact and cost-effectiveness of the CBW system in the two sectors was conducted, mainly targeting the a small number of implementing partners involved in the project.

In Kenya the project is managed by a National steering committee (NSC) with membership from the policy makers, implementing and facilitating agencies in the natural resource and HIV/AIDS sectors.

This report is an outcome of a one-day national workshop with Kenyan partners, held on 25th January 2007, at the Panafric Hotel, Nairobi, Kenya. The workshop brought together stakeholders in the HIV/AIDS and Animal Health sectors to share findings from the evaluation of Kenyan pilots and experiences from other agencies and to explore the implications of mainstreaming and scaling up the CBW systems in-country. Most of the participants were from the implementing agencies and there was poor representation from the policy makers.

1.2 Objectives

The objectives of the workshop were that, by the completion of the workshop, participants would have:

- A better understanding of the CBW systems and be aware of the findings from the **impact** evaluation of CBW systems;
- Presented and discussed the findings of the evaluation of CBW systems in Kenya;
- Developed a broader institutional, policy and advocacy framework for adapting and scaling up the CBW system as a mechanism for pro-poor service delivery in Kenya.

In total, 39 participants attended the workshop, representing different organisations. For some this was their first introduction to the CBW systems, other were partners who have been involved since the programme started. However, overall, there was poor participation by government and other policy makers in Kenya. (see annex 2 participants list). The Key facilitator of this one day event was Mr Isaac Thendiu with support from the Kenya National Steering Committee and Patrick Mbullu, the project manager.

The overall assessment of the workshop was excellent (83%), as was the achievement of the objectives set out for the workshop; participants' have a better understanding and aware of the findings from the impact evaluation of CBW systems (79 %), developed broader

institutional, policy and advocacy implications for adapting and scaling-up the CBW system as a mechanism for pro-poor service delivery in Kenya (73%). Participants enjoyed the group session with parallel groups (78%) and 85% of them felt the workshop did identify ways to take forward the CBW systems in Kenya. They rated the workshop facilitation as excellent (87%). The overall organisation of the event was rated lowest (68%). See annex 4 for the full evaluation results and additional comments

2 Workshop Opening and Welcome

The workshop started with introductions and expectations of the participants. This was conducted in a participatory manner by the workshop facilitator Mr. Isaac N. Thendi who afterwards led the participants through the workshop programme.

The chairperson of the steering committee then gave the opening remarks and thereafter the workshop was officially opened by the regional director of Practical Action Eastern Africa.

2.1 An overview on the CBW action research project in Kenya

Stephen Mogere, the chairperson of the National Steering Committee in Kenya, welcomed participants and gave a brief overview of the evolution of the project. He pointed out that the current development agenda for public service delivery in Kenya is pro-poor in nature and that the CBW action-research project is based on the assumption that the use of CBW could be a pro-poor mechanism for service delivery. Also, that the government's presence in remote areas in terms of public services is limited due to scarce resources, as well as the structural institutional challenges that inhibit effective service delivery for the poor.

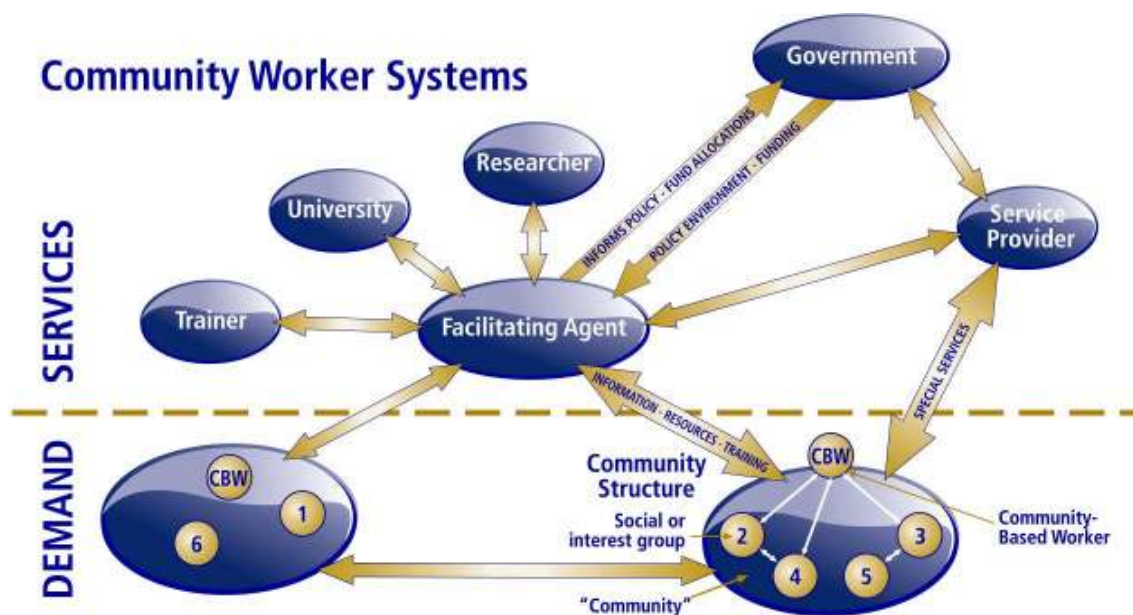
Hence this meeting which is aimed at bringing different partners and agencies involved in the use of CBW for service delivery to share experiences and to report on the cost-effectiveness study conducted on CBW. The study was structured to reflect the design of the CBW action-research project and revolved around issues of accountability, effectiveness, selection, efficiency and impact.

The NSC assigned an independent consultant to evaluate the Kenya CBW pilots. The consultant – ALMACO management consultants - collected secondary data on the pilots and undertook site visits of each of the pilots that were evaluated. Comparison was performed on other similar service providers to determine the cost-effectiveness of the CBWs. It is these experiences of the pilots that will be shared in this national workshop so that different views could be collaborated. This report will therefore be used as a learning approach to development practitioners and those who use CBW for service delivery. To this end I welcome all of you to a fruitful sharing experience.

2.2 Overview of the 4-country CBW Action Research Project

Patrick Mbullu, the CBW Project Manager, introduced the conceptual framework underpinning the CBW model, highlighting the key principles of the approach. The CBW Systems model (below) includes the community and a Community-based worker at the micro level; a facilitating agent (FA) and service providers at the meso level; and government, national institutions and the international community at macro level.

He gave the background to the project indicating that many African governments have instituted good macro policies that are pro-poor in nature - advocating for improved service delivery and community participation in service delivery. Some of these countries have also increased funding allocations towards the social sectors, eg South Africa currently spends a great deal of public funds on public services, with substantial and rapid decentralization in governance and service delivery. Also improving service delivery is a key priority for most governments to reduce poverty. However, progress on the ground in reducing poverty for the majority of the poor is still very slow due to the following factors:



- results (e.g. learning outcomes) have not responded as expected and remain inferior, particularly for poor people
- State not best at delivery of services and should instead create enabling environment for other actors including the private sector and NGOs
- some argue that market liberalisation has had a negative impact on the poor and that high levels of poverty and inequality still persist

The CBW project emanates from earlier work by Khanya-aicdd (2000) on Institutional Support for Sustainable Rural Livelihoods in Southern Africa (SSRL). This research found great institutional complexity at

- Community level, local govt level, province, centre
- Formal/informal structures
- Different sectors.

It identified that if people's livelihoods are to be improved, there is need to strengthen micro-macro linkages. Six key governance issues to promote sustainable livelihoods (SLs) were derived and are group as follows.

1. Empowering communities

- poor people active and involved in managing their own development (micro)
- active and dispersed network of local service providers (community based, private sector or government) (micro)

2. Empowering local government and management of service

- at district/local government level, services managed and coordinated effectively and responsively and held accountable (lower meso)
- at provincial level, capacity to provide support and supervision (upper meso)

3. Realigning centre

- centre providing holistic and strategic direction around poverty, redistribution, and oversight of development (macro)
- international level strengthening capacity in-country to address poverty

The CBW project focuses on the second governance issue – promoting dispersed, active and locally accountable community workers, who can work in a range of sectors, addressing services which are desperately needed and are best delivered locally, and the links to higher levels of government and NGOs. While urban areas may have seen improvement in service delivery, very few services reach rural villages. Most often than not, the only visible government services in rural areas are primary schools, sometimes a clinic, or a dip tank. In most instances, resources are captured by few institutions but not reaching the clients these are intended to benefit. There is therefore a need to change the way services are currently structured if we are going to address poverty, so that all villages/communities can be adequately served.

The CBW project aims to see how best services can be provided to all villages/communities in a cost-effective and sustainable way. Khanya-aicdd's participatory work has found that most communities depend on locally provided services, e.g. crèches, traditional birth attendants, traditional healers, home-based carers and local shops. There have been programmes, e.g. HBC, community health workers (CHWs) or paralegals, but these have remained as isolated examples and have not been scaled-up. The question the CBW project seeks to address is how these can be made more effective and scaled-up, and what the requirements needed for this to happen.

Table 2.2 shows examples of the models that were piloted and also evaluated as part of the 4-country action research.

Table 2.2 Models tested in pilots

| Models/Country | SA | Uganda | Kenya |
|-----------------------------------|--|---|--|
| 5-8 hrs (costs covered) | Thaba Nchu Food Security Programme | - | ABC – Kisumu |
| 20 hrs (costs covered) | World Vision; Environment Protection; DoA (BASED programme); Mvula Trust | Concern Uganda; NAADs (farmer facilitators); BUCODO | KANCO; KICOSHEP |
| 20-30 hrs (paid a stipend) | Golang Batcha; Hospice; World Vision; CHOiCe Trust, Nhlaysi | KCCC (HATS) | ABC – Kisumu WASDA – Water attendants |
| 40 hrs paid a salary | CHOiCE Trust | - | - |
| Private sector | - | ORUDE Jinja farmer extension | WASDA (CAHWs) |

2.3 Official opening remarks



Willie Tuimising, Team Leader Practical Action in Eastern Africa on behalf of the Regional Director had the following opening remarks to make:

While reviewing the project, it is important to include a critical analysis of the “*process*”. Reviewing the project “*impact*” in isolation would deny the stakeholders the rare chance of capturing significant lessons that could be used to inform the logic for a subsequent phase.

With official funding for public service provision dwindling by the day, the CBW approach continues to gain currency. By and large, it is becoming a significant and cost-effective mode of service delivery for the bulk of rural communities. These auxiliary workers, whatever their specialisations, are generally more affordable and penetrative to where the needs are. As a result, the project should identify, seize, develop and exploit available (*and potential*) opportunities both spatially and temporally to advance this cause.

It was appreciated that the pilot phase involved CBW in two sub-sectors: Animal Health and HIV-AIDS. Subsequent phases should be try and be as holistic as possible. This is because of the encouraging results from the first phase and the fact that people’s lives are not compartmentalized. The more the project can answer to the diversified aspects of people’s lives, the greater and more sustainable the livelihood impacts would be. The project should therefore design a more integrated approach in the next phase.

The subsequent phase should also proactively do an analysis for gaps amongst various CBW cadres with a view to devising appropriate capacity building mechanisms. Their commendable work notwithstanding, CBWs requires constant skills-upgrading to achieve some congruence with current knowledge trends locally and internationally.

The place and role of technology pursuant to CBW service delivery needs to be understood, appreciated and enhanced. This revolves around information collection, exchange, dissemination; tools of trade; data management; etc. The next phase of the project should make a conscious effort to address the same.

Invariably, CBWs have immense household responsibilities yet their work is meant to be mainly voluntary. The project should pay greater attention to issues of motivation and fitting compensation for this cadre. Practices vary greatly in the region. These range from occasional monetary rewards, grain supplements to seasonal livestock donations or even regular/monthly stipends. Beneficiary communities are normally instrumental in deciding the *modus operandi*. It is therefore critical that an agreed system of compensation for CBWs is agreed.

Whatever style CBW takes, matters of sustainability remain paramount. The next project phase must critically analyze the current CBW models (while thinking of new and better ones) for sustainability. While it is recognized that the CBW approach is viable, the pillars of sustainability must be well understood, grounded and duly institutionalized. Lessons abound within the Greater Horn of Africa as well as Southern Africa that we can learn from.

This already exists for some CBW sectors. However, others are still viewed as unnecessary entities, eg *quacks* in the Animal Health sector in Kenya!. All subsequent project phases must work hard on demystifying and de-stigmatizing these important community agents of change and for the public sector to see them as complementing rather than replacing the

technical side of animal health care . This would call for popular publicity campaigns, substantial advocacy and policy activism.

The project must standardize its definition of “the poor”. Across the board, the different stakeholders may hold different conceptualizations. It would then be tricky to develop targeting standards; track and compare progress against goals/objectives in all regions.

It is also important for the project to embrace “*less conference talk and more grassroots action*” as it continues to evolve , ie ‘Grass-rooting and Ground-truthing. Resources and activities should increasingly be partitioned in favour of communities at household level.

Holding ourselves accountable should innervate all of our work. We must be accountable to both the donor/s and the targeted beneficiaries we aim to serve. In addition, we all must rise to the challenges of ethics and professionalism in whatever we do.



Workshop participants in group session

3 Workshop presentations

Two presentations were made by implementing agencies – Environmental Liaison Centre International (ELCI) and Practical Action (PA). Thereafter, the consultant who had undertaken the evaluation of the pilots gave the preliminary findings from the study. Participants took note of the issues that arose out of the presentations. Plenary discussions were held after the presentations.

3.1 Advocacy community change and communication

James Oduor, ELCI-ABC coordinator outlined their work. The ELCI-ABC project addresses the issues surrounding HIV/AIDS and affecting members of the fishing community. The organization was formed at a time when many organisations were struggling to bring awareness on the pandemic. It all started out when 10 young people were trained and later participated in roundtable discussions along the Kisumu beaches. The target for attendance at the time was 500 but the actual turnout surpassed by 90 attendants.

These roundtable discussions brought out the various issues surrounding HIV/AIDS affecting the community. A new project was initiated with a regional scope from the roundtable initiative. A lot of issues that were raised centred on the formulation of policies and factors affecting the economy and health of the target group hence the birth of JABOYA project. The JABOYA project aimed to increase regional awareness and lobby for reproductive rights.

The 10 young people who at the time were active in the field felt the need to come together and were registered, giving rise to ABC Kisumu. Currently, there are 50 CBWs regionally (around Lake Victoria). 16 CBWs are in Kenya, 20 in Uganda and 14 in Tanzania. This has made it possible for them to fundraise and maintain sustainability.

The challenges experienced by the organization are:

- Genuineness of volunteerism;
- Level of commitment by CBWs;
- Compensation of CBWs;
- Lack of clear guideline on formulating policies within the organisation;
- Delivery of community's expectations;
- General suspicion towards NGOs and CBOs by community members;
- How to provide motivation to the Cows.

In conclusion, there is need to avoid politics although the government departments can be quite supportive and resourceful.

3.2 Community Based Animal Health Workers - Practical Action in Eastern Africa

Gregory Akall, from Practical Action in Eastern Africa provided a brief outline of their work involving CBWs. Practical Action has trained and worked with Community-based Animal Health Workers (CAHWs) in northern Kenya over the past 10 years. In these areas, veterinary services are not easily accessible despite these communities' heavy dependency on livestock for their livelihoods. The CAHWs were trained to provide basic animal health services to pastoralists within the *manyattas* (homesteads).

Additionally, an Ethno-veterinary Knowledge-based (EVK) project was introduced. This is one example of a community-based worker system initiative where pastoralists in Marsabit, Turkana and Samburu districts are engaged as traditional medicine (healers) on animal diseases. The pastoralists therefore largely utilise herbal medicines as they are more accessible and affordable to the local communities. The project worked well and saw the validation of some of the herbs for treatment of worm infections in sheep by the veterinary department.

Currently, Practical Action is engaged in ensuring that these CAHWs access relevant manuals and receive refresher training on an ongoing basis. Indeed, the CAHWs were instrumental in 2006 during the implementation of the post-drought livestock recovery project where they assisted veterinary officers in a mass livestock treatment campaign conducted in Baragoi and Kirisia divisions of Samburu districts. PA is scaling up CAHWs services to neighbouring countries including Southern Sudan, Uganda and Ethiopia. An innovative addition to this project is the introduction of loan provision to CAHWs to set up drug stores. PA has ensured that the CAHWs work is effective through setting up these drug stores and to the provision of loans to ensure that they sustain themselves beyond the funded project.

CAHWs are involved in disease surveillance together with the veterinary department in the districts. They provide services for a fee which is either paid in cash or kind. The CAHW service delivery is however not legally recognized in Kenya.

3.3 Findings from the Evaluation of Community-Based Worker Systems in Kenya

Tom Omurwa of ALMACO consultants presented on the recent concluded evaluation of CBW systems in Kenya. AIMACO was commissioned by the National Steering Committee to evaluate the CBW pilots that had been testing one or more of the 5 models outlined above (see table 2.2). The objectives of this evaluation were to establish:

- whether the CBW system is effective and having an impact on people's livelihoods;
- whether the CBW system is cost-effective as a form of service delivery;
- what seems to have been good practice in running of the CBW system and;
- assuming that overall the CBW system has proved cost-effective, what are the broader institutional, policy and advocacy implications.

It also aimed to look at the impact and cost-effectiveness of the CBW pilots (models selected), including sustainability potential, the lessons learnt from the pilots for mainstreaming CBW systems into service delivery, and if cost-effective, how to influence policy and practice to support such models of service delivery.

3.3.1 Approach and methodology

The approach used was both quantitative and qualitative research methodology to gather data that would inform the evaluation objectives. Both primary and secondary data was collected using key informant interviews, focus group discussions and review of records. A visit to each of the three pilot sites was conducted and a sample of CBWs of each pilot project was interviewed through key informant interviews and focus group discussions. A sample of beneficiaries was also interviewed, some through face to face interviews and others in Focus Group Discussions (FGDs). Representatives of the Facilitating agents (FAs) were interviewed and so were selected government officials. Existing data and information

was gathered through literature reviews. In addition, members of the CBW secretariat were also interviewed.

The implementing agencies visited were:

- Kibera community self help project (KICOSHEP)
- Wajjir South Development Association (WASDA)
- Environmental Liaison Centre International (ELCI) –ABC Kisumu (Jaboya project)

3.3.2 Effectiveness and Impact

As far as effectiveness and impact of the pilots was concerned, table 3.3.2 summarises the findings:

Table 3.3.2 Summary of CBW pilots effectiveness and impacts

| Organisation | Findings |
|---------------------|--|
| KICOSHEP | <ul style="list-style-type: none"> • Beneficiaries are now confident to reveal status • Stigma has drastically reduced (there is openness to speak about HIV & AIDS) • Increased utilization of VCT services • Improved health status of households • CBWs have acquired new skills (training) • CBWs have initiated Income Generating Activities (IGAs) (some earn up to Ksh 300/= per day), the road to sustainability approach <p><i>“Our lives have changed extremely for the better for all of us...Some of us were ailing most of the time with no medicine, but now we are no longer sicklings and our health is very steady... The caregivers mostly go an extra mile to bring drugs to us”.</i></p> |
| WASDA | <ul style="list-style-type: none"> • Availability and accessibility of services (e.g. water and veterinary drugs) • Decision making has become participatory and localised • Gender sensitization in the community • Accessibility to services like water and drugs • Availability of facilities • Linkages to other Institutional services • Closer services to the community • Replication of ideas • Trained skills in management of resources • Improved livelihood (monetary gain) • New opportunities |
| ELCI | <ul style="list-style-type: none"> • Life skills for youth improved • Increased awareness of HIV/AIDS transmission (community) • Increased condom use • Negative cultural beliefs changing (increasing focus on girl child) • Increased utilization of health services |

3.3.3 Cost-effectiveness/Cost Analysis

Limitations of the CBW system of service delivery

- CBW models are evolving and therefore lack “competing” interventions
- Lack of clearly defined and measurable effects for example in Home-based Care; compliance versus improved well-being

3.3.4 Cost Analysis

A cost of sustaining HBC services for 10 CBWs is stated in table 3.3.4 below:

Table 3.3.4 Cost of sustaining 10 CBWs

| Type of cost | Monthly cost | One time cost |
|--------------------------|---------------|----------------|
| Salary per month | 10,000 | |
| HBC kit | | 70,000 |
| Technical training (CBW) | | 102,000 |
| IGA training (CBW) | | 1,800 |
| Stipend | 1,000 | |
| Running costs | 2,000 | |
| Communication | 500 | |
| Food allowance | 1,000 | |
| Transport | 300 | |
| Food(client) | 500 | |
| Total(Ksh) | 15,300 | 173,800 |
| Total(US\$) | 219 | 2,483 |

The ABC project invests Ksh.948 (\$14) to reach one person with appropriate HIV/AIDS messages.

Table 3.3.4 Success of the CBW approach

| Organisation | Successes |
|-------------------|--|
| KICOSHEP | <ul style="list-style-type: none"> • “Freelance model”; non-specific • Linkages to other support agencies • Potential for sustainability |
| WASDA | <ul style="list-style-type: none"> • Community participation in program implementation. • Realization of rights • Referral of services • Acquisition of skills through training and involvement • Improved revenue collection and management of facilities. • Rapid responses • Existence of structures in the Community e.g. committees. • Good linkage to professional services • Participatory approach - changing from trickle down effect to bottom-up approach: - Improved community decision making and advocacy. • Defined roles of CBWs |
| ELCI: ABC Project | Round table training strategy – communities ‘participate’ in generating ideas for advocacy |

3.3.6 Challenges of the CBW system

- Evolving nature of CBW systems/ interventions
- CBW interventions not 100% independent
- Lack of/inadequate documentation
- Lack of/inadequate information of past experiences (Research??)
- Sustainability (continuous challenge)

3.3.7 Recommendations

1. Need to “tag” research to CBW interventions (Research intervention strategies)
2. Cost-effectiveness analysis (CEA)
3. Define desired effects/impact of the intervention
4. Focus on other factors (sustainability, indirect costs etc)
5. Identify fairly stable (non-evolving) models
6. Document and share emerging best practices
7. Establish “How to” guidelines based on best practices

3.4 Plenary Discussion - Issues emerging from presentations

1. The reason why the government has failed to participate fully in CBW work is because they see the system as not cost effective. However the government needs to do more to improve the CBW service delivery system.
2. A cost benefit analysis of the CBW system should be carried out
3. It is essential to integrate HIV/AIDS programmes in the CBW system and there should be a linkage in the HIV/AIDS national policy.
4. Participants could not have emphasized more on the importance of partnering with government and other stakeholders to enable realization of the systems objectives. Institutions like the MoLFD and the NACC should be involved fully
5. Issues should be looked at in a sectoral way
6. A standardized definition of a CBW would help clear the differences that exists
7. Different regions have different levels of resource endowment and questioned how the CBW system would come in to seal this gap.
8. Efforts being made to clear the conflict between practitioners of herbal and conventional medicine are not adequate. Policies to address issues surrounding use of herbal medicine should be formulated.
9. Kenya Agricultural Research Institute identified how research systems in farming had neglected involvement of the local farmers and that systems developed are being rejected by farmers because they are not involved at the initial stages of development. It was thus vital to involve the community members at all phases of projects
10. What are the best modalities to motivate volunteers?
11. How can the CBW system be sustainable?
12. The various institutions need to work properly to avoid collapse of the CBW system
13. Comparative study should not only focus on comparing like elements.
14. The evaluation should have revealed the costs incurred to train a nurse versus costs incurred to train a CHW and a comparison of the length of training covered by both workers.
15. Documentation and research should be enhanced through linkage system

It was clarified that isolation was not used during evaluation. It was challenging to isolate impacts of the evaluation with the different structures operating and how changes in each system were linked.

4 Group work and presentations

After the presentations participants were divided into 6 groups to discuss the key research questions that have guided the CBW action research project to date. The groups were formed in a voluntary manner, with participants choosing a group where they have good understanding and or interest. Each group was given a group task, prepared in advance and outlining the task to be performed. General tasks included; choosing a chairperson, a secretary, and a rapporteur to take notes and present back to the whole group. The presentations were engaging and lively. Workshop organisers went round all the groups to clarify issues and provide assistance where necessary.

The six groups were:

- Group 1: Appointment, accountability, management and involvement of the community
- Group 2: Coordination of CBW systems
- Group 3: Reward systems for CBWs
- Group 4: Roles and linkages required
- Group 5: Support and supervision
- Group 6: Training

4.1 Appointment, accountability, management and involvement of the community



Examples of current practice were identified. General consensus was that the community is responsible for hiring and laying off CBWs. Currently, various types of hiring techniques are utilised, namely self appointment, community appointments, nomination by community leaders, FBOs appointees and appointment through professional bodies. Layoff of CBWs is done by excommunicating or dismissal after evidence of misconduct has been presented to leaders. However, the group recommended that *a proper committee should be set aside to make fair decisions on the matter.*

With regard to selecting and appointing CBWs the group noted that appointments should be *based on merit when considering workers for crucial projects.* There is also a *need to hire multi-skilled workers.* It is important to *consult the community on the level of skills required before making appointments.* This can also be used to monitor performance of workers.

The reason why CBWs do not deliver services as per expectation is due to lack of a cultural fit. It is thus *essential to ensure that the workers generally share language and understand the culture of the community.* Other factors considered relevant while appointing CBWs include, *past experience, considering referral's opinions and social connectivity.*

The CBWs are currently held accountable by their sponsors (FA) or donors. However, more needs to be done to *ensure transparency and accountability. Regular monitoring and evaluation of performance of projects at hand is essential to ensure continuity, positive change and that challenges are addressed as they arise.*

The community's management and involvement role is currently centring on designing of projects and sourcing of funds. It is however, sad to note that this is being done by a few

mobilized groups and that the community engages in fewer roles after projects have been launched.

Recommendations:

1. The community should be involved at all levels from identification of problems and viable projects to monitoring and evaluation.
2. It is important to empower the community to fundraise for themselves so that they have a sense of ownership.
3. All members of the community should participate in the selection of the committee members including their heads.
4. Sustainability can be achieved through encouraging members of the community to part with a small fee to ensure repair of damaged tools and continuance of use.

4.2 Coordination of CBW systems

Different types of community-based workers in Kenya include:

- Community-based animal health workers
- Farmer extension workers
- Community-based distributors of contraceptives
- Home-based care givers
- Youth counselors like NACADA
- Vigilante groups involved in community policing.



The community-based workers are currently coordinated through various means:

- the administrative chiefs through *barazas* (public meetings);
- traditional institutions;
- Village development committees and local CBOs.

Most associations of CBWs are registered by the government through the Department of Social Services. In addition the District Steering Group (DSG) is charged with the responsibility of coordinating and regulating development of communities at the district level. DSG also audits CBOs/NGOs activities. In addition to the above DSG engages in building partnerships with relevant stakeholders to increase development interventions. The levels of coordination of CBWs should start from the village, the sub-location, the location, the division, and then to the district or constituency levels.

Recommendations:

1. An association at the village level such as that of a community parliament – KADET should be engaged in discussing matters centring on rights, ethics and formalization of CBWs.
2. Coordination should be stretched to the constituency level where Community Development Funds (CDF) can facilitate the structuring of the systems.
3. Civic education should be offered for better governance of the system.
4. Logistical problems such as funding and sustainability of projects should be addressed in depth.
5. Coordination of structures that allow for transparency and accountability should be emphasized.

4.3 Reward systems for CBWs

It is very disappointing to note the manner the CBWs are being rewarded for their support and hard work. Currently rewards are given through allowances while most CBWs are categorized as volunteers. CBWs do not have a predictable system of receiving payments and so the efforts of CBWs are mainly motivated by personal commitment as opposed to other incentives.

This matter should not be taken for granted as the quality of work can easily deteriorate if the matter is not addressed seriously. Both monetary and non monetary rewards should therefore be considered. The funds for rewarding CBWs should be sourced from community contributions, grants, and donations at whatever level and government bodies.

With regard to policy formulation and modification, there is a great need to create policies to facilitate access to funds by CBW systems. The CBW systems should also be developed to a level where they have access to loans from the various financial institutions. Political goodwill would play a big role to ensure that the above factors are addressed.

Recommendations:

1. Allow CBWs to take home some home-based care supplies
2. Give first priority to CBWs when job opportunities arise through new projects within the community.
3. Recognize CBWs who have performed well.
4. Train CBWs on versatile skills so that they are equipped to grab opportunities as they arise.
5. Address the issue of offering incentives to CBWs

4.4 Roles and linkages required

The community is charged with the role of identifying problems, coming up with viable projects to address these problems, mobilizing groups to see to it that the project is successfully implemented as well as partnering with relevant groups to ensure their goals are met. However most communities are not empowered to identify their own problems and to come up with viable solutions. Currently the roles of CBWs are needs based and there is no interrelation between roles.

The Community Development Assistants also carry out the role of identification of projects, suggesting viable projects and mobilizing groups as government workers at the community level. On the other hand, ward committees go beyond identifying problems and projects, they advocate for the allocation of funds and other resources by the government e.g. LATF.

Recommendations:

1. Employment of other community-based service providers should be regularised to allow identification with the community
2. CDAs have an equally important role and should be trained on how best to work with the community
3. CDAs terms and conditions of employment should be addressed to achieve job satisfaction and motivation among them
4. Structures in which ward committees work under should be modified to allow for transparency and accountability
5. Members of ward committees should be continuously trained to avoid obsolescence.

6. Look into partnering with agencies such as VSO Jitolee, UNV, Ministry of Labour and Human Resource Development, UNGANA, NAVNET, Community representatives, Ministry of National Planning and Ministry of social services.

4.5 Support and supervision

Support to CBWs is offered through training, financial aid, donation of materials and simply moral support. Supervision is ensured through a non-elaborate system of monitoring and evaluation and this is provided through progressive reports, review meetings and accounting as well as auditing. Training is provided through individual training of trainers, workshops and exchange visits. Financiers include NGOs, MFIs and FBOs. Essential materials are usually provided by individuals, churches, government programmes and corporate bodies. It was noted that the government provides moral support through chiefs and the District Officers. Other bodies like community groups, the corporate sectors and FBOs also offer the same.

Recommendations

1. Professional training should be offered.
2. Mentoring programmes should be put in place to facilitate learning
3. The system of assessing those who have been trained should be improved.
4. More financial support should be provided.
5. The government should allocate more materials through better partnership efforts.
6. Develop more forms of monitoring projects

4.6 Training

It was noted that CBWs only receive informal training. This training is neither standardized nor accredited. Monitoring of the training of CBWs is done by the following:

- Health care service providers
- Ministry of Livestock and Fisheries Development /Department of Veterinary Services
- Donors, including NGOs and CBOs
- Community leaders
- Others such as, the Catholic Church, ECK, KHRC, IED.

Recommendations

1. Training of CBW should embrace more techniques other than seminars and practical trainings. The training system should be standardized and accredited. Tests and certification should be included.
2. Training of CBWs should be up-scaled and diversified
3. CBWs remuneration should be addressed to motivate more people into the field in addition to regulating and providing versatile skills.
4. Standardize and accredit training offered to CBWs
5. Offer progressive training that encompasses innovative learning

5 The Way Forward – Vision of the CBW system in Kenya

The major issues to be addressed by this session were:

1. How to take forward lessons learned and mainstream them within the CBW system in Kenya?

Participants identified the need to develop a strong coordination unit to champion the course. The CBW NSC needs to broaden and widen the network – bringing in other key players in the CBW system. It needs to draw on critical government departments as identified in the working groups. The process also needs to draw crucial lessons learned so far and sharing them with CBW systems beyond the natural resource and HIV sectors. Further, the NSC needs to work with donors to identify sources of funding for further focusing on this subject matter, for example, by focusing on broad areas that affect the CBW systems: e.g. governance, social security sectors etc.

6 Closing Remarks

The workshop was officially closed by Patrick Mbullu with a recap of key points emerging from the presentations and discussions. He also highlighted on the remaining work that is needed to complete the project successfully. These included:

1. Need for national regulatory framework/guidelines on CBWs training, support and supervision
2. Recognition of CBWs as a critical cadre of service providers providing important services in needy communities
3. Emphasis on monitoring as an intermediary intervention to check back with communities if the CBW is giving them feedback
4. Policy and legislative framework on incentives - how can CBWs access some of the available resources e.g. LATF/Constituency Development Funds to pursue their objectives and activities?
5. Need to scale up the system through similar workshops to identify good practice.

The following specific deliverables are required beyond this workshop

- Production and dissemination of the workshop report
- Completion of the evaluation of pilots report with cost-effectiveness and impact assessment
- Final country report - drawing on the initial in-country report, evaluation of pilots/cost-effectiveness and the workshop this national workshop report
- 4-country workshop to share findings and discuss mainstreaming the CBW system (March/April 07) in Uganda
- Developing and producing guidelines for implementing CBW systems (looking for potential donors)