Findings from CHV Study

A DAY IN THE LIFE Observational Study







The objective of the DAY IN THE LIFE ethnographic study is to observe CHVs interactions with their designated community in the context of their daily life. Trained researchers followed and observed them through a typical day. The researchers aimed to understand the routine and typical activities of the CHVs in their natural environment gaining insight into their needs, behaviours and pain points.

graphic study is to observe CHVs interactions wit



Methodology

We used the DAY IN THE LIFE ethnographic research method of trailing and taking note of the participant's general activities and routine through a typical day



per day following and observing each CHV



in total following and observing each CHV 4 CHVs

observed in total

Tools

used to gather information: • Observation guide • Notes, • Photos and • Video recordings

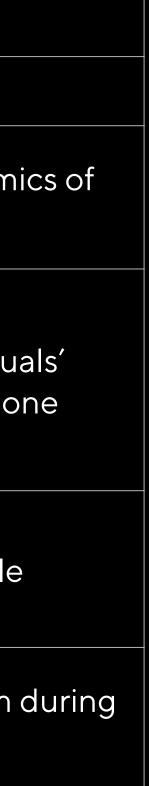
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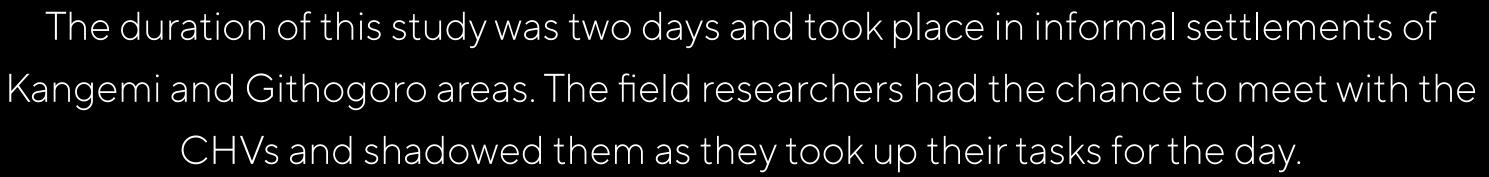
Observation Guide

Category	Includes	Researchers should note
Location	Where they work;how do they get there?	
Verbal behavior and interactions	Who speaks to whom, how and for how long;who initiates interaction;language used	Gender, age, profession of speakers and dynamic interaction
Physical behaviour and gesture	What people do , who does what, who interacts with whom, who is not interacting?	How people use their bodies and voices to communicate different emotions ;what individua behaviors indicate about their feelings toward on another, their social rank, or their profession
People who stand out	Identification of people who receive a lot of attention from others	The characteristics of these individuals;what differentiates them from others;whether people consult them or they approach other people
Work dynamics	What tools do they use;are there repetitive tasks/ routines they follow? Which colleagues do they interact with; how do they interact?	Anything that they use to record or guide them d their work





Point to note is that the on both days the CHVs showed up and worked in pairs.





Kangemi

The CHVs performed their tasks between 11AM to 3.30PM CHVs walked from door to door collecting data from community members to find out the following:

- How many people have health insurance
- How many people have been vaccinated
- Whether pregnant mothers were visiting clinics for prenatal care
- Whether contraceptives are being used for family planning

In the case that members of the community were reluctant about seeking these services, the CHV would educate and encourage them to seek them.



Nancy and Michael with a community member



Kangemi

- The CHVs would approach them in context to make the community members comfortable, for example if they found a group of women washing clothes, they would offer to help before proceeding to ask them questions based on the form she needed to fill.
- They used vernacular or Kiswahili language to communicate with the community members.
- It was notable that community member felt more comfortable with the female CHV compared to the male CHV.
- Community members recognised the CHVs and would approach them.
- CHV spent 10 to 20 minutes interacting with members of each household
- Most of the community members that the CHVs interacted with were women between the ages of 20 years to early 30s
- The CHVs highly regarded the community members privacy.





A day in the Life of NANCY

Name: Gender: Age: Profession: Place of work: Nancy Gichana Female 26

Community Health Volunteer

Kangemi Health Centre

Nancy would like to help improve the wellness of people in her community and is motivated by being able to "do her part".

Wake Up Prepares for the _____ work day including having breakfast

Commute

Travels to Kangemi Health Centre for her CHV duties via public transport (Matatu)

Work

Nancy split ups from her colleague to cover her designated community unit of 30 households in a month.

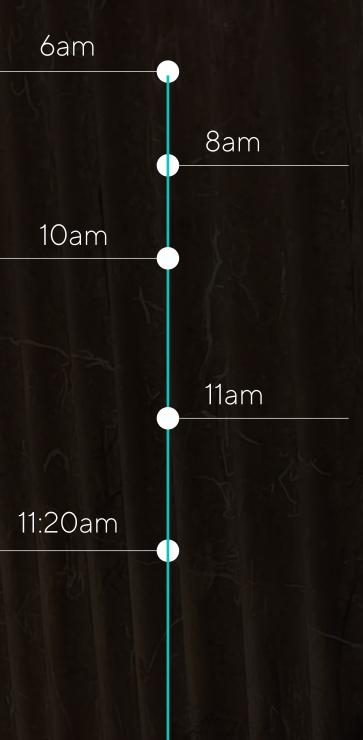
She walks with her copy of the MOH514 ledger, blank note papers and a pen.

She walks up to a group of people, introduces herself and engages them with questions from MOH514.

She speaks to about 10-15 people in a day.

Sleep

She goes to bed to rest in order to do it all again the next day



Side Hustle

She starts the day with errands and makes time for secondary income generating activities

Meet Up

Convenes with colleague, chitchats as they walk to their designated community (Waruku)

Lunch

3:30pm

4pm

5pm

She calls it a day. Depending on her disposable cash, has lunch with her colleague

Home

She walks home which is in the wider Kangemi area

Wind Down

She freshens up, prepares supper and gets some quality time with family

10pm





A day in the Life of MICHAEL

Name:
Gender:
Age:
Profession:
Place of work

Michael Kimani Njenga Male 52 Community Health Volunteer - Team Lead Kangemi Health Centre Sits on the board of a local committee that helps to empower young girls in Kangemi. He also runs an electronics shop in Kangemi.

Wake Up Involved in family morning activities Heads to Work

Only 2km away, Michael walks to work or gets there by motorbike

Work

Michael split ups from her colleague to cover his designated community unit of 30 households in a month.

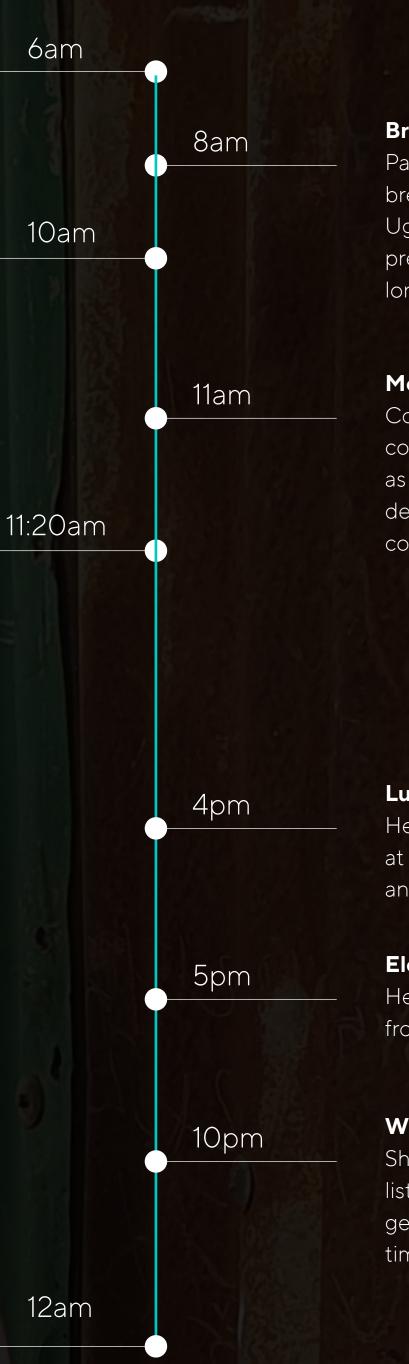
He walks with his copy of the MOH514 ledger, blank note papers and a pen.

Compared to his female colleague, he is more straightforward and it takes him a while for people to warm up to him

He spends about 10 to 20min speaking to members of each household

Sleep

Rests in order to do it all again the next day



Breakfast

Partakes in a heavy breakfast such as Ugali or Rice in preparation for the long day

Meet Up

Convenes with colleague, chitchats as they walk to their designated community (Waruku)

Lunch

He walks back home at the end of the day and has his lunch

Electronic Shop

He works at his shop from 5pm to 10pm

Wind Down

She freshens up, listens to music and gets some quality time with family



Githogoro

The CHVs performed their tasks between 2PM to 4PM CHVs are given their weekly route plan by the CHA and they walk door to door. Whilst at the community members homes, they would find out the following:

- Whether children getting assistance from the different NGOs and bursaries are still in school.
- Whether persons living with HIV have visited the clinic for a top up of the antiretrovirals.
- Whether nursing mothers are attending antenatal clinics and if the children are up to date with their vaccinations.

Should an issue need escalation, the CHV called the CHA directly and sought advice and informed the community member that they will be back with the feedback received .



John with a community member at his home



Githogoro

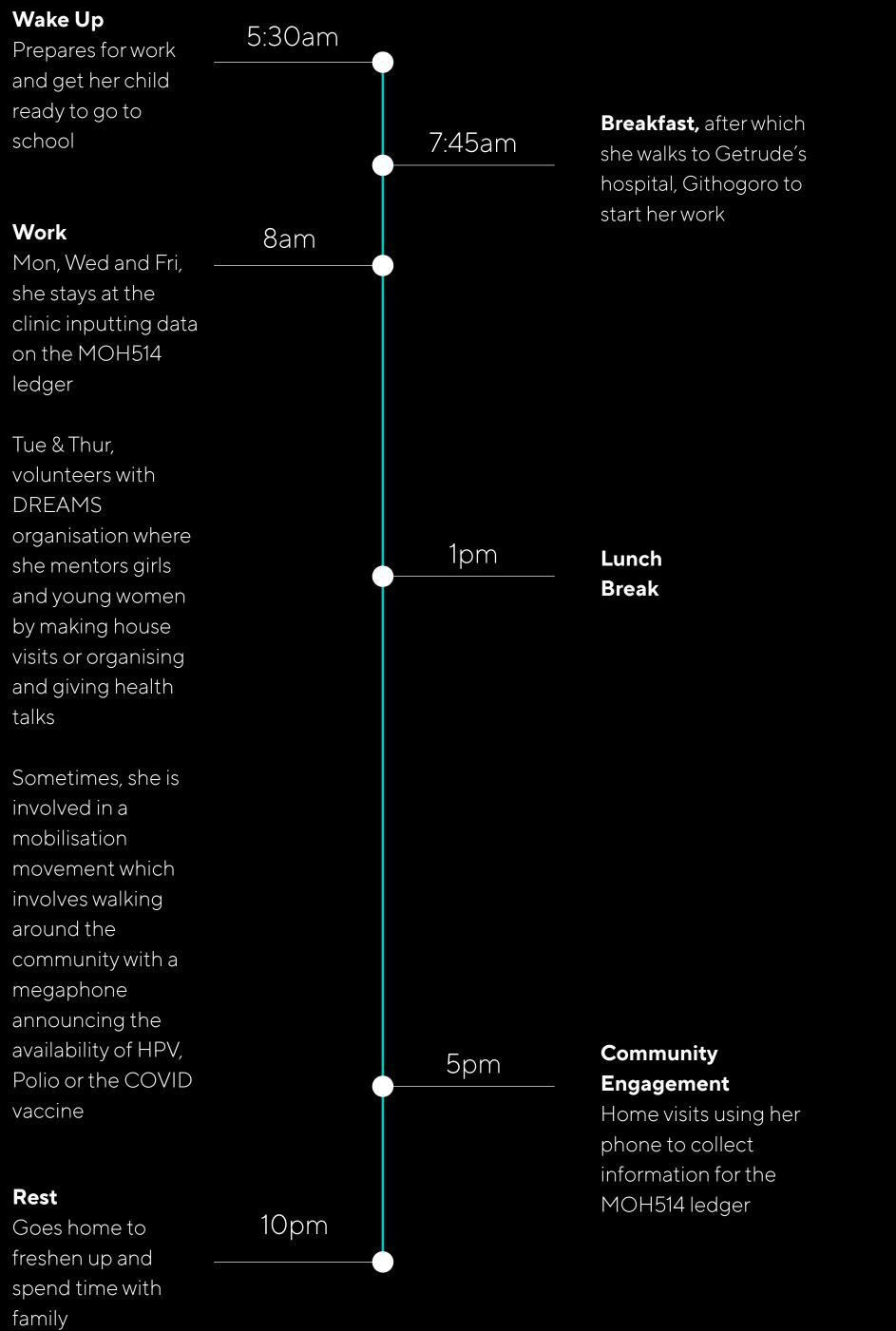
- The CHVs were well known and recognised and you could see them interacting with community members as we walked through the community.
- Some community members would enquire about certain services that they would be expecting. For example the Covid-19 vaccine, when it would be available and where.
- The CHVs would follow up on the issues that had been raised from previous visits to see if the community member took up the interventions recommended to them
- They did not walk around with any files as it would draw attention from community members to think that they are bringing some form of aid to them. So they took notes on their phones and transferred them to the reporting tools at the health facility.
- The CHVs did not get to visit a lot of households. During this day there was a team from SHOFCO (Shining Hope for the Community) that was at the area holding a meeting where most of the residents are members.
- Most of the community workers are casual labourers. They are out during morning. hours and tend to be back in the evening.





A day in the Life of HELLEN

Name:	Helen Wanjugu Mazitoh
Gender:	Female
Age:	37
Profession:	Community Health Volunteer
Place of work:	Githogoro
	She is involved in meeting every need that the community could have e.g
	she helps sign up needy children for bursaries (school fees) through the
	area MCA's resources and leadership.

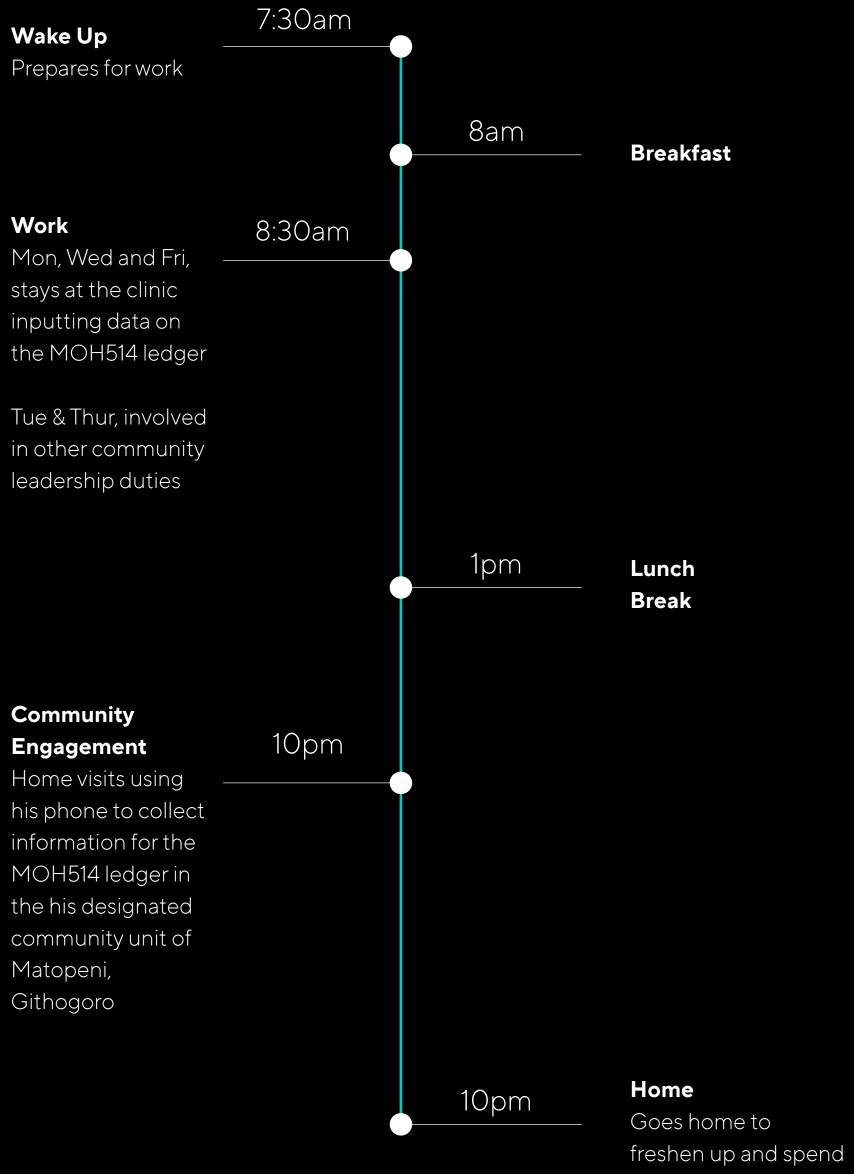






A day in the Life of JOHN

Name:	John Kinge
Gender:	Male
Age:	29
Profession:	Community Health Volunteer
Place of work:	Githogoro
	Also involved heavily community activities and leadership



time with family



We conducted a retrospective with the field researchers after this field visit, and no challenge had been encountered . The CHVs were very collaborative and had no problem with the field researchers accompanying them. We moved on to the next part of the observation study because we didn't experience any blockers.

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Challenges

1

Most of the community members are casual labourers. They are out during morning hours and tend to be back in the evening. Hence not available during the day.

2

There is no compensation given to the CHV and many times they have to facilitate for some of their community members to get services out of pocket e.g Hospital visit at Gertrude's hospital is KSh.100 per visit. Which makes them frustrated.

3

During the rainy season it is difficult for CHV to maneuver in the community due to muddy footpaths and they are not supplied with rain gear to help them navigate during these times.

4

CHV very often carries out her work without taking any break, which affects the quality of work towards the end of the day as they are exhausted

5

CHV do not have any identification card which makes it difficult for people to trust them with their information as they cannot properly support their identities as CHVs.



Notable Findings

- According to the CHVs the HPV programme has not been highly prioritized in their tasks. However they informed the parents who had children of age about it as well as the girls and referred them where to get it.
- We did not actively see the CHVs perform any task specifically regarding the HPV.



John and Helen walking through the community.



From this study we were able to validate the role and mandate of CHVs, their work dynamics and the level to which they engage with the community members regarding the HPV programme. It has come out clearly that HPV programme has not been prioritized and that there is opportunity for more engagement with the programme.

The CHVs play a very important role on how information is relayed to the community members and if well equipped they could greatly improve the uptake of the HPV programme.



Appendix, Links

<u>CHV, Kangemi</u>

<u>CHV, Githogoro</u>

