



Community Healthcare Workers *are health workers*

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Community healthcare workers

- CHWs have long been recognised to be an important part of a primary healthcare system.
- Disease prevention, health promotion, and linkage to and retention on care are at the core of the CHW programme.
- The development of a strong CHW cadre is a fundamental component of the HIV response.

- Fast tracking of the implementation of National policy on CHW's is key.
- Total absorption of CHW's by government, not NGO's,
- Standardized and graded remuneration of CHW's
- Learn from KZN CCG mode, its good but not even closer to perfect.
- There are many good lessons that could be learned from current NGO's who are managing CHW's on what works and what is not.

The CHWs should be split into facility and community based teams who should offer a selection of services depending on where they are based.

Facility based CHWs

- Understand HIV and TB fully to offer up to date prevention and treatment literacy information based on latest guidelines – and offer HIV and TB education in facilities;
- Promote HIV testing at a facility level and offer information to help reduce risky sexual behaviour;
- Provide linkages for those using the facility to counselling and support services;
- Provide lay HIV and initiation counselling and enhanced adherence support services;
- Facilitate scaled up facility-based support groups and adherence clubs;
- Provide basic mental health assessments in particular for people living with HIV facing treatment fatigue, depression and other mental health challenges;
- Ensure people who access HIV treatment keep taking it, following up with those who default, and notifying community based CHWs about ART defaulters to support tracing efforts;
- Providing community based CHWs with information about those enrolled on TB treatment at the facility in order to assist contact tracing of those with TB.

Community based CHWs

- Understand HIV and TB fully to offer up to date prevention and treatment literacy information based on the latest guidelines;
- Promote HIV testing and offer information & provide commodities to help reduce risky sexual behaviour;
- Promote and provide HIV self-testing kits and/or finger prick tests to marginalised and hard to reach communities not currently accessing health services through the clinic (missing men), linking those who gain positive results to facility services;
- Provide lay HIV and initiation counselling and enhanced adherence support services, including through home visits and through facilitating scaled up community-based adherence clubs;
- Provide treatment home delivery, delivery to adherence clubs, and other fast track models of treatment collection and care to people on ARVs in order to relieve the burden on facilities and to increase adherence levels;
- Provide basic **mental health assessments** in particular for people living with HIV facing treatment fatigue, depression and other mental health challenges;
- Ensure people who access HIV treatment keep taking it and engage in defaulter tracing;
- Trace people with TB or who are close to people with TB and ensure that they have access to, and take, treatment effectively.

Support Systems for CHW's

- Relevant tools of trades, real time data collections.
- Uniform and name tags
- Backpack, gloves, mask, bandages, pain block and other relevant medication
- Supervision
- Mental support and debriefing sessions.
- Quarterly checkups for TB and other airborne diseases



Thank You