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NIGERIA PREVENTION AND ORGANIZATIONAL SYSTEMS - AIDS CARE AND TREATMENT PROJECT



Photo by Gwenn Dubourthoune

STRENGTHENING THE HEALTH WORKFORCE FOR IMPROVED HIV SERVICE DELIVERY: THE SHARE STRATEGY

Background

Increasing access to life-saving health services, including HIV testing and counseling and antiretroviral therapy (ART) for people living with HIV/AIDS (PLHIV) continues to be a global priority as we strive to achieve an AIDS-free generation. In Nigeria, as a result of significant investments over the last two decades through the United States President's Emergency Plan for AIDS Relief (PEPFAR), HIV services for PLHIV have been rapidly expanded, ensuring access to free testing and counseling services, antiretroviral drugs (ARVs), and laboratory support services that are essential to their enrollment in treatment and follow-up.

The provision of high quality HIV/AIDS services is largely dependent on the availability of a qualified and trained health care workforce in sufficient numbers, in the right

ABOUT PRO-ACT

The Prevention and Organizational Systems - AIDS Care and Treatment (Pro-ACT) project is a seven-year project (2009-2016) funded by the United States Agency for International Development (USAID) and implemented by Management Sciences for Health (MSH) in five Nigerian states: Niger, Kwara, Kebbi, Sokoto, and Zamfara. Pro-ACT strengthens the capacity of Nigeria's public, private, and community sectors for sustainable HIV/AIDS and TB prevention, control, care and treatment integrated within the health system.

SERVICES PROVIDED BY VOLUNTEERS

- HIV testing and counseling
- Adherence counseling and support
- OVC care and support
- Data entry
- Defaulter tracking
- Peer support group meeting facilitation
- Home visits



Photo by MSH

Home visit by a Community Volunteer

place, at the right time. Further, adequate and highly motivated human resources for health (HRH), supported by appropriate training, are critical to ensuring effective linkages across the HIV services continuum of care.

The Prevention and Organizational Systems – AIDS Care and Treatment (Pro-ACT) project, funded by the United States Agency for International Development (USAID) and implemented by Management Sciences for Health (MSH), strengthens the delivery of comprehensive HIV/AIDS prevention, control, care, and treatment in five states in Nigeria. In their efforts to roll out comprehensive HIV/AIDS services, MSH observed a number of HRH-related barriers including:

- inadequate human resource (HR) capacity of all cadres of health care workers (HCWs),
- frequent transfer of trained HCWs requiring the identification and training of new HCWs,
- poorly remunerated and unmotivated HCWs resulting in low staff morale,
- inadequate infrastructure, and
- an embargo on recruitment of staff by partner state governments.

Inadequate human resources led to poor clinic flow systems, overburdened HCWs, long waiting times for patients, stigmatization and discrimination of PLHIVs by healthcare workers, and poor quality of services.

To address these challenges, MSH developed and implemented the Supporting Health Workforce Action, Retention and Engagement (SHARE) strategy with the aim of strengthening HRH capacities at partner health facilities to ensure the delivery of quality and comprehensive HIV services.

Approach

The SHARE strategy was designed to bridge gaps in human resources in order to adequately meet service demand. The key component of SHARE was the development and initiation of a robust volunteer program in 2009. MSH recruited highly motivated volunteers to support service provision at partner health facilities. The need for community-based volunteers was advertised during community outreach activities, such as PLHIV peer support group meetings at partner health facilities, and special events such as World AIDS Day. Individuals who showed interest were invited to submit their applications to designated points of contact at the health facilities. A team comprised of facility staff and MSH technical officers was tasked with reviewing and shortlisting potential candidates for various positions. Shortlisted candidates were then interviewed to determine their motivation, suitability, and availability.

Intervention

Selected candidates were provided training in various areas, including HIV testing and counseling, adherence counseling, Positive Health Dignity and Prevention, defaulter tracking, and service data entry. After the trainings, the volunteers participated in facility level orientation sessions on the MSH integrated service delivery strategy, their relationship with healthcare workers, reporting lines, expected service provision, and quality standards. To ensure continuous on-the-job coaching and mentoring, each volunteer was supervised by a trained health care worker in the hospital unit where

they were deployed. Each volunteer was provided with a scope of work, which was adapted to the needs of their unit. MSH provided the volunteers with a nominal monthly stipend of US\$120 to cover transport costs and lunch during work hours. Each volunteer worked an average of 30 hours per week.

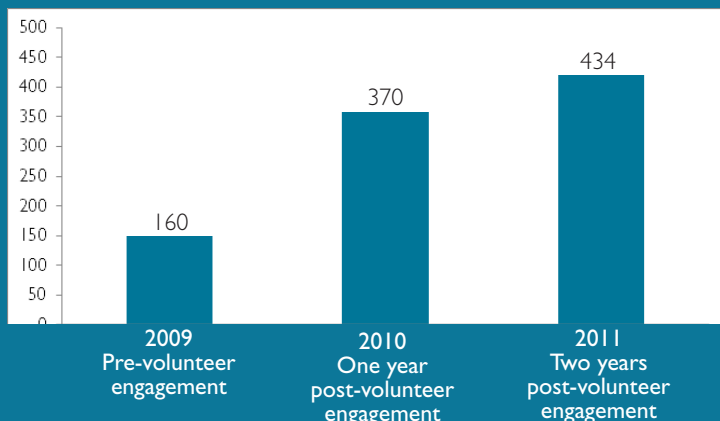
In recognition of their commitment and service over the years, each volunteer was given a certificate of award in 2014. During the award ceremony, MSH used the opportunity to showcase the significant contributions of these volunteers to senior health managers, state ministry of health officials, the state AIDS agency, and representatives from the civil service commission.

Demonstrating the contribution of the volunteers to HIV state response entities encouraged partner facilities to employ some of the volunteers as ad hoc staff. MSH also recruited some of the highly performing volunteers as full time employees; this was a key motivating factor for other volunteers. MSH also supported the development of an HR directory which details the experience and qualifications of each volunteers. The HR directory of trained staff in each focus state will serve as a key resource for making evidence-informed HRH management decisions. It was also shared with the state ministry of health officials.

CHILDREN SPECIALIST HOSPITAL (CSH) CENTRE IGBORO, KWARA STATE

The average monthly uptake of HIV testing and counseling (HTC) services at CSH Centre Igboro significantly increased as a result of the volunteer cadre between 2009 and 2011, as depicted below.

Average monthly HTC uptake at Children Specialist Hospital Centre Igboro, Kwara state



Results

Through the Pro-ACT project, 281 volunteers were recruited, trained, and deployed in five states in Nigeria. From our experience, the most effective volunteers are those who are highly motivated, have strong links with the host community they serve, and are regularly supervised.

Through the work, support, and dedication of the volunteers, Pro-ACT achieved the results outlined in Figure 1 between 2009 -2014.

FIGURE 1. OVERVIEW OF RESULTS



924,253 adult clients counseled, tested and received their results with support from volunteers



93,821 pediatric clients counseled and tested with support from volunteers



267,069 women counseled, tested and received their results with support from volunteers



8,317 clients who defaulted and were tracked back to care by the volunteers

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Lessons Learned

The use of volunteers to extend access to HIV/AIDS services proved to be an effective approach to bridge HRH gaps. The following are key lessons learned through the SHARE experience:

- Volunteers are easily identifiable from within the host communities and can deliver results if adequately trained and mentored
- Volunteer capacity can be developed in relatively short periods of time to relieve the burden on HCWs in high-client-volume health facilities
- Volunteers usually live within the host communities and understand the context to better respond to challenges of service provision and needs of clients
- Volunteers also work to ensure universal access to HIV care by minimizing "missed opportunities" often encountered in health facilities
- Volunteers can be highly cost-effective compared to similar services provided by higher-level service providers based at health facilities

8 TIPS FOR ENGAGING AND MAXIMIZING THE IMPACT OF VOLUNTEERS

1. HRH capacity gap and needs analysis
2. Targeted advocacy and consultation with partner facility management, PLHIV peer groups, and community leaders
3. Structured selection process to identify highly motivated individuals and PLHIVs
4. Ongoing capacity development
5. Health facility-level orientation
6. On-the-job coaching, mentoring, and performance evaluation
7. Stipends and non-financial incentives, e.g., recognition awards
8. HR directory of volunteers

The following key recommendations, based on the SHARE experience, can optimize and expand the use of volunteers to address HRH challenges and extend access to HIV/AIDS services:

- **Advocacy** – Develop a series of compelling advocacy briefs that profile the crucial role volunteers play in expanding access to HIV prevention, care and support services.
- **Develop an operational framework** – Articulate a guideline for engagement of volunteers. Guideline should clearly define their roles, job descriptions, capacity building opportunities, and reward system such as financial and non-financial incentives to ensure long term retention in the program.
- **Financial support** – Volunteer programs need long term stable financial support from government at the national and sub-national levels to operate and manage the programs and to provide nominal financial and non-financial incentives to the volunteers.
- **Generate more evidence to demonstrate impact** – More research will be needed to clearly demonstrate to government at national and sub-national levels, the impact and contributions of volunteers in the delivery of HIV prevention, care and support services.

Conclusion

Pro-ACT has successfully demonstrated that strengthening HR capacity through the use of community-based volunteers can optimize uptake of HIV testing, care, and treatment services in resource constrained settings. Through their dedication and work, the volunteers have played a crucial role in expanding access to HIV prevention, treatment, and care in Pro-ACT focus states. To ensure sustainability of the SHARE strategy in Nigeria, there is a need to develop a comprehensive policy framework that is supportive of volunteer programs, and that ensures adequate support for volunteers to deliver interventions that have been proven to be effective. ■

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