

# The inSCALE project

# Developing and implementing interventions to improve community health worker motivation and performance

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## Background

TREATMENT

- Community health workers (CHWs) fill
  an important human resource gap
- CHWs operate at scale to provide health education/promotion and deliver integrated community case management (ICCM).
- Training and deployment follow MOH guidelines and policies
- Barriers to sustained implementation at scale include high attrition rates, low motivation and infrequent supervision

DIAGNOSIS

PREVENTION





RESEARCH







Aims to identify best practices and test innovative solutions to the main barriers to ICCM implementation at scale:

- CHW motivation
- Supportive supervision of CHWs

DIAGNOSIS

- CHW performance

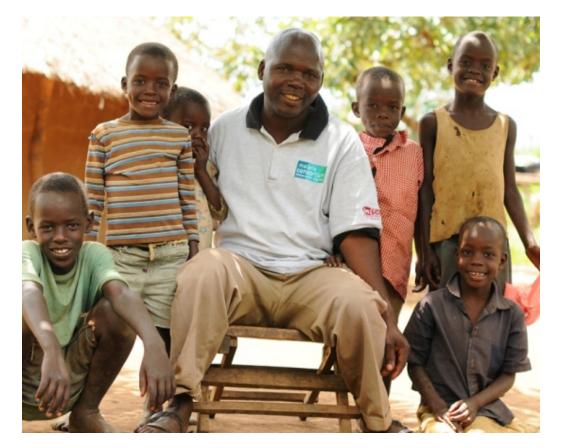
PREVENTION

- More appropriate treatment of sick children
- Randomised controlled trial in Uganda (Village Health Teams VHTs) and in Mozambique (Agentes Polivalentes Elementares -APEs)

TRFATMENT



### inSCALE Goal



To demonstrate that government led ICCM programmes in 2 African countries can be scaled up to 33% of the districts, resulting in at least 50% of children in these districts accessing standard case management for diarrhoea, pneumonia and malaria

#### PREVENTION

DIAGNOSIS

TREATMENT

RESEARC



### **Implementation Research**

#### **Formative Research**

➢To assess the views of CHWs, their supervisors, community members and key programme implementers on impact, feasibility, acceptability of promising intervention components

#### **Process Evaluation**

➢Key informant interviews with CHWs and supervisors on whether the interventions were taken up, done so as planned and had an impact

#### **Endline Survey**

Impact evaluation- did interventions impact on CHW performance and motivation and appropriate treatment of children

PREVENTION

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### Interventions



Technology based intervention

Community based intervention

Mozambique and Uganda

Uganda

PREVENTION

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