



The inSCALE project

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

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Background

- 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



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Innovations at Scale for Community Access and Lasting Effects

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

- CHW motivation
 - Supportive supervision of CHWs
 - CHW performance
 - **More appropriate treatment of sick children**
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- Randomised controlled trial in Uganda (Village Health Teams – VHTs) and in Mozambique (Agentes Polivalentes Elementares - APEs)

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

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

Interventions



*Technology based
intervention*

Mozambique and
Uganda



*Community based
intervention*

Uganda