

GOVERNANCE, DECENTRALIZATION, AND UNIVERSAL HEALTHCARE

A QUALITATIVE STUDY OF COMMUNITY HEALTH WORKER PROGRAMS IN THE PHILIPPINES

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BACKGROUND

Community health worker (CHW) programs are an important resource in the implementation of universal healthcare (UHC) strategies in many low- and middle-income countries¹⁻⁴. CHWs are often individuals' first point of contact with the health system⁵⁻⁶. However, in countries with decentralized health systems the quality and effectiveness of CHW programs may differ across settings due to variations in resource allocation and local politics⁷⁻⁸.

What are community health workers?



Community health workers are community members trained in basic healthcare delivery that provide primary healthcare services to their local communities¹⁻⁴.

CHWs in the context of the Philippines



In the Philippines' decentralized healthcare system CHWs are often the front-line of healthcare delivery¹². Recent legislation was passed institutionalizing UHC in the Philippines and CHWs play an important role in its implementation¹³.

What factors influence the success of CHW programs



Governance factors, such as local, regional, and national politics, policies, and resources¹⁻⁴, as well as sociocultural and individual factors, such as CHWs' motivations, gendered norms around care, and socioeconomic status⁹⁻¹¹, impact the success of CHW programs.

The objective of this research was to explore the governance of CHW programs and lived experiences of CHWs in a decentralized health system and examine the structural and individual-level factors that influence the operations of CHW programs.

OBJECTIVE

FINDINGS

LIFE CYCLE FACTORS

All CHWs except one were female. 74.3% of participants were 40-69 years old, 47.3% had college/vocational college education, and 39.2% of participants had high school education.

CARE & SOCIAL CAPITAL

Individuals were motivated to be CHWs by their desire to care for their communities. Being patient, compassionate, respectful, dedicated, and approachable, as well as having trusting relationships with the community, were seen as key to the CHW role. Social capital played an important part in recruiting CHWs, with many related to or acquainted with those who recruited them.

HUMAN & FISCAL RESOURCES

CHWs' remuneration and workload varied by region depending on the barangay's budget. Non-governmental organizations (NGOs) and individual CHWs also influenced resource availability.

TRAINING LENGTH & PROVIDER

Although there were common types of training provided, length, fees, training providers, and the availability and frequency of supplementary training varied between regions. NGO training often supplemented basic training provided by the local government.

LOCAL POLITICS

CHWs were employed by different levels of government. The positions of CHWs who were employed solely at the barangay or city level were often dependent on their support of the current local political leader. This enhanced their precarity and impacted administrators' ability to provide training.

"Young people don't want to be trained without an allowance."

"It's not about the salary, it's about compassion and care."

"They would like to add more CHWs for the loads to become easier, lighter, but [...] there's no allowance. That's the problem."

"I asked for a budget but they said that there is no budget [...] so I will [continue to] ask [...] I will try, I will try, I will try."

"Fortunately they were trained by [an] NGO [...] about those diseases and how to assist."

"Job security is relative to your political stance."

THE WORDS OF COMMUNITY HEALTH WORKERS IN THE PHILIPPINES



Study location

- Negros Occidental
 - 15 barangays across 3 cities
- Negros Oriental
 - 21 barangays across 3 cities

METHODS

We conducted 85 semi-structured interviews with CHWs (n=74) and administrators of CHW programs (n=11) in two provinces in the Philippines. We used thematic analysis to analyze data.

DISCUSSION



Relying on individuals' motivations to care for others as a way to recruit and retain CHWs may create vulnerabilities that impact the sustainability of CHW programs and their effectiveness in implementing UHC in the Philippines.



The implementation of CHW programs can be obstructed by health system decentralization through the uneven operationalization of national priorities at the local level.



There are opportunities for CHW programs in the Philippines to enhance collaboration with non-state actors in the short term while leveraging the ability of a decentralized health system to allow for contextual and responsive healthcare delivery by CHWs in the long term.

REFERENCES

1. Tulenko, K., Mgedal, S., Afzal, M. M., Frymus, D., Oshin, A., Pate, M., Quain, E., Pinel, A., Wynd, S. & Zodpey, S. 2013. Community health workers for universal health-care coverage: from fragmentation to synergy. *Bulletin of the World Health Organization*, 91, 847-852.
2. Gilmartin, C. 2017. Community Health Workers: A Priority for Universal Health Coverage? *Management Sciences for Health*.
3. Perry, H., Crigler, L., Lewin, S., Glenton, C., Leban, K. & Hodgins, S. 2017. A new resource for developing and strengthening large-scale community health worker programs. *Human Resources for Health*, 15, 1-3.
4. Scott, K., Beckham, S., Gross, M., Pariyo, G., Rao, K. D., Cometto, G. & Perry, H. B. 2018. What do we know about community-based health worker programs? A systematic review of existing reviews on community health workers. *Human Resources for Health*, 16, 1-17.

5. Kok, M. C., Broerse, J. E., Theobald, S., Ormel, H., Dieleman, M. & Taegtmeier, M. 2017. Performance of community health workers: situating their intermediary position within complex adaptive health systems. *Human Resources for Health*, 15, 1-7.
6. Zulu, J. M., Kinsman, J., Michelo, C. & Hurtig, A.-K. 2014. Integrating national community-based health worker programmes into health systems: a systematic review identifying lessons learned from low- and middle-income countries. *BMC Public Health*, 14, 1-17.
7. Kok, M. C., Kane, S. S., Tulloch, O., Ormel, H., Theobald, S., Dieleman, M., Taegtmeier, M., Broerse, J. E. & De Koning, K. A. 2015. How does context influence performance of community health workers in low- and middle-income countries? Evidence from the literature. *Health Research Policy and Systems*, 13, 1-14.
8. Lehmann, U. & Gilson, L. 2013. Actor interfaces and practices of power in a community

- health worker programme: a South African study of unintended policy outcomes. *Health Policy and Planning*, 28, 358-366.
9. Glenton, C., Scheel, I. B., Pradhan, S., Lewin, S., Hodgins, S. & Shrestha, V. 2010. The female community health volunteer programme in Nepal: decision makers' perceptions of volunteerism, payment and other incentives. *Social Science & Medicine*, 70, 1920-1927.
10. Maes, K. & Kalofonos, I. 2013. Becoming and remaining community health workers: perspectives from Ethiopia and Mozambique 11. Swartz, A. & Colvin, C. J. 2015. 'It's in our veins': caring natures and material motivations of community health workers in contexts of economic marginalisation. *Critical Public Health*, 25, 139-152.
12. Sumaylo, D. J. F. 2013. Information Delivery in the Provision of Barangay Health Services in Barangay Dawis, Digos City, Philippines. *Journal of Asia Pacific Studies*, 3, 86-109.

13. WORLD HEALTH ORGANIZATION. 2019. *UHC Act in the Philippines: A new dawn for health care* [Online]. World Health Organization. Available: <https://www.who.int/philippines/news/feature-stories/detail/uhc-act-in-the-philippines-a-new-dawn-for-health-care> [Accessed].

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