Community health volunteers: bridging the gap between knowledge and action

Community volunteers help to increase reproductive, maternal and newborn health knowledge in communities and promote timely service utilisation.

In remote communities, strong referral systems help to bridge the gap between village and health centre by connecting people to important services. As trusted and respected figures, community volunteers can help referral systems to operate smoothly by positively influencing health seeking behaviours among community members. With sufficient resources and support, volunteers can help to spread accurate health information and equip community members with the knowledge of when, where and how to access care.

Partnering to Save Lives (PSL) collaborated extensively with community volunteers in remote communities in Kratie, Mondul Kiri, Ratanak Kiri and Stung Treng to facilitate behaviour change communication (BCC) activities. In particular, PSL collaborated with:

- Village Health Support Group (VHSG) leaders who facilitated health education sessions and home visits, and were an important point-of-contact for community members who wanted health information;
- Traditional birth attendants (TBAs) who educated women about safe RMNH practices, made referrals for services in health facilities and accompanied women on these visits;
- Community-based distributors (CBDs), who distributed short-term family planning methods and some reproductive health advice within the community;
- Listening and Dialogue Group (LGD) facilitators, who led regular LDG sessions that combined pre-recorded audio programs with group discussion about RMNH issues. Some LDG facilitators were also VHSGs.

PSL supported community volunteers by providing training on reproductive, maternal and newborn health (RMNH), facilitation skills and job aids (materials such as audio recordings, flip-charts, activity cards and more for use during health education activities). PSL coordinated monitoring and supervision visits by health centre staff in communities, and organised regular meetings and peer exchange opportunities between volunteers.

“When VHSGs go to educate them [women] at home, they always follow their advice... [The women] understand more.”

Discussion group participant, Stung Treng province

Credit: CARE
Community volunteers were a valuable source of referrals that helped to increase RMNH service utilisation. To continue supporting their roles into the future, PSL recommends to:

- Continue supporting VHSGs to build their knowledge of RMNH and group facilitation skills.
- Build CBDs’ knowledge of long-term and permanent methods of family planning to enable comprehensive advice for clients.
- Explore opportunities for VHSGs to be included as a formal cadre of healthcare worker in Cambodia with clear job descriptions (including RMNH activities) and appropriate government salaries or performance-based incentives.
- Monitor the progress of current policy discussions with the Ministry of Interior for sub-national authorities to support VHSG activities. Where appropriate, advocate for VHSG activities (meetings, monitoring activities, transport allowances and reward and recognition incentives) to be included in sub-national budgets.

### Lessons learned

Community volunteers play a valuable role in improving communities’ health awareness and making referrals for important RMNH services. PSL identified the following lessons:

- The effectiveness of community health education sessions can be amplified with joint facilitation from community volunteers and health centre staff (for example, midwives) who can respond to audience questions as they are raised.
- Collaboration between community volunteers, health centres, local authorities/commune councils, operational districts (ODs) and NGOs also enables stronger referral pathways and opportunities to support each others’ work, for example, community volunteers can help with data collection in the community and report back to health centres.
- When engaging with vulnerable groups, such as adolescents, persons with disabilities and ethnic minorities, community volunteers may have established relationships and trust, which can enable open dialogue on potentially sensitive RMNH topics.
- Community volunteers who speak ethnic minority languages can help to ensure that health information and referrals reach these more vulnerable groups. Furthermore, if the volunteer is of the cultural group that they are working with, they are well placed to address cultural barriers to care seeking and healthy behaviours.
- Regular support for community volunteers helped to improve their confidence, for example, via the provision of job aids (flip-charts, audio, flash cards) and monitoring visits. Radio broadcasts, which were intended for a primary audience of community members, had the dual benefit of refreshing volunteers’ knowledge of RMNH.

### Recommendations

In selected PSL-supported health centres:

- **30%** of surveyed RMNH clients were referred by a VHSG
- **11%** of surveyed RMNH clients were referred by a TBA
- **20%** of RMNH clients from an ethnic minority group were referred by a TBA
- **22%** of RMNH clients from an ethnic minority group were referred via a community group


Community volunteers are trusted voices in their communities and PSL’s results showed that they can improve RMNH referrals and service utilisation. Embedding the role of community volunteers within health education, awareness raising and referral systems is an enabling strategy for improving use of RMNH services. The next challenge will be finding sustainable solutions for funding the activities of community volunteers and adequately recognising their role within the health system.

Credit: Save the Children