

HOUSEHOLD MODEL VISIONING

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Community Health Workers in Harper, Liberia gathered for a half day of presentations and discussions about the health of their community, their working patterns, and their goals. The goal of this event was to familiarize the Community Health Workers (CHWs) with new information about their own work and the burden of disease in their communities. This was a day meant to facilitate critical thinking about how their program can improve according to the health needs of the community and their own needs as CHWs.



I was not able to be in Liberia during the fellowship due to COVID-19, so for this event we had the CHWs gather at a distance at Tubman University while I facilitated the presentations over Zoom on July 22, 2020. A total of 48 CHWs and five CHW-supervisors gathered and the Community Health Nurse and other administrators were present.

This event could not have happened without the ground coordination from Bendu V. Sannoh, a Senior Social Protection Officer with Partners In Health (PIH)-Liberia, and Caroline Doe, the Community Nurse with PIH-Liberia. The realization of this event is owing to their time and effort. Additionally, the surveys could not have been conducted without the CHWs themselves, and the results could not have been analyzed without the work of Emmanuel Howe, one CHW who input the responses to a computer. Lastly, the global PIH-Liberia team, namely Miry Choi, Matthew Hing, Lee Hair, Lassana Jabate, and Daniel Palazuelos, contributed greatly to this project, in analyzing the data, helping in the preparation of the presentation and questions, and coordinating with the ground team. I began the day with a presentation that focused on the results from the demographic health surveys of the Harper community and the Time in Motion surveys that the CHWs conducted about their working patterns during the past year. Following the lunch break, we instructed the CHWs to split into groups and discuss two questions that the team and I agreed would facilitate valuable conversations. These questions prompted the CHWs to reflect on what they found surprising in the presentation and how their colleagues and organizations can better support their work. After the discussions, each CHW was sent home with a form to fill out asking them to reflect on what goals they can set for themselves as individuals. The individual and group forms were then scanned back to me and I made infographics to be distributed among the CHWs in order for them to have concrete take-aways and reminders from the day.

This event was most successful in its ability to provide a forum for CHWs to air their concerns and goals for the program and reflect on their own work. The CHWs were able to see different analyses of their work metrics, including how much time they spend on different responsibilities. This information is particularly helpful to understand where more attention is needed and how to better structure the program to ensure best outcomes for patients and health workers.





The day was exciting for both me and the CHWs, as the data I presented was data that I had spent my summer analyzing and the CHWs had never gotten to see the outcomes of these surveys before. It was also especially exciting to get to meet the CHWs and administrators virtually, with whom I had been communicating with and learning lots about through very impersonal metrics. Ultimately, it was heartwarming to see firsthand the extreme care and dedication that the CHWs have for their patients and this program.