IMPROVING HEALTH SERVICE DELIVERY in CAMBODIA









ACKNOWLEDGEMENTS

CARE would like to thank GlaxoSmithKline for their support of this work. Their funds have helped ensure midwives improve their skills, supported the provision of better quality services, provided access to remote communities, and improved links between villages and health centres so children receive the right vaccinations.

CARE would also like to thank the Ministry of Health and its line departments within Koh Kong province for their collaboration in support of this project.

IMPROVING HEALTH SERVICE DELIVERY IN CAMBODIA

Funding from GlaxoSmithKline (GSK) has helped CARE to improve the effectiveness and quality of health services delivered to remote and marginalised villages in Cambodia.

Since October 2012, the project has focused on improving access to and utilisation of health services, particularly in very remote communities. This focused on increasing skills and motivation among frontline health workers – including midwives and community health volunteers who are part of Village Health Support Group (VHSGs) – so healthcare facilities can provide better services.

CARE worked directly with health centre staff to **identify the challenges** they face when facilitating outreach services and **developed support mechanisms** that ensure a more regular, comprehensive and integrated approach to health services. CARE staff have encouraged the sharing of learning among health teams and established stronger links with communities to ensure more people are able to access health advice and services.

CARE's activities have followed specific recommendations made by Ministry of Health leadership and CARE has worked in close consultation with GSK to ensure project activities are in line with priorities.



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GlaxoSmithKline is delighted to be working with CARE in Cambodia to address this important issue. GSK reinvests 20% of the profits that we make in Cambodia into projects to improve the quality of healthcare available to everyone in Cambodia, no matter where they live or their ability to pay. This project to improve the quality of health services in remote and marginalised villages in Cambodia is part of our reinvestment programme. We are delighted to see the results that have been achieved to date. Congratulations to everyone who has been involved.

Deborah Gildea, Director & General Manager, GlaxoSmithKline (Cambodia) Co., Ltd

PROJECT DETAILS

PROJECT OBJECTIVES

- Improve the effectiveness and quality of health services by enhancing the capacity and motivation of health workers to facilitate more comprehensive and integrated services
- Enhance health centre outreach mechanisms to improve access and utilisation of health services, including prevention services such as vaccination
- 3. Advocate with key Ministry of Health partners and stakeholders through leveraging the visibility and successes of project activities to inform future protocols, guidelines and policies

With GSK's support, CARE has been able to positively impact the lives of thousands of women and children in Koh Kong. Building these links

both among health providers and between health centres and the communities they serve helps ensure that these communities will be able to access improved healthcare for years to come.

Stav Zotalis, Country Director, CARE Cambodia



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PROJECT ACTIVITIES

- Training and supervision of midwifes in remote rural communities through on-the-job coaching and cross learning visits to improve their medical knowledge and skills.
- Linking health staff across different facilities through Midwifery Coordination Alliance Team (MCAT) meetings.
- Supporting more frequent outreach visits to very remote communities to provide vital health services.
- Training Village Health Support Group members to share health information with others in their village through regular community health education.
- Linking community members with their local health centre for vaccinations more effectively.
- Facilitating spot-checks on outreach services to ensure these are regular, consistent and offer full supplies of vaccines and medications.
- Conducting meetings with key stakeholders to shire project successes, with the aim of increasing the sustainability of the project by persuading relevant government authorities to support activities such as MCATs and remote outreach in the future.

KEY FACTS & STATS

With the support of GSK, CARE has worked in 62 villages across 12 health centres in Sre Ambel and Smach Meanchey operational districts.

- 59 midwives received mentoring, coaching and cross learning visits to improve the quality of their healthcare services
- 37 health staff received on-the-job training
- 86 health staff received support to participate in MCAT meetings
- 129 VHSGs received training to update their health knowledge and improve their facilitation skills
- 58 villages received spot-checks to ensure the quality of healthcare outreach delivery services
- Close to 6,000 households received educational posters on hand washing to improve hygiene within their families

KEY ACHIEVEMENTS

The project had a number of very positive impacts in its first year and continues to support these health service improvements.

- Over 27,000 women and children were reached through outreach health clinics
- 872 community members who had not accessed healthcare services for two years received treatment and services through regular outreach clinics
- Over 5,000 community members across 62 villages received community health education
- 74% of pregnant women in Sre Ambel operational district received antenatal care services
- 97% of children under 1 year old in Sre Ambel operational district received all vaccinations within the National Immunisation Program for Cambodia



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I would like to express my deep thanks to CARE for this support to address gaps in health programming in Sre Ambel operational district. This effort has accelerated the district's performance, especially in relation to improved health status among community people through a focus on the health of mothers, newborns and children. We hope to maintain our good partnership and cooperation with CARE in this GSK-supported project so we can continue to work together to achieve all of the Ministry of Health's goals.

Dr. Lam Litina, Sre Ambel Operational District Director

CASE STUDY: Improving the quality and effectiveness of maternal health services

GSK funding has allowed CARE to improve the quality of maternal health services in Sre Ambel operational district in Koh Kong by supporting Midwifery Coordination Alliance Team (MCAT) meetings. These provide clinical skills training to medical staff while building links between health facilities to make care and referrals more efficient.

Midwives such as Sokim (pictured) deliver around five babies each month and she says that of these there is usually at least one birth with complications, whether this is a breech birth, post-partum bleeding or other severe issues. This means that approximately 20% of all births Sokim attends require special attention to avoid losing the mother or the child.

Attending MCAT meetings, which started in July 2013, has had a huge impact on Sokim and her work. Each quarter she meets with other midwives and doctors from health centres, referral hospital, operational district and provincial health department in the area, allowing them to share their experiences and discuss best practices with other medical staff. Having the opportunity to build these relationships face-to-face has been key to improving the work of the midwives in the area – Sokim can now seek extra support immediately when problems arise by contacting other medical staff for their input.

MS. HAM SOKIM

Sokim, 26, has been a midwife at Sre Ambel health centre for over a year. After learning the theory of midwifery during her studies, she found that when working in real life she often had practical questions about specific cases that were outside her experience.

When I first started at the health centre, I had no support system to help me as I had no contact with other midwives in the area and no relationship with hospital staff when I needed extra assistance. Now when cases are serious enough to require referral to hospital, I know exactly who to contact and we can provide the right care to mothers much sooner.







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Having discussed the challenges they all face as health professionals at the MCAT meetings, Sokim says the hospital staff have changed their attitude towards midwives from the health centres and are much more keen to work together to provide greater service to mothers in the area.

The MCAT meetings are also providing clinical skills training, allowing midwives to refresh their knowledge and gain a deeper understanding of conditions such as pre-eclampsia, eclampsia and post-partum hemorrhage. Medical staff are keen to update their skills and knowledge and the project has helped by organising quarterly supervisions from the Provincial Health Department, Operational District and Referral Hospital. The supervision gives each midwife one-on-one support while they are working in the health centres and allows them to ask any follow-up questions from the skills training. The supervision team then meet with each health centre chief to provide feedback and suggest areas for further development, encouraging health workers to continuously improve the services they provide.

For Sokim herself, networking with other midwives in the area has helped build her confidence at the start of her career. She has observed that improving her skills has led to better trust among community members and this has resulted in more women going to the health centres to deliver their babies.

The MCAT meetings have literally been a lifesaver for many midwives, helping them to improve their knowledge and support each other to save the lives of mothers and infants. The success of the project has already become known in the area and other operational districts in Koh Kong are asking whether they can implement MCATs for their midwives.

CASE STUDY: Enhancing health centre outreach services

CARE has used GSK funding to support additional outreach services to provide healthcare to very remote communities. In sparsely populated rural areas where communities have to travel long distances to the nearest clinic, accessing basic health services can be difficult. As a result, outreach services, where medical staff provide basic medical care directly in the communities, are vital for helping community members stay healthy.



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During outreach visits, midwives will provide vaccinations to children, monitor the condition of new mothers and pregnant women such as Chhan Chhourn (pictured), and offer contraception services. Health staff offer health and nutrition education, providing vitamin supplements where needed, and tend to minor injuries or ailments. They can help refer patients to the relevant health centre or hospital when they deem it necessary. All of these services are vital to ensure that children in remote and marginalised communities grow healthily and do not succumb to preventable diseases.

These visits also allow health workers to monitor trends and recurring problems so that they can

MRS. CHHAN CHHOURN

Chhourn, 33, and her husband live in Kom Lort, a village which is very remote from the health centre. She is pregnant with her fourth child.

I am very happy the health clinic staff are able to provide outreach health services directly in my village. For this pregnancy I have been able to access ante-natal clinic services to help keep my baby healthy and I have been given iron tablets. I have also received a tetanus vaccination. It is good that the health staff are now visiting my village regularly. Most mothers bring their children to get vaccinations and medicine from the clinic staff and I observed that now there are very few serious illnesses among the children here.





report back on these to the local health centre. This is very important for spotting outbreaks of disease early on and taking action to prevent these, such as providing early treatment for malaria.

For the Boeng Preav Health Centre in Koh Kong province, outreach is a big challenge. Some of the most remote areas that they cover can only be reached via a 6-8 hour boat journey, meaning the occasional visits of health workers are the communities' only access to healthcare. Without support to cover their transportation, staff found it difficult to visit these isolated villagers regularly, meaning children such as Nov Youtha's son (pictured) did not receive vaccinations and illnesses were left untreated. Prior to the project, two villages had not accessed any health services for over a year.

The funding from GSK has made a huge difference to the centre's outreach work. With the food and transportation of

staff covered by the project, they are able to guarantee regular visits to all communities so they have the opportunity to see a health worker at least once every two months. In addition to food and transportation, the project supports health education materials such as key messages flipcharts to help improve community members' knowledge of topics such as nutrition and treatments for common ailments.

The chief of the Boeng Preav Health Centre says that since the project started, the number of children receiving standard immunisations such as tetanus has increased, and he hopes that this will continue to rise. Improving the quality and frequency of the health services available within communities has not only increased the number of people that medical staff are able to reach, but also helped to improve community members' engagement with health workers so that they have better trust and are more inclined to access medical services in the future.

MR. NOV YOUTHA

Youtha and his wife Sun have two young children. They live in Por Boeung village and during the rainy season it would take them eight hours to travel across the forest by boat to reach the health centre.

My family are very happy that this project has provided outreach health services in my village as before travel to the health centre was a big challenge. During health clinics, I have been able to bring my 3-yearold child to get the full course of tetanus injections. Even



if I am busy, I am happy to take the time to visit the clinic and I am very grateful that medical staff will journey to our village. Now we who live in remote areas can access health services to prevent our children from becoming ill.

CASE STUDY: Improving links between health workers and communities so they can better provide health services

With GSK funding CARE has been able to improve health knowledge within villages by working with Village Health Support Group (VHSG) members. This has included building links between these community representatives and local health centre staff for more effective coordination of visits and outreach services.

MRS. MIEN SOTHEAR

Sothear, 33, has been a Village Health Support Group (VHSG) member for the past nine years. Her role is to help educate villagers about health and act as a link between the community and the local health centre.

Before, I worked with small clusters of 10 people to provide education sessions encouraging good hygiene and providing basic health instruction. This was very time consuming it was hard to motivate people to attend and without new training to it was hard to devise what topics to cover. After training I now have the confidence to include more than 30 people in my health awareness sessions and the new training materials have made this much easier.



The project has helped to improve the capacity of local health workers such as Sothear (pictured) by providing training to improve their knowledge and increase confidence when speaking to large groups of people. The new flipcharts and training materials provided make it easier to educate villagers – these have 12 key messages and she aims to deliver one each month. Sessions cover topics such as: the importance of immunisations; symptoms of diseases such as malaria and dengue; vitamins and nutrition; breast-feeding; and the care of minor ailments in children.

The provision of prizes – in the form of practical sanitation items such as soap – by the project has increased the enthusiasm and motivation of villagers attending these sessions as well as contributed to increasing more washing and cleaning by the



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community people. This has made it easier for Sothear to gather people to join in and ensures they learn more by participating in the activities with enthusiasm. Sothear has noticed that as community members' knowledge has increased, they have been more likely to take family members to the health centre when they get sick.

Another aspect of the role of VHSG members is to bring people to receive vaccinations from visiting health workers. Sothear has found that since the project started, outreach visits from the health centre have been much more regular and reliable and as a result the community has much greater trust in these. Previously, she would gather those due for vaccinations but the outreach staff would not always show up, leading many villagers to become angry at Sothear for wasting their time. Now, villagers have increased confidence that the health workers will attend and she has been coordinating her education sessions with these visits to ensure as many people are reached as possible.

Providing a link between the local people and health workers is vitally important to ensure the relevant health centres

are informed about pregnancies, outbreaks of disease and other health concerns within the community which may require medical support. Living within the village and interacting with her neighbours on a daily basis allows Sothear to compile this information more effectively than a visiting health worker and she acts as a focal point for the health centre within the village. The project organises bi-monthly meetings for VHSG members to meet with health centre staff, offering them the opportunity to discuss the health issues faced by their communities and for medical staff to look for any trends that may need addressed.

VHSGs are able to play a vital role within communities by actively encouraging more people to seek the right medical attention when they need it and supporting them to lead a healthier lifestyle. These improved links between communities and health workers have led more people to seek medical support.

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