

Community Health Workers

Over the last fifteen years a number of projects in rural areas and so-called informal settlements have been developing a more appropriate community based health worker. Community Health Workers (CHWs) are non-professional, elected by the community, live in the neighbourhood that they serve and respond to the health needs of their community. Up to this point there has been an uncoordinated approach and different levels of training.

CHWs are necessary because:

- poor socioeconomic conditions cause ill health most health professionals have not addressed these. CHWs are part of the community and experience the same problems and are thus well equipped to promote community organisation to confront the basic causes of ill-health;
- health services available to the rural areas and informal settlements are totally inadequate; and
- CHWs take skills and health knowledge previously held only by doctors and nurses and place them in the hands of the people. Home visiting makes them available and accessible to the community at all times.

This conference made the following proposals:

- CHWs should have a place in a future comprehensive primary health care system;
- CHW projects should be extended to a larger number of communities, with priority given to rural areas and informal settlements. This should preferably be done through non-government structures and not by government;
- CHWs should be accountable to representative local community structures;
- CHWs should be paid;
- There needs to be adequate support and supervision;
- There should be a core curriculum for CHWs with ongoing training appropriate to the needs of their community; and
- CHWs should have career mobility.

We commit ourselves to:

- work with local communities in the extension of CHW projects; and
- assist in training, coordination and support for CHW projects.

We call on government to:

- subsidise CHW projects through representative community based or non-government organisations who will control the funds and be accountable to the community;
- recognise CHWs and develop a supportive referral system;
- reorient health professionals to recognise, support and work with CHWs; and
- recognise the considerable experience of the non-government organisations and communities in this field, and that they should be centrally involved in any future initiatives regarding CHWs.