

Recruitment and training of Community Health Workers- The SEHAT model

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INTRODUCTION

The community health worker (CHW) is the backbone of the SEHAT model. Not only is she responsible for the effective administration of the behavioral intervention but also wholly responsible for patient screening, recruitment and data collection. Thus high quality recruitment and training of CHWs is essential for the smooth functioning of the project. The following document will detail the process used to recruit and train the CHWs.

RECRUITMENT PROCESS

The process of recruitment involves multiple steps. We start by identifying local leaders and stakeholders as channels of communication with the community. Through them advertisement for applications are distributed. We then conducted a screening test to identify potential candidates. Candidates who performed below par are eliminated. The rest are called for a structured interview, where candidates are rated based on various criteria. Then the best applicants in each cluster (1 cluster has 300 individuals between the ages of 35 and 70) are selected for training.

Criteria for selection

Before we delve into any detail about the process of recruiting CHWs, we will in brief explain the selection criteria for a CHW. We have set various levels of importance to a list of criteria. Some criterion are considered absolutely essential while others are considered favorably if satisfied by the CHW. We want to keep the essential criteria at a bare minimum so that we can invite as many applications as possible, and not miss out on women who are really waiting to serve their community and further their learning.

The following four criteria are considered absolutely essential for the CHW:

- Must be an adult woman
- Must reside in the geographical area of the pre-defined cluster for at least a year
- Must have a minimum educational qualification of completing middle school (10th standard)
- Must be able to read and write the local language

The following criteria were considered favorable but not essential:

- Married
- Between the ages of 25 and 40.
- Living in the cluster for at least 3 years
- Completed high school/ under-graduation.
- Have previous experience working in a health care setting.

Thus, the first step in recruitment of CHWs was to establish these basic minimum criteria for the selection of CHWs. The justification for these criteria follows:

1. Woman – The CHW has to be a woman for various reasons. Primarily, it would mostly be women who would have the time for volunteer work in a society where men are the breadwinners of the family. Furthermore, men would not be respected as CHWs as volunteering would be seen as a failure to provide for the family. Also, it would be more difficult for men to gain trust- as they would often have to enter households when the female members would be alone during the day. Lastly, measuring blood pressure and blood glucose would involve close physical contact that might be less acceptable from a man.
2. Geographical requirement – This is essential as the CHW must know her area of work and must be seen as a part of the community. Hence the need for at least a year of residence in the same geographical area as that of the cluster.
3. Marital status – We included this as a favorable criteria as married women in the society are perceived to be more mature and experienced. Their marital status would also enhance the respect she would receive from the community.
4. The other criteria are self-explanatory and don't need justification.

Identifying local leaders

Once the clusters are chosen and defined, we identify local leaders and stakeholders in the community. We identify the ward councilors and approach them with the idea of this project. We seek their permission for conducting the project and request their help in recruitment. Flyers (advertisements) are distributed in the concerned areas through these channels and applications for the position of CHW are sought. (Advertisements- Appendix 1, Application Form- Appendix 2).

A problem we encounter sometimes is the differential response from the various clusters. Some of the clusters are well represented in terms of number of applicants while in others the response can be lukewarm. This differential response of the clusters is usually due to the socioeconomic and educational differences between them. To countervail this pattern, multiple rounds of aggressive advertisements and application seeking are done from the underrepresented clusters, till we receive atleast 4 applications from each cluster. The local ward councilors are especially instrumental in helping locate people in their cluster who would satisfy the recruitment criteria for the project.

Screening test

Once we receive the applications, the next step in the process is to screen these applicants. A written screening test is administered to all the applicants with the intent of screening out applicants with a lack of understanding of basic mathematics, human biology and the local language. The test is usually held over a period of two days at the premises of a local community hall (See picture). The screening test is of 30 min duration and consists of 30 questions, 10 questions each in mathematics, human biology and diet (Appendix 3- Questionnaire). We decided to use a cut off score of 15/30 to screen out applicants. The screening test is based on a template used by another NGO "SughaVazhvu Healthcare" to recruit CHWs. While this test has not been validated, we have anecdotally observed a marked positive association between scores in the test and the quality of CHWs.



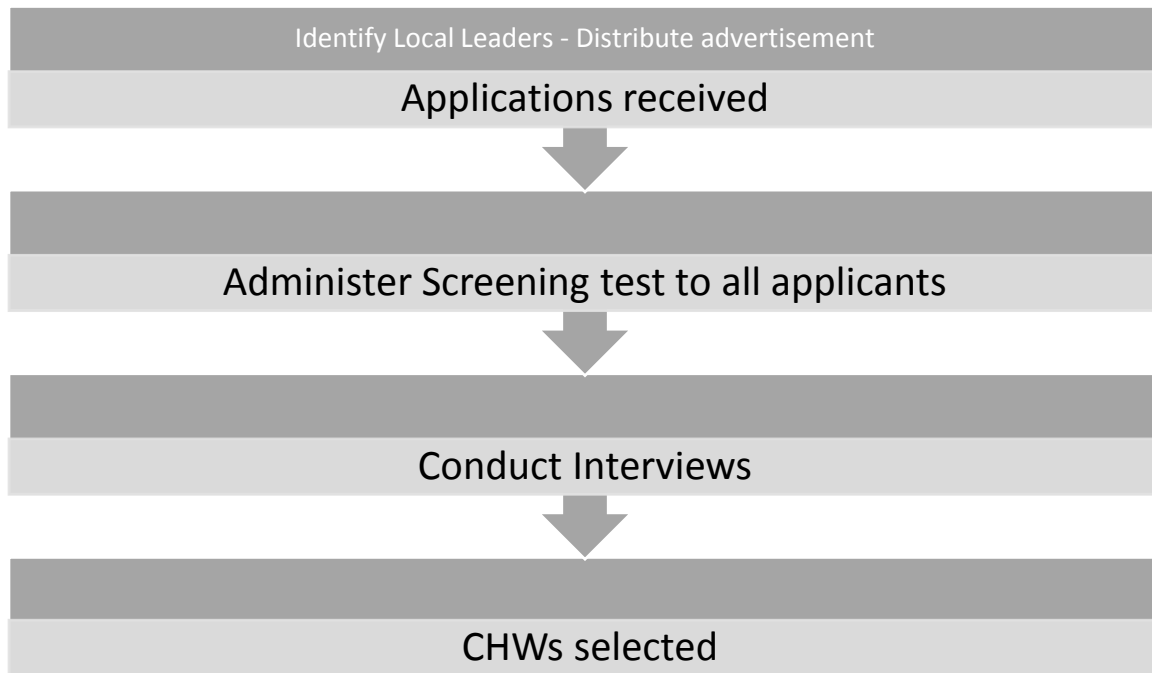
Interviews

The interview is the final step in the selection process of CHWs and is given maximum weightage in the selection of the CHWs. The interviews are conducted by a panel of 3 people. Atleast one of the interviewers has to be from the core team of SEHAT (Aditya or Raghu). The other two are usually given brief training by SEHAT in order to recruit effectively. We follow a structured pre-defined format for the interviews adapted from a format used by “SughaVazhvu Healthcare” (Appendix 4). The rating scale was based on 10 predefined categories with different weights given to each category. An aggregate score was used to rate the candidates.

Hearing the various stories and motivations of so many women is usually a very interesting experience for all involved. It is heartening to see so many women in small towns express interest in learning new things and helping their communities. Some of the candidates are motivated as they have had had people in their family, sometimes multiple male members, die of heart disease and related conditions. A usual common theme is the applicants perceive this as a very honorable job that would earn them a lot of respect in the community. Monetary incentives are usually a secondary incentive for most applicants. The interviews are conducted over a period of two to three days. Some of the things that lead us to view a candidate favorably are an expression of interest in learning new things, prior experience in health care (polio mass immunizations/ Auxiliary Nurse and Midwife(ANM) training) and demonstration of good communication skills. If we are unsatisfied with the quality of applications from a particular cluster, we usually send out a second call for applications and repeat the process till we are satisfied. We believe that spending some time in recruiting the best people available allows a lot of downstream benefits as it improves the quality of care provided, makes training easier and minimizes attrition.

The total recruitment process can be expected to take anywhere between 2-4 weeks.

Process summary



TRAINING

The training of CHWs is a crucial step in the success of the project. The training model has been developed by SEHAT. We have also benefitted from suggestions made by Dr. Anand, Professor of Community Medicine at All India Institute of Medical Sciences, New Delhi.

The training of CHWs is staggered over time with multiple sessions of training and refresher training. This is to ensure that the CHWs gradually ease into their role as health care providers without being overwhelmed. The usual training schedule is as follows:

	COURSE	TIME IN DAYS	TIMELINE
1	Introduction to the project and training for first phase of screening	7	Prior to start of screening
2	Training for second phase of screening and hypertension intervention	7	At the end of screening 1
3	Training for diabetes	7	After 4 months of Hypertension work
4	Training for smoking	7	After 1-2 months of Diabetes work
5	Refresher course	7	1 year since the start of the intervention, and every year after

The rest of the document will detail the first phase of training only, as an example. The rest of the training phases follow a similar pattern. More details of the training process can be found in the SEHAT Trainer's Manual.

The training process is usually started within a week of finishing recruitment. The training can be conducted at a community hall in the town, or any other suitable place. The training is usually conducted by a SEHAT physician with the assistance of a SEHAT CHW supervisor. Each session is typically 3-4 hours long. CHWs are paid Rs. 100 as travel allowance for the training sessions.



Sample training session

We try to incorporate some principles of effective adult learning into the training process. The training is designed to be as practical and hands on as possible. The

training sessions are a group activity and a lot of teaching involves role playing and demonstrations. We use the “teach back” method to confirm understanding of the information being conveyed.

For example, a session on measurement of blood pressure involves a brief lecture on the physiology of circulation and blood pressure with explanations involving real life concepts like pipes and hand pumps. This is followed by a round of “teach back”, where the CHWs repeat these concepts to the instructor. We then demonstrate the correct technique of BP measurement, followed by a round of practicing the correct technique by pairing up the trainees. This might be followed by a role playing session with the supervisor or instructor playing the role of a reluctant and/or ‘difficult’ patient. The topics covered during each session is shown in the table below.

DAY	TOPICS COVERED
1	<ul style="list-style-type: none"> • Introduction to the project – Define expectations, introduce all stakeholders, overview of the project, importance and epidemiology of cardiovascular diseases • Blood pressure measurement – Physiology of circulation and blood pressure, BP measurement technique, significance and interpretation of the BP values, documenting BP
2	<ul style="list-style-type: none"> • Blood glucose measurement – Physiology of blood glucose control, correct measurement technique, universal precautions, significance and interpretation of blood glucose values, documenting blood glucose.
3	<ul style="list-style-type: none"> • Review of day 1 and day 2 using “teach back method” and practice of technique • General topics - Effective communication (introduction to a new person, effectively addressing common concerns), function of CHW as health providers, general discussion of ethical practices, confidentiality and data security
4	<ul style="list-style-type: none"> • Administering the questionnaire – Obtaining consent, Recording data, analysis and discussion of every single question • Practical concerns – Time management, record maintenance, managing resources, coordinating with supervisory staff, troubleshooting equipment
5-6	<ul style="list-style-type: none"> • Full length mock sessions with “volunteer study subjects” with feedback. (See picture) • Equipment distribution
7	<ul style="list-style-type: none"> • Additional training of supervisors



Mock session with volunteer subject

Usually, the most challenging aspect of the training process is teaching good communication skills to the CHWs. While some women are naturally talented at communicating effectively, others struggle with effective communication. We try to be as hands on

as possible in teaching the CHWs to be good communicators. Most of the role play sessions are directed at this aspect of training. We create difficult, reluctant and unpleasant patient scenarios to refine communication skills. These usually prove to be the most fun part of the sessions! The sessions are also usually effective in improving tact and ability to communicate calmly in difficult scenarios.

The training is usually a fun experience for all involved. It is a challenge working with women of different ages with different backgrounds, education and intelligence! However, it is usually gratifying to see great camaraderie develop between the CHW trainees by the end of the first phase of training.



Group photo of a training session

APPENDIX 1- OUTDOOR FLYER FOR RECRUITMENT

Are you interested in delivering healthcare & education to your community?

Join us as a health guide

Health guide: is a local woman who is trained to teach people to adopt healthy habits of living and eating, thereby improving their health. She will especially focus on Hypertension, Diabetes and Smoking which is a silent problem and one of the leading causes of death today. She strives for the well being of each individual with these conditions by providing proper advice on the disease and helping the patient lead a healthy life, thereby controlling the rate of heart disease, early death and other medical problems in the community.

Profile: A woman above the age of 18, ideally a permanent resident of the town.

- 1) A full time worker, willing to dedicate 8 hours a day with madhyamik level competence in basic mathematics and science.
- 2) Fluent in the local language (can speak, read and write)
- 3) Serve a population of about 120 people with Hypertension, Diabetes and Smoking without any discrimination on gender, caste, religion, age and be willing to travel within her basti everyday to make home visits to each of her patients.
- 4) Be willing to work for atleast 2 years.

Honorarium of Rs. 2000 per month with additional phone balance of Rs. 100 every month. Additional bonuses are given during festivals for good quality work.

Roles and responsibilities of health workers:

- Teach patients with blood pressure problems, sugar problems and smoking about the nature of the disease, help them make adjustments in lifestyle which can lead to increased control of blood pressure, control of sugar and quit smoking. This will be done through regular home visits to each patient.
- Encourage people with hypertension and Diabetes to seek care from a doctor and to encourage them to take their medicines regularly.

We aim to treat hypertension, Diabetes and Smoking in a comprehensive, continuous manner by increasing involvement of the local community. The project team comprises of a team of doctors, including doctors from AIIMS, New Delhi and USA who are dedicated to this common cause. It aims to develop capacity in the community to manage these common conditions and empower people with knowledge regarding these conditions.

Application and selection process-

- 1) Application forms can be collected at _____ or by calling _____.
- 2) Completed forms should be submitted at the same place from which the forms were collected by _____, 201_.
- 3) Shortlisted candidates will be called for a written exam and an interview
- 4) Based on the final interview, 1 health guide per area will be selected for 2 years.

APPENDIX 2

APPLICATION FORM

Personal Details:

1. **Full** **Name:**

2. **Date of Birth** (DD/MM/YYYY): ____ / ____ / ____

3. **Name of Ward:**

Ward- _____

4. **Address:**

House/Door Number: _____ House Name (if any) _____

Street Number: _____ Street Name: _____

Landmark (if any): _____

Ward No.: _____

Town: _____

5. **Contact Number:**

Landline/ Mobile: _____

6. **Knowledge of local language:** (Kindly circle the relevant box(es))

• Read • Write • Speak

7. **I am a resident of the Ward for the past** _____ **years**

8. **Why do you want to be a community health worker?**

Declaration by candidate:

- Am willing to serve as a full – time community health worker and dedicate 8 hours of work, 5 days a week, towards the health of my locality.
- Am willing to provide services to all the people of my locality without any discrimination on gender, religion, caste, creed or economic status.
- Am willing to travel within my basti to meet all households and travel to neighbouring bastis at the time of special meetings and trainings.

Name: _____

Signature: _____

APPENDIX 3

Screening Questionnaire

Date: __/__/____

Duration: 30 minutes

Note to Candidate:

A. Fill in all details in Section-1

B. An additional sheet has been provided to you for mathematical calculation

C. Circle the relevant box in Section 2, 3 and 4 for each answer as illustrated below:

1. Uttar Dinajpur is a district in the state of:

- Tamil Nadu • West Bengal • Bihar • Goa

Section 1:

- Name of the Candidate: _____
- Contact Number: _____
- Name of the Area where you reside: _____
- Ward number _____

Section 2:

Part 1: Basic Mathematics

1. High School road has 10 houses with 4 adults, 3 children and 2 teenagers each. What is the population of High School Road?

- 80 • 90 • 74 • 66

2. Class 5 of Bharati Vidya School has 7 girls and 14 boys. 7 boys and 4 girls fall sick after attending an interschool competition. How many healthy students are there in the class now?

- 4 • 7 • 8 • 10

3. 225 women of a village attend a lecture on “Leadership Skills” at the community hall. Post lunch, 75 women leave for personal chores, 24 leave for a Self Help Group Meeting and 16 leave for the Government School’s to attend their children’s annual program. How many women have attended the lecture completely?

- 85 • 100 • 110 • 120

4. If apples cost Rs. 80 per kg, how much would 6 kg of apples cost?

- 300 • 450 • 480 • 500

5. Distribute 75 tablets among 5 households equally. How many tablets does each household receive?

- 15 • 5 • 0 • 13

6. The Panchayat president has identified 25 children from the Government school to participate in the Inter State cultural competition in Uttar Dinajpur. 5 students receive an award in drama, 4 receive an award in folk dance and 7 win an award in singing. How many students did not win an award?

- 7 • 6 • 9 • 8

7. Radha, a health worker, has to complete 8 home visits in a day. She starts her work at 10 AM and completes her duty at 2 PM. How much time can she spend with each house for the visit?

- 20 mins • 30 mins • 15 mins • 25 mins

8. Gowri purchases 6 apples, 4 mangoes, 22 bananas and 2 pineapples from a shop. 7 bananas, 1 apple, 2 mangoes and 1 pineapple turn rotten over the next day. How many good fruits does she have now?

- 22 • 23 • 21 • 19

9. The population of a village is 3650. There are 1456 females, how many males are present in the population?

- 2312 • 2634 • 2194 • 2232

10. There are a total of 350 children in a Government School. 112 take the special class in mathematics, 42 take the special class in Bengali and 26 take the special class in Hindi. How many students have not opted for any special class at all?

- 47 • 126 • 68 • 170

Part 2: Human anatomy

1. Stroke (paralysis) is caused by problem in:

- heart • brain • neck • stomach

2. The organ which pumps and supplies blood to the whole human body:

- Kidney • Lungs • Heart • Liver

3. HIV/AIDS is spread through:

- Consuming alcohol in groups • Sharing food with those affected
- Sexual contact with HIV infected person • None

4. Alcohol affects which organ of the human body:

- Kidney • Lungs • Liver • Heart

5. One disease that increases with age:

- Tuberculosis • Diarrhoea • Malaria • Hypertension

6. One disease that could run in families/ generations:

- Malaria • Typhoid • Cholera • Diabetes

7. Pain in the chest can be due to problem in:

- Kidney • Stomach • Heart • Liver

8. The total number of teeth a full grown adult has is:

- 28 • 34 • 26 • 32

9. The main function of this organ of respiration is to transport oxygen into the human body:

- Heart • Lungs • Liver • Brain

10. Having adequate amount of drinking water on a daily basis, will not lead to:

- Kidney stones • Tuberculosis • Heart attack • Malaria

Part 3: Diet

1. Healthy meal would include:

- Iodized salt • Black Salt • Non iodized salt • All

2. Person with hypertension must reduce in- take of:

- Sugar • Salt • Vitamin C • Wheat flour

3. Green leafy vegetables are rich in:

- Iodine • Fat • Iron • Proteins

4. One must reduce the intake of which of the following in our diet:

- Vegetables • Sugar & Salts • Fibre rich food • Fruits

5. Calcium is good for our teeth and bones. Which of the following is rich in calcium:

- Spinach • Tomatoes • Milk • Guava

6. People with conditions related to the heart, must avoid high quantities of:

- Beans • Apple • Spinach • Butter

7. Those with diabetes must avoid consuming:

- Cucumber • Tomatoes • Bitter Gourd • Potatoes

8. Pregnant women must avoid having:

- Milk • Drumstick leaves • Pulses • Raw fish

9. Which of the following is essential for the aged population:

- Oil • Butter • Calcium • Sugar

10. Limited amount of protein is good for our health. Which of the following is NOT rich in protein:

- Potatoes • Curds • Milk • Spinach

APPENDIX 4

INTERVIEW FORM

Name of the Interviewee: _____
 Name of the village: _____

Name of the interviewer: _____
 Date (DD/MM/YY): ____/____/____

Note to the Interviewer: Kindly refer and administer the Interview Guide for scoring the candidate.

SN	Parameter for assessment	Weight	Score (1-10)
1	Please assess the candidate on her level of confidence and communication skills.	5%	
2	Please evaluate the candidate's level of motivation to perform the role of the CHW.	15%	
3	Please assess the candidate's willingness and ability to spend the time required for the CHW role?	15%	
4	Please assess the value the CHW job/ role holds to the candidate and her family.	15%	
5	Please assess the physical ability and personal health of the candidate to perform the role of the CHW.	10%	
6	Please assess the candidate on her knowledge of her area.	10%	
7	Please assess the temperament and beliefs of the candidate to suit the role of the CHW.	10%	
8	Please assess the problem – solving ability of the candidate.	5%	
9	Please assess whether the candidate has received support and consent from her family to perform the role of the CHW	5%	
10	Please assess whether the candidate suits the profile of the CHW with the help of the criteria.	10 %	
	TOTAL SCORE		