# Perceptions on, and experiences with, supportive supervision of HEWs Reachout providing maternal health services in Sidama zone, South Ethiopia

Nega T. Metasha', Daniel G. Datiko<sup>1, 2</sup>, Aschenak Z. Kea', Elias M. Bunte', Maryse C. Kok<sup>3</sup>

<sup>1</sup>REACH Ethiopia, Ethiopia <sup>2</sup>Department of International Public Health, Liverpool School of Tropical Medicine, United Kingdom <sup>3</sup>. Royal Tropical Institute, the Netherlands

# BACKGROUND

Community health workers (CHWs) play a significant role in health care delivery. CHWs in Ethiopia are known as Health Extension workers (HEWs) and are key actors in providing maternal health care in rural communities. Access to quality health services is greatly influenced by the performance of CHWs. In the context of strengthening and quality improvement of CHW programmes, various studies have showed that supervision systems are essential to increase CHW productivity and performance. Supervision is one of the most relevant tasks in health systems management, yet health managers and other supervisors commonly neglect supervision, and many supervisors lack the knowledge, skills and tools for effective and supportive supervision.

Group supervision is a form of supervision whereby CHWs come together to meet with their supervisor either at a health facility or in a village. These monthly meetings usually include discussion of collected data, discussion of problems encountered, sharing suggestions for local solutions and continuing education. It is often the time when CHWs realize how they can help and support each other. Group supervision provides a rich forum for them to share their unique experiences and challenges, and could be a mechanism for mitigating burnout among CHWs as a result of interacting with clients in the course of their community work. It is recognized as a key approach for strengthening the quality of all aspects of community health service delivery

**REACHOUT** has been implementing group supervision, alongside already existing individual supervision, as part of a quality improvement intervention for one year, to enhance quality of maternal health service delivery by health extension workers (HEWs) in Shebedino District, Sidama Zone, South Ethiopia.

REACHOUT is an international research project to understand and develop the role of close-to-community providers of health care in preventing, diagnosing, and treating major illnesses in Africa and Asia

### METHODS

A mixed research methodology was used. Forty in-depth interviews (with HEWs, HEW supervisors and coordinators) were conducted in various areas, based on the level of performance. The interviews were recorded, translated, transcribed and thematically analyzed. A motivation questionnaire with HEWs, antenatal care (ANC) observations using a checklist, and tracking tools on service utilization provided quantitative data, which were analyzed in Excel.

## RESULTS

HEWs indicated that the group supervision made them feel more motivated. The group supervision provided a rich forum for them to share their unique experiences and challenges. The participation of HEWs in group supervision was improved from 2.3% to 61% at the end of the year. At the same time period the regularity of the meetings increased from 4% to 70.4 %. It was also seen that the knowledge and skills of HEWs have improved: before and after intervention the mean score of ANC skill observation changed from 19.3 to 29.3. Improvement in the utilization of antenatal care was also observed as result of supportive supervisor interventions introduced in the woreda. The proportion of mothers attending the first and fourth ANC appointment improved from 73% to 76% and 56% to 70% respectively at the end of the year

"....Supervision increases my knowledge on area where I m supervised. Since I got something on which I forgot i because of that it motivates me on work"

Health Extension Worker

Some HEWs mentioned that they observed changes in supervisory approaches and the support they got from supervisors and midwives from the catchment health centres improved attendance at Pregnant Women's Forums and the uptake of facility delivery.

"In fact there were a practice of supportive supervision before REACHOUT comes. It is kind of why this done or not done or simply listing down weak sides and setting ime when the points to be corrected without discussing ow to correct. The other point, it was neither regular or participatory. This was the nature of supervision previously but this has been changed since the ntroduction of REACHOUT interventions"

### Health Extension Worker

"The number of pregnant mothers attending delivery at health facility is increased because there are Pregnant Mothers Forum in the health posts twice a week facilitated by supervisor or midwife from the health centre...during the forum the midwife support the health extension workers to counsel and create awareness on the services to the pregnant mothers and discuss with them on the problems and put solutions to tackle the problems. The first reason for the improvement is strengthening the support to the HEWs by midwife and supervisor and making things easily workable and helped or the increment of pregnant mothers attending delivery at health facility"

### Health Extension Worker

Notwithstanding the positive results of the intervention, HEWs and their supervisors also reported barriers to supervision. Some HEWs felt that supervision was still focused on record review and fault-finding rather than being supportive in nature, and they felt that it did not address all areas of HEWs' work. Supervisors sometimes felt unsupported because of a lack of training and resources. Group supervision training was provided at the beginning of the year, but there was a high turnover, 21 out of 32 supervisors were transferred.

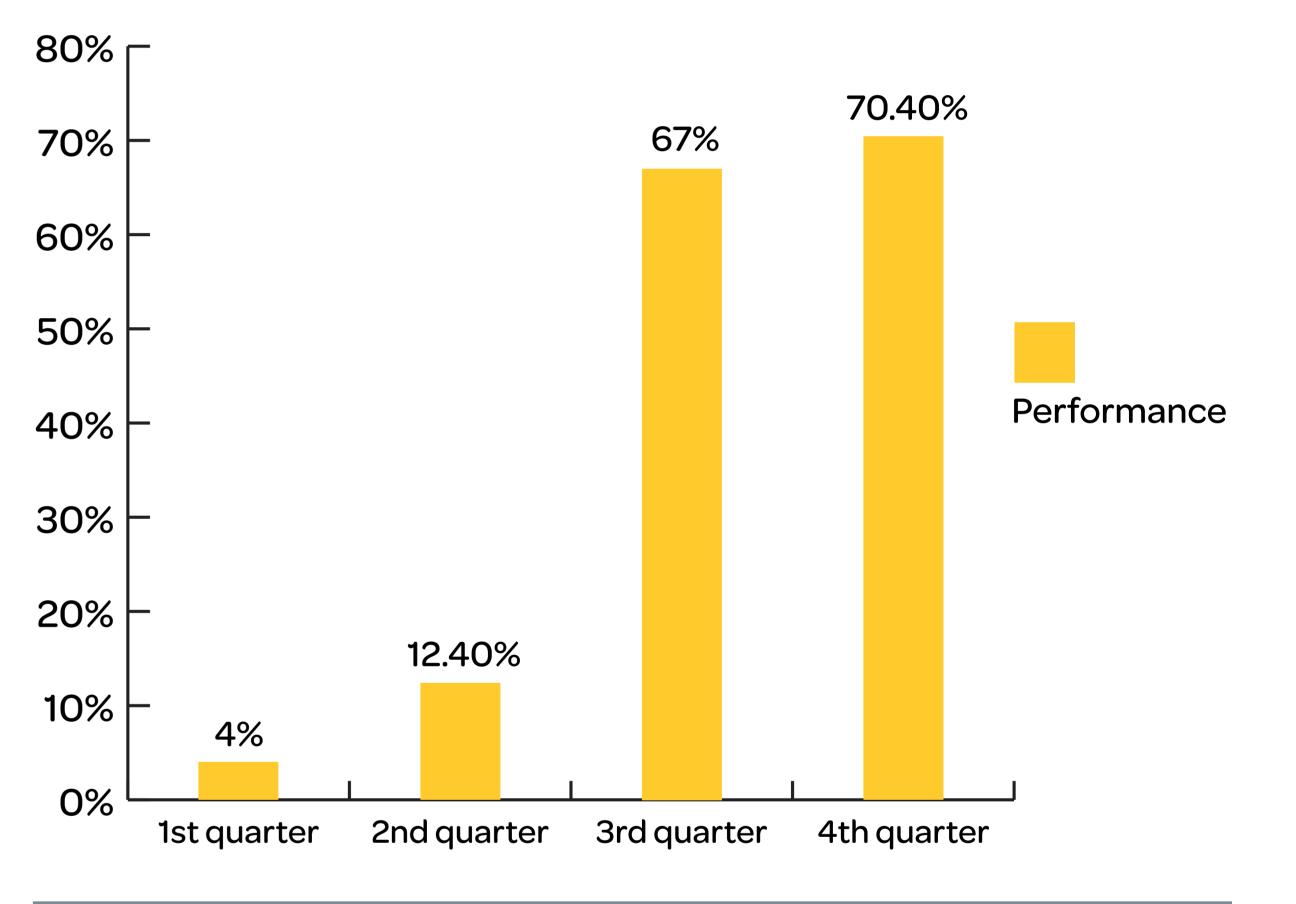
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# Monthly Group supervision meeting regularity in facilities Shebedino district in 2015



# **CONCLUSION:**

The findings show that group supervision is a strategy to improve motivation, knowledge and skills of HEWs. However, there is a continuous need to invest in resources and training for supervisors.

### Contact: aschenakizer@yahoo.com

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