



A Festival of Learning

“C-it DU-it” (pronounced "see it; do it") hosted its first Learning Event in Homa Bay in October 2024. This was the first time Homa Bay's 16 Work Improvement Teams met to share innovations around early identification and referral of pregnant women. Nobody could ignore the palpable energy in the room as the Work Improvement Teams (WITs) arrived from all over Homa Bay. WITs displayed their hand-drawn posters, transforming the conference room into a huge talking wall. Representatives from all levels came to learn about community-led approaches to improving the uptake of antenatal care. The more than 130 participants included community leaders, adolescents, community health promoters (CHPs), community health assistants (CHAs), in-charges, sub-county and county representatives from Homa Bay, Migori and Kisumu, implementing partners, national leaders from the Community Health Division and the Department of Primary Health Care and international collaborators from Liverpool. The learning event objectives were to:

1. Share WIT stories and showcase good practice
2. Celebrate successes, highlight innovations and recognise the WITs
3. Reflect digitization of health data
4. Discuss lessons for scale-up
5. Present County priorities for 2024/2025

Learning Events are inclusive and break traditional hierarchies to provide a platform for community voices to be heard. They use active and engaging methods to make it easy for everyone to participate and learn. Our interactive report captures learning, innovations, key messages and priorities. We hope it excites you and gives you a flavour of how communities are using data to drive-up ANC contacts at community and facility levels.

“Without community health promoters, there is no community health”



Dr Salim Hussein, Head of Primary Health Care, Ministry of Health Kenya, emphasised the importance of community health services within primary healthcare. Recognising the critical role of community health promoters within community care, he said *“Without community health promoters, there is no community health”*.

Dr Anne Thitu, Programme Officer in the Ministry of Health Kenya, celebrated the evidence on improved antenatal care generated by the community health promoters across Homa Bay county and the role this will play in antenatal care across Kenya; *“This evidence shows that community health services work...and will help how we scale-up implementation across the 319 Kenyan sub-counties”*.

“Pamoja twaweza...unless we work together, we will not manage this; together we can”

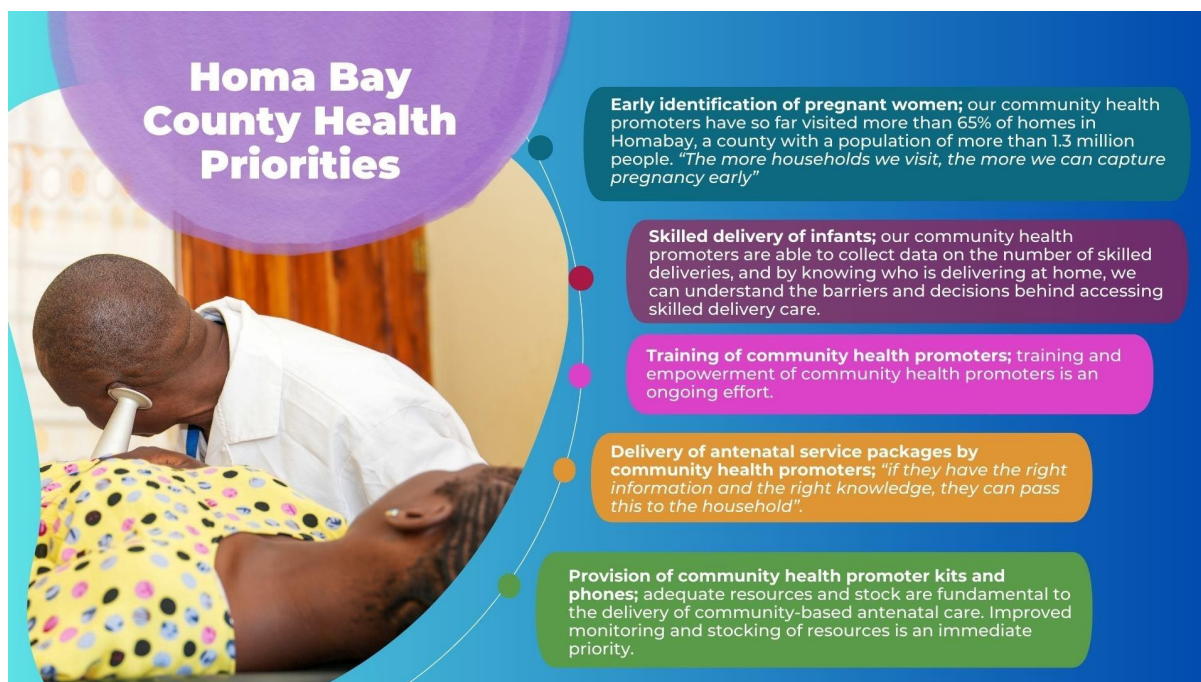
We were excited to share our main theme from the learning event; ‘Together we can’. The Festival of Learning and the work that is done by the community as part of C-It Du-It aims to empower our community leaders to use their voice and share their knowledge and innovations to improve antenatal care and maternal and infant health in Homa Bay county.

Dr. Vicki Doyle, co-director of Capacity Development International and intervention lead on C-It Du-It, emphasized the importance of sharing what works to enhance the effectiveness of work improvement teams while further strengthening the connection between the community and primary healthcare.

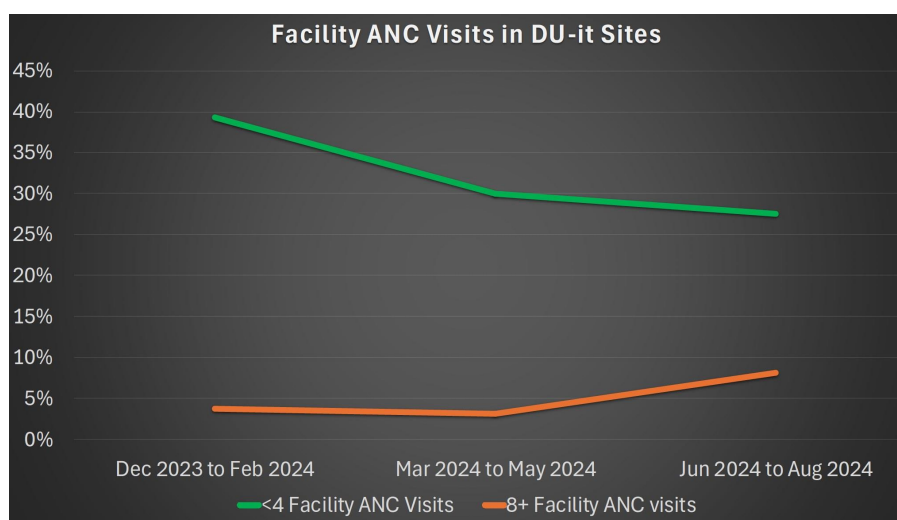
“The Learning event is about providing a space to learn from each other and talking to each other...this is about sharing innovation and building ourselves to be stronger and better...”

Community health promoters are critical to achieving county priorities for antenatal care





Women receiving 8+ ANC visits has increased by 5%



WIT experiences are the most valuable data

Our work improvement teams kindly agreed to share experiences and stories from their critical role in providing community-based antenatal care. Each work improvement team presented vibrant posters with personal stories of the challenges associated with providing this care and the unique innovations that they had developed to support the most vulnerable members of their communities. The energy within the room was contagious as the WITs demonstrated their ownership of this data, and the deep-rooted relationship they have with their communities. Some themes emerged across the WIT posters, including the

need for innovative solutions to improve antenatal care to adolescents, and the potential benefits of including men within sexual and reproductive education campaigns.



“Adolescents have not been considered members of the household during household visits...they need to be included in pregnancy identification activities”



Including young people in health services: tips for WITS!

Activate Action are a youth-led organization in Homa Bay working with young people living with HIV and disabilities. They joined us to share their knowledge on providing inclusive healthcare at the community level, with a particular emphasis on the need to include adolescents and men within our efforts to improve antenatal care. Activate Action's initiatives are highly relevant to our work and could be adapted and applied within our communities.

“We need to be creative in the type of messaging we give to our youth...engage boys and girls together so that they have conversations about sexuality...collaborate with schools and community leaders to reduce cultural stigma”

Tips for WITs

- Engage youth from the start
- Give youth a platform and voice
- Use of online platforms
- Support and fund youth ideas and innovation
- Provide age-appropriate youth sexual and reproductive health information
- Be creative in your messaging
- Take services to where young people are – don't expect them to come to you
- Engage with both boys and girls together – through mentorship and dialogue
- Build youth life skills and provide opportunities for financial growth
- Collaborate with schools & local leaders to break cultural stigma & build community support for adolescent health services
- Development of service charter



Lessons learnt from togetherness: from Homa Bay to Liverpool





Miriam Taegtmeyer, Professor of Global Health and Co-Director of the Institute for Resilient Health Systems at Liverpool School of Tropical Medicine presented a keynote session to inspire our community health promoters to understand the global importance of their work. As LSTM celebrates its 125th anniversary, the lessons we can learn from the WITs are directly applicable to the school's mission 'to improve health outcomes in disadvantaged populations globally, through partnership in research and education'.



Using data to improve antenatal care - Whose responsibility?



Dr Lilian Otiso, Executive Director of LVCT Health, led a panel discussion which asked the question of how we can maximise the production and use of data to optimize healthcare delivery in the community, and where does the responsibility lie in achieving this goal.

The panel provided a platform for advocacy and a channel of communication between the community and the policymakers in the room. Panel members included Dr Salim Hussein (Head of Primary Health Care in the Ministry of Health Kenya), Dr Anne Thitu (Programme Officer in the Ministry of Health Kenya), Dr Gordon Okomo (Director of Health, Homabay County), Steve Okong'o (Program Manager, Community Health & County Lead, Lwala), Lucy Masogo Health Facility), Sheila (Community Health Assistant, Randung), and Adhu (Lead Community Health Promoter, Wagwe North).

During the panel we heard about strategies to improve trust between the community and the community health promoters; discussed the responsibility of the WITS in ensuring quality ANC; and evaluated the challenges encountered. We also discussed the current and potential role of digital data platforms in community health. The strength and confidence of the WITs was evident. Challenges in linking and sustaining digital health systems were shared, as well as frequent loss of internet connectivity, and poor stocking of primary healthcare facilities. These challenges affect the sustainability of community healthcare services.

Some key points from the panel discussion are summarised below.

"We can deliver ANC at the community level... a very big 'we can'" Adhu.

The community team radiated confidence when sharing their ability to deliver quality care to all women within their communities. Their position within the communities was highlighted as a unique strength in building trust between the community and the primary healthcare system.

“For us without the foundation of community health, our primary healthcare does not stand” Salim Hussein.

Whilst CHPs are demonstrating increased expertise and confidence in providing primary healthcare, there remain individuals and groups reluctant to embrace change in the primary healthcare landscape. Steve Okong’o emphasized the need for advocacy and data to inform policy and motivate primary healthcare workers to embrace change.

Our panel discussion highlighted the need for increased action at the policy level to support the work of the CHPs.

“The community have done their part, but the government must also do their part and be accountable” Gordon Okomo.

Welcome to the World Café



Our World Café provided the opportunity for our community team members to explore their experiences of delivering improved antenatal care, discuss the challenges, and share their innovations. We covered six key themes, and have captured some of the lightbulb moments from their discussions.

1. Working as a WIT

- *There should be leadership mentoring on all WIT members so in case of staff transfers the WIT remains intact and still owned by the community.*
- *Community members within the WITs should take the lead and facilities should provide support.*

2. Digitisation

- *Use of eCHIS and EMR reduce the workload in the facility and for CHPs.*
- *eCHIS acts as a reminder to the CHPs on the tasks to do*

3. Supervision, mentorship and coaching

- *Coaching of WITs supports innovation, builds teamwork, and improve skills.*
- *Work not documented is work not done. There is need for better documentation.*

4. Engaging and communicating with adolescents and young people

- *Adolescents can relate more to their peers, so there is clear value in including adolescents within the WIT team.*
- *Adolescent engagement has been largely focussed on young women. There is a need for innovation solutions to engage young men.*

5. Continuum of care: community-facility linkage

- *Ethnicity is a barrier to provision of quality ANC services. Due to cultural differences HCW and the community tend to view the other party to have an attitude.*
- *Accountability responsibility: staff in some cases do not want to be accountable for their specific responsibilities eg not completing the CHP CRF*

6. Linkage module demo

- *CHPs feel more confident about the system and its ability to communicate back to them.*
- *CHAs are happy that they have not been left out. They can see the people who have been referred and processed.*
- *Nurses are happy to receive email notifications to see the people who have been referred by the CHPs.*

Point of Care Testing: Learning from Migori

We invited Felix, from Migori county to share their learning in providing point of care testing for expectant mothers.



Challenges

- Supplies system: Irregular and unpredictable. Partners had to supply kits to fill the gaps
- Govt' system of supplying through KEMSA- a challenge for consistent supplies.
- 1 lab tech/site: Pregnant mothers miss lab tests if lab tech is away
- No power back up, lab tests not done (Malaria microscopy & HB) when mRDT out of stock and power blackout.
- Documentation of lab tests to show malaria test not captured in ANC register
- Self referrals from other sites especially for ANC tests meant women came from far away to get tested when kits were in stock.



Lessons from Migori for HomaBay

- Improving testing at the facility increased uptake of 4 tests by 4 months
- Increased confidence in the service and people coming from far
- Commodity availability has huge impact on uptake
- Sustainability of the intervention depends almost entirely on supply

Dr. Gordon Okomo, County Director of Health for Homa Bay County, responded to the learning and presented the county's priorities for the next WIT cycle.

“4 tests by 16 weeks can help us identify and treat complications in pregnancy as early as possible...it is our dream to make sure there are no complications in pregnancy” Dr Gordon Okomo.

“As a department we want to put our foot down and make commodity supply a priority for maternal and child health. We can provide continuous, non-interrupted support at the community level.” Dr Gordon Okomo.

The final celebration: Championing our WITS!



The excitement of the previous two days of learning and sharing came to a roaring crescendo with the awards ceremony to celebrate the amazing achievements of our WITS team! The effort and passion put into the poster presentations to share their impacts and innovations to improve the engagement of women in ANC was evident across all of the teams.

Nonetheless, there were six WITS whose achievements had hugely impressed both the judges (*insert list of judge names*) and the other attendants at our Festival of Learning. We are very pleased to share the following awards:



1 - People's choice – best poster – Kadwet



2 - People's choice – best poster – Wagwe North



3 - Most active WIT in early identification of pregnant women and referral – Kodumo West



4 - Runner-up most active early identification of Pregnant women and referral - Kamagawi



5 - Best WIT Folder – Kamuga



6 - Runner-up Best WIT Folder - Kobila

Individual Award to Rose Atieno as the most active CHP in early identification of pregnant women and referral



On top of this, there were commendations for all WIT teams and some key individuals for their amazing achievements!

Individual Commendations

Lead CHP going above and beyond normal duties: John Okewo Mwaga

CHA demonstrates leadership and commitment: Sheila Obinga

CHA demonstrates leadership and commitment: Joyce Achieng

Highly Commended Posters

- Going beyond the health sector to address stigma around teenage pregnancy in schools – God Jope B
- Well-presented bar chart; also commended for bringing on board community organisations – Upper Kamenya
- Very good root cause analysis; beautiful visual presentation - Uko-Ondeng'e
- Working with DREAMS programme mentors; commendation for the photos of the 8+ ANC achievement – Kojwach East
- For using fishbowl meetings and a nice range of methods for outreach – Komuoyo
- For working with and training adolescent peer advocates – Lower Korayo
- For the root cause analysis. Judges also noted the high-quality photos – God-Jope A
- For a specific and achievable change plan (and mobile health clinic) – Kanyongo

Next steps