Training and support for Community Based Workers

Well-designed Community Based Worker (CBW) programs include clearly defined job roles and expectations, careful recruitment, appropriate training, and consistent and ongoing support and supervision.

Who are Community Based Workers?

A CBW is a community member who is employed or contracted to provide a link between the program and the community and/or undertake specific non clinical work.

The value of Community Based Workers

Research demonstrates that CBWs can play an important role in promoting health, preventing disease and improving health outcomes, in both developing and developed countries, especially where health inequalities exist. CBWs can improve access to and coverage of communities with basic health services, can undertake actions that lead to improved health outcomes and can make a valuable contribution to community development.

Training and support

Develop a comprehensive orientation, induction and training program covering the required knowledge and skills. Develop clear guidelines and procedure manuals to provide step-by-step guidance and ensure support structures and materials are available to enable CBWs to do the job.

From the international literature...

Well-designed training programs are essential to equip CBWs for their jobs as CBWs are often selected without prior experience or professional training. The content and duration of the training will depend on the range and nature of services or programs the CBWs are expected to deliver or be involved in, as well as the level of education they have.

Effective training programs for CBWs include:
- A knowledge component covering topics such as ethics, confidentiality and subject matter specific to the program or service to be provided
- Skills training in communication, sharing health information, aspects of health promotion, manual skills required for the job, documentation and record keeping

Without refresher training, learned skills and training are quickly lost. In one study, three additional training days each year for CBWs resulted in improved quality of service and service utilisation.

… While the literature reflects a great diversity of approaches, locations, organization and length of training, there is agreement on one matter: that continuing or refresher training is as important as initial training. Lehmann and Sanders 2007 p 19
### Different training approaches and their effectiveness

<table>
<thead>
<tr>
<th>Training Approaches</th>
<th>Description</th>
<th>Evaluation of Benefit for Learning</th>
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<tbody>
<tr>
<td>Educational techniques</td>
<td>Interactive techniques: Active educational experience that allows dialogue and interaction that includes simulations, role plays and case-based learning in preparation for supervised real-life experiences.</td>
<td>Interactive techniques that encourage the learner to process and apply the information have been found to be much more effective than didactic techniques for knowledge and skills acquisition.</td>
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<tr>
<td>Didactic techniques</td>
<td>Passive educational experience that includes lectures and reading.</td>
<td>Information or learning experiences that are spaced or repeated over time produce better learning outcomes than single training interventions.</td>
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<td>Timing</td>
<td>One time: All the material is presented only once, at one time.</td>
<td>Most effective skill acquisition and performance takes place in an environment as similar to the work situation as possible. [There may be a mix of training away from community and training at the work-site].</td>
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<tr>
<td>Spaced and repeated</td>
<td>Information or learning experiences are spaced apart and/or repeated several times.</td>
<td></td>
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<tr>
<td>Location</td>
<td>At work site: Trainees receive training at the facility or in the community where they will work (or in a similar community).</td>
<td>Manuals may be good guides of content for the trainers, but are poor methods of learning for students. Appropriate for some job aids for fully literate CBWs.</td>
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<tr>
<td>Away from work site: Training is in a classroom or other site remote from the [CBW’s] community.</td>
<td>Much more effective than words. Can be compiled into charts of algorithms and protocols for job aids. Still useful as health education aids.</td>
<td></td>
</tr>
<tr>
<td>Teaching/learning media</td>
<td>Print: Manuals and handouts</td>
<td>Can be used interactively, repeatedly, and almost anywhere. More effective than either print or still pictures for learning.</td>
</tr>
<tr>
<td>Pictures</td>
<td>Pictures, cartoons, or photos. Can be on paper or on electronic devices</td>
<td></td>
</tr>
<tr>
<td>Multimedia</td>
<td>Audio and/or video content on computers, mobile and smart phones, DVDs, and radio.</td>
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</table>

Table 5 reproduced from Chapter 9, page 9-16, Training Community Health Workers for Large-Scale Community-Based Health Care Programs by I Aitken in Perry, H and Crigler, L (Eds) (2014).

### From practice in Northern Australia...

**Orientation and induction**

The type of orientation and induction into the workplace depends on the size and nature of the organisation. For example, CBWs employed by the Northern Territory Government in a full-time capacity are required to attend a formal orientation program. In smaller organisations the coordinator may conduct an in-community orientation and a workplace induction. In some cases, orientation is covered in the initial training which may take place in an urban centre. The program manager or supervisor then provides induction into the workplace on the community.

**Training**

Managers and coordinators all reported that CBWs undertake both formal and on-the-job training. CBWs are enrolled in relevant accredited training programs ranging from Certificate II to IV levels. Non accredited training consists of workshops specifically designed to cover the knowledge and skills required for the program and, in some cases, is delivered by a Training and Education Officer. In other cases, a number of health professionals, each covering specific health program areas, deliver the workshop content. This formal training is combined with on-the-job training and support as follows:

- By skilled CBWs who train and mentor new CBWs
- By a coordinator providing an initial training workshop for casual CBWs, backed up by weekly mentoring
- By CBW coordinator role visiting the community to provide support plus additional training and support provided by visiting health professionals
- By a range of health professionals with ongoing support by Aboriginal Health Practitioners


Developed by Pandanus Evaluation & Planning Services in collaboration with The Fred Hollows Foundation Indigenous Australia Program. Additional information about the development of this project can be found at http://www.healthinfonet.ecu.edu.au/key-resources/promotion-resources/?lid=30884

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This publication may contain images of persons that have passed away. The Fred Hollows Foundation would like to acknowledge these persons and pay our respects to them and their families.