



Applicant Information

Applicant Name	Applicant Email	Affiliation	Country
Mr Richard Tetteh	richierossie85@gmail.com	Kintampo Health Research Centre	Ghana

Abstract Details

Title:

Training community health workers to check for hypertension: A Ghanaian example of task-strengthening initiative.

Category:

Non-communicable diseases including mental health

Authors:

Richard Tetteh¹, Solomon Nyame¹, Juliet Iwelunmor², Ucheoma Nwaozuru³, Joyce Gyamfi⁴, John Amoah¹, Kingsley Apusiga⁵, Kezia Gladys Amaning Adjei⁵, Angela Aifah⁴, Deborah Onakomaiya⁴, Kweku Bedu Addo⁵, Kwaku Poku Asante¹ and Gbenga Ogedegbe⁴

Objectives:

Community-based interventions delivered by community health workers (CHWs) are considered effective strategies for managing hypertension in resource-constrained settings. We describe the training outcomes for CHWs at peripheral health facilities in rural communities with skills to screen, refer and link individuals with high blood pressure for optimal care in Ghana.

Method:

A study of 107 Community Health Workers (CHWs) from 54 CHPS zones in Ghana participated in a three-day training program. They completed semi-structured questionnaires to assess the acceptability and appropriateness of the training on hypertension care knowledge. McNemar's Chi-squared test was used to determine differences in individual assessment responses.

Results:

About 57% of the respondents were females with an average age of 29.9 (3.3). Most of the respondents (81%) were community health officers with educational qualifications of a post-secondary certificate (55%). Preceding the training, responses by CHWs indicated knowledge towards screening for hypertension at the community level. Also, majority of CHWs had adequate knowledge compared to baseline (90% versus 72%, McNemar's test $p < 0.001$). CHWs reported considerably more knowledge regarding all measures. Trainees suggested unavailability of key resources, cost of treatment as well as distances to referral centres as potential barriers for the successful implementation of the health system strengthening initiative.

Conclusion:

Fostering capacity building among community health providers for hypertension-care and prevention in resource-constrained settings can enhance sustained progress towards global CVD reduction. Our findings also identified a series of barriers that would aid the development of a pre-implementation guide to support intervention implementation and adaptations to fit the context.

Submission Date:

2024-09-23 11:52:21