**Qualitative Findings Towards the Development of Criteria and Indicators for Functional VHTs**

Healthy Child Uganda

University of Calgary

July 19, 2013

Diana Chan

*Purpose*

Collect and document the qualitative findings from assessing ‘active’ versus ‘non-active’ VHTs in order to contribute to the development of criteria and indicators for functional VHTs.

*Methodology*

Qualitative research methods were used to assess ‘active’ versus ‘non-active’ VHTs during the course of two weeks in May 2013. Unstructured focus groups with VHTs were held with the accompaniment of a CHO in the role of interpreter. A focus group with 7 VHTs was held during Child Health Day in Nyabubare of Kitojo parish in Kakanju sub-county and a second focus group with 10 VHTs was held during the break time of a MNCH training day in Rugaga of Nyabubare parish in Nyabubare sub-county. A third focus group with 12 VHTs was held at the beginning of a VHT monthly meeting in Ruharo ward in Bushenyi municipality. Additionally, short individual interviews without the aid of an interpreter were held with 2 VHT trainers in Rugaga and 3 CHOs in Bushenyi.

There is a raw version of this document that includes that includes all criteria and indicators mentioned in focus groups. This version has been revised as to include only the most mentioned indicators amongst those indicators that can more readily be measured. There is also the addition of recommended sources and methods of data collection as to tangibly assess the VHTs in accordance with the criteria and indicators.

|  |  |  |
| --- | --- | --- |
| **HCU Criteria and Indicators for Functional VHTs** | | |
| *Criteria* | *Indicators* | *Data Sources/Data Methods* |
| * Attends and actively participates in VHT training courses | * Attends VHT courses and trainings, such as MNCH, Community Development, and Refresher courses * Communicates the motivation to attend VHT trainings because she/he want to add to their understanding and skills * During VHT trainings, asks and answers questions, volunteers for role plays | * Attendance records * Assessment of level of participation by VHT Trainers * Assessment by VHT Coordinators and Area Supervisors |
| * Conducts home visits in the community | * Conducts home visits/check-ins with all designated HHs at least once a month * Conducts home visits/check ins at least 2 times with pregnant women and 4 times between the date of birth and 6 months * Regularly conducts follow-up visits associated with danger signs and referrals * Participates in at least 1 out of every 2 VHT group home visits | * VHT reports * Feedback from community members |
| * Conveys health information and knowledge from courses to communities | * Provides health information talks to communities at least once per month * Teaches community members about various health issues, such as nutrition, hygiene, pregnancy, pregnancy danger signs, how to avoid malaria | * VHT monthly and quarterly reports * Assessment by Area Trainers/Supervisors |
| *Criteria* | *Indicators* | *Data Sources/Data Methods* |
| * Mobilizes community members to attend/participate in community events | * His/her designated household members regularly attend Child Health days and/or other community events * HH visits include reminders of upcoming Child Health Days * People in the communities regularly attend health information talks, e.g., at least once a month | * Recorded attendance of VHTs’ designated HHs at CHDs and other community events * VHT reports |
| * Actively participates in Child Health Days (CHDs) | * Attends 2 CHDs per year * Assists Health Workers with tasks during CHDs | * Recorded attendance of VHTs at CHDs * Assessment by Area Trainers/supervisors |
| * Promotes Income Generating Activities (IGAs) | * Presents the principles and benefits of IGAs at community meetings * Is involved with a group/village IGA, such as raising poultry and pigs or weaving baskets * Advises community members about IGAs as a way of promoting self-reliance | * VHT reports * Feedback at VHT monthly meetings * Assessment by Area Supervisors/ VHT Coordinators * Observations by CHOs |
| * Contributes to VHT reports | * Provides expected data to the VHT Village monthly report * VHT registrar is filled out correctly and updated regularly * Contributes to quarterly VHT group reports | * VHT reports * Assessment by the VHT Coordinator and Area Supervisor |
| *Criteria* | *Indicators* | *Data Sources/Data Methods* |
| * Regularly attends VHT quarterly meetings | * Attends at least 2 out of 4 quarterly VHT meetings * Actively participates during meetings, such as by sharing challenges that have occurred in their areas and contributing problem-solving ideas * Is punctual for meetings * If fails to attend a meeting, communicates to the other VHTs why he/she could not attend and takes responsibility | * Recorded attendance at monthly meetings * Assessment by the Area Supervisors/ VHT Coordinator |
| * Observable positive health development outcomes in communities | * Identifiable changes in homes that the VHT is responsible for, such vented/covered latrines, kitchen gardens   Increased percentage of women delivering their babies at health centers over time from the VHT’s area   * The homes in the VHTs area have high standards of hygiene, and identified as good examples for the rest of the community | * Healthy Homes Competition * Feedback from community members * Health centre reports * Observations by CHOs |
| * Displays model/‘exemplary’ behaviour | * VHT has a well-kept compound and home and demonstrates good health and hygiene practices * Encourages other VHTs to adhere to their responsibilities (e.g., If another VHT misses a monthly meeting, pursue why; counsel and encourage ‘non-active’ VHTs to keep working) * Considered approachable and cooperative by other VHTs and community members * Brings new ideas to the VHT team, such as cleaning their local health centre | * Assessment from VHT Coordinators and Area Supervisors * Feedback/reports from community members and other VHTs |