



Zambia Health Bulletin: Volume 4

January 2016

## IPA Presents Financial Case for **Providing Career Incentives to CHAs**

e previous PA Health Bulletin (August 2015) we said the discernible positive differences in household wors and child health in districts where the Community h Assistants were micruited using career incentions en OHAS's in comparison with those excluded using OHAC's in comparison with those exculted using ity incentives ("Control CHRd"). Over the part IPA has been meeting with government stakeholders ing the MOH HR Technical Working Group – and what these results mean areer incentives for the Ch ration is below.

estanch has shown that the Career CHAs are more urble then the Control CHAs and that producting sence comes from career motivation - from Releng that hand work: could lead towards Career growth instructs. Career CHAs conducted, on average, 20% in toxehold that and 2.4 towards, and the more instruction of the Charlow conduction of the toxehold is busieful that and 2.4 towards are study. For the same a leader 3.5 control CHAs, an ansulf, for the same takes 1.3 Corecol CHAs to achieve the household Lates 13 Control CMU to achieve the routened lucifiely of a Camer OHA and 2.3 Control CHe to he community meeting productivity of one Camer in means trausefold with by Control OHA "control explored community meeting, "cost 10.1.47 embrs, the concern is if no career incertues are incentives and the Ca DIAs, there will be lost motivation activity could decrease. If the CHAs drops to that of Control CHAs, the GoZ will face ver STM per year in bot productivity (assuming there are 000 CHVe de year) in bot productivity (assuming there are 000 CHVe de year) of the field (into the memory of the re health outcomes in part) that comes with the motivated of high performing Career CHAs.

	Control CHAs	Career CHAs
Annalisatary	\$460.00	96,000
Amount invested in Invatencial (144) visits	54,800 (54,000 × 80%)	14,801(14,000 x 80%)
Number of HH visits completed per year	219	275
Cost per HH visit	822.54	812.45
Amount invested in community meetings	5400 (\$6000 x 10%)	9600 (\$40000 x 10%8
Number of meetings completed per year	**	28
Cost percommunity meeting	854.55	63.05

Ministries we are facilitating conversations also opportunities would need to be provide maintain high level of motivation amongot conver opportunities are always limited, we only a few positions would need to be offle incertive for CHRs to work hard. providing a handful of new openings for tra promotions are likely to be significantly less than the CHAs losing their career-incentive based motiv

The Community Health Workers evoluation tests the Child Hes Clinton Health Access India IN ICHAI

## Interpersonal Communication to Encourage Use of Female Condoms

emaile Cond. enable film rates of female initiated m planning and induce rates of HV infection in Sub-Altra. In Zendon, mass did Huban and for the new Maximum Drae the proving adults will be mathy (prins) Aftice in Zambia, massifely tribution and marketing company for the new Maximum Draw Minuaritic Groups in togethel at young adults: will be lowerched by the Society for Family Health (DHP) in february. Besearchers are conducting a commutation (IPC) intervention as an encouragement design in parts: knowledge, accutopublic, use of condo-and update of finank conduction. We are more completing a lower the action of the second method and context. This survey collected data on the contexpetite knowledge and use of 2,300 young adults age 16-24.

month SFH will launch the new Maximum Divi an's Gordom (MDWQ) and begin a tocial maniating page. The MDWC will be advertised widely in all study targeting young, urban adults the Largetrag young unawa acutes tretogen acutes in each one's available social media, and a mobile webs line il and/only axign the 40 wards to either restate the ogen or server, as the comparison group (20 wards the PC pargons will be implemented by 15H and the neurohy encruised youth who will gather groups of to discuss conditions, demonstrate correct use of the mmunity scrutted youth who we gener group to discuss condoms, demonstrate correct use of the num Diva Woman's Condom, and teach condom egotiation skills through role-playing.

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In the previous IPA Health Bulletin (August 2015) we discussed the discernible positive differences in household behaviors and child health in districts where the Community Health Assistants were recruited using career incentives ("Career CHAs") in comparison with those recruited using community incentives ("Control CHAs"). Over the past months IPA has been meeting with government stakeholders - including the MOH HR Technical Working Group and presenting what these results mean for the cost-benefit of providing career incentives for the CHAs. Here is a brief summary of that presentation.

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