AN INVESTIGATION ON THE RISK OF INFECTION AMONG COMMUNITY HEALTH WORKERS IN THIKA SUB COUNTY, KIAMBU COUNTY, KENYA

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1. INTRODUCTION

1.1 Background

- Thika Sub County is one of the sub counties in Kiambu County. It is located 40 kilometers to North East of Nairobi. It has a population of 218,544 people (National 2009) with an area of 327:1 sq km.
- It is one of the sub counties in Kenya where community health strategy has been embraced.
- The sub county has about 7 community health units with 270 trained and active community health workers that provide health services to the communities they come from (Public Health-Thika, 2012).

1.2 Statement of the Problem

- Community health workers (CHW) are members of a community who are chosen by community members or organizations to provide basic health and medical care to their community.
- They are members of the communities where they work, selected by the communities, answerable to the communities for their activities, supported by the health system but have shorter training than professional workers.
- The use of community health workers has been identified as one strategy to address the growing shortage of health workers
- The CHWs perform a wide range of functions, which generally include:

- Home visits, Environmental sanitation, Provision of water supply, First aid and treatment of simple and common ailments, Health education, Nutrition and surveillance, Maternal and child health and family planning activities, Communicable disease control, Community development activities, Referrals, Record-keeping and collection of data on vital events
- Without protective practices such as proper hand washing, use of sterile gloves, sterile and safe equipment, and correct waste disposal, Community Health Workers are at high risk of getting infections while performing their regular functions.
- This study therefore aimed at establishing the knowledge and practices of Infection Prevention Control among Community Health Workers in Thika Sub County.

1.3 Objectives

- The study aimed at establishing the knowledge and practices of Infection Prevention Control among Community Health Workers in Thika Sub County. Specifically it aimed at;
- a) To determine the level of knowledge of community health workers on infection prevention and control
- b) To determine the practices of community health workers on infection prevention and control
- c) To determine the barriers hindering community health workers from practicing infection prevention and control

1.4 Research Questions

- The study was out to answer the following questions;
- a) What is the level of knowledge of community health workers on infection prevention and control?
- b) What are the practices of community health workers on Infection prevention and control?
- c) What are the barriers hindering community health workers from practicing infection prevention and control?

2: METHODOLOGY

2.1 Research Design and Sampling

- Thika Sub County has a total of 7 community health units with 270 community health workers.
- A descriptive study design was used to carry out this study.
- The study targeted all the CHWs and sampled 108 of them to participate in the study. This was 40% according to Mugenda and Mugenda (1999).
- The community health workers were selected randomly from their respective community units.

Table 1: Sampling Design

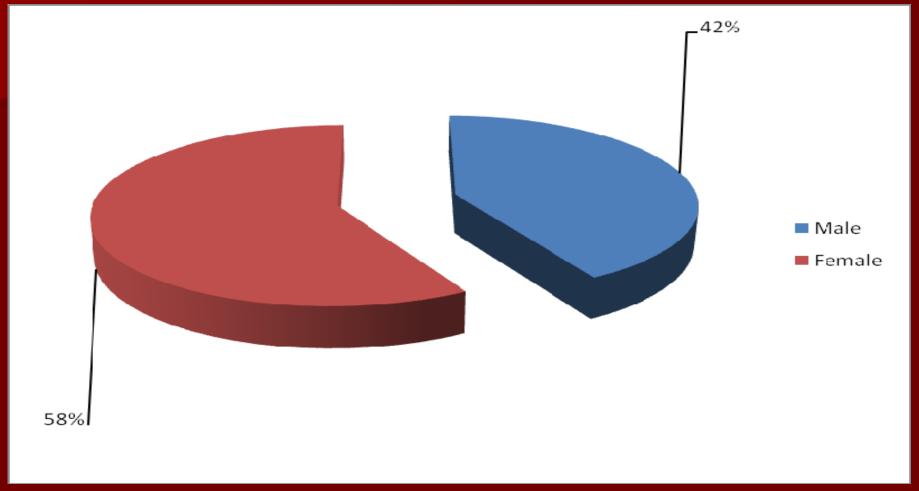
Community unit	No. of CHWs targeted	Sample	Percentage (%)
Kiandutu	68	27	25
Umoja	32	13	12
Komo	28	11	10
Jujafarm	28	11	10
Kiaora	45	18	17
Dekoma	35	14	13
Malaba	34	14	13
Total	270	108	100

2.2 Data Collection and Analysis

- The structured interview schedules were used to collect data in the study. The procedure for data collection entailed conducting of interviews to the CHWs.
- This was done by the researcher with the aid of hired and trained research assistants.
- The researcher examined all the interview schedules for completeness and consistency and then categorized all the items using frequency distribution tables.
- It was then analyzed using Microsoft Excel and presented in pie charts and graphs.

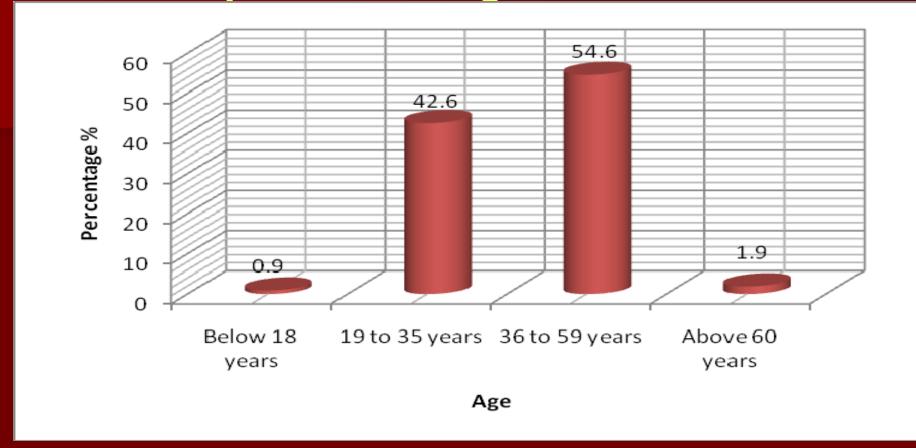
3: STUDY FINDINGS

3.1 Respondent's Gender



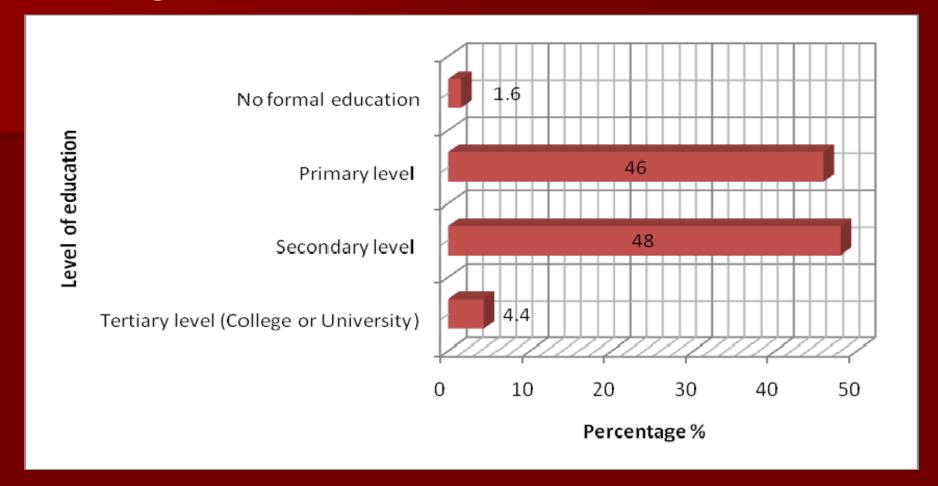
More than half (58%) of the CHWs that were interviewed were female while 42% were male.

■ 3.2 Respondents' Age



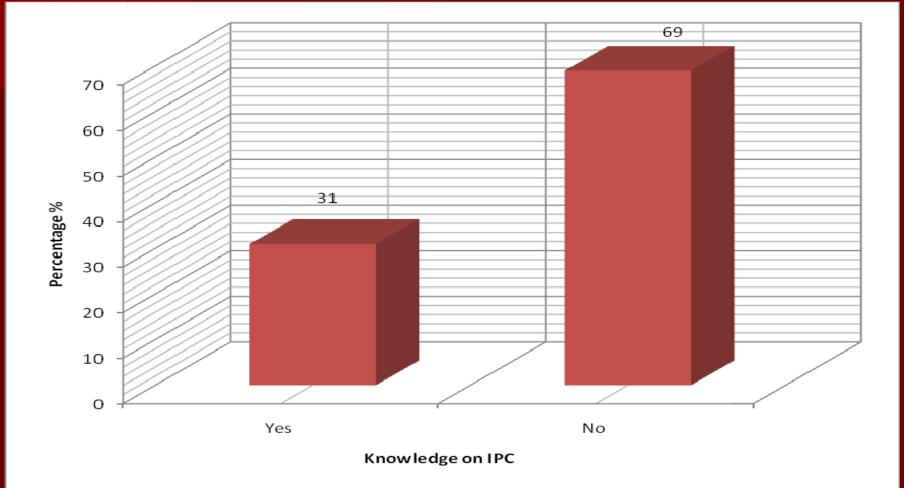
More than half (54.5%) of the respondents were between the age of 36-59 years. Slightly less than half (42.6%) were between 19-35 years. Those that were below 18 years were 0.9% while 1.9% was above the age of 60 years.

3.3. Highest Level of Education



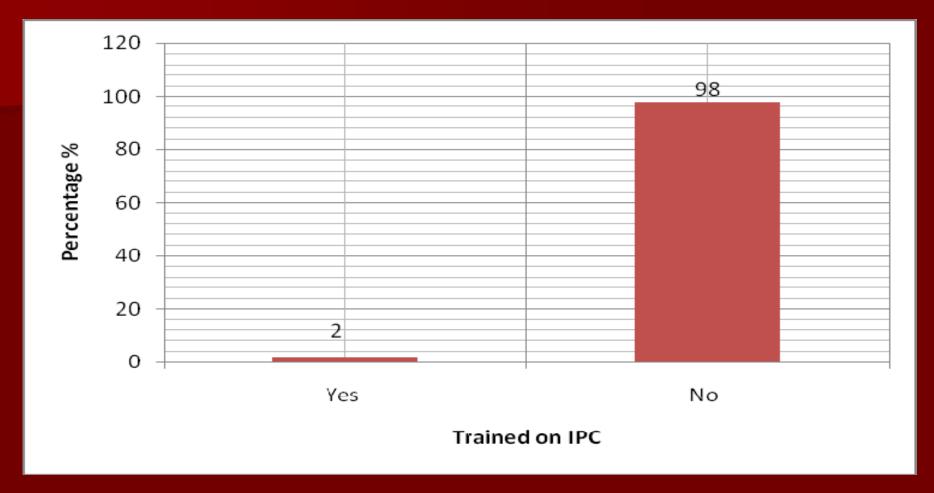
Slightly less than half (48%) and (46%) of the CHWs interviewed had secondary and primary education respectively. Those that had tertiary education were 4.4% while those with no formal education were 1.6%.

3.4 Knowledge on Infection Prevention and Control



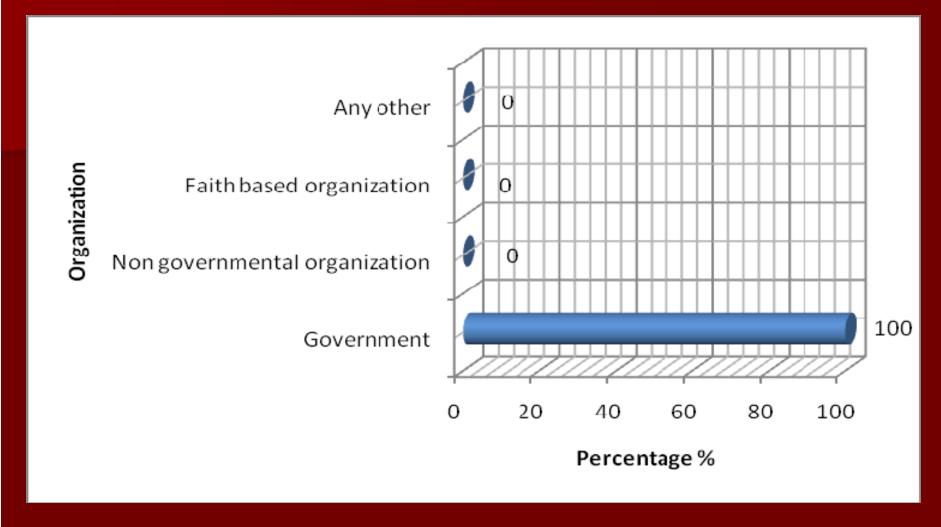
Most (69%) of the CHWs had no knowledge on infection prevention control while only 31% had knowledge on IPC.

3.5 Training on Infection Prevention Control



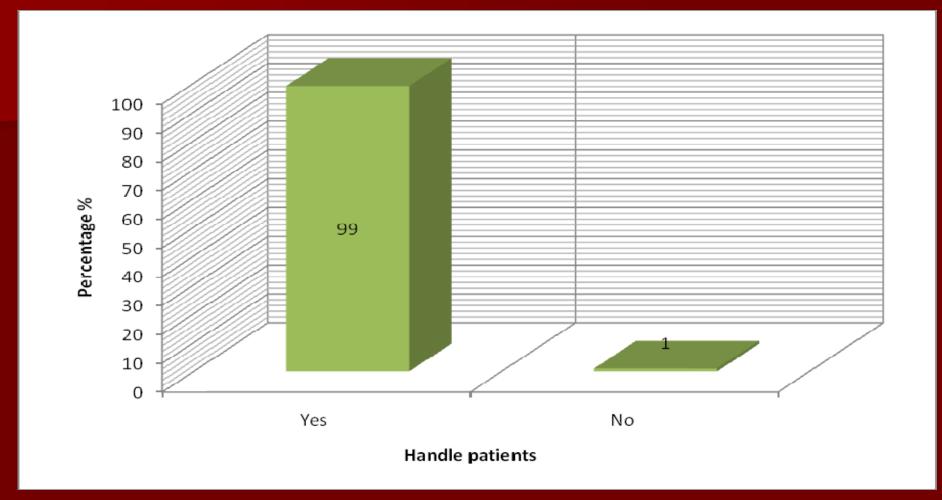
Majority (98%) of the CHWs interviewed were not trained on Infection Prevention Control while only 2% of the CHWs said they had been trained.

3.6 Training Organization



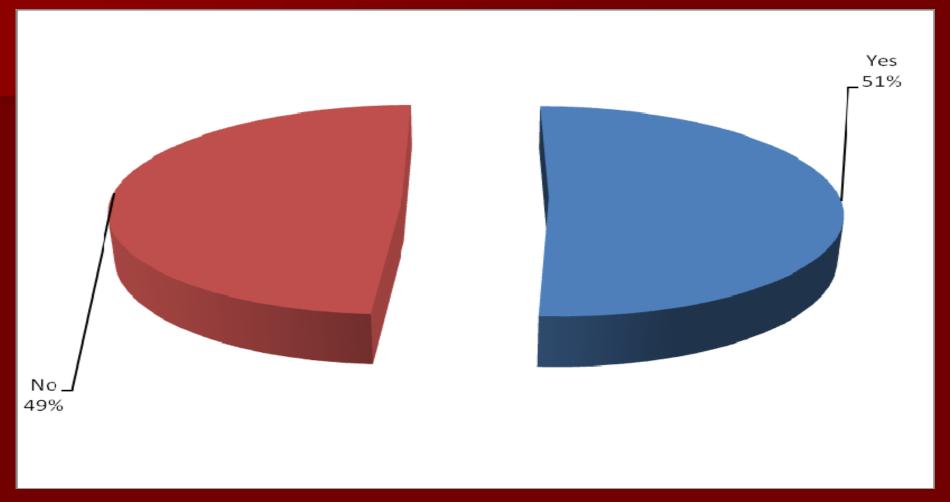
Among the 2% of the CHWs who were trained on IPC, all (100%) of them said to have been trained by the government

3.7 Handling patients during the CHWs' work



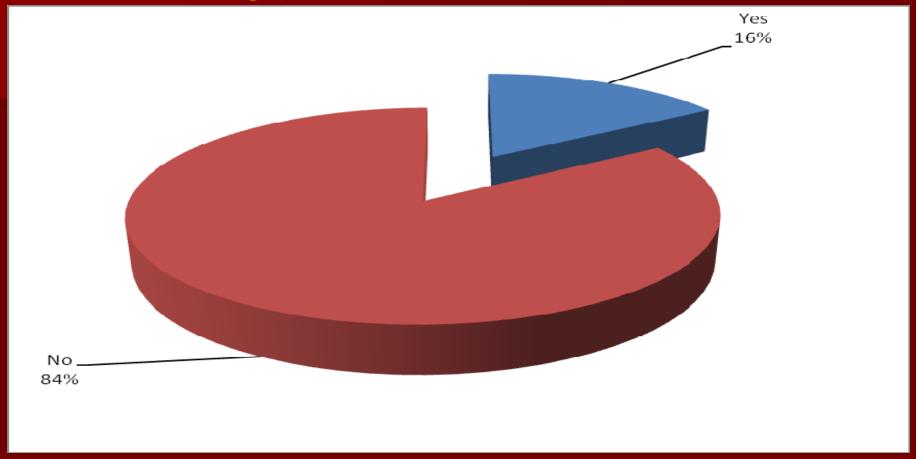
Majority (99%) of the CHWs interviewed said they handled patients at home during their work while only 1% said they did not handle patients

3.8 Use of personal protective gloves when handling patients



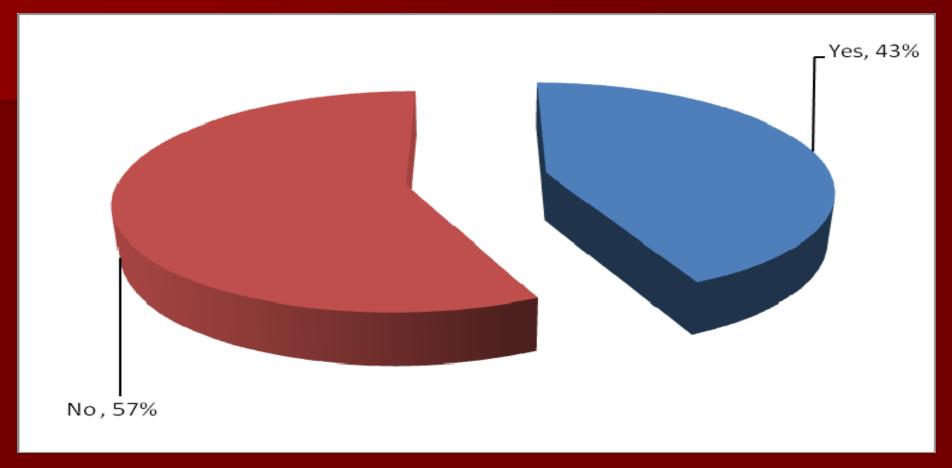
Among the CHWs who handled patients during their work, slightly less than half (49%) of them did not use personal protective gloves while 51% used.

3.9 Disinfection of surfaces and equipment after handling patients



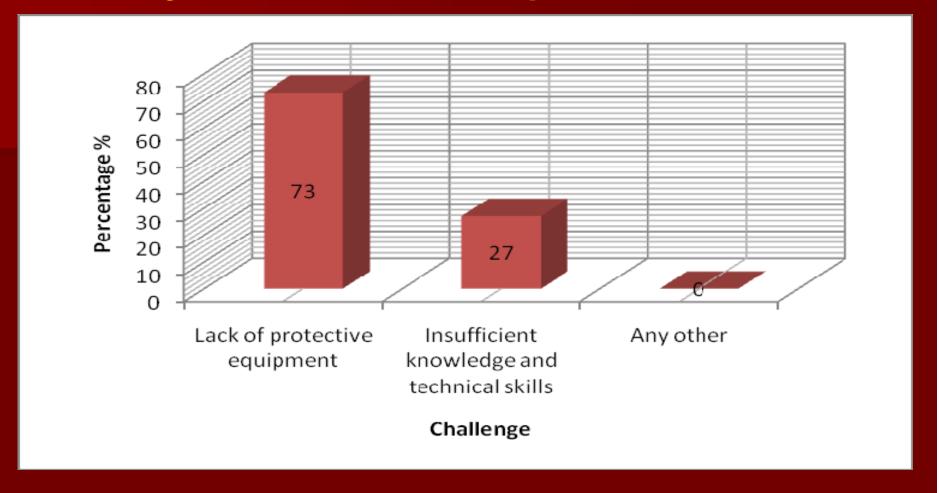
Majority (84%) of the CHWs did not disinfect surfaces and equipment after handling patients while on 16% disinfected the surfaces.

3.10 Hand washing with soap after handling patients



More than half (57%) of the CHWs did not wash their hands with soap after handling patients while 43% washed.

3.11 Major barriers for the practice of IPC



Majority (73%) of the CHWs interviewed said that lack of protective equipment was the main barrier hindering the practice of IPC while 27% said that the main barrier was insufficient knowledge and technical skills

4. SUMMARY OF THE FINDINGS

- The study found out that more than half (58%) of the CHWs in Thika sub county were female while 42% were male. Majority of the CHWs were adults between the ages of 19-59 years. Only 0.9% and 1.9% were below 18 and above 60 years respectively. Majority of the CHWs had formal level of education ranging from primary to university with (48%) and (46%) having secondary and primary education respectively. Only 1.6% did not have formal education
- The study established that only 31% of the CHWs in Thika had knowledge on IPC while most (69%) did not. Majority (98%) of them were never trained on Infection Prevention Control as opposed to only 2% who said to have been trained by the government.

Summary of the Findings cont'

- The study determined that almost all (99%) of the CHWs handled patients at home during their work. Among them, slightly less than half (49%) did not use personal protective gloves while only 51% used. Majority of them (84%) did not disinfect surfaces and equipment after handling the patients and only 43% washed their hands with soap while more than half (57%) did not.
- The study found out that majority (73%) of the CHWs failed to practice IPC due to lack of protective equipment while 27% was attributed to insufficient knowledge and technical skills.

5. CONCLUSIONS

- Most of the Community health workers in Thika sub county did not have correct Knowledge on Infection Prevention Control. Almost all of them had no training on IPC.
- Almost all of the CHWs in the sub county handled patients at home during their work. However, most of them neither used personal protective equipment, disinfected surfaces and equipment after handling the patients nor washed their hands with soap. This risked them being infected while performing their duties.
- The major barriers that hinder the practice of IPC among community health workers were lack of protective equipment and insufficient knowledge and technical skills.

6.0 RECOMMENDATIONS

- Train all community health workers in the sub county on infection prevention control
- Provision of personal protective equipment to all community health workers in the sub county to enable them protect themselves while performing their work
- Provide all community health workers with disinfectants and other hygiene commodities and educate them on the same
- Create awareness among the community health workers and the community at large on the importance of proper hand washing with soap
- Enhance support supervision and mentorship at the community level

THANK YOU!!!