

To: Global Health Council - Gates Award for Global Health

From: Steven Lewis, Access Consulting Ltd and the Centre for Health and Policy Studies, University of Calgary, Canada.

I am very pleased to nominate the **Training for Health Renewal Program, (THRP)** Mozambique-Canada for the Gates Award for Global Health.

The **Training for Health Renewal Program (THRP)** is an exciting international health initiative linking institutions and communities in Mozambique with institutions and communities in Canada

It is a co-operative partnership between the University of Saskatchewan of Canada health science faculties and the Ministry of Health in Mozambique.

THRP sees human-centred development as the ultimate goal of health work; and "new" community health practice as a means through which health workers and communities take action to achieve human-centred development.

THRP is committed to building the capacity of institutions and communities to deal directly with HIV/AIDS, malaria and other major diseases. The program works to strengthen both health systems and local communities, to develop positive social and economic conditions for health.

Health workers trained by this program use innovative methods to focus on:

People with little or no formal education;

Communities that have few resources – particularly rural communities;

HIV/AIDS in the context of community settings and issues such as poverty, malaria and undernourishment;

Mozambicans confronting their own culture and practices in particular the role of gender in the transmission of HIV/AIDS;

The goal of THRP is to empower communities and make them part of health system strengthening. It encourages health and other institutions to work with and respond to communities.

Setting the Standard

At the **Massinga Centre for Continuing Education in Health** (Massinga Training Centre) in rural Mozambique health workers learn to work with communities. Though a special **Training of the Trainers** program, health workers learn community participation and engagement methods in order to train other health workers. Many of the 17,000 health workers in Mozambique are not adequately trained to confront the new realities such as combating the HIV/AIDS pandemic. Training health workers to engage with communities is a major priority in strengthening the health system.

The Minister of Health of Mozambique, in a recent visit to Massinga, sees the Massinga Training Centre as setting the standard as a national model for community participation and health training. Minister Garrido said, **“this Centre sets the standard...it is exemplary...a model of organization..it is what I want in our training institutions. You are in the vanguard, the only ones to do community participation linked to training”**.

With the loss of trained health workers due to illness, especially AIDS, the Mozambique health system is unable to expand its coverage beyond 60 per cent of the population. A capacity to appropriately train health workers linked to community participation and involvement is an utmost priority.

Training of Trainers

The mandate of the Massinga Training Centre is to transform health training--both undergraduate and postgraduate. At Massinga Centre, the continuing education of health workers and of teachers of health training institutions focuses on training of trainers (TOT) using a methodology developed in THRP. **The key components of this methodology are community engagement, critical inquiry, discovery-based learning methods, and sustainable institutional change through curriculum reform and organizational development.**

The continuing education methodology of Massinga Training Centre is informed by community partnerships that are characterized by mutual learning between the Centre and pilot communities. The term ***community participation*** is used to describe the THRP process of community development within a health context to inform training and contribute to community capacity-building. Through the methodology, health workers are challenged in their thinking, feeling, and behavior to transform their teaching and practice. The methodology takes into account the considerable challenge involved for this change to occur since front line personnel are poorly paid, work with limited resources, and have few opportunities for continuing education of a kind that offers career advancement. At the same time in the partnership, community members take ownership for influencing the health care system for better provision of services, all the while building their own capacity for better governance. In this way, health workers and the people they serve reduce the distance between each other. Massinga Centre is becoming nationally known as the field laboratory for effective community participation in action.

Responsive Institutions

The THRP program and the Massinga Training Centre came out of the desire of the Mozambican Ministry of Health to make health and training institutions responsive to community needs and participation.

This link between community and health structures maximizes the resources and capacity of both the institutional side and the civil society side. It makes everyone a part of and a resource to health system strengthening.

Strengthening the Health System and the Local Community

A critical step in confronting HIV/AIDS is to strengthen the capacity of Mozambique to train health workers committed to and skilled in creating more equitable and effective relationships with each other and the communities they serve. Parallel to this is to strengthen the ability of communities to engage in a participative way in building a healthy community.

Rooted in popular education, health promotion and community development approaches, Massinga Training Centre staff work with local people to develop their capacity to build a healthy community. They use four main methods:

- community participation;
- community-based teaching and learning methods;
- critical inquiry; and
- sustainable institutional change and linkages.

In the district communities of Tevele and Basso, community health activists conduct door to door health risk surveys, create community education programs on how to prevent HIV/AIDS and engage the wider community in economic and social development. The Massinga Training Centre links health workers with the community in these efforts.

The results of community involvement and participation in health system strengthening are apparent.

Joint activities between the Massinga Training Centre and communities of Tevele and Basso began by building trust, outlining objectives and expectations and addressing the community's priority health issues. The first concern of the community was to have its own "hospital." The community's primary health issue was malaria, followed by HIV/AIDS. To deal with the need for a local health post, THRP facilitated the training of a young woman chosen by the community to become a health activist, diagnosing and treating the most common ailments. To address the problem of malaria, a joint community mapping and baseline survey exercise was carried out. The Massinga Centre works closely with the Ministry of Health's National Program for the Control of Malaria (NPCM), and has had training from its staff, both at the Centre and in Tevele. Giving the community the lead role in the definition and prioritization of health issues and interventions has neither slowed the rate of progress nor resulted in an unbalanced approach.

This community-led model is proving to be successful. Community-led programs have expanded into theatre and drama presentations on HIV/AIDS prevention, confronting the issue of gender in making women and children the most vulnerable to HIV/AIDS, and the role of health workers in their relationships with communities. The communities are now organizing around the social and economic determinants of health looking at community economic development initiatives that are most appropriate to their needs.

Gender Equality and HIV/AIDS

THRP gives gender equity prominence through its partnership with *Forum Mulher*, the national women's coalition in Mozambique. A module is being completed on gender training, based on workshops in Massinga with *Forum Mulher*, that takes a health sector and health status perspective. It will be one of the key courses linking communities and health workers, tested with different groups and in different settings, refined, and published for wide spread use. This module gives particular emphasis to the interdependence of gender equity and HIV control. Gender differences are at the root of a number of the social, economic and political factors that drive the HIV/AIDS epidemic. Without an understanding of the complex relationship between gender equity and HIV/AIDS, strategies devised to tackle the epidemic will fail. The attitude of men to women remains the cornerstone of behaviour change for preventing infection.

THRP is implementing the "**Building Healthy Communities**" initiative to develop a strong orientation in training and community work on HIV/AIDS. Actions to address HIV/AIDS in Mozambique have lagged behind other countries, especially in rural areas where more than 70% of the population lives. As a result, the incidence of HIV/AIDS is rising with the highest rates being in the southern and central regions of the country. Massinga Training Centre is located in the south, in Inhambane. The town, Massinga, is on the main north-south national highway, and is the most densely populated area in the province. Massinga District is the highest provider of men to work in the mines of South Africa. These miners are at high risk of contracting HIV and bringing it back home. Massinga Centre coordinates with both the provincial and district councils to combat HIV/AIDS. Through its community participation program, THRP is developing pilot experiences of building capacity within communities to take on the challenge of HIV/AIDS while serving as a training laboratory for health workers.

Recently published studies suggest that Africa's HIV/AIDS crisis may be exacerbated by unsafe medical practices, especially injections and non-sterile procedures that occur in both the formal and informal health care system.¹ While international efforts to address this issue exist, they are woefully under-funded.

The national mandate and reach of Massinga Training Centre affords an important opportunity to influence health workers and local practitioners to minimize the risk of HIV/AIDS from transmission through unsafe medical practices, strengthen their role in facilitating community-capacity building in HIV/AIDS prevention and care, and reduce their own personal risk of contacting HIV to maintain a stable workforce, essential to a functioning formal and informal health care system.

Massinga Training Centre is in a unique position to operate programs for formal and informal health workers in the prevention of medical and sexual transmission of HIV, emphasize the interdependence of gender equity and HIV/AIDS for behavioral change, and build community capacity to take on the challenge of preventing sexual, medical, and vertical transmission of HIV especially in rural areas.

Mutual Learning – Making the Links

Institutions and communities in Canada link directly with and learn from the work in Mozambique. Through its leadership and involvement with the International Interdisciplinary Community-University Student Partnership (**IICUSP**) at the University of Saskatchewan THRP contributes to the development of innovative health training in Canada. Canadian health science students are placed with community based organizations to learn about community health and development in both Canada and Mozambique. This mutual learning and exchange strengthens the capacity of health workers, locally and globally, to build healthy communities.

Supporting the Work

The Canadian International Development Agency (CIDA) is a major funder of the program. In addition, many Canadian organizations and individuals support the work on the ground in Mozambique. For example, the Canadian Auto Workers are contributing considerably to the infrastructure of the Massinga Training Centre. Students, church members and others are supporting community projects related to the Massinga.

Evaluation and Recognition

The Canadian International Development Agency (CIDA) has conducted a major evaluation of the THRP work. The program was cited for its innovative methodology and practice. It was recognized as achieving the objectives of appropriate training of health workers, community engagement in health and development and seen as a model to build on. Most recently, the work of THRP and the Massinga Training Centre has been identified as the base to develop a Mozambique wide training program for health workers linked to community participation and engagement.

Two films have been produced, **Mozambique – Land of Hope**, and **Renewal** that document the methodology and practice of THRP, and the engagement with communities.

Sr. Antonio Tanda, THRP Mozambique Director, has received a special award from CIDA in recognition of his groundbreaking work in developing community based health interventions. Another member of the THRP team, Dr. Murray Dickson, author of *Where There is No Dentist*, has been similarly recognized. Gerri Dickson, THRP Canada Director, recently received a special award on international development practices from the University of Saskatchewan.

In Summary

Sub Sahara Africa is facing a major crisis in strengthening its health systems both in the quality of health workers to service the system, and the participation of communities in their own health and development. The Training for Health Renewal program through its Training of Trainers strategy linked to a community participation methodology is a critical model in understanding through action the ability to strengthen health systems.

Sincerely, Steven Lewis, Nominator. October 30th, 2006