

Job title:	CGPP Community Mobiliser
Reports to:	CGPP Project officer
Duration	

Background

CORE Group Polio Project (CGPP) is supporting global polio eradication initiative in Kenya by working closely with Kenya Ministry of Health, WHO and UNICEF. It is working in five border counties of Kenya namely Badhadhe, Afmadow, Bardere, Elwak, Belet-Hawa and Dollow districts of Somalia.

The project supports county health office to improve the planning, operation and monitoring of polio campaign, routine immunization and AFP surveillance. It equally works with community to improve knowledge and behaviour of individuals, households and communities on polio immunization, AFP surveillance and routine immunizations.

CORE Group Polio Project (CGPP) is entrusted for working with community as it is the unique strengths of CGPP NGO members that can add a value to global polio eradication initiative. The critical challenge to polio eradication is to reach a section of population that is hard to reach, high risks, unreached, security compromised, mobile population, border population. This is where CORE Group Polio Project engages itself in and employs its best community mobilization experience to the population for polio vaccinations, surveillance and routine immunization. In Kenya, CGPP is working in most difficult areas along the borders. The population is far, the infrastructure is non-existent, it is security compromised, and the population is mobile. The health care infrastructure is weak as there are no health facilities, some of health facilities are closes due to security reasons, and health facilities are under staffed. In such situation, without external support, the health facilities will not be able to do its part of jobs needed to eradicate polio. In this situation, CGPP employs a community mobilizer for each of its support health facilities to strengthen the community participation to polio eradication and overall health of people in general. This strategy will improve documentation of critical data on the catchment population and communities, improve community participation and support, community based surveillance and improved health service of the health facility in the facility and to the community. CM will be a great resource support for the health facility when it lacks human and support capacity to improve community participation.

CGPP Community Approach

CGPP community approach involves working with community closely in support of polio eradication and routine immunization. Approach involves working with a community team lead by community mobilizers (CM) in each health facility catchment areas. The CM will be the project's focal person to work with health facility team especially the CHEW to improve community awareness, mobilization and participation to improve polio eradication efforts including the routine immunization. S/he will work with CHEW to identify a key community stakeholders that should include CHV, village chiefs and Elders, Traditional Healers, TBAs, Religious leader, teachers and so on. CM will makes monthly visit to each of his catchment villages where by s/he conducts community meeting of key community stakeholders, make visits to them and organize social mobilizations in support of polio eradication which includes mass polio campaign, community surveillance for AFP and routine immunization. The community mobilizer will be paid monthly stipend for the work done at communities.

A CM will be selected from interested and eligible men or women living in the catchment population of the project area. *Health facility in-charges, CHEWs and village chiefs will be involved in the selections of the community mobilizers to foster closer working relationship with health facility staff and support health team community mobilization activities.*

CM should be a self-motivated, respected in the community, and be able to teach or facilitate other in knowing and adopting good health behaviours. He/she should be able read and write English/local language well.

Key tasks and responsibilities: Working closely with the respective health facility team, community mobilizers will

- Identify in each catchment village the key community stakeholders to work with which includes CHV, Village chiefs and Elders, Traditional Healers, TBAs, Religious leader, and teachers. Keep brief profiles of them with contact information including telephones.
- Maintain a brief village profile of catchment village with information on location, population size, distance and pastoralist population and so on. Update periodically
- Develop and maintain a social map for catchment area of health facility
- Maintain a good working relationship with key community stakeholders such as CHV, Village chiefs and Elders, Traditional Healers, TBAs, Religious leader, teachers.
- Visit to each catchment village at least once a month to meet Key Community stakeholders. Use a checklist guide the jobs to be performed during catchment village visit
- Conduct social mobilization in each of catchment village before planned polio campaign working with Key Community Persons
- Conduct orientation on community surveillance for key community stakeholders and establish a system to looking out and reporting of selected diseases and health events.
- Carry out social mobilization and awareness raising activities for routine immunization in each of catchment village
- Interact with households on immunization and health issue and appropriate behaviors
- Work with Key Political, Clan leader, Social leaders, Religious leaders, Schools and institutions in support of polio eradication.
- Implement and monitor community surveillance in collaboration with catchment area health facility
- Coordinate with the local health facility to make sure that when a disease is reported, appropriate actions are taken.
- Support Health Facility in micro planning, during SIA, for routine immunization as appropriate.
- Support health facility in updating catchment village population data including pastoralists
- Provide regular work reports to CGPP polio officer
- Other duties as assigned by CGPP Polio Officer

Monthly CM visit to catchment village:

CM and CHEW work key community stakeholders in villages. CP visits each catchment village at least once a month. During the visit, CM integrates a number of activities as follows:

- 1) Visit key community stakeholders and share updates
- 2) Hold key community stakeholders meeting periodically
- 3) Update information such as population movements – pastoralist, nomads, and reflect changes in village profile and map
- 4) Carry out health education/social mobilization/community activities with community stakeholders

CM in turn will be supervised by the CGPP county polio officer (PO) and County Surveillance Coordinator (SO). PO will keep regular communication with CM in number of ways. PO does so through telephone conversations. PO will organize quarterly review meeting in sub count health office..

Qualifications

Local resident and not employed by others or with other major social responsibilities
At least high school pass
Ability to work with people, community leaders
Ability to move within catchment areas
Have social mobilization and leadership skills
Have training and supervisory skills

Training:

CM will get job orientations and technical training on polio eradication, routine immunization, AFP surveillance and community mobilization activities. CGPP Polio Officer and County Surveillance Coordinator will provide training and refresher trainings.

Recording and Reporting

CM will be given note book and recording and reporting forms. CM will keep the paper copy with them and transmit the reports to CGPP PO. CM will share copy of report to the health facility. CGPP PO will share a copy of CMs report to county surveillance coordinator.

Performance Indicators:

Number and list of key community stakeholder including CHVs
Number and list of catchment villages with key demographic and social and health information
Updated social map for catchment health facility areas in recommended format in last quarter
Number of monthly visits made to catchment village made
Number and type of community meetings held
Number and description of social mobilization conducted during SIA
Number of AFP/other disease or events reported
Updated report on population movement including pastoralist and nomad
Number of meetings held with health facility
Number of reports submitted to PO

Motivation

CM is semi volunteer. CGPP expects about 15 days a month to carry out duties. For the level of efforts put in, CGPP will compensate CM with USD 50 per month. In addition to this, some incidental such as transport fare during field visits for hard to reach and remote villages could be reimbursed. CM will not be entitled to any other compensations or benefits.