STUDY BRIEF

STRENGTHENING HEALTH SYSTEMS BY ADDRESSING COMMUNITY HEALTH WORKERS' MENTAL WELL-BEING AND AGENCY (SHINE)

SHINE
Promoting CHW Wellbeing and Resilience

Focus
Mental well-being of Community Health Workers (CHWs)

Duration
48 months (2022-2026)

Donor
National Institute for Health and Care Research (NIHR), UK

Setting
This project involves conducting research in urban slums and remote rural areas of Kenya, as well as peri-urban and rural settings in Bangladesh to gain cross-contextual, cross-country comparisons and lessons for scale-up in other Low- & Middle-Income Country (LMIC) contexts.

Background

Community Health Workers (CHWs) play a vital role in connecting underserved communities with formal health services, especially in remote and peri-urban areas. Their importance was particularly evident during the COVID-19 crisis, highlighting their role in maintaining adaptable health systems. However, CHWs in low and middle-income countries often remain under-recognized and inadequately supported, despite their essential contributions. Existing support systems tend to focus on increasing service delivery without addressing CHWs' well-being, leading to overwhelming workloads and significant job-related stress—especially in challenging settings. These chronic stressors not only jeopardize CHWs' mental well-being and job performance but also threaten the sustainability and responsiveness of the broader health system. Yet, the health system continues to overlook these issues, providing little support to safeguard CHWs' resilience and retention.

Research Aims

The aim of our research is to explore the stressors faced by CHWs using a community-based participatory research (CBPR) approach, and to co-develop, pilot, and evaluate holistic health system support packages in two different LMIC contexts. These packages will focus on strengthening CHWs' mental well-being and agency, ultimately contributing to greater health system resilience. We will address this long-neglected area by drawing on mental well-being and resilience frameworks and by strengthening both the hardware (e.g., training) and software (e.g., community cohesion and support) components of the health system.

Research Objectives

- To identify strategies and programmes to enhance CHWs' mental well-being, with a specific focus on mental health that is equitable, sustainable and acceptable in LMIC settings.
- To co-design and test innovative health system interventions that are responsive to the diverse personal and job-related stressors (social, material and human) experienced by CHWs.
- To enhance the quality and equity of existing support approaches to ensure a focus on mental well-being that prioritises the diverse needs of CHWs.
- To contribute evidence and knowledge to inform and advocate for support of CHWs mental well-being in future research and programme design in other health systems

Research Methodology

- Undertake analysis of existing global and national policies and practices that support CHWs mental well-being.
- Conduct interdisciplinary research with CHWs, supervisors, key decision/policymakers, and community members using qualitative, participatory methods, quantitative surveys, and embedded participatory evaluation to generate evidence on their experiences and challenges.
- Utilize evidence to co-produce interventions with CHWs and key stakeholders, to support CHWs' mental well-being by promoting their resilience and agency to strengthen the health system's resilience.
- Pilot and evaluate interventions for cost, equity, feasibility, acceptability, and scale-up.

Study Sites in Bangladesh

Research focuses on peri-urban and rural settings. The study sites in Bangladesh include the Mymensingh and Barisal districts, with five upazilas selected from each district.

Partners and collaborators

1. BRAC James P Grant School of Public Health (BRAC JPGSPH), Bangladesh. Bangladesh Collaborators
- Non-Communicable Disease Control (NCDC) Program, Directorate General of Health Services (DGHS), Bangladesh
- BRAC Health Program (BHP)
2. LVCT Health, Kenya
3. African Population and Health Research Centre (APHRC), Kenya
4. Liverpool School of Tropical Medicine (LSTM), UK
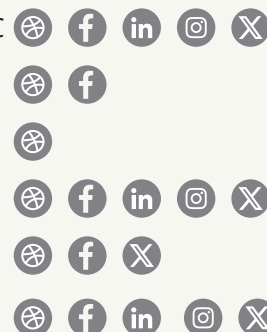
Exploratory (Phase 1)

- To comprehensively analyze the stressors impacting CHWs in rural and urban settings, assess their coping mechanisms, identify necessary support for their mental well-being and health system resilience, and document community beliefs, behaviors, and interactions with CHWs.

Planning (Phase 2)

- Create innovative health systems interventions, addressing both personal and job-related stressors CHWs face. This involves hosting co-design intervention workshops, where CHWs collaborate with supervisors, managers, and policy actors using the 'Stepping Stones' method.
- Use the evidence generated from phase 1 to co-develop and operationalize a holistic support package for the psychosocial well-being of CHWs.

Piloting (Phase 3)

- There will be simultaneous implementation of phases 3 and 4
- This will demonstrate the feasibility and measure outcomes of codeveloped interventions aimed at supporting CHWs mental well-being
- Outputs will include innovative health systems interventions tailored to address personal and job- related stressors, as well as contextualized mental health interventions for CHWs, tested and evaluated for cost, equity, feasibility, acceptability, and potential scale-up
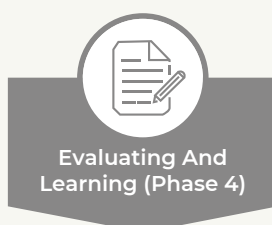
Evaluating And Learning (Phase 4)
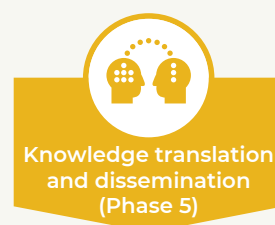
Knowledge translation and dissemination (Phase 5)

- Synthesis of evidence and sharing findings through national & international platforms through a series events engaging key stakeholders

Acknowledgement and Disclaimer