



# What works? What fails?



FINDINGS FROM THE NAVRONGO COMMUNITY  
HEALTH AND FAMILY PLANNING PROJECT

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Navrongo Health Research Centre

## WHO NURSES THE NURSE?

**As a Community Health Officer you are supposed to be living in a community providing health care. Can you explain your presence here at the district hospital?**

I have been attached to the Maternal and Child Health Centre in the District Hospital in Navrongo. I am convalescing from a knee injury following a motorbike accident I got involved in about half a year ago. I am beginning to learn how to walk again so my posting here is to give me the opportunity to exercise my knee as I begin the slow and painful journey to full recovery.

**Give us an insight into your work as a CHO**

I have been a Community Health Officer (CHO) for four years. I started at the Gia community in 2001. After one year I was transferred to Gaani where I stayed for two years before I was sent to Kayoro. Only six months into my assignment at my new station I got involved in an accident with my motorbike.

**Is that the first time you have been involved in an accident with your motorbike?**

No. That was the second time. The first one occurred on September 19, 2003. A cyclist crashed onto my motorbike when I was riding. I fell off the motorbike and got bruised but not seriously injured. I was treated and discharged. I stayed at home for only three days and went back to work. Then as fate would have it, on December 5, 2003, I was involved in another accident. I left for the field at about 10:00 am to supervise health volunteers who were administering Polio vaccines to children. I had hardly moved out on my bike when a man suddenly crossed my way. I had to apply sharp brakes to avoid hitting him. I was moving slowly and tooting my horn to warn pedestrians because there were a lot of people on the road, but all of a sudden here was a man right in front of me and I thought I had to do all I could to avoid running over him. In the process I fell and the motorbike fell on my knee. I did not know I was injured until I tried to lift myself up. I could not. I was helped by those who were around and rushed to the Chiana Health Centre where I was referred to the district hospital and from there to the regional hospital in Bolgatanga. After an x-ray of the injured knee, I was referred to Tamale Hospital, 200 km away to see a bone specialist.



It was in Tamale that I was told it was a torn ligament and an operation was required. I returned home, prepared, and went

back for the operation which was performed on January 9, 2004. I stayed in the ward for four weeks before I was discharged but I could not walk because of the pain and the stiffness of the leg. I have been at home now for five months and you can see that I am now only beginning to learn how to walk again, with the aid of the crutch.

**We sympathize with you for what has happened. How does all this make you feel?**

In fact I don't feel bad about it. I feel I have done my duty. As a CHO I live and work with community members, mainly trying to stop them from falling sick in the first place and also treating those who fall ill. If I injure myself in the course of performing my duties, I take it as an occupational hazard. Moreover, as a motor rider, I expect things like this to happen. Though I feel bad sitting at home doing nothing, I am looking forward to being able to walk well again and to start work afresh.

**How did your community take the news of your accident?**

The community was reportedly thrown into grief and disbelief. The Chief and some of his elders visited me personally at the hospital. I am not surprised that they felt very bad about my accident because I had already built good relations

with the community members and trust between service provider and client had also been established. Kayoro is probably the farthest way and most isolated community in the Kassena-Nankana District and as a nurse midwife I did more than just attend to their minor health needs—I also conducted deliveries in conjunction with Traditional Birth Attendants (TBA). I helped prevent deaths that would have resulted from pregnancy and child delivery complications.

**Is there anything special that needs to be done to recognize the difficulties involved in CHO work?**

The Ministry has no policy for picking up the medical bills of health personnel. That is already bad enough. The individual is left to her fate, which is what I am going through now. The district assisted me with some little money for transportation and promised further assistance but there is nothing else to expect from the Ministry. Take this scenario: *A nurse is sent to the remotest parts to serve. She gets injured in the course of her duty, not during her leisure time. She foots all her medical bills, and when she recovers she is expected to go back to the community to continue to serve and to put up her best. Is this your idea of fairness?*

**I have no idea. But frankly, how can some of these odds be evened?**

The CHO work is a new service delivery initiative. As it is scaled up across the country, there is the need for the policy makers to review service delivery guidelines and set humane conditions of service for CHO taking into consideration their peculiar circumstances and risks.

**Who nurses the nurse at the community level?**

When a CHO is taken ill and she can walk or ride she reports to the nearest clinic and seeks treatment. But I must reiterate that the nurse pays for all the drugs. If the nurse cannot move on her own it is the community’s responsibility to assist. In my case, it was the community that took me in the market truck and sent me to the nearest health post.

**When do you hope to fully resume work as a CHO?**

You know CHO work is not a sedentary business. A CHO seeks the people at their homes and brings them health care. The main mode of doing CHO work is the use of the motorbike which, in rural northern Ghana, is one of the most valuable pieces of equipment for delivering health services. I kick start the bike with my right leg. Since I am injured in the right knee, I don’t know how long it will take for me to regain the strength that I need to kick start a motorbike. That is what it all now depends on—my being able to start the motorbike. But things are not too bad as at now.



**In more active times: Felicia administering immunizations to a child**



**Even in great pain, Felicia maintains her infectious smile that keeps her clients at ease**

**How did your family cope with the situation?**

The family was distraught. You know I am a single parent with three children, two boys and a girl. I also contribute to the bread basket of the extended family. So when I went down everyone was alarmed and I could feel it. But they all did what they could. They lifted me, cleaned me, and coaxed me to eat. Gradually, I was able to take a few steps. Now everyone is recovering from the shock and the smiles are coming back on the faces of my children and family relations and I am happy to see that.

**Conclusion**

May the smiles remain there for a very long time.

*Send questions or comments to: What works? What fails?*  
Navrongo Health Research Centre, Ministry of Health, Box 114, Navrongo, Upper East Region, Ghana  
[What\\_works?@navrongo.mimcom.net](mailto:What_works?@navrongo.mimcom.net)

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