



# What works? What fails?



FINDINGS FROM THE NAVRONGO COMMUNITY  
HEALTH AND FAMILY PLANNING PROJECT

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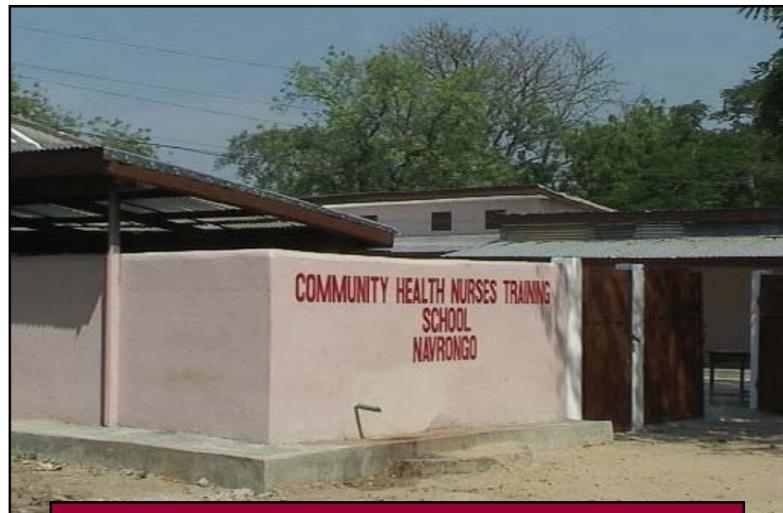
Navrongo Health Research Centre

## NEED, THE MOTHER OF INNOVATION

Dr. Samuel Kweku Enos has been District Director of Health Services of the Kassena-Nankana District for the better part of the life of the Community Health and Family Planning Project. He has also written a couple of "What works..." notes. Notes 13 and 14 sample his impressions about the CHFP and more.

**WW:** A new community health nurses training school has been established in the Kassena-Nankana district (KND) to train nurses for the national Community-based Health Planning and Services (CHPS) programme. As the District Director of Health Services (DDHS), can you tell us how the whole idea came about?

**Dr. Enos:** The idea of establishing a community health nurses training school came about as a result of the need for training more Community Health Nurses (CHN)—since the success of the national CHPS programme will depend largely on the availability of nurses. The CHPS concept is basically about putting CHN in communities to deliver health services to the people. But if you look at the capacity of the existing training schools, it could take about 40 years to produce nurses enough to cover the whole country. But health cannot wait that long. There was therefore the need to find innovative ways of producing more nurses to satisfy this demand. It is thus out this need that the idea came.



The Navrongo Day-Community Health Nurses Training School—a cost-effective way of training nurses for doorstep health care

**WW:** You talked of innovations—so what is innovative or unique about the Navrongo School?

**Dr. Enos:** There are three main things that make the Navrongo Nursing School unique:

- First, the school did not spring up as a government idea but was developed by health workers on the ground and by the people involved in health research in the district.
- The second feature is that the school is a day school. This is something new because all the other nursing schools for CHN are boarding schools. We had learnt that one of the main obstacles the government encounters in setting up new boarding schools is the high cost of feeding and housing. It was therefore thought that the cost of feeding and accommodation could be heavily slashed and the rest of it shared among stakeholders and the direct beneficiaries.
- The final unique feature of the Navrongo initiative is that the school has been built on the foundation of resources from the region. External funding did not play any role for the school to kick off. We did not have to cry out for external financial support from NGOs and other organizations. We needed to demonstrate that such an innovation could be carried out at the community level. An old structure, which was not being put to maximum use, was converted into a school and refurbished with support from the District Assembly, the DHMT and the Navrongo Health Research Centre (NHRC).

**WW: By making it a day school, aren't you running the risk of compromising on the quality?**

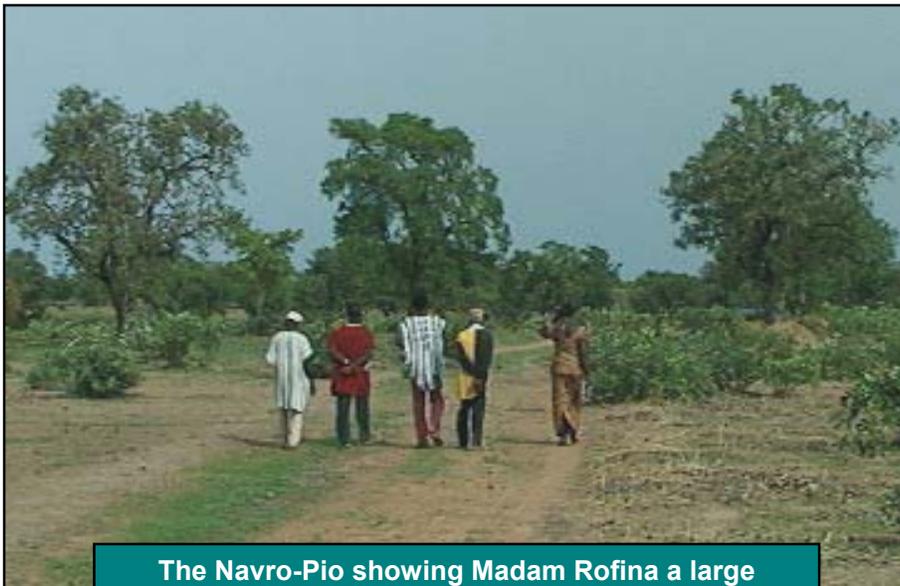
**Dr. Enos:** No. We are not compromising on quality at all because there is no evidence that housing and feeding the students in one place ensures the production of quality nurses. On the contrary, we have reason to believe that given the fact the Navrongo School training is based on practical field demonstration the graduates of our school will be better equipped to carry out community work than those from other schools. In a critical analysis, what makes a good nurse is not largely dependent on whether or not she is schooled in a boarding house but rather it is the quality of training that she gets—this is exactly what we are teaching our students. It will also depend on the attitude you put toward work. Our mode of selection is also something to write home about. Students are selected based on district-level sponsorship, which in the long run ensures makes students accountable to the community to which they are obliged to serve after training.

**WW: What comments will you make on the nursing situation in the KNDA and the region as a whole? Was there really the need to train more nurses?**

**Dr. Enos:** Frankly speaking, the nursing situation in the Kassena-Nankana district and for that matter the Upper East Region is not very bad as compared to that in the southern part of the country. This is as a result of the high exodus of nurses to the outside world which fever does not seem to have caught up with nurses upcountry yet. Also, in terms of nurse-client ratios, the region has an advantage over some of the regions down south. In spite of this there is still a huge gap. For instance, as of 2002, only 18 nurses were placed in the communities in KNDA, even under experimental conditions out of an anticipated 30 nurses who are needed to cover the district fully. With the implementation of the Community-based Health Planning and Services (CHPS) Initiative, the demand for more nurses will far outstrip supply. Traditionally, two nurses per year were posted to the region from the Tamale Community Health Nurses Training School. There is no gainsaying that this is woefully inadequate. There was therefore the urgent need to find innovative ways of producing more nurses to fill in the gap and make health care delivery more accessible and affordable to the people.

**WW: What has been the contribution of the traditional authority to the Navrongo School project?**

**Dr. Enos:** When the idea was mooted, discussions were held with research scientists of the NHRC and the then regional director of health services, Dr. Erasmus Agongo. We then engaged the traditional authority and opinion leaders in the KNDA as we usually do anytime there is a new programme that we intend to roll out in the district. We particularly consulted the Navro-Pio for a permanent site for the school and he offered us a large swathe of land. Our hope is that when we get the necessary funding from central government, we will be able to develop the site and put up a permanent structure for the school.



**The Navro-Pio showing Madam Rofina a large swathe of land for the Navrongo School project**

*Send questions or comments to: What works? What fails?*

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