

**Improving Universal Coverage of Maternal and Child Health (MCH) in the Great Lakes Region:
Assessment of perspectives of Policy Makers, Program Planners and Managers and Community Leaders on
Lay Health Worker (LHW) programs in Uganda and South Sudan in 2013**

Abstract

Objectives: we aimed to explore the perspectives of policy makers, health program planners and managers and community leaders on Lay Health Worker programs in Uganda and South Sudan in 2013.

Methods: We interviewed purposefully selected sample of 24 participants from the public and private health sectors, community leaders using semi-structured questionnaires and facilitated three focus group discussions with ANC and postnatal users in three districts in Uganda. We reviewed three planning and or guiding frameworks both at national and local government levels. Transcripts from the audio records of interviews were inductively coded in ATLAS.ti 6.0.15 and thematic content analysis was used. We reviewed four national level policy documents in South Sudan but could not undertake primary data collection.

Results: Six themes emerged describing the perspectives of Policy makers, health program planners and managers and local leaders: competency, motivation, working relationships, responsiveness and accountability, resources and user access to healthcare services. Public sector program planners and managers were critical on shifting clinical roles to VHTs contrary to their private-not-for-profit sector counter parts citing inadequate VHT selection oversight. All except national level participants viewed VHT policy inflexible about number of VHTs per village in contrast with national VHT guidelines. Although documentary review reveals that PHC package of South Sudan be implemented at community level, we could not find evidence for a public supported community-level Lay Health Worker Program in South Sudan.

Conclusions: Public sector health program planners and managers were critical of shifting basic clinical tasks to VHTs. Selection criteria should involve health program planners and managers to build task-shifting confidence. The policy guidelines for the VHT program need further dissemination with more clarifications on supervision arrangements. Uganda's VHT program and the findings of this study may contribute to future efforts of South Sudan to roll out such a program. Future studies need to involve participation of donor institutions in the two countries.

Key words: Lay Health Worker programs; Stakeholder perspectives; Maternal and Child Health, Village Health Teams, Community Health Workers