

## ***CBHC Sustainability***

behaviour in order to identify their own needs and problems, and take informed decisions for their welfare. In view of this line of thinking, the Association has committed itself to pursuing sustainability by designing both direct and indirect relevant mechanisms to ensure that a strong foundation is laid for effective CBHC implementation.

Some of the ways used over the years therefore, are discussed in detail here below:

### ***Community Capacity Building***

This has been a leading activity in our plans. Before the actual training of Community Resource Persons (CORPs) is often prolonged mobilisation and sensitization exercises which involve all political and civic leadership structure as well as the communities in the intended operational project areas. This sensitisation must be adequate, that is, people (communities) should be sensitized enough on any new concept to reach the level of spontaneously responding with satisfaction saying, "**Aha! now what can we do about it?**" This expression calls for real practice, discussion and planning which is followed by formation of committees and/or identifying CORPs for training at the various levels.

It has been observed in a few cases, where awareness raising was inadequate with limited community mobilisation, that such PHC/CBHC Projects (usually introduced by outside agencies) collapsed almost immediately the resources were withdrawn. In

our experience, unless the communities voluntarily get interested and actively become involved in the various activities at different stages, that project however beneficial it might appear, is bound to collapse after external resources cease.

We have observed that in CBHC over the years, even though we are not able to quantify this, that to enhance attitude and behaviour change, requires some degree of literacy on the part of the community. Similarly there is need for mutual trust and respect which, in fact, supports efforts to introduce the literacy element in the project activities without much resistance. While we have urged our member programs, we have not had sufficient opportunity to incorporate functional literacy in our curriculum. This is one of the key issues for our future consideration. People must be able to read and at least write simple things in order to understand and appreciate some of the PHC/CBHC concepts and know what happens elsewhere in the world.

We have also learned the importance of working with the local/community existing groups and NGOs as well as government sectors both to solicit immediate support and to ensure the longevity of the project. In this way we avoid creating new structures unless it is necessary to do so. New structures like committees often overburden the communities, and gradually members drop off thus making them dysfunctional. Similarly, sustainability cannot be expected to be achieved unless the CORPs who in most cases are volunteers, are trained.

### ***Capacity Building in Institutions of higher learning:***

The Association has been able to influence colleagues of paramedics and Makerere and Mbarara University Medical Schools to include CBHC Approaches (theory and field practical experience) into their curricula. The Secretariat has played a key role in this development, and has had external support which accelerated the process. This initiative aims at enabling students in the medical schools and other related institutions to appreciate and internalise CBHC better during and after their training, and hence support such health initiatives for community welfare.

### ***Capacity Building of Community and District Structures: Training and Coordination of CBHC***

The Association conceived this idea of building and strengthening community capacity and other level structures right from the beginning. The committees undergo the pertinent training regarding their roles and responsibilities in the promotion of health and development.

Their training covers a wide range of topics including participatory problem identification, planning, support supervision of CORPS, monitoring and evaluation, baseline surveys, community based information systems, Income Generating Activities etc.

In the district of Kabarole, Kasese, Gulu, Kapchorwa, Moroto, Rakai, and Mbale the Association has worked through the