

DATABASE OF CIVIL SOCIETY ORGANIZATIONS IN BURKINA FASO BOOSTS THE COMMUNITY RESPONSE

A database of civil society organizations in Burkina Faso was instrumental in developing the community component of a concept note on health systems strengthening, according to Simon Kaboré, executive director of RAME (Réseau pour l'Accès aux Médicaments Essentiels) and member of the country coordinating mechanism.

In 2012, PADS (Programme d'Appui au Développement Sanitaire), an entity of the Ministry of Health and a principal recipient of a Global Fund grant, ordered a mapping of all the community stakeholders involved in the health system in Burkina Faso in order to update a database of NGOs and associations. In 2008, a similar work was done by PAMAC (Programme d'Appui au Monde Associatif et Communautaire). A review of the existing databases from DEP (Direction des Etudes et de la Planification and DSONG (Direction du Suivi des Organisations Non Gouvernementales) was also used.

This latest updating of the database was completed in 2014.

An invaluable source of information, the database showed the type of activities implemented by associations, where their interventions took place, who the beneficiaries were, and what tools the associations had at their disposal. It also included the challenges they met as well as suggestions on improving how activities are coordinated and on what monitoring and evaluation was required in order to make their work more effective and visible.

Through the database, several weaknesses were identified with respect to the coordination of interventions and how they were structured. The three diseases were not covered equally: According to the database, for example, only 9.3% of health centers provided TB treatment. This information led to a

decision to include in the concept note activities to reinforce the community response in the health sector – activities related to service delivery (such as providing support to patients, community monitoring and awareness raising) as well as to institutional strengthening (such as the payment of rent, and money for salaries and computers).

Challenges in creating the database

This database was not easy to do. PADS had to recruit a team of consultants to lead the process, including a public health doctor (who was the head of mission), a community specialist and an engineer specialized in statistics.

The objectives of the team were to do a document review of all NGOs and associations involved in the community health sector; establish a methodology for additional research; develop data collection tools; and put together a work plan. Then, they had to collect the data in the field, design the mapping and the database, and organize a workshop to present the results.

This process was overseen by the DGS (Direction Générale de la Santé) whose role was to provide recommendations at each step of the process (methodology, work plan, data collection, field visits, research, interviews with different groups, preliminary report). The project lasted 60 days.

One of the challenges was the fact that the existing data were incomplete or contained outdated information. Several associations did not manage to provide all the information requested in the form. The missing information had to do with equipment (vehicles, computers) and finances (amounts and sources). Some networks of associations did not have this type of information about their members; those that did had not updated the information.

The database unveiled various problems affecting the community work. The planned activities did not always correspond to the profile for community agents which Burkina Faso adopted in 2014. There was a lack of motivation and a lack of a common approach for community interventions.

Solutions were proposed in the concept note, including developing an orientation guide for community health agents; organizing training sessions; making equipment and supplies available; monitoring the activities implemented by community groups; organizing strategic information workshops for elected officials and local leaders; organizing quarterly monitoring and coordination meetings; and providing institutional support to the associations.

Acknowledging the challenges in collecting information from the associations, Simon Kaboré recommends a better collaboration in future with CORAB (Coalition des Réseaux et Associations du Burkina Faso) – the national network of associations – and with technical and financial partners.

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