



AN INTERNATIONAL DEVELOPMENT AND REFUGEE AID ORGANIZATION

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CONCERN AMERICA TRAINED VILLAGE HEALTH PROMOTER PRACTITIONERS AS THE 'DOCTORS' OF THEIR COMMUNITIES

A Tendon Repair by a Young Health Promoter Practitioner

While visiting Las Cruces [Guatemala] I had the chance to observe one of the health promoters repair a tendon injury in a young man. This was remarkable in a number of ways. First off, this promoter was a young man for whom Spanish was not his native language. In addition to learning the health promoter curriculum, he had to learn Spanish (the Mayan language of Q'eqchi' being his native tongue) in order to be successful. Interestingly, perhaps because of these limitations, he had to repeat the first year's curriculum before moving onto the second year curriculum. Yet despite these limitations, this promoter was one of the most professional, caring and thorough care givers I have ever had the occasion to observe.

While watching this young promoter care for his patients a teenager came in with a machete injury to his left index finger. The promoter carefully examined the young man, determining he had likely severed his distal extensor tendon, necessitating not just a skin repair but a careful identification and repair of this lacerated tendon.

Our team watched somewhat in awe, as the promoter took the injured teen out to the picnic table to prepare for the repair. He used meticulous sterile technique as he set up a sterile field, cleansed the wound and identified the two ends of the severed tendon. Grasping these ends he carefully tied each to the other using the appropriate absorbable suture and figure of 8 ligatures. After repairing and subsequently examining the repair, he closed the overlying skin with interrupted nylon sutures. This was followed by splinting and detailed instruction to the injured party on wound care, infection precautions and follow up. At each step the promoter's actions were precise, thorough and meticulous. I reflected how over the years I have sometimes become more casual, almost sloppy about these kinds of events, but this young promoter.....

I came away from this experience deeply impressed with the quality, skill and service these health promoters provide to their community. I had no doubt that without this service this teenager would have been permanently disabled due to his injury. But that with the service and care rendered by this health promoter this teenager would fully recover with the complete use of his finger. In the actions of this young promoter in this remote village in Guatemala not only had the young injured teen been touched and made better, but I had been touched and become a better physician.

(By Dr. Michael Gilbert, a Family Medicine specialist with St. Joseph Heritage Medical Group in Orange, California, who visited a group of "Health Promoter Practitioners" in northern Guatemala in 2009)

In places like Chiapas, Mexico; Petén, Guatemala; and the Lower Atrato region of Colombia, the health care providers who give daily care in hundreds of villages and towns are not doctors or nurses but rather **Health Promoter Practitioners**. These amazing community health care providers, most with less than three years of primary school, have been successfully trained as their communities' medical practitioners who diagnose and treat patients, administer a wide range of medicines, and even perform surgeries like the tendon repair described above.

Access to quality and affordable health care is a serious concern for billions of people in most of our world. In materially poor countries with few resources to dedicate to health care, combined with factors that increase barriers to care such as rural isolation, war, and language/cultural differences, there is little hope that fully-staffed clinics and hospitals will be built in the near future, or that existing services will be improved and expanded to meet daily health care needs.

THERE EXISTS A MODEL OF COMMUNITY-BASED, PRIMARY HEALTH CARE THAT IS AFFORDABLE, EFFECTIVE, AND THAT ENGAGES COMMUNITY MEMBERS IN ITS PROVISION: “HEALTH PROMOTER PRACTITIONERS.”

In the U.S., the term “health promoter” often refers to individuals who provide health education and basic health care follow-up under the strict supervision of a medical doctor. In the regions of Latin America mentioned above, these Health Promoter Practitioners’ depth of knowledge, skills, and ability to provide primary health care, in their native languages, is comparable to the work of physician assistants and nurse practitioners in the U.S. As a result, in villages located hours away from health care centers and whose residents earn less than \$2.00/day, high-quality, low-cost health care is a reality, saving and sustaining innumerable lives, using few resources.¹

Health Promoter Practitioner and the “Birth Box”

"Three weeks after the last course, Pregnancy and Child Birth, there was a knock on Jose's door at midnight. It was a neighbor asking for help. His wife was in labor. Their village is a three-hour-hike to the road, and then a four-hour drive to the hospital. "I didn't want to go, because this man had made fun of my studies [to be a health promoter], but my father told me to go. He said, 'What are you studying for if you don't go?' When Jose arrived at the house, a thatch hut with no electricity and a dirt floor like all the others in the village, he found the exhausted wife with a breech delivery. The body had come out, but the arms and head were stuck, as so often happens. 'I was scared, but I just tried to remember the box.'

"During the Pregnancy and Child Birth course, every health promoter in the course came to the front of the class and 'received a breech birth' from the 'birth box,' allowing their hands to learn how to extract the head from the pelvis. 'I just kept thinking, It's not a woman, it's a box,' said Jose. Finally, he was able to free the baby's head, effectively saving the woman's life, and forever establishing his position as the village health care worker."

(By Dr. Kate Feibusch, a Medical Doctor who has been training health promoter practitioners in Guatemala since 2000.)

The core training of Health Promoter Practitioners takes four years, with ongoing advanced training as needed (see table for course overview). As Health Promoter Practitioners learn and master a new skill, the appropriate medicines and equipment are provided to them in the form of a donation to their

¹ For another discussion of the importance and success of health promoter practitioners, see Dr. David Morley and Hermione Lovel's book *My Name Is Today, an Illustrated Discussion of Child-Health, Society and Poverty in Less-Developed Countries*, published in 1986 by McMillan Publishers Ltd., London, p.219. In this book they state: "...In the majority of successful programmes, very different people have been selected. Many are illiterate but prove to be highly effective as part-time health workers. They usually have deep roots in the community and are respected members. They are usually women who have raised a family of their own. Frequently they have themselves been traditional birth attendants or other traditional providers of health care. If men, they have been successful farmers or herbalists. Their influence is likely to be felt far outside the medical field."

communities. The medicines, chosen from the World Health Organization’s list of Essential Medicines², are prescribed and sold on a revolving fund basis by Health Promoter Practitioners, helping to ensure a steady supply of medicines that are administered safely and appropriately. Health Promoter Practitioners work out of a village clinic or their own homes, some with regular clinic hours and others on an “as needed” basis. Many of them specialize in the care they provide including dental or women’s health. Those who excel in leadership skills become the trainers and accompaniers of the newer Health Promoter Practitioners in their area, helping to build a sound local health infrastructure.

As their awareness and involvement grows some Health Promoter Practitioners also become community organizers who advocate for improved health services and policies with their own governments. In Colombia, for example, the Health Promoter Practitioners formed their own organization called the Committee of Associated Inter-ethnic Health Promoters of the Lower Atrato (COAPIBAS), and, in 2007, they won the Clarence H. Moore Award for Voluntary Service, a prize of the Pan America Health and Education Foundation (from 600 groups nominated throughout Latin America). The Award is a testament to their delivery of health care in their communities and to their ability to organize around health care in the Lower Atrato region of Colombia.

With Health Promoter Practitioners primary health care is a viable option in economically impoverished and challenging situations. Their transformative work is a model that can and should be replicated around the world.

| Health Promoter Practitioner Training Curriculum | | | | |
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| Year 1 | Year 2 | Year 3 | Year 4 | Advanced Courses |
| <ul style="list-style-type: none"> • Community Health: What is a Health Promoter?; Identify and Describe Common Diseases; etc. • Digestive System • Respiratory System • Nutrition and Child Development • Medicinal Plants and Traditional Medicine • Skin • Hygiene and Sanitation | <ul style="list-style-type: none"> • First Aid • Essential Medicines • Suturing • Reproductive Health, Pregnancy, and Delivery • Sexually Transmitted Diseases • Oral Health • Chronic Illnesses • Sanitation and Hygiene | <ul style="list-style-type: none"> • Chronic Diseases • Mental Health • Gender • Biodiversity and Managing Ecological Plagues • Advanced Nutrition • Natural Medicine | <ul style="list-style-type: none"> • Environmental Health • Health Policy • Leadership and Community Organizing • Facilitating Meetings • Educational and Supervising Techniques • Laboratory and Pharmacy for Rural Clinics | <ul style="list-style-type: none"> • Eyes and Skin • Nutrition and Growth • Community Organizing • Muscles and Skeletal Frame • Women’s Health • Diabetes • Heart • Advanced Suturing • Complicated Deliveries |

² For more information about the World Health Organization’s list of Essential Medicines, visit www.who.int/topics/essential_medicines/en/