

**Job Profile**

**Community Health Agent (CHA)– KZN – South Africa**

1. **Terms of Reference**

Title: Community Health Agent

Locality: Eshowe / Mbongolwane, KZN, South Africa

Programme: Community Health Agents Programme (CHAP)

Duration: 12 months (extendable)

Starting date: 01 September 2012

Reporting to: CHAP Team Leader

1. **General Overview**

Médecins sans Frontières (Doctors without Borders) is an international medical humanitarian organisation that delivers emergency aid to vulnerable populations. It is financially independent, and impartial with regard to race, religion or political affiliation. MSF has been providing TB and HIV services in South Africa since 1999 and in Lesotho since 2006. It also provides medical and humanitarian assistance to vulnerable migrant in Musina and inner-city Johannesburg.

MSF operates an ambitious ‘HIV and TB incidence reduction’-project in Eshowe and Mbongolwane health service areas in KwaZulu Natal, called Bending the Curves. Working with the Department of Health to decrease the incidence of new HIV and TB infections, and to decrease the morbidity and mortality of HIV/TB in the community. This will be achieved by strengthening existing services and expanding testing and case finding within the community, and ensuring rapid initiation to treatment, and improved adherence and retention in care. A large part of the project will be working with the communities – ensuring that as many people as possible know their HIV/TB status and that those who should be on HIV and TB treatment are on and remain on treatment. This will require significant community mobilization both within the health service facilities but also through local NGOs, CBOs, traditional and current political leaders and alternative health care providers.

1. **Summary of the position**

The Community Health Agent will engage his/her local community on all health and social aspects of HIV/AIDS, Tuberculosis (TB), STI, family planning, and related issues. S/he will visit homesteads in a designated area to conduct door-to-door HIV counselling and testing, TB screening, and will engage residents in health talks on the above topics. Eligible clients will be integrated in the existing referral system and linkage to care will be ensured through regular follow-ups, including tracing of defaulting clients. The Community Health Agent has to be easily accessible by the community and become the first person of contact on HIV/AIDS, TB, STI, etc. and offer continuous support to both HIV and TB positive patients, with focus on treatment adherence.

1. **Specific Activities**

These are the seven main activities to be performed by the community health agents:

1. Visit assigned homesteads on a rotational basis at least once every calendar month; list provided at the beginning of each month and can vary from month to month
2. To conduct door-to-door HIV counselling and testing in assigned homesteads:
   1. General health education on HIV/AIDS, TB and STIs to be offered whether the clients consent to test or not; this includes condom distribution and demonstration on condom use;
   2. Pre- and post-test counselling to all individuals consenting to HIV test;
   3. Initial HIV screening and confirmation rapid tests (if indicated).

To reach projected monthly targets of people counselled and tested in the households.

1. To conduct TB screening to all HIV positive clients and refer all TB suspects to the health facility.

1. To ensure proper referral system to the health facilities is in place and to conduct follow-up ensuring that proper service is provided.
2. Collect all relevant data (as required and prescribed by M&E) in the respective forms. Draft reports as required including but not limited to:
   1. List of all clients screened for TB and referred to the nearest health facility
   2. Monthly report reflecting monthly activities, achievements and challenges
3. To offer continuous support to both TB and HIV positive clients to ensure that clients are linked and retained in care. The list of newly referred clients should be provided to the medical team so as to monitor the referral system.
4. To conduct defaulter tracing for both TB and on ART clients through a list that will be provided by his/her nearest health facility. A list of traced and re-linked clients should be submitted to the health facility and CHA coordinators.
5. General: support all other MSF activities in their assigned region in order to mobilise communities, promote services and provide general information about the organisation to the public
6. **Selection Criteria**

Qualifications and training requirement

|  |
| --- |
| * Matric (or equivalent) * Qualifications or courses attended in HIV Counselling and Testing; TB knowledge and added advantage * Good understanding of the community in rural and deep rural areas their culture and religion. * At least 1 year working experience in community based organizations on HIV/AIDS, TB and STI issues preferably in the project area   Other requirements |
| * Fluent in IsiZulu and English * Detailed knowledge of the Project areas, preferably currently living in or at least from the area * Basic numeracy skills * Report writing skills * Passion for community development and self development |