



Case Study: Community Drug Distributors in the control of NTDs in Ghana: CDD and Health System perspectives

Ghana is burdened with ten out of the seventeen neglected tropical diseases mostly found in sub-Saharan Africa. Each of the ten regions in Ghana has at least three of these diseases and are mostly found in rural and some urban communities. Over the years, the main strategy used by the country to control neglected tropical diseases has been mass drug administration. Community drug distributors are mostly used to deliver drugs to whole communities as part of the control of neglected tropical diseases and COUNTDOWN is exploring the factors that affect and influence the effectiveness of community drug distributors in implementing neglected tropical disease control activities in selected districts in Ghana.

This study was conducted using qualitative approach to explore community drug distributors involved in the control of neglected tropical diseases in Ghana.

Study Design and Findings

- 54 focus group discussions and 40 in-depth interviews



Community Drug Distributors Selection and Community Involvement

In most cases the drug distributors had been selected based on their experience in prevention activities and their residence in the community. They were often selected by community leaders rather than communities. This is not standard criterion for community drug distributor selection.

“They came to this town to meet the chief and the elders and I was appointed. The community members are happy about me.”

Community Drug Distributor

Community Drug Distributors and Supervision

Community drug distributors were motivated by a desire to rid their communities of lymphatic filariasis. However, they described how challenging and timing consuming the drug distribution was for them. Delivering drugs during the wet season when roads were inaccessible was a struggle. They also discussed how unsupported and unsupervised they often felt.

“Throughout the MDA, no one even comes round to encourage us and ask about how the work is going and whether we have challenges. Once they give us the drugs, that’s all until we finish and send their books to them. I still have drugs that are two years old in my room. They won’t come for it or ask”

Community Drug Distributor

Community Responses to Mass Drug Administration

In communities where mass drug distribution has been going on for more than five years community drug distributors discussed how community fatigue made their work challenging. They highlighted the resistance some community members voiced in relation to MDA and how community engagement for the programmes was almost non-existent.

“People lack knowledge about why they take drugs and why they should take drugs year after year. The problem is that we do not have an ongoing educational and sensitization activities running. We only go out there and just attempt to give out drugs but because they lack understanding, people refuse the drugs. How can we eliminate diseases?”

Community Drug Distributor

“There is virtually no programmed community educational or sensitization activity on the NTDs. We only paste posters when the people cannot even read, then how do we expect the message to reach them and bring about a change. So, to achieve success in improving access, there should be a programme in place like we have for malaria, TB and other diseases”

Community Drug Distributor

Gender and Equity

From the international literature it is known that gender shapes health workers experiences in a wide range of ways. For community drug distributors they often had to dedicate weeks of their time to distribute the drugs. For male and female farmers, if drug distribution took place during periods of high intensity activity they were often taken away from their fields. This left an impact on their livelihoods. They also had caring responsibilities to perform in addition to their drug distribution activities increasing their budget.



Impact

Neglected tropical diseases can cause a great deal of suffering. To date the focus has been on distributing drugs yearly to affected communities. In Ghana, despite some programmes beginning more than a decade ago there is still ongoing transmission of some disease. Understanding the perspectives of the front-line community volunteers delivering the drugs can help to improve the programme.

Ensuring that the neglected tropical disease programmes function will prevent women, men, girls and boys from being infected with neglected tropical diseases. This is important because the diseases can cause life-long problems from people affected.

These findings are important for making and implementing policy for neglected tropical diseases. There is often geographic distance between those making policy and those delivering policy on the front-line. This work provides voices and perspectives from community drug distributors that are not often heard.

Key Recommendations

- ✓ It is important that community members are involved in community drug distributor selection
- ✓ Drug distribution duration should be increased and avoid the wet season or when people are celebrating religious festivals
- ✓ Need for increased and improved supervision of community drug distributors by health personnel
- ✓ Communities should be sufficiently sensitised and ongoing community engagement is required

References and Further Reading

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