

Local heroes, Global impact: engaging community workers for climate and health.

Summary

Date: 22nd November 2024

Time: 11 am- 4pm

Total number of participants: 31 female community health workers

Engagement Method: Participatory Rural Appraisal (PRA) method, discussion and presentation

Venue: Meeting hall of ward 6, Lalitpur Metropolitan City, Patan, Nepal.

Objective: To engage community health workers (CHWs) in Nepal by using participatory rural appraisal (PRA) tools to link the impacts of climate change to health challenges.

Outcome: CHWs were engaged and their level of understanding to link the connection between climate-change and health was explored.



Background:

In September 2024, Nepal experienced devastating floods and landslides resulting in 200+ fatalities, many injured and displaced families. Among the most affected areas was Lalitpur district, where locals described the incident as one of the destructive floods they had ever experienced. They claimed the flood and landslide in September was unexpected and reported it to be the result of climate change.

Community health workers (CHWs) play a vital role in delivering basic healthcare services in Nepal. They serve as a bridge between the healthcare system and communities, addressing primary health needs, raising awareness, and promoting preventive measures. They are mostly engaged to provide services in maternal and child health, immunization, and disease prevention. Despite their critical contributions, CHWs often face challenges such as limited resources, inadequate training, and the burden of addressing health issues exacerbated by climate change and natural disasters. Strengthening the capacity of CHWs is essential to improving health outcomes and building resilient communities across Nepal.

Objective:

With an objective to engage community health workers (CHWs) in Nepal by using participatory rural appraisal (PRA) tools to link the impacts of climate change to health challenges, this mini-grant project was conducted with around 31 female community health workers who play a pivotal role in community awareness.

Program description:

Preparation for the project implementation started as soon as I received the grant approval email. Given the short duration to complete the project activity, the first step included planning & preparation for the project, identifying CHWs, developing detailed agenda and preparing the required logistics. My team members helped me with identifying and contacting the CHWs, venue booking, contacting the local government stakeholders and making them aware of the project activity. I was involved in developing the agenda and arranging the logistics.

Though the initial plan was to conduct the project for 2 days, due to time and financial limitation, the program was constricted for a day. 31 CHWs from ward 6, 7, 8 and 9 attended the event. Ward is the smallest administrative unit in Nepal. My team helped me in the execution of the project activities.

Detailed description of the event:

1. Ice-breaking session (Web-of-impact): The program started with an ice-breaking session with a game- “Web of impact” .

Objective: To introduce participants to the interconnectedness of climate change and health while fostering team-building and interaction.



Gameplay:

- I facilitated the session by throwing the yarn to the next person and asked them to tell us how climate change affected health in their community. This went on when the next person tossed the ball of yarn to another participant while holding onto their section of the string doing the same thing.
- As the ball of yarn was passed around, a web of string was formed, symbolizing the interconnected impacts of climate change and health.

Output:

- With the responses received from the CHWs, I realized that the CHWs lacked the understanding of climate change and the effect it could have on health.

- At the end of the session, emphasis on the importance of collaboration in addressing climate-health challenges.

2. Working in pairs on the interconnectedness of climate-change and health

The CHWs sitting next to each other were paired and asked to discuss the interconnectedness of climate-change with health and the trend of health impacts 10 years ago and now because of climate-change.



Output:

- The CHWs pointed out a rise in infectious diseases such as dengue, pneumonia, eye-infections, water-borne infections, COPD as a result of climate-change.
- They also pointed out the mental health impacts of climate-change. The infectious diseases could result in mental tensions putting an impact on our mental health.
- They compared clean water, air and environment 10 years before and contaminated and polluted environmental components at the present time.
- The CHWs also reported the rise in hotness of sun leading to increased rates of skin cancer at the present time.

3. Seasonal mapping: Working in pairs was followed by a group work of seasonal mapping of climate-health challenges. After the group-work and presentation, a summary chart was presented by my team.

Objective: To identify and visualize seasonal patterns of climate-related events and their impact on health in the community.

Group-work: The CHWs were asked to draw a 12-month timeline on the sheet, labeling each month and they had to fill in climate events in each month column and the health impact that

could bring in. At the end of the presentations, the CHWs were asked about their role during this time. They reported making people aware about WASH or preventive actions, distributing chlorine drops, health education and working together with the local government.



Output: This helped to identify common trends across the communities and helped to identify the gaps in preparedness.

4. Journey mapping: The CHWs were asked to visualize various climate-change events they could remember of, explain what could be their causes and the health challenges imposed by them throughout the journey of their life-time.

Objectives: To identify the patterns, frequency, causes of climate events in different spans of time and how its effect on health has changed over the years.

Output: The CHWs identified different socio-political events that could have led to the climate events to capture diverse experiences.

For e.g., democracy led to free movement within the country leading to urbanization and overcrowding in some places causing floods, landslides that ended up in an increased incidence of water-borne infections.



5. Cause-effect tree diagram: The next PRA tool used with the CHWs was the cause-effect tree diagram. The CHWs were divided into 2 groups and were asked to identify a specific climate-health challenge and were asked to identify the cause and effects of the problem. **Objective:** To analyze and visualize the causes of a specific health challenge caused by climate change and its effects on individuals and the community.

Group-work: One of the groups worked on dengue and the other group worked on water-borne infection during flood.

Output:

The dengue group reported over-population, overcrowding, cemented surface, water source pollution, water containment to be the causes of the climate-change that results in increased temperature. Reported effects were dengue out-break, deaths, mental tensions, lack of appetite, misinformation leading to wrong health choices, shortages of hospital beds and medical supplies.

The water-borne infection group reported causes as: overpopulation leading to throwing sewage in water-sources, lack of awareness, lack of hygiene and sanitation,

lack of literacy that causes water-borne infections like cholera and its effect to be fever, outbreak, weakness, malnutrition, deaths, financial pressure.



6. Visioning exercise: The final PRA tool that was applied with the CHWs was visioning tool that encourages participants to imagine a desired future or outcome and works backward to identify actions needed to achieve that vision.

Objective: To encourage CHWs to visualize a future where climate-related health issues are minimized and to identify the steps necessary to achieve that future.

During the visioning exercise: As a facilitator, I asked all the CHWs to close their eyes and picture their community 5-10 years from now where climate-related health issues were no longer as severe and they were living in a clean, fresh, pollution-free environment. They were asked to imagine that. After opening their eyes, they were asked to share their reflection or vision with the group and were asked what initiatives they took to reach there. Then they were asked to analyze the current situation and were asked to identify the path to reach what they envisioned.

Output: Visioning encourages long-term thinking and planning, ensuring that immediate actions are part of a broader strategy for community resilience.



Conclusion

The *"Local Heroes, Global Impact"* initiative successfully demonstrated the potential of engaging community health workers in addressing the intersection of climate change and health challenges. Through participatory rural appraisal tools, CHWs not only gained a deeper understanding of the complex dynamics of climate-health impacts but also actively contributed insights based on their community experiences. The sessions highlighted critical health issues exacerbated by climate change, such as rising infectious diseases, mental health strains, and environmental degradation.

This project also revealed gaps in awareness and preparedness among CHWs, emphasizing the need for ongoing capacity-building efforts to empower them as climate-health advocates. Despite the limited time frame and resources, the project achieved its objectives by fostering collaboration, enhancing problem-solving skills, and inspiring CHWs to envision sustainable solutions for their communities.

Way Forward

Building on this foundation, there should be provision to provide training for CHWs or development of informative materials to strengthen their understanding of climate-health linkages. These CHWs represent the general community so it can be concluded that there is a gap in awareness among the community people as well. Measures should be taken to bridge the existing gap in their understanding to prevent the issue of climate-change from exacerbating.