The Community Health Systems Catalog Dataset

User Guide

Since 2012, the Advancing Partners & Communities (APC) project has supported community health programs, with a focus on family planning. APC develops practical tools and approaches to help global and national stakeholders identify knowledge and programming gaps to harmonize and scale up community health programs.

What is the Community Health Systems Catalog?

In March 2014, In support of global efforts to strengthen, scale up, and harmonize community health programs, APC launched the Community Health Systems (CHS) Catalog, a one-stop shop for information on community health and family planning policies and programs in 25 countries. In 2017, APC updated the CHS Catalog, which features:

- 25 country profiles.
- A list of country policies and strategies.
- A set of infographics.
- A synthesis of cross-country trends.
- A complete dataset.

Photo: Robin Hammond, JSI

The CHS Catalog content is organized by the WHO's Health System Building Blocks framework and comprises information based on individual country policies and strategies. The catalog focuses on national public-sector programs, and when possible, captures community-based private sector health programs operating at scale.

How were the data collected?

APC developed the CHS Catalog using a 121-question survey in collaboration with the Strengthening Partnerships, Results, and Innovations in Nutrition Globally project and the Maternal and Child Survival Program (MCSP), each funded by USAID. APC recommends referring to the survey tool when exploring the dataset.
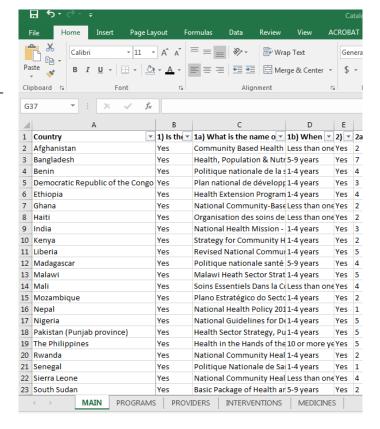
The project collected data between January 2016 and June 2017 through country consultants, who gathered community health policies, strategies, curricula, and other national documents vetted by country authorities, and used them to complete the survey. APC staff verified the data and input final responses in an electronic survey using a combined Enketo/SurveyCTO platform. The project then transferred and formatted this information in Microsoft Excel to enhance usability.

How is the dataset organized?

The CHS Catalog survey dataset is organized across five Excel spreadsheets to facilitate comparisons across countries, programs, and community health providers.

1. MAIN SHEET

- Includes the main survey responses related to community health systems, organized by **country**.
- Contains responses for survey questions #1–25, 46–56, 76–102, 109, 111, 113, and 119–120.
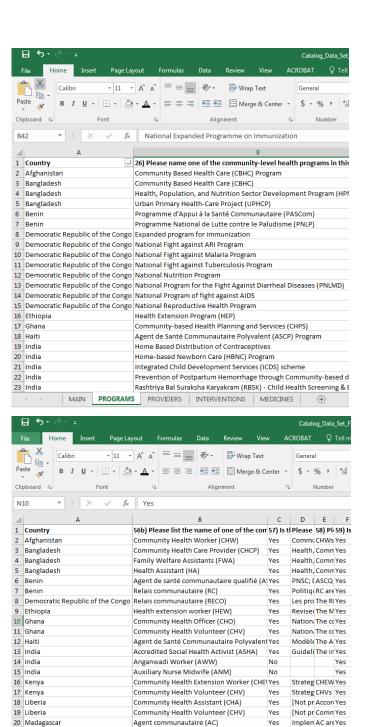
2. PROGRAMS SHEET

- Includes survey responses about community health programs, organized by **country** and specific **program**.
- Contains responses for survey questions #25–44.

	A	B
1	Country	26) Please name one of the community-level health programs in this
2	Afghanistan	Community Based Health Care (CBHC) Program
3	Bangladesh	Community Based Health Care (CBHC)
4	Bangladesh	Health, Population, and Nutrition Sector Development Program (HPI
5	Bangladesh	Urban Primary Health-Care Project (UPHCP)
6	Benin	Programme d'Appui à la Santé Communautaire (PASCom)
7	Benin	Programme National de Lutte contre le Paludisme (PNLP)
8	Democratic Republic of the Congo	Expanded program for immunization
9	Democratic Republic of the Congo	National Fight against ARI Program
10	Democratic Republic of the Congo	National Fight against Malaria Program
11	Democratic Republic of the Congo	National Fight against Tuberculosis Program
12	Democratic Republic of the Congo	National Nutrition Program
13	Democratic Republic of the Congo	National Program for the Fight Against Diarrheal Diseases (PNLMD)
14	Democratic Republic of the Congo	National Program of fight against AIDS
15	Democratic Republic of the Congo	National Reproductive Health Program
16	Ethiopia	Health Extension Program (HEP)
17	Ghana	Community-based Health Planning and Services (CHPS)
18	Haiti	Agent de Santé Communautaire Polyvalent (ASCP) Program
19	India	Home Based Distribution of Contraceptives
20	India	Home-based Newborn Care (HBNC) Program
21	India	Integrated Child Development Services (ICDS) scheme
22	India	Prevention of Postpartum Hemorrhage through Community-based d
23	India	Rashtriya Bal Suraksha Karyakram (RBSK) - Child Health Screening & E

3. PROVIDERS SHEET

- Includes survey responses about community health providers, organized by **country** and **cadre**.
- Contains responses for survey questions #56b–75.

	A	B	C	D	E	F
1	Country	56b) Please list the name of one of the con	57) Is tl Please	58) Pl 59) Is
2	Afghanistan	Community Health Worker (CHW)	Yes	Commu	CHWs	Yes
3	Bangladesh	Community Health Care Provider (CHCP)	Yes	Health,	Comn	Yes
4	Bangladesh	Family Welfare Assistants (FWA)	Yes	Health,	Comn	Yes
5	Bangladesh	Health Assistant (HA)	Yes	Health,	Comn	Yes
6	Benin	Agent de santé communautaire qualifié (A!	Yes	PNSC; I	ASCQ	Yes
7	Benin	Relais communautaire (RC)	Yes	Politiqu	RC are	Yes
8	Democratic Republic of the Congo	Relais communautaire (RECO)	Yes	Les pro	The RI	Yes
9	Ethiopia	Health extension worker (HEW)	Yes	Revise(	The M	Yes
10	Ghana	Community Health Officer (CHO)	Yes	Nationi	The cc	Yes
11	Ghana	Community Health Volunteer (CHV)	Yes	Nationi	The cc	Yes
12	Haiti	Agent de Santé Communautaire Polyvalent	Yes	Modèle	The A	Yes
13	India	Accredited Social Health Activist (ASHA)	Yes	Guideli	The in	Yes
14	India	Anganwadi Worker (AWW)	No			Yes
15	India	Auxiliary Nurse Midwife (ANM)	No			Yes
16	Kenya	Community Health Extension Worker (CHE\	Yes	Strateg	CHEW	Yes
17	Kenya	Community Health Volunteer (CHV)	Yes	Strateg	CHVs	Yes
18	Liberia	Community Health Assistant (CHA)	Yes	[Not pr	Accor	Yes
19	Liberia	Community Health Volunteer (CHV)	Yes	[Not pr	Comn	Yes
20	Madagascar	Agent communautaire (AC)	Yes	Implen	AC are	Yes
21	Malawi	Community Based Distribution Agent (CBD,	Yes	Family	Prima	Yes
22	Malawi	Community Home Based Care Volunteer (C	Yes	Malawi	CHBC\	Yes
23	Malawi	Community Leader for Action on Nutrition	Yes	Malawi	The H	Yes

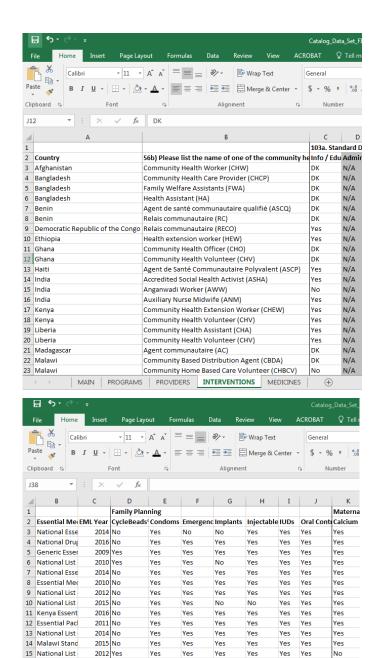## 4. INTERVENTIONS SHEET

- Includes survey responses about which interventions community health providers are allowed to provide, according to policy, organized by country and cadre.
- Contains responses for survey questions #103–118 (see the tables at the end of the survey tool).

5. MEDICINES SHEET

- Indicates which selected medicines, supplies, and commodities are included in each country's Essential Medicines List.

How can the dataset be used?

While the CHS Catalog country profiles and cross-country synthesis provide a sizeable overview of community health in 25 countries, the complete dataset contains even more detail. The Excel format enables users to perform simple tabulations and secondary data analyses to meet their specific information needs.

The dataset:

- Collates information on a range of national community health models to inform country-level policy and program planning and design. This allows countries seeking to create or update community health policies and programs learn from their neighbors' experience.
- Provides detailed information to serve as a foundation for policy analyses and research. The dataset distills information from extracted from more than 100 countries' policies on community health, health systems strengthening, family planning, and other health topics.
- Advances dialogue on the role and definition of a CHW. With data on more than130 health interventions, the dataset is a key resource for information on the services that countries permit CHWs to provide. This information is particularly useful in the context of task-sharing, a practice that many countries are undertaking to better distribute the burden of health service delivery across the workforce and improve access for communities that are underserved.

Photo: Mubeen Siddiqui, MCSP

When using the CHS Catalog dataset, consider the following:

1. **Catalog data was collected from written policy guidance.** The purpose of the CHS Catalog is to provide a policy-level perspective on community health systems. APC applied a broad definition of 'policy' that included national and subnational policies, strategic plans, training curricula, and other documents that guide community health systems. Hence, it does not necessarily capture the realities of policy implementation or service delivery on the ground.
2. **The catalog captures a snapshot in time.** The data comes from policy guidance developed before 2017, thus policies developed after the dates on the individual CHS Catalog country profiles may not be captured.
3. **Policies are often vague, incomplete, and/or contradictory**, which presents challenges in distilling and interpreting written guidance. When possible, APC conducted interviews with local experts to validate the information. APC recommends using the CHS Catalog country profiles, the original policies and strategies (listed on the CHS Catalog website), and/or other resources as companions to this dataset.

Citing the CHS Catalog dataset

If you use the CHS Catalog data in your work, please use the following citation:

Advancing Partners & Communities. 2017. *The Community Health Systems Catalog 2016–2017*. Arlington, VA: Advancing Partners & Communities. Available at https://www.advancingpartners.org/resources/chsc

Photo: Kate Holt, MCSP