
Reproductive Health

Social and Behavioral Science Research (SBSR)

4-28-2020

The community health system in Mali: An overview

Frontline Health Project

Follow this and additional works at: https://knowledgecommons.popcouncil.org/departments_sbsr-rh



Part of the [Community-Based Research Commons](#), and the [International Public Health Commons](#)

Recommended Citation

Frontline Health Project. 2020. "The community health system in Mali: An overview." Washington, DC: Population Council.

This Brief is brought to you for free and open access by the Population Council.

The Community Health System in Mali: An Overview

HEALTH SYSTEM GOVERNANCE

In Mali, the community health system is decentralized and operates across five levels:

- At the **national** level, the General Directorate of Health and Public Hygiene (DGSHP*) at the Ministry of Health and Social Action (MSAS*) collaborates with other ministries to develop key community health policies and strategies, and maintains a system to collect and analyze community data. The National Federation of Community Health Associations (FENASCOM*) is an advisory board which operates at this level. National health programs are updated approximately every five years via national health policies.
- At the **regional** level, the regional health directorate (DRS*) implements policies, ensures the availability of commodities, supports community health provider training, and documents and evaluates activities. At this level, the regional branch of FENASCOM, known as the Regional Federation of Community Health Associations (FERASCOM*) acts as an advisory board for regional health issues.
- At the **district** level, the district management team known in French as the *equipe cadre du district* (ECD*) establishes and oversees health area teams. A district coordination committee provides technical and financial support to the health areas.
- At the **health area** (*aire de santé*) level, the community health associations (ASACOs*) create and manage community health centers (CSCOMs*). Health area teams, consisting of representation from the ASACO, the CSCOM, the mayor, and NGOs, implement health services, including identifying service delivery points, and selecting and monitoring community health workers (CHWs).
- At the **community** level, village health committees (VHCs) support community mobilization and manage health service delivery. VHCs comprise village and religious leaders, traditional healers, women's and youth organizations, and other local partners.

*Acronym is in French

ROLE OF COMMUNITY HEALTH WORKERS

The health system in Mali relies on two cadres of CHWs to deliver health care services, primarily to rural populations: agents de santé communautaire (ASC*) and relais communautaires (relais). As of 2017, national ASC programs were not fully operational as outlined in national health policies, and national budgets did not factor in adequate payment for ASCs. As a result, ASC programs in Mali are dependent on mixed funding from the national government, donors, NGOs, health districts, and local communities (1). However, in 2019, the president of Mali announced a series of reforms to increase health service delivery and establish a standardized network of ASCs within the national healthcare system. More information about these reforms and other national health policies is on the following page.

ASCs have previous training, often as nurses aides or auxiliary midwives. They receive a salary, supervise relais, and are responsible for various health service delivery activities, including distributing family planning, offering basic newborn care, conducting community integrated-management of childhood illnesses, participating in immunization campaigns, and delivering health information to communities. ASCs are supervised by technical directors of the health centers (DTCs*), who are generally nurses or doctors at the CSCOMs (2).



Photo Credit: Souleymane Bathieno/Health Policy Plus, Project 2018

Coverage ratios for ASCs depend on the geographic region in which they serve. As stipulated in forthcoming policies, there should be one ASC for every 700 people in southern Mali, and one ASC covering 100-500 people in northern Mali. Each ASC is responsible for providing services for 1-3 villages, which constitute an ASC site. ASC sites in southern Mali span three kilometers. In northern Mali, ASC sites span 25 kilometers in areas that have a fixed health facility, and 60 kilometers in areas that are serviced only by mobile medical units (2).

Relais function similar to community health volunteers (CHVs) in other African countries; they are selected by their communities and serve as unpaid volunteers who assist ASCs in health education and promotion, community mobilization, and health service delivery. Specific duties include the provision of family planning, referring clients to the ASC or CSCOM, and conducting follow up visits with households as needed. Relais are expected to provide services to approximately 50 households at the village level (2).

COMMUNITY HEALTH POLICY

The community health system in Mali is guided by various documents that contribute to one community health strategy. The *National Implementation Guide for Essential Community Health Care (SEC*: Guide nationale pour la mise en œuvre)* is the main community health document which outlines roles and responsibilities of community health providers and processes for organization, management, and delivery of health services. The SEC is a component of Mali's national health and social development program as outlined in the *Decennial Health and Social Development Program (PRODESS* III) 2014-2018* (3).

*Acronym is in French

The Decennial Health and Social Development Plan (PDDSS) 2014-2023* provides an implementation framework for the PRODESS III, outlines eleven strategic objectives focused on health systems strengthening, and emphasizes community participation in health (2).

A key supplementary document that guides ASC service delivery is the *Essential Community Health Care: ASC Handbook*, which provides information about the services that ASCs are expected to deliver. There is a related guide for relais, but it has not been updated since 2014 (2).

NATIONAL REFORMS TO EXPAND ACCESS TO HEALTH CARE SERVICES

Although Mali's maternal, child (under five years), and infant mortality rates have fallen over the past two decades, they still remain among the highest rates in the world (1). In an effort to reduce the number of maternal, child, and infant deaths and significantly improve health outcomes for the general population, the government of Mali announced that it would be introducing a series of national healthcare reforms (4). The reforms, which are expected to take full effect by 2022, include:

- Providing contraceptives free of charge;
- Free preventative and curative health care for children under five and pregnant women;
- Increasing national budget allocations to health;
- Adding thousands of ASCs to the health workforce and strengthening and standardizing their role within the national health system



Photo Credit: Jordan Burns/PMI. 2015.

Box 2. What are the implications of Mali's proposed health reforms for vulnerable populations?

Despite an estimated 50% of its population living below the international poverty line, the government of Mali imposed user fees for health services beginning in the 1980s. This practice contributed to the country's historically high infant, child, and maternal mortality rates due to many households' inability to afford preventative and curative care. Malians living in rural areas face additional challenges when accessing care due to a lack of health facilities. The announced reforms mark the first effort by the government to fully invest in and streamline ASC programs at the national level. The deployment of government-employed ASCs, along with the elimination of user fees at the point of care for pregnant women and children under five, have the potential to increase the number of Malians receiving essential health services while reducing the number of preventable deaths.

In addition to reducing the number of maternal, child, and infant deaths and improving other health outcomes for Malians, the reforms are expected to address specific challenges related to current ASC programs, such as sustainability, funding, and high turnover rates (4). African public health officials also note that the increase in the number of ASCs has the potential to significantly reduce the number of deaths due to malaria and diarrheal disease, which are the leading causes of mortality in Mali (5).

A consortium of non-governmental organizations (NGOs) such as Health Policy Plus (HP+) and Muso Health are working with the government of Mali and local community health partners and program stakeholders to advance and fully execute the reform efforts by 2022 (1).



Photo Credit: Ben Stevens/Action Against Hunger Mali

REFERENCES

1. Saint-Firmin PP, Diakite B, Stratton S, Ortiz C. 2018. Community Health Worker Program in Mali Under Threat: Evidence to Drive Advocacy Efforts. Washington, D.C: Health Policy Plus.
2. Devlin K, Egan KF, Pandit-Rajani T. 2016. Community Health Systems Catalog Country Profile : Mali. Arlington, VA; Advancing Partners and Communities.
3. Ministère de la Santé et de l'Hygiène Publique. 2014. Plan Decennal de Développement Sanitaire et Social (PDDSS) 2014-2023. Bamako, Mali: Government of Mali.
4. Ministère de la Santé et de l'Hygiène Publique. 2019. New Presidential Initiative Launches in Mali, Strikes at the Epicenter of the Global Maternal and Child Mortality Crisis. Retrieved from: <https://www.musohealth.org/wp-content/uploads/2019/02/Pathbreaking-Presidential-Healthcare-Reform-Mali.pdf>
5. Adepoju P. 2019. Mali announces far-reaching health reform. The Lancet. [https://doi.org/10.1016/S1473-3099\(20\)30056-6](https://doi.org/10.1016/S1473-3099(20)30056-6).

CONTACT

For more information about the Frontline Health project in Mali, contact:

Timothy Abuya, Associate, Population Council (Kenya)
tabuya@popcouncil.org

Karen Kirk, Staff Associate, Population Council (New York, USA)
kkirk@popcouncil.org

Suggested citation: Frontline Health Project. 2020. "The Community Health System in Mali: Overview." Washington, D.C.: Population Council.