

Learning package: Community strengthening and engagement

## Community referral systems: catalysing client journeys from home to the health centre

Community referral systems enable timely utilisation of healthcare services. Partnering to Save Lives' periodic snapshot surveys show the importance of community referral systems upon health seeking behaviours.

Strong referral systems help to ensure timely and effective use of health services, and are an important feature of successful reproductive, maternal and newborn health (RMNH) programs.<sup>1</sup> To enable timely service utilisation, Partnering to Save Lives (PSL) strengthened community referral systems within its suite of behaviour change communication (BCC) activities in remote northeastern communities. PSL collaborated with community volunteers who lead activities that included listening and dialogue groups (LDGs), live radio broadcasts, traditional birth attendant (TBA)-midwife alliances, and village health education events. Each of these activities encouraged women to access appropriate and timely RMNH services.

PSL conducted three snapshot surveys over its lifetime to determine the proportion of RMNH clients who were referred through a community referral mechanism. PSL completed exit interviews with RMNH clients (i.e. women of reproductive age, including ethnic minority

and poor women) in randomly selected, PSL-supported health centres in Kratie, Mondul Kiri, Ratanak Kiri and Stung Treng provinces. Surveys were conducted in rainy and dry seasons to account for seasonal differences in service utilisation.

The survey results showed that as PSL BCC activities were rolled out across the four provinces, community referral mechanisms demonstrated increases as sources of client referrals, including for ethnic minority groups, poor women and women with disabilities.

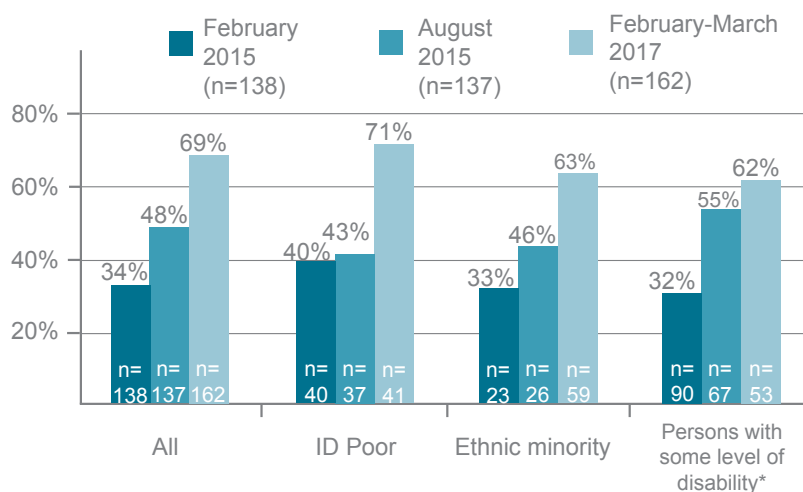
1. Kannarath, C., and Somuny, S. (2012). *NGO good practices in strengthening community-based referral system in Cambodia.*

In 2017, 69% of surveyed RMNH clients in PSL-supported health centres were referred through a PSL community referral mechanism.

### Key results

Community referral systems demonstrated trends of increasing RMNH care-seeking and service utilisation over time, particularly for vulnerable groups, as shown in Figure 1 at right.

Figure 1: Percentage of people referred by a community referral mechanism



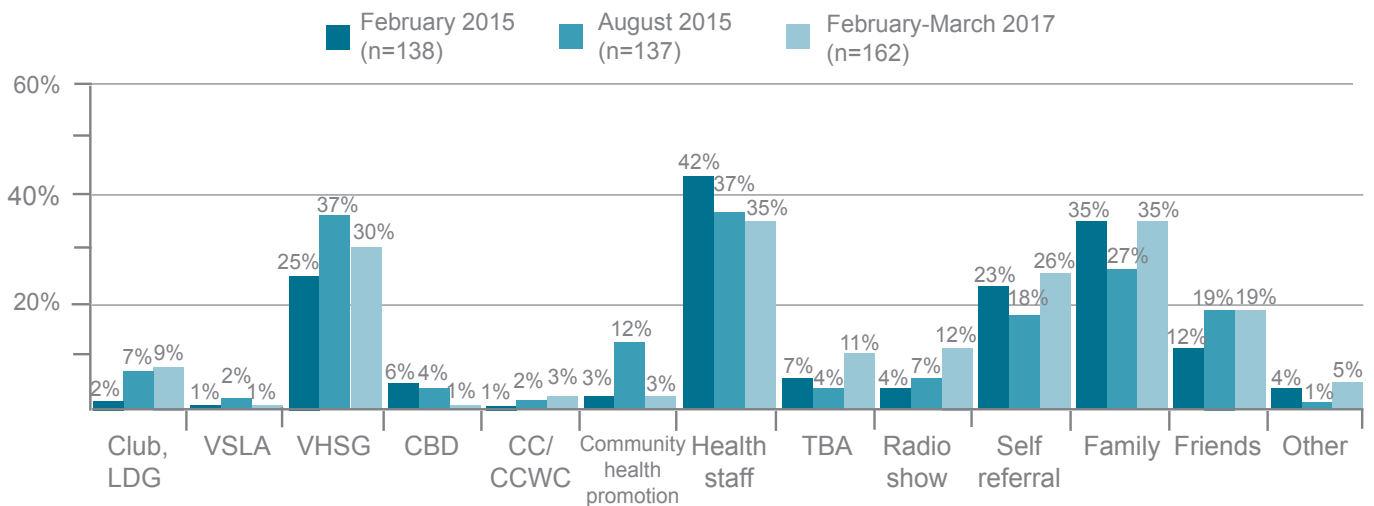
\*Functional disability was assessed using the Washington Group Short Set Questions

## Key results, continued

When comparing all sources of referrals, the most common sources remained village health support groups (VHSGs), health staff, friends, family and self-referral, see Figure 2. Of the mechanisms supported by PSL, radio broadcasts, TBAs and community clubs increased their share of referrals by the third survey, corresponding with full

implementation of the PSL BCC framework. These results are consistent with the PSL whole-of-program endline survey, which found that PSL had a statistically significant positive effect on women accessing services via a community referral mechanism.

Figure 2: Referral sources, all surveys



## Limitations

There were some limitations to the snapshot surveys. In each case, the surveys had a relatively small sample size (n= 138,137 and 162 respectively across three surveys), so the results may not be statistically significant. Additionally, due to the convenience sampling approach, these results cannot be generalised across all RMNH clients in the northeast.

## Discussion and conclusions

Despite these limitations, the survey results provide some useful insights:

- The high occurrence of referrals by a VHSG, family member or friend emphasises the strong influence of these people over women’s healthcare decisions. It also highlights the importance of BCC in the community to increase knowledge about healthy behaviours and danger signs, and to prompt timely referrals and service utilisation.
- The survey results showed that the most commonly accessed services were antenatal care, followed by family planning and safe delivery. In line with the 2014 Cambodian Demographic and Health Survey findings, very few women were attending for postnatal care.

- Comparing the results of the three surveys suggests that interventions by PSL successfully increased the proportion of women referred for RMNH services particularly for certain vulnerable groups that are the focus of PSL’s activities, such as ethnic minority women, poor and women with disability. The PSL whole-of-program endline survey confirmed a statistically significant effect for ID poor women and those with disabilities in PSL-supported provinces, which showed that these women had a higher rate of referral than in non-PSL locations. (Endline survey data could not be analysed to determine whether this also applied to ethnic minorities).

Together, these findings demonstrate that community referral systems are beneficial for improving RMNH service utilisation and should be continued. Concurrent support for VHSGs and other BCC activities may also help to disseminate accurate health information among community members who refer each other and enable timely use of services.

