An all-encompassing ‘fruitbowl’ approach
The Strengthening Community Health and HIV Response in Nigeria (SCHH) project

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A unique health promotion strategy used by Christian Aid Nigeria in its SCHH project is the ‘fruitbowl’ approach, which involves providing health education to communities and households on various issues including family planning, HIV, malaria, tuberculosis, maternal and child health (MCH), and water, sanitation and hygiene (WASH).

Health education is provided through community health agents (CHAs), selected from project communities and trained by Christian Aid partners to be focal points on health issues. CHAs then receive a manual which they use to educate other community members.

The benefits of the fruitbowl approach lie in the information and solutions it provides on different health challenges facing families and communities. One such community is Olakpoga, in Otukpo Local Government Area, Benue state, where CHAs were trained by Christian Aid partner Ohonyeta Care Givers (OCAG).

The Olakpoga CHAs have gone door to door in the community providing information and education on different health issues. As a result:

- Members of the community have learned to use long-lasting insecticidal nets (LLINs) to prevent malaria.
- The uptake of antenatal care by expectant mothers has increased.
- Using the manual, CHAs have taught community members to cover food and water to prevent infections which lead to diarrhoea.
- Mothers have been educated in preparing salt-sugar solution for children with diarrhoea.
- CHAs have provided information on HIV and tuberculosis testing and prevention.

1 The local government of the marginalised community of Olakpoga is said to be the oldest in Benue state and very developed, but the community itself is still underdeveloped.
CHAs have supported the community development committee’s campaign for construction of latrines by educating community members on the disadvantages of open defecation.

Judith Eche, a mother and businesswoman in Olakpoga, confirmed the multifaceted approach was bearing fruit. Judith was pregnant when CHAs first visited her and accessed antenatal care as a result of the information they provided. Her baby was found to be in the breech position and the situation was remedied before she gave birth. During antenatal care she was given a LLIN, as recommended by the CHAs. She didn’t suffer malaria during her pregnancy and her children get malaria less frequently now, leaving Judith more time for her business. Judith also learnt to make salt-sugar solution, which helped treat her son’s diarrhoea, so he didn’t have to visit the health centre.

Grace Elias, a mother and farmer from Olakpoga, said the CHAs taught her personal hygiene to protect her baby from diseases and provided information which led her to use Vitamin A supplements and deworming medicine, which has made her older children stronger and more active. Christian Aid has partnered with the Vitamin Angels Alliance to increase access to Vitamin A supplements and deworming for children under five in hard to reach communities. Grace was also taught to use a LLIN, which she received free from the health centre, and now does not suffer malaria as frequently as she used to.
Dorcas Alade, a mother and farmer, said her life had changed since the CHAs came to her door. ‘The CHAs are very useful. We would have lived our old lives if not for them,’ she added.

Through the efforts of CHAs, many households know much more about the causes and prevention and, to an extent, the treatment of common diseases. CHA Christiana Ochela said: ‘There are no more mild diseases in this community.’

Though good progress has been made and community members are happier and healthier, the CHAs still receive some complaints. Community members sometimes ask for LLINS, but while the nets are provided free to pregnant women, other people have to pay for them and they often don’t have the money. CHAs also report that community members request drugs from them to cure diseases they have learnt about. When this happens, the CHAs refer them to health centres for treatment and use the opportunity to reinforce prevention messages.