

## Research Topic: Use of intermediaries in improved supportive supervision process in 12 local governments in Enugu state, Eastern Nigeria

Article by Tina Isi Adesina  
*Lecturer, Sikkim Manipal University, Nigeria*  
*Email: tadesina995@gmail.com*

### Introduction

Enugu state is situated in the south-east geopolitical zone of Nigeria, with a population of over 3.2 million people (estimated in 2012). (*population.gov.ng*). Enugu state has within the state 17 local government areas with monitoring and evaluation officers supervising the health care delivery centers. It was noted that over 180 health care workers had very poor understanding of the uses of data and the relevance of data capturing tools. The LGA M & E officers were trained and acted as intermediaries in mentoring and providing supportive supervision to the CHCW.

**Objective:** In developing countries, supervision is a widely recognized strategy for improving health worker performance; and anecdotally, maintaining regular, high-quality supervision is difficult. However, remarkably little research has explored in depth why supervision is so challenging. Supervision is a widely accepted form of improving health workers performance and for improving patient health outcomes in developing countries (Ewereji, 2011). However maintaining frequent and high quality supervision can be quite challenging and can sometimes be difficult especially in a developing country like Nigeria where poor supervision can be as ineffective as no supervision at all (Vu, 2014).

**Methods/intervention:** Record reviews, focus group discussion, peer discussions and discussions during meetings were used to assist health care workers in reviewing their performances. Supportive supervision was carried out on the job both formally and informally with 12 LGA officers supervising 180 health care facilities. Monthly data collection / capacity building exercises were carried out for period of 12 months. This improved LGA officers performance and enabled them mentor the CHWS in their respective LGAs.

**Findings:** At first, very few supervision took place, after carrying out a capacity building workshop and incorporating these capacity building activities in monthly data collection meetings, the errors in data collected from CHWS reduced. The major problem encountered afterwards were bad road network, intra facility transfers, poor staff motivation, poor ownership of data, increased supervision workload, facility staff demanding incentives or monetary rewards.

**Conclusion:** Leadership support is crucial to achieving a successful and qualitative health care delivery system (Crigler et al, 2013). As such, supervision should be monitored from the highest level in the state by applying this, the LGA officers and their respective supervisors take ownership, use their authority to promote sustainable supervision in the state.

Working with the state intermediaries' shows that consistent monitoring and supervision and helps to foster understanding of the evolving influences on supervision. By doing this, they use their resources and authority to promote supervision and remove impediments to supervision. Support from leaders can be crucial, thus donors and politicians should help make supervision a true priority. As with front-line clinicians, supervisors are health workers who need support. We emphasize the importance of research to identify effective and affordable strategies for improving supervision frequency and quality.

## References

- [1.] Enwereji E. E (2011) Making Supervision Supportive and Sustainable in Primary Health Care, [Online] Available from: <http://ghf.g2hp.net/2011/12/08/making-supervision-supportive-and-sustainable-in-primary-health-care-services-in-nigeria/>
- [2.] Rowe A. K, Onikpo .F, Lama M. and Deming M. S (2009) the rise and fall of supervision in a project designed to strengthen supervision of Integrated Management of Childhood Illness in Benin. Health Policy and Planning Journal, Vol 25. Pp:125–134 [Online] Available from: <http://heapol.oxfordjournals.org/content/25/2/125.full.pdf+html>
- [3.] Huyen Vu (2014) Supervision of Community Health Workers in Low- and Middle-Income Countries. [Online] Available from: [http://peersforprogress.org/pfp\\_blog/supervision-of-community-health-workers-in-low-and-middle-income-countries/](http://peersforprogress.org/pfp_blog/supervision-of-community-health-workers-in-low-and-middle-income-countries/)
- [4.] Lauren Crigler, Jessica Gergen, and Henry Perry (2013) Supervision of Community Health Workers. [Online] Available from:  
[http://www.mchip.net/sites/default/files/mchipfiles/09\\_CHW\\_Supervision.pdf](http://www.mchip.net/sites/default/files/mchipfiles/09_CHW_Supervision.pdf)  
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<http://web.archive.org/web/20110519235026/http://www.population.gov.ng/files/nationalfinal.pdf>  
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