AMREF INTERNATIONAL TRAINING CENTER

Qualification Code	:	102105T4COH
Qualification	:	Level 5
Unit Code	:	HE/OS/CH/CR/01/5/A
Unit of Competency	:	Monitor Community Healthcare

WRITTEN ASSESSMENT

Time: 3 HOURS

INSTRUCTIONS TO CANDIDATE

1. Marks for each question are indicated in the brackets.
2. The paper consists of **TWO** sections: **A** and **B**.
3. Candidates are provided with a separate answer booklet
4. **DO NOT** write on this question paper.

This paper consists of THREE (3) printed pages

Candidates should check the question paper to ascertain that all pages are printed as indicated and that no questions are missing.

SECTION A (40 MARKS)

Answer ALL the questions in this section.

1. Define the following terms as used in community health practice:
   a) Health promotion (2 Marks)
   b) Community disease surveillance (2 Marks)

2. You are part of a community health outreach team in Village X and notice several children frequently falling sick with respiratory infections. Identify two interventions you could implement to reduce these illnesses. (2 Marks)
3. As an intern supervising Person Y on household visits, you notice families are not practicing proper handwashing. Outline two steps you would take to educate households on hand hygiene effectively. (2 Marks)
4. You accompany a CHP on a vaccination outreach in Village Z and find that some children have missed scheduled immunizations. State three services you should provide to ensure full immunization coverage. (3 Marks)
5. You are training CHPs on maternal and newborn health. Identify three key topics you would cover to help households prevent and manage common maternal and neonatal issues. (3 Marks)
6. In Village Y, malaria case reporting is incomplete and inconsistent. Mention three possible barriers causing delays in disease surveillance. (3 Marks)
7. In your monthly CHP drug kits review in Village X, you notice missing labels and expired medicines. Identify three reasons that might lead to poor drug storage and handling. (3 Marks)
8. You observe that some CHPs lack essential equipment for attending minor injuries. Outline four tools or supplies that should always be included in a CHP first aid kit. (4 Marks)
9. As a Community Health Officer with Organization P, you notice low attendance at hygiene promotion sessions in Village Z. Identify four factors contributing to poor participation and suggest practical solutions. (4 Marks)
10. You are collaborating with the Community Health Committee (CHC) in Village Y to improve health awareness. Outline four roles the CHC can play to mobilize the community effectively. (4 Marks)
11. In Village X while conducting health needs assessment, you observe a high prevalence of malnutrition among children under five. Identify four community-based interventions to improve child nutrition and growth. (4 Marks)

12. You are planning health education sessions on waterborne diseases for households in Village Z. Mention four innovative methods you could use to ensure uptake of recommended hygiene practices.

(4 Marks)

SECTION B (60 MARKS)

Answer Any THREE Questions in This Section

13. You have been deployed to a semi-rural sub-county following reports of rising public health concerns. The local authorities instruct you to conduct a rapid community health assessment. As you interact with households, local leaders, youths, and health facility staff, you begin noticing recurring gaps in service access, behavior, and available resources. Your findings will determine the action plan for targeted interventions in the area.

a) Describe five common health needs in the community. **(10 Marks)**

b) Explain five criteria that can be used to prioritize health needs during planning. **(10 Marks)**

14. You are appointed as a Community Health Officer to support disease surveillance in rural and informal settlements. In your first week, you observe weak reporting structures, delayed referrals, and limited awareness of early warning signs among community members. You are expected to strengthen surveillance so that public health threats can be detected and acted upon quickly.

a) Discuss five steps involved in setting up a disease surveillance system in the community. **(10 Marks)**

b) Explain five key benefits of establishing community-based disease surveillance. **(10 Marks)**

15. You are conducting health education sessions in an underserved community where cases of preventable illnesses remain high. While preparing for your sessions, you realize that success depends not only on the content delivered but also on your skills as a facilitator and the community's interest. Despite your efforts, attendance at previous sessions has been low.

a) Describe five characteristics of a good health educator that would enhance the effectiveness of community health education. **(10 Marks)**

b) Discuss five factors that may lead to low attendance in community health education sessions at the community level. **(10 Marks)**

16. You are supervising Community Health Promoters (CHPs) across several community units when you notice frequent stock-outs of essential drugs. Investigation reveals poor tracking, inconsistent restocking, misuse of supplies, and inadequate documentation. Community members are reporting delays in accessing medicines, and the Sub-County Health Management Team is concerned about service reliability.

a) Explain five common challenges in managing essential drugs and supplies in CHP kits. **(10 Marks)**

b) Discuss five practical strategies that can be used to improve the availability and proper use of CHV drugs in the community. **(10 Marks)**