



AMREF INTERNATIONAL TRAINING CENTER

Qualification Code : 102105T4COH
Qualification : Conduct Community Level 5
Unit Code : HE/OS/CH/CR/04/5/A
Unit of Competency : Conduct Community Health Linkages

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 questions from this section.

1. Define the following terms as used in community health:
 - a) Defaulter Tracing System (2 Marks)
 - b) Community Health Volunteers (CHVs) (2 Marks)
2. Universal Health Coverage (UHC) is built on three key pillars. Mention two of these pillars. (2 Marks)
3. Community participation is crucial in public health initiatives. Outline three ways of mobilizing community members to take part in health programs. (3 Marks)
4. When sharing research findings with stakeholders, some challenges may arise. Identify three barriers to effective dissemination of findings. (3 Marks)
5. Effective community health partnerships are crucial for sustainable health interventions. Identify three challenges that community health partnerships may encounter. (3 Marks)
6. As a community health assistant, assessing the needs of your community is important. State three benefits of conducting a local needs assessment. (3 Marks)
7. Defaulting on treatment can lead to poor health outcomes and increased disease burden. Name four reasons why defaulter tracing is conducted in health programs. (4 Marks)
8. Effective communication is essential in public health, yet challenges exist in sharing health information. Identify four barriers to effective dissemination of health information. (4 Marks)
9. Health-seeking behavior is influenced by multiple social, economic, and cultural factors. State four factors that influence health-seeking behavior in communities. (4 Marks)
10. Patients on long-term medication may fail to adhere to treatment regimens due to various reasons. Identify five factors that contribute to treatment defaulting. (5 Marks)
11. Community outreaches are frequently conducted to improve health awareness and service delivery. Enumerate five venues that can be used for conducting community outreaches. (5 Marks)

SECTION B (60 MARKS)

Answer any three questions from this section.

12. Universal Health Coverage (UHC) is a key priority in Kenya's health sector, aiming to ensure all individuals receive quality healthcare without financial hardship.
- a) Explain five benefits of Universal Health Coverage (UHC) in Kenya. (10 Marks)
 - b) Discuss five key barriers to achieving UHC and possible solutions to overcome them. (10 Marks)
13. Community Health Volunteers (CHVs) play a crucial role in delivering healthcare services at the community level.
- a) Discuss five key responsibilities of CHVs in promoting primary healthcare. (10 Marks)
 - b) Discuss five major challenges that CHVs face in their work and suggest possible solutions. (10 Marks)
14. Referral systems are essential in ensuring continuity of care by linking patients to appropriate healthcare facilities based on their medical needs.
- a) Explain five challenges affecting the effectiveness of the referral system in Kenya. (10 Marks)
 - b) Discuss five ways in which Kenya's referral system can be improved for better healthcare service delivery. (10 Marks)
15. Defaulting on treatment remains a major barrier to achieving positive health outcomes in many health programs.
- a) Describe five reasons why patients default on treatment. (10 Marks)
 - b) Explain five measures that healthcare workers can implement to enhance the effectiveness of the defaulter tracing system. (10 Marks)