

The double-edged effect of volunteer labor in primary health care in Nigeria

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Background

Health worker shortages are common in low resource settings and compromise access to quality healthcare. Facility managers adopt several means to attempt to optimize service delivery. One way is the engagement of volunteers to assist in facilities.

Method

Selected health facilities, host communities, and district offices were observed using ethnographic approaches. In-depth interviews of health workers and volunteers (n = 30), and focus group discussions with service users across communities (n = 60) were conducted to understand concerns identified during ethnography.

Key Finding

Inefficiencies at the facility level and implicit policy vagueness/complicity of district officials at the district levels, contribute to work pressures in health centres. Officers in charge (OICs) have too much discretionary power to hire or fire.

Volunteer health workers help and 'kill' primary health centers, due to unchecked discretionary power.

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