# FAMILY HEALTH GUARDIANS



Community-level pathways to developing a context-sensitive health model



## **Family Health Guardian Approach**

A culturally sensitive family-based approach aiming at reducing mortality and morbidity cases by improving health practices of the community.



## Family Health Guardians

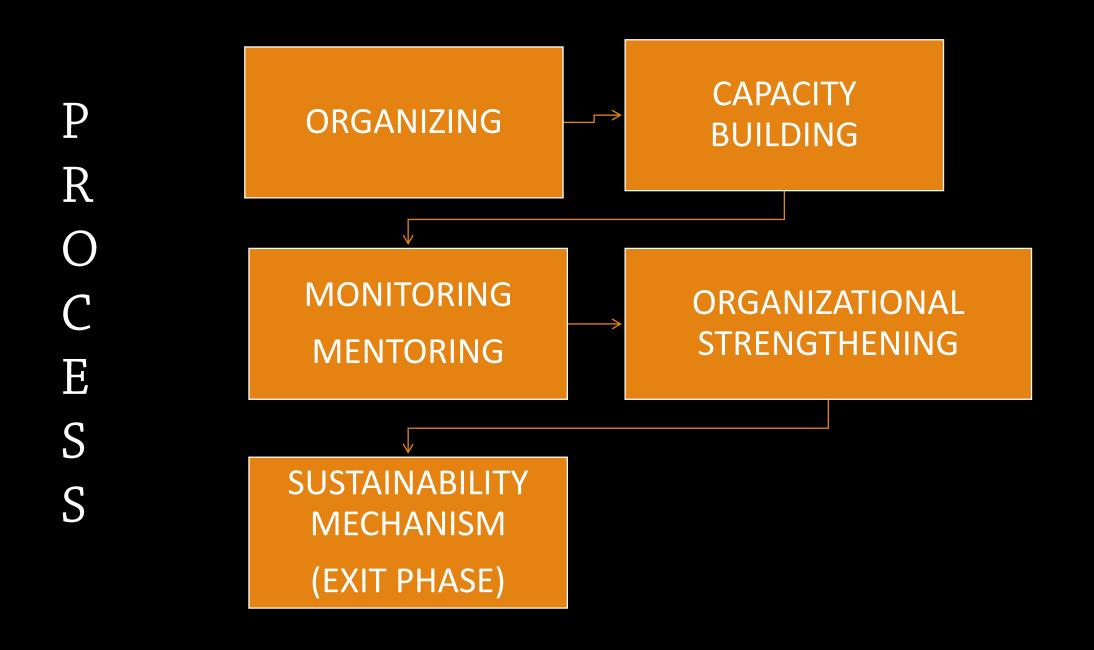
Health steward of his/her own family, trained and capacitated to take the full responsibility on the health of each members of his/her family and to extend such services to his/her neighborhood when needed.



## Roles and responsibilities

- Provide full health care services to his/her family.
- Keep health records of the family
- Maintain backyard /container vegetable and herbal garden
- Ensure clean and safe environment for the family
- Attend FHG regular meeting
- Attend enhancement trainings and seminars as may be requested by the partner
- Provide health services to the best of his/her capacity to the neighborhood when needed
- Participate community initiatives related to health,
  e.g. Coastal and coastal clean-up
- Influence and traine at least 2 neighbors to become FHG





**ORGANIZING** 

- Consultation with the stakeholders
- Partnership building
- Identification of possible FHGs
- Program Orientation
- Organization of FHGs







CAPACITY BUILDING

- Mapping of the different cultural health practices
- Module making (5 Modules)
- Trainings

Module 1: Maternal and Child Care

**Module 2: Sanitation and Nutrition** 

**Module 3: Common Illnesses and Diseases** 

in the Community

**Module 4: First Aid and Alternative Medicines** 

**Module 5: Project Management** 





MONITORING MENTORING

- Quarterly Family health record notebook monitoring
- Organization's regular meeting
- Field coaching and mentoring







ORGANIZATIONAL STRENGTHENING

- and Values Formation
- Culture of Peace
- Basic Facilitation
- Basic Project Management
- Financial Literacy Team-Building



## Sustainability Mechanism

- Establishment of partnership and system with the primary stakeholders, CSWD and CHO
- OrganizationsSystems and policies
- Livelihood activities (individual or group)



## **CHALLENGES**

Sustaining the interest and commitment of the FHGs

Lost/damaged health record notebook

Limited support from the local health services

 Culture of IP Muslims (Bajau and Bangingi) as nomadic by nature

Funds for community project



### **GAINS**

#### Personal

- FHGs level of confidence increased
- Level of community participation and decision making improved
- Realization of finding themselves very productive
- Find fulfillment in what they are doing.

#### **Family**

- Morbidity cases among FHG families decreased
- Improved family relationship
- Foster family consciousness in practicing good health habits
- Improve family economics

#### **Community**

- Initiate community health projects
- Reduce morbidity cases
- Improved community economics
- Improved community relationship
- Recognition of FHGs by BLGU and local CHO
- Increased barangay health workers

## Key Insights

- FHG approach provide more time for health workers to look into ones family's health.
- Shows high interest of the individual members because their priority is their family
- Highly encourage but less pressure to do community service.
- Recognition of the stakeholders (CHO, CSWD, LGU) on the approach
- It boost family and community economics
- Appreciated much by the community because of its culture integration. Traditional healers are not threatened. Appreciated much by the community because of its culture integration. Traditional healers are not threatened.
- It contributes to the community's reduction of morbidity/mortality cases
- Multiplier effect

