COMMUNITY-BASED EXPERIENCE AND SERVICE (COBES)

Introduction

The Millennium Declaration and the Sustainable Development Goals which were launched in the years 2000 and 2015, respectively, called for accelerated development efforts to address poverty in all dimensions. Ensuring adequate health for all communities in Ghana is one major opportunity future doctors have to contribute to this global objective.

In line with this, the Community-Based Experience and Service (COBES) programme was established as a flagship programme with the inception of the UCC School of Medical Sciences, through the ingenuity of the Founding Dean, Rev. Prof. H.S. Amonoo-Kuofi. The program is innovative, community-based, problem solving and student-centred. It additionally gives the students a strong community orientation which serves to increase their awareness of the role of social, cultural and environmental factors in health and the relationship between health and development.

COBES reinforces the roles played by doctors and other health professionals, as well as government and civil society in healthcare delivery. During the COBES program, students are posted to a community for four (4) weeks with set objectives which are aligned with the overall objectives of UCCSMS. As the name implies, COBES has two main components: the Experience component and the Service component. The experience component requires that students live in the selected communities, research into health, socio-cultural and socio-economic problems and provide practical and cost-effective solutions and interventions that promote health and bring development to the communities. The service component requires that students provide tangible, short-term to medium-term services that bring about environmental sanitation, behavior change concerning health and education and improvements in gender, health, socio-economic and socio-cultural disparities. The first batch of students who undertook this programme started in 2008 at Okwampa, close to Bawjiase in the Awutu Bereku district of the Central Region.

The broad objectives of the programme are to:

- produce high calibre medical doctors, and other health professionals who have a broad based education, are people-centered, community-oriented and research conscious. Our students are trained to use their acquired medical knowledge to provide appropriate solutions for the existing medical problems within the community;
- train doctors to provide leadership and example in dealing with the ethical and moral problems confronting the community;

- be a conduit for establishing a centre of excellence in medical research into diseases commonly found in Ghanaian communities;
- create and maintain strong collaborative links with local and international organizations and institutions involved in community health and education through exchange programs and collaboration in multi center medical research and healthcare solutions.

Eligibility and Timing

The programme is organized for all pre-clinical and clinical students, except the levels 100 and 600 students. It is carried out in the second semester of each year beginning from February for the first group that leaves the university campus for the community to which they are assigned, and ends in May for the last class group to leave campus. Each eligible class takes turns to have up to a month of field experience.

Selection and Preparation of COBES Sites

Currently, eight approved rural sites located in various districts in the Central and Eastern Regions exist for students' field practice as shown in the Table 1.

SITE	DISTRICT	REGION	LEVEL
Okwampa	Awuu Bereku	Central	500
Twifo Praso	Twifo Atti-Morkwa	Central	500
Assin Foso	Assin South	Central	500
Abura Dunkwa	Abura Asebu Kwaman	Central	500
Saltpond	Mfantseman	Central	500
Apam	Gomoa West	Central	500
Adjobue	Akyemansa	Eastern	200/300
Assin Kushea	Assin North	Central	400

The sites are selected based on the following criteria: acceptability of communities and districts to host and support students; reasonable distance (Within three hours' drive) from the main UCC campus; rural or semi-urban setting; existence of gaps in health, socio-cultural and socio-economic indicators.

The School has no permanent residential accommodation at the levels 400 and 500 sites, except at Okwampa, so rented accommodation in guest houses are provided and paid for by the School. The long-term vision however, is to have permanent accommodation and systems at all sites.

Development of a permanent residential facility by the UCCSMS is ongoing at Akyem Adjobue. This is a refurbishment of old and abandoned residential structures of the defunct Ghana Consolidated Diamonds Company which were donated to the University by the community. The permanent residential site at Okwampa was supported by Plan Ghana and is hosted at the premises of the Okwampa CHPS zone. The site at Assin Kushea in the Assin North district is supported by the Omanhene of the area, Nana Prah Agyensaim VI but there is not as yet permanent accommodation. It should be noted that students do not only live and work at these sites but also work in the adjacent communities.

Field Implementation

Once the sites are assigned and the themes for the various classes are agreed upon by a COBES committee, budgets for each class are prepared by the coordinator and Submitted to the dean's office for approval. Two weeks before the commencement date, the class is given a primary orientation to help them develop tools and gather resources for the field experience. Students are divided into groups according to the number of communities' available and assigned facilitators. A final orientation is organized for both students and facilitators (usually academic senior members) three days before the commencement date. Logistic preparations are also made. Students are posted to the field where they carry out research and implement solutions, interventions and services aimed at correcting observed gaps and disparities in health. Students usually spend up to three weeks on the field and one week on campus to prepare their report.

The field work usually begins with a community entry processes and durbar to inform them about the theme and objectives for the year. At the end of the third week an exit community durbar is held to give feedback on the activities carried out and achievements made. The durbars are usually attended by the district coordinating council, chiefs and elders and community members. The press is usually invited to capture events. The Vice-Chancellor of the University or his representative also attends the durbar.

Once the students return to the campus, they do detailed analyses of the data collected and make presentations to the faculty and students of the school at a one-day seminar.

The seminars usually begin with photo-exhibitions. Detailed reports are submitted by the students and graded. Copies of reports are sent to the districts and communities visited and also to the School's library.

Modest Achievements

The COBES programme has made some modest achievements in the last few years. Most of these have been as a result of advocacy to major players in health and education in the communities and active provision of resources by the School of Medical Sciences in particular and the University as a whole some examples of these achievements are highlighted below.

Okwampa

At the start of the programme ten years ago, there were no lights in the communities and the telecommunication network was very poor. Through advocacy efforts by UCCSMS to PLAN Ghana and the district assembly, electricity supply has been provided to all the communities except one, the telecommunication network which was non-existent has also seen massive improvement.

Through advocacy efforts, a well for underground water has been constructed at the Okwampa CHPS zone by PLAN Ghana. UCCSMS provided funds to purchase a submersible pump and additional reservoirs (4No.) to improve water storage and supply.

Through advocacy efforts also, PLAN Ghana has constructed a 12-room teachers quarters to support retention of teachers in the community. These rooms also serve as students' accommodation during the COBES period.

A newly constructed structure for child welfare clinics and community durbars has also been provided at the CHPS centre by PLAN Ghana.

Akyem Adjobue

A nearby community (Ekoso), whose water source for the past 80 years had been an unhygienic stream, was provided with a newly constructed well. The students who were placed in that community noted the poor water and sanitation situation and arranged to have something done it. They contacted the COBES coordinator who supported them to mobilize funds from field facilitators and the Dean of the School to purchase cement and other materials for construction of a new well. The construction of the well was through community mobilization and self-help. The community now enjoys a clean source of water from the newly constructed well. The construction of the well also brought to an end a longstanding dispute between two families in the community.

Refurbishment of the old and abandoned residential facilities by the UCCSMS for its students has facilitated the construction of the road network into the village by the Ghana COCOBOD. Improvements in the street lighting system have been facilitated by the Member of Parliament and the DCE. The facility will serve the research needs of other faculties in the university in the near future.

The students through their own efforts have started refurbishment of an old post office in the village into a community library. Books have already been provided by the students. ICT equipment are also being mobilized to support the library. When completed, the facility will support reading and learning for children and youth of the village and hence improve the educational status of the community.

Akyekrom

Reports of the level 200 postings revealed a poor CHPS centre facility at Akyekrom and lack of lCT equipment in the schools. Advocacy at the exit durbars yielded positive results. An NGO working in the area has constructed a new CHPS compound facility for Akyekrom, while UCCSMS has provided Akyekrom JHS with computers and accessories to support teaching and learning of lCT. (Figure 5.)

Akyemansa District

Because of the deprived nature of the Communities, the university has offered to admit students with good grades from some of the top courses. About 10 students have currently been supported to gain a mission in .0 various courses. Including Bachelor of Commerce, Human Biology and Institute for Development Studies (IDS). These will motivate other students to study harder to acquire higher education.

The Anyinase sub-district of the Akyemansa district and the Kushea sub-district of the Assin North districts are being prepared as demographic surveillance sites to support research at UCCSMS.

Impact

The COBES program has had significant impact on both students and the communities. The impact reported here is based on summaries of surveys and desk reviews carried out within the period.

<u>Impact on students</u>

- Improved research capabilities and skills
- Increased appreciation and deeper understanding of factors involved in health and disease
- Increased appreciation of disease trends and characteristics in different communities

- Increased competencies in investigation of diseases
- Ability to live and survive in hardship areas and under hardship conditions
- Development as good team players capable of functioning in any group dynamic
- Increased leadership competencies and communication skills
- Improved report writing skills
- Increased skills in functioning in culturally diverse settings and cultural sensitivities
- Improved competencies in the practice of medicine in district settings
- Increased understanding of the challenges (health and social) of living in a deprived community

Impact on communities

- Increased knowledge about disease causation. For example shift from hot sun as a cause of
- malaria to malaria parasites as cause of malaria.
- Increased OPD attendance
- Increased attendance at ANC and delivery
- Increased family planning uptake
- Improved infrastructural development. For example roads and communication
- Increased willingness of girls to pursue education to higher levels
- Improved environmental sanitation
- Improved water supply and power provision
- Improved male involvement in health promotion practices
- Increased uptake of health insurance
- Improved university entry rate

CHALLENGES

Some of the challenges faced by the COBES programme are the lack of permanent accommodation for students, poor power supply and lack of alternative power sources at the various sites. Other challenges include inadequate funding to support student field activities and lack of long-term partnerships With industry players to support the programme.