At least half of the world’s population does not have access to the essential health services they need. In most cases, it is poverty, geography, and a shortage of healthcare workers (globally, there is an estimated shortage of 7.2 million health workers) that keeps lifesaving primary health care (PHC) out of reach.²

Increasingly, health leaders are launching community health worker (CHW) programs to bridge the gap between remote and rural communities and the essential PHC communities need to thrive. CHWs can provide PHC services that address some of the most important causes of maternal and child mortality, deliver sexual and reproductive health education and services, and treat communicable and non-communicable diseases to help us reach our development goals and support achievement of the Sustainable Development Goals.

Already, there are more than five million CHWs around the world, including 2.3 million in India alone. The WHO is advocating for the adoption and further expansion of CHW programs.³ And African Union leaders have endorsed a plan⁴ to mobilize another two million professional CHWs.

Many CHW programs have been transformative and helped countries achieve their health care goals. But many others have encountered a few key hurdles that undermine their impact, including:

**LOW PRODUCTIVITY:** CHWs impact is diminished when they spend large portions of their day in transit. A survey of CHWs in Ethiopia,⁵ for example, found that CHWs spend more time travelling between patients than treating patients.

**HIGH TURNOVER:** High CHW turnover reduces quality of care, increases training and management costs, and strains the workload of the remaining CHWs. In Bangladesh,⁶ for example, 15 percent of government CHW positions are vacant.

**SUPPLIES:** Consistently and effectively supplying CHWs working in remote and rural communities has been a challenge. In Liberia,⁷ for example, a survey found that fewer than half of CHWs had stocks of zinc to stop diarrhea or the antibiotic amoxicillin. And just over half of CHWs had oral rehydration solution or malaria drugs.

World Bicycle Relief’s rugged, durable bicycle is helping CHWs expand and accelerate their impact, closing the gap between rural communities and lifesaving health services in a number of ways.
EQUIPPING COMMUNITY HEALTH WORKERS WITH BICYCLES

World Bicycle Relief has partnered with health ministries and civil society organizations to distribute more than 128,383 bicycles in seven countries to accelerate the progress and magnify the impact of critical healthcare programs. These bicycles ensure community health workers spend less time in transit and more time with patients, help CHWs obtain and deliver medicines and family planning, engage clients more frequently, and help improve CHWs job satisfaction.

IN KENYA, community health workers equipped with World Bicycle Relief’s Buffalo Bicycles saw 88 percent more patients and referred 50 percent more patients for TB screening at a local clinic. And community health workers equipped with bicycles were less likely to quit.8

IN ZAMBIA, community health workers equipped with World Bicycle Relief’s Buffalo Bicycles in nine provinces quadrupled the frequency of visits to their patients.9

IN MALAWI, community health workers equipped with World Bicycle Relief’s Buffalo Bicycles doubled the number of patients they could visit. As a result, patient non-compliance with long-term treatment dropped more than 90 percent.10

IN GHANA, community health volunteers equipped with World Bicycle Relief’s Buffalo Bicycles were more likely to continue delivering health services to the community.11

“The bicycle has really changed the nature of my job. I am now able to visit many more households than before I received the bicycle. People in my community can also borrow the bicycle and take a person to hospital because the bicycle is so strong.” — AMADU MEJA, COMMUNITY VOLUNTEER IN NORWEGIAN CHURCH AID’S ADOLESCENT GIRLS AND YOUNG WOMEN PROJECT, MALAWI
ABOUT WORLD BICYCLE RELIEF

World Bicycle Relief partners with communities, governments, and the private sector to improve access to healthcare, education, markets, and critical government services for rural communities left behind by current development initiatives. Founded in 2005, World Bicycle Relief has already helped accelerate the journey out of poverty for more than 3.5 million people in 21 countries. When women, girls, community health workers, farmers, and entrepreneurs have durable bicycles, they can access the services and opportunities they need to build a better life.