



## Factors Affecting Community Health Volunteers' Motivation to Participate in Health Programs in Comprehensive Health Service Centers

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### Abstract

**Introduction:** Community health volunteers link people and health workers and they voluntarily contribute to community health. Given the importance of the engagement of volunteers in promoting health programs and improving the quality of care provided, this study aimed to explore the experience and perceptions of community health volunteers of comprehensive health service centers in the western regions of Ahvaz to identify the most critical factors motivating their participation in health programs.

**Methods:** This qualitative study was conducted in 2017 on community health volunteers in comprehensive health service centers in western Ahvaz. The data were collected through semi-structured in-depth interviews conducted face-to-face with 35 community health volunteers. The conventional qualitative content analysis approach was used to analyze the collected data.

**Results:** Data analysis revealed 302 primary codes, 27 subthemes, and ten main themes. The ten main themes extracted in this study, including the physical context, organizational context, social context, climatic context, cultural context, increasing health knowledge, material factors, psychological factors, social factors, and spiritual factors, constituted the factors affecting the community health volunteers' motivation to participate in health programs.

**Conclusion:** Community health volunteers' motivation to participate in health programs is influenced by factors such as physical context, organizational context, social context, climatic context, cultural context, increasing health knowledge, material factors, psychological factors, social factors, and spiritual factors. Thus, failure to pay attention to these factors will reduce the community health volunteers' incentives to promote health programs, decrease volunteers' cooperation with centers, reduce the quality of care provided, and ultimately waste the funds spent on volunteers' training and preparation.

**Keywords:** Community health volunteers, Motivation, Participation, Health programs, Comprehensive health service centers

## Introduction

Health programs refer to related services and activities developed and implemented to address one or more health problems (1). In recent decades, many efforts have been made to reduce the problems of vulnerable and deprived groups worldwide, and many health programs have been developed and put in place mostly based on public participation. Global experience has proven that popular measures are the best solution to solve popular problems, and many health programs have been developed and implemented based on public participation. One of the main consequences of such partnerships is the realization of social development (2).

One of the strategies to attract people's participation in health programs in Iran is the "community health volunteers" program launched across the country in 1993 (3). Community health volunteers are the link between people and health workers and they voluntarily contribute to community health (4). Volunteers are, in fact, public health advisors in the health services sector. Community health volunteers are selected from women in a given area. Having the minimum literacy, having social acceptance, having enough time, and having the interest and motivation to do voluntary activities are important requirements for selecting people to participate in this program (4). One of the most important reasons for implementing the community health volunteers program is to convey health messages to families through community health volunteers (2).

Women's participation means their full involvement in the decision-making and implementation processes in all matters of society and such involvement is a requirement for health programs' success (2). Women's participation increases their sense of self-confidence and self-reliance. It also improves the effectiveness of health programs by increasing follow-up speed in completing activities and reducing the cost of implementing programs (4). One hundred thousand health volunteers currently provide health services to about 16 million people in urban and rural areas (2).

Numerous pieces of evidence have been presented on the impact of the involvement of community health volunteers in improving health programs. For example, the "Voluntary Urban Community Health" project was implemented in 1987 in Nachara, a town in Nepal. After two years of voluntary work, despite inadequate and insufficient support and management in this project, there was a significant improvement in terms of prenatal care,

vaccination coverage, the use of oral rehydration salt (ORS), and nutritional status for children under five years of age (5). Another survey was conducted in 2015 in low- and middle-income countries to examine the effect of payment and incentives on motivation and concentration of community health workers (CHWs) and showed that volunteers have a significant and unique impact on health outcomes (6).

Despite the effectiveness of the community health volunteers' presence in improving health outcomes and improving health indicators, studies show that many of them have stopped cooperating with health centers in recent years. For example, 304 out of 1501 volunteers in Markazi Province (7) and 62 out of 142 community health volunteers in Birjand terminated their cooperation with health centers in these areas (8).

One way to increase the participation of community health volunteers is to choose an effective strategy to motivate them (9). Motivation is an internal factor that causes a behavior in the individual (10). To further motivate community health volunteers and improve the quality of care provided by them, it is essential to understand the different motivating techniques and their associations with participation in health programs. Greenspan et al. examined the sources of CHWs' motivation and showed that health workers are intrinsically motivated to participate in health programs mostly due to the support of their families (11). Sundararaman et al. highlighted the consideration of motivational factors beyond material factors in encouraging participation in health programs (12). Furthermore, Ndima et al. pointed to the need to improve monitoring systems to increase CHWs' motivation (13).

Given that community health volunteers' disengagement in health programs leads to a waste of costs spent on training and preparation (14), this study aims to identify the most critical factors motivating community health volunteers' participation in health programs held by comprehensive health service centers in western Ahvaz.

## Methods

The present study employed a qualitative design. The research population included community health volunteers of comprehensive health service centers in western Ahvaz. The respondents were selected through convenience sampling and the sampling process continued purposefully to create

maximum diversity in the extracted themes. In this method, the researcher, based on his/her judgment, chooses the best sources of information such as observation, interview, or written sources (15). Accordingly, after interviewing the officials of all centers and reviewing the relevant documentation, 35 community health volunteers were identified by considering their age, education, marital status, and duration of cooperating with the center. Then, the respondents were selected from among community health volunteers who had very active cooperation with the centers and those, who ended up cooperating with the center for some reason other than the migration, to reflect their views in the data. Sampling continued until the collected data were theoretically saturated and no new information or theme was observed with additional interviews.

The data were collected via semi-structured in-depth individual interviews conducted with the respondents in comprehensive health service centers in western Ahvaz in 2017. The reason for choosing this data collection technique was the homogeneity of the research sample (16). An interview guide was developed to collect data, based on the objectives of the study and a review of previous studies. The interview guide contained questions addressing the respondents' demographic characteristics and questions that explored the factors that motivate the respondents for further cooperation and demotivate them to end up their participation with health programs. The study's main focus was on challenges of the health volunteers' participation in health programs, including the reasons for cooperating or deciding to terminate cooperation with the center and their concerns as health volunteers. Each interview lasted approximately 45 minutes. All interviews were recorded with the permission of the participants and then were transcribed word by word.

The collected data were analyzed using the conventional qualitative content analysis approach concurrently with the thematic analysis of the data (17). Thematic analysis is a method that helps to understand the visible and invisible themes in interpretations (18). The thematic analysis was performed in six steps, including familiarity with the data, generating the main codes, searching for themes, reviewing the extracted themes, defining and coding the themes, synthesizing all themes into thematic clusters, and presenting a thorough description of the factors motivating the health volunteers' participation in health programs (16).

Some measures were taken to ensure the credibility of the findings. For instance, the researcher's long-term contact and communication with the participants and their trust helped the researcher understand the research context. To verify the data and codes, the participants were asked to review the codes and themes extracted from the interview transcripts to ensure the accuracy of the codes and themes. Those codes that did not reflect the participants' views were revised. This helped to increase the internal consistency of the data. To peer check the data, all transcripts and the extracted codes and themes were reviewed by two members of the research team and they confirmed the accuracy of the findings.

### **Ethical considerations**

Before collecting the data, a research permit was obtained from the Research Ethics Committee under the code IR.AJUMS.REC.1396.482. Besides, informed consent was obtained from the participants to participate in the study and record the interviews. Moreover, all participants were assured that their data would remain confidential.

### **Results**

The participants were 35 community health volunteers from western Ahvaz. Most participants were married (74.2%) and had a high school diploma (54.2%). A majority of them (71.45) had up to two children and an average of 6 years of experience working in the center. Furthermore, 71.4% of the health volunteers were cooperating with the centers at the time of the interview and 28.6% ended up cooperating with the centers for some reason. The participants' demographic characteristics are shown in [Table 1](#). After interviewing 35 community health volunteers, 302 primary codes were extracted. These codes were further categorized into 27 subthemes and then subcategorized into ten main themes ([Table 2](#)).

The results showed that the community health volunteers' motivation is influenced by factors such as physical context, organizational context, social context, climatic context, cultural context, increasing health knowledge, material factors, psychological factors, social factors, and spiritual factors. These factors were classified into the themes and subthemes as detailed in [Table 2](#). The failure to pay attention to these factors will reduce the community health volunteers' motivation to participate in health programs.

**Table 1. The descriptive statistics for the participants' demographic characteristics**

Variables		Cooperation				Total	
		Cooperating		Cooperation terminated			
		Number	%	Number	%	Number	%
Age	20-30	9	25.6	2	5.7	11	31.3
	31-40	5	14.3	2	5.7	7	20
	41-50	11	31.5	3	8.6	14	40.1
	50 and older	-	-	3	8.6	3	8.6
Education	High school	8	22.8	3	8.6	11	31.4
	Diploma	13	37.1	5	14.3	18	51.4
	Associate degree	3	8.6	1	2.9	4	11.5
	Bachelor's degree and higher	1	2.9	1	2.9	2	5.8
Number of children	0-2	20	57.1	5	14.3	25	71.4
	3-4	5	14.3	4	11.4	9	25.7
	5 and more	-	-	1	2.9	1	2.9
Service records (year)	0-5	15	42.8	5	14.3	20	57.1
	5-10	3	8.6	3	8.6	6	17.2
	10 and longer	7	20	2	5.7	9	25.7

### Physical context

Most community health volunteers with 12 years of experience considered the physical context of the centers an essential factor in enhancing their motivation to participate in health programs. Assigning a fixed place for training purposes and the community health volunteers' activities are factors related to the physical context of the center. The physical context of an organization refers to the physical dimensions, environmental conditions, space, and symbols used in that organization, which must capture employees' attention to motivate them to perform activities better. Assigning a fixed place for training purposes and activity of the health volunteers are some aspects of the physical context of the centers, affecting the volunteers' motivation to participate in health programs. One of the participants stated, "We did not have a fixed place even for our training activities, and every week they had to choose an empty room to hold the training class. There were also some problems with the equipment such as chairs, desks, air conditioners, and heaters" (Participant 3).

### Organizational context

Another factor that influenced the motivation of the health volunteers' participation was the center's organizational context. The organizational context is a network of communications and authorities that links individuals and groups who perform essential tasks. Introducing the community health volunteers to the community, monitoring the performance of the community health volunteers by community health authorities, providing an executive guarantee for the cooperation of people and local institutions

with the volunteers, facilitating the sharing of activities performed by the volunteers, the quality of training provided to the volunteers, the quality of performance of community health care authorities, creating competition among the volunteers, and the fitness of incentives provided with the volunteers' expectations were all factors related to the organizational context that had a significant effect on the volunteers' motivation to participate in health programs.

### Introducing the community health volunteers to the community

Data analysis indicated that introducing the community health volunteers to the community was one of the critical factors that enhanced the volunteers' motivation to cooperate with the centers. The participants stated that they expected to have a formal position in the centers to perform their communal duties without any problems. In particular, the community health volunteers who had a long service records in the health centers pointed to this issue as an essential factor in motivating participation. One of the volunteers cooperating 16 years with one of the centers stated: "As health volunteers, we were not well introduced to people, and we do not have even a health card to show that we are members of the health center and people do not know who a health volunteer is. As people do not know about health volunteers, they do not listen to us and ignore our advices. However, when they know that we are health volunteers, they will listen more carefully" (Participant 8). A married woman working as a volunteer for six years stated, "My main concern is to be known well as a health volunteer by people" (Participant 7).

**Table 2. Factors motivating the volunteers' cooperation with comprehensive health service centers**

Table 2: Factors motivating the volunteers' cooperation with comprehensive health service centers		
Main themes	Subthemes	Subcategories
Physical context	Assigning a fixed place to training purposes and volunteers' activities	-
	Introducing the community health volunteers to the community	
Organizational context	Monitoring community health volunteers' performance by community health authorities	
	Providing executive guarantees for the cooperation of people and local institutions	
	Facilitating the sharing of activities done by the health volunteers	-
	The quality of training provided to community health volunteers	
	The quantity of training provided to community health volunteers	
	The quality of performance of community health managers	
	Creating competition among community health volunteers	
	The fitness of incentives with the community health volunteers' expectations	
	Relations with official staff	Understanding the importance of volunteer work Fair treatment with volunteers The pursuit of the health volunteers program by the center's officials
	Relations with other community health volunteers	Recommending others to participate in the training courses
Social context	Organizational relations with senior officials	The fair choice of the top health volunteers
		Appreciating volunteers' teamwork in official meetings
		Paying attention to volunteers' demands
		Personal visits of health officials of volunteers' activities
		Inviting a volunteers' representative to attend the staff meetings
Climatic context	Weather conditions	-
Cultural context	Support from close relatives	-
Increasing health knowledge	Increasing the volunteer's health knowledge	-
	Increasing the health knowledge of family members and others	-
Material factors	Receiving salary	-
	Receiving incentives	Having access to health services
		Having access to transportation facilities to attend the volunteers' day meeting
		Providing insurance coverage for the health volunteers
		Non-cash gifts
		Holding recreational camps
Psychological factors	The spirit of social participation	-
	Commitment to the role	-
	A sense of usefulness	-
	A sense of need for participation	-
Social factors	Ensuring job security	-
	Gaining social status	-
Spiritual factors	Religious beliefs	Working for the sake of God
	Altruism	Altruism



### *Monitoring community health volunteers' performance by community health authorities*

The community health volunteers stated that they expect community health authorities to monitor their activities and hold face-to-face meetings to review their performance. "I would like them to value us more, ask more from us, and provide us with some solution to help us do our duties more effectively and to tell us what is important and give solutions accordingly" (Participant 7).

### *Providing executive guarantees for the cooperation of people and local institutions*

Providing executive guarantees for people and public institutions' cooperation with community health volunteers was another factor influencing the community health volunteers' performance. The executive guarantee of a task prevents the violation of the task. The community health volunteers expected that the centers would follow up on their problems when they visited the related areas. When they see that their efforts are in vain, they are demotivated to continue their cooperation. "Some community health volunteers become discouraged as they realize that, the problems reported by them are not followed up and solved" (Participant 8).

### *Facilitating the sharing of activities done by the health volunteers*

Facilitating community health volunteers' sharing of activities was another point mentioned by the volunteers in this study. They expected to be able to communicate with volunteers working in other centers where training classes were held as this would increase the possibility of sharing information and knowledge, improve the quality of training, and increase their performance: "We would like them to make arrangements so that we can visit other centers and attend their training courses. Maybe the quality of their courses will be better and we will learn things better" (Participant 8).

### *The quality of training provided to community health volunteers*

Updating the training programs offered in keeping with peoples' problems and increasing the variety of training programs was one of the most critical factors affecting community health volunteers' participation. The participants stated that they expect their training programs not to be solely on some old books but consider new diseases and problems currently faced by people. "They must provide some training about new diseases and the

ones that are currently affecting people" (Participant 10). "I think the courses are useless for us. They need to add more variety to the courses" (Participant 3).

### *The quantity of training provided to community health volunteers*

Another critical factor that can increase the community health volunteers' motivation is the number of training programs. This means that in addition to a routine program held for them in the centers every week, more workshops will be held to address the volunteers' activities and expand the scope of their activities and provide more services to the people. This issue was especially highlighted by the community health volunteers with a high school diploma. "I expect the officials to increase the number of training programs and hold training courses such as injection courses so that we can extend our cooperation with the centers" (Participant 21).

### *The quality of performance of community health managers*

According to the community health volunteers, effective planning by organizers of health programs such as the Ministry of Health and other health officials of the province and cities was essential to solve the existing problems. "Sometimes I decided not to go to the center because I felt that there is no managerial structure in place for community health volunteers" (Participant 12). "I think the problem is with the work of the authority experts and there is no management mechanism for community health volunteers' program" (Participant 13).

### *Creating competition among community health volunteers*

The community health volunteers believed that there should be some differences between the community health volunteers working with the centers for many years and those who had not been working for more than a few months, as a motivator. "I expect the center and the authorities to create competition between the old and new community health volunteers" (Participant 13).

### *The fitness of incentives with the community health volunteers' expectations*

The incentives offered should be in a way that motivate community health volunteers. Volunteers should consider these incentives to be relevant and fair to their tasks. They compare their activities and gifts received with the community health volunteers' activities and gifts in other centers. The fairness of

differences makes them develop a sense of motivation. *"We do our work for the sake of God, but when the officials give us some gifts once a year on the commemoration of volunteers' day, the gifts should deserve our attempts. We are demotivated to cooperate with the center when we see they mistreat us and give more valuable gifts to people working in other centers"* (Participant 13).

### **Social context**

The social context of an organization consists of people working in that organization, customs, and other organizations that are located around and deal with the organization. According to the community health volunteers, relations with office staff and other community health volunteers and relations with senior officials were recognized as components of the centers' social context.

#### *Relations with official staff*

Understanding the importance of volunteer work, the pursuit of the health volunteers' program by the center's officials, and fair treatment with volunteers were essential factors that the community health volunteers considered necessary in their relationships with the center's official staff: *"I get disappointed when I see mistreatment"* (Participant 6). The way the centers' staff treats the community health volunteers makes the volunteers feel to be a member of the center: *"I like to cooperate with the center because of their friendly atmosphere and good treatment"* (Participant 24).

#### *Relations with other community health volunteers*

The relationships established with community health volunteers working in other centers were also related to the social context and effectively motivating the volunteers' participation. *"When the community health volunteers who had already worked in the centers described the program, I too would have liked to join the program"* (Participant 7).

#### *Organizational relations with senior officials*

Another factor motivating the participation of community health volunteers was having relationships with senior officials. According to the participants, the appropriate choice of the top health volunteers, appreciating the health volunteers' teamwork in formal meetings, paying attention to the volunteers' demands, and inviting the health volunteers' representative to the staff meetings were the most critical components of establishing relationships with senior officials that increased their motivation.

The fairness of top health volunteer's selection process was effective in motivating the volunteers' participation. The community health volunteers expected the seniors to be careful when choosing the top health volunteers and to apply the same standard for selecting top health volunteers: *"The health volunteers' day celebration is not admirable, the community health volunteers are not valued, and they always appreciate just the top ones"* (Participant 12). *"It is true that they only select one person, but at least they can appreciate us and show they value our work"* (Participant 8).

Appreciating volunteers' teamwork in official meetings could also motivate them for further participation in the health program. They expected their activities to be acknowledged at annual meetings held to honor health volunteers. *"Once a year, when the health volunteer's commemoration day is held, only the officials and trainers are praised, but not volunteers"* (Participant 7).

A significant number of participants pointed to the volunteers' demands as one of the factors that influenced their motivation to participate in health programs. *"I expect the authorities to pay attention to us"* (Participant 6). *"I ask the authorities to pay more attention to the community health volunteers, as this will encourage and motivate them"* (Participant 2).

Inviting a representative of the community health volunteers to attend the health centers' staff meetings was also highlighted as one of the factors motivating the participation of the community health volunteers. According to the participants, one community health volunteer should be selected to represent them officially in the city headquarters. The representative should be permitted to attend meetings related to community health volunteers and raise and follow up important issues related to the program directly with senior officials. *"There should be meetings with community health volunteers, or at least one health volunteer can represent others in these meetings. The community health volunteers' program should be assigned to a health volunteer who can execute the program. There should be one person who supervises the whole program"* (Participant 12).

### **Climatic context**

The climatic context refers to the conditions of a geographical area such as temperature, humidity, wind, precipitation, and other meteorological characteristics over a relatively long period. These

conditions are essential factors that affect human activities. Some participants mentioned the reason for their unwillingness to cooperate with the centers: *"I think the reason why some volunteers do not attend the center is that it's very hot here"* (Participant 9).

### **Cultural context**

Culture is a fundamental part of the life of every individual and society. Cultural characteristics are the factors that people live with and belong to. Culture is a vital factor that guides community members' behaviors and shapes and covers all behaviors, like an umbrella. One of the cultural factors affecting the participation of community health volunteers was the support from close relatives. Sometimes, some activities were not accepted by close relatives, because of some beliefs, which demotivated the volunteers to participate in the health program. *"Many women do not attend the center because their husbands do not allow them to do so"* (Participant 14). *"I asked my friends to come to the health center, but they said that their husbands did not agree"* (Participant 16).

### **Increasing health knowledge**

The vast majority of community health volunteers stated that increasing their health knowledge was one of the most important motivating factors for participating in health programs. Increasing the health knowledge of the health volunteer and increasing their family members' knowledge and the awareness of those around them were crucial factors that motivated the participants.

#### *Increasing the volunteer's health knowledge*

Increasing the volunteers' health knowledge was one of the most important factors that caused the community health volunteers to continue cooperating with the centers: *"I wanted to learn some information"* (Participant 6). *"Because it helps me increase my information"* (Participant 22).

#### *Increasing the health knowledge of family members and others*

Another critical reason that motivated the community health volunteers was that they could pass on the information they gained to others. One participant cooperating for about five years with one health center stated, *"My main motivation is to use my information first and to pass it on to the public"* (Participant 5). *"I felt I'm responsible for the people to raise their knowledge and health"* (Participant 12).

### **Material factors**

The participants stated that receiving salary and incentives motivated them to cooperate with the centers.

#### *Receiving salary*

Although a small number of community health volunteers expected to receive a fixed salary in return for their activities, this factor was pointed as one of the motivating factors for the health volunteers: *"I cooperated in doing all things, especially collecting data, and later they said that they would pay us for this, and this further motivated me"* (Participant 3).

#### *Receiving incentives*

Concerning incentives, the health volunteers pointed to issues such as having access to health services, having access to transportation facilities to attend the volunteers' day meeting, providing insurance coverage for the health volunteers, non-cash gifts, and holding recreational camps: *"We expect the officials to make arrangements so that our family members and we can have more access to medical services and medicines in the center"* (Participant 14). *"Anyone would like to have insurance for the job s/he does or at least to receive other benefits"* (Participant 22).

### **Psychological factors**

The health volunteers' psychological characteristics were pointed out as another factor that affected their participation in health programs. The psychological factors were classified into subthemes such as the spirit of social participation, commitment to the role, a sense of need for participation, and a sense of usefulness. The health volunteers stated that the spirit of social participation was an important factor motivating them to cooperate with the centers: *"It helps us to talk to people and keep in touch with them"* (Participant 1). Commitment to the role was also one of the crucial factors motivating the volunteers. A 46-year-old health volunteer working for six years stated, *"Every volunteer knows there are several problems, like household problems. I force myself as an employee to attend the center and it's really important to me"* (Participant 7). The volunteers also believed that there was a growing need for participating in health programs to increase their information. *"No matter how knowledgeable is a person; there is still something to be learned"*



(Participant 10). Moreover, some community health volunteers stated they felt useful when they could help others by giving them the information they had learned and saving someone from illness, and this increased their motivation to participate in health programs. *"First of all, I calm down emotionally when I attend the training courses because I feel like I'm doing something useful, and I think that's more valuable than any capital"* (Participant 10).

### **Social factors**

Human is a social being and always lives collectively and meets their needs with the help from others. Of course, only a few community health volunteers pointed to social factors as the reason for their cooperation with the health center. According to this study's findings, social factors were categorized into the two subthemes of ensuring job security and gaining social status. Several participants hoped that their activities would help them to get a job in the future. *"My main motivation for cooperating with the center is that I can find a job"* (Participant 12). *"Some volunteers say we will be officially employed"* (Participant 8). A small number of the volunteers also stated that obtaining a social position and gaining respect from the community motivated them to engage in health programs. Some of the participants stated that one of the factors that led them to cooperate with the centers was to be considered and respected by the community. *"When we go to a park or public places, people know us, and this makes us have a good feeling"* (Participant 4).

### **Spiritual factors**

Many community health volunteers with a long history of cooperating with the centers stated the spiritual factors such as religious beliefs and altruism as the most important reasons for participating in health programs.

#### *Religious beliefs*

Many community health volunteers believed that they would receive a great reward from God to share their information with the people and reduce their illnesses. One of the volunteers who was cooperating with a health center for 12 years stated: *"I'm working here for God's sake, and I believe that God will support me with his grace"* (Participant 6). *"We do our work for the sake of God"* (Participant 5). *"Because I accepted to work for the sake of God, I have no special expectation"* (Participant 15).

#### *Altruism*

Altruism means a sense of empathy and social

responsibility. In this study, the community health volunteers stated that one of their primary motivations was to cooperate with the centers to help other human beings and serve people. More than half of the volunteers mentioned this concept as one of the factors motivating their participation. *"I love serving this center and other people and I did not think of anything else"* (Participant 25). *"Money is not everything; the health and well-being of other human beings is more important"* (Participant 9). *"I always wanted to serve the people in some way"* (Participant 10). *"I like to help people in my community"* (Participant 13). *"My only concern was the problems of the people and to get their problems solved"* (Participant 26).

### **Discussion**

The present study aimed to explore the experience and perceptions of the community health volunteers working in health centers in western regions of Ahvaz and determine the most critical factors motivating their participation in health programs. The results showed that creating motivation in community health volunteers is influenced by factors such as physical context, organizational context, social context, climatic context, cultural context, increasing health knowledge, material factors, psychological factors, social factors, and spiritual factors. Accordingly, failure to pay attention to these factors will reduce the capacity of health volunteers as a part of human resources needed to achieve the health system's goals.

Given the role of CHWs in improving health outcomes and increasing access to health services, especially for deprived and vulnerable people (19), the emphasis has been put on some strategies to increase their motivation to participate in health programs, and especially in primary health care (9). Accordingly, health care managers can develop community health volunteers' program management by taking into account the most important factors motivating community health volunteers.

This study showed that the most frequent factor affecting the motivation of community health volunteers is increasing health knowledge. In other words, the primary goal of many community health volunteers' participation in health programs is to increase their health information and pass on the information to their family and also members of the community. Bayati et al. showed that increasing information was one of the individuals supporting factors that led to the continuation of cooperation between volunteers and the centers (4). This issue

has also been highlighted in other studies conducted in low- and middle-income countries. For example, Tanzanian CHWs pointed to improving skills and using acquired skills to improve their own, family, and others' health as factors influencing their motivation and satisfaction (20). One study that addressed incentives for CHWs in Ethiopia also pointed to the importance of raising awareness of health issues and using health information for improving the worker's and their neighbors' health (21). Furthermore, according to one study conducted in Zambia, the desire to learn, the expectation of personal growth and learning to care for the family, and the desire to share the gained knowledge with community members were the most essential factors motivating health workers (22). The most essential motivating factors among CHWs in Uganda were acquiring health knowledge, helping the family members, and sharing knowledge with community members (23). Besides, the most essential motivating factors for community health volunteers in Malaysia were improving people's health, helping the community, and acquiring knowledge and hands-on skills (24).

Another factor that is essential in motivating community health volunteers to participate in health programs is the organizational context of health centers. For example, the findings of this study showed community recognition as one of the factors affecting people's familiarity with the health volunteers' program and its goals. It facilitates performing their duties in the community and make people in the community follow their advices and recommendations. The issue was also found in other studies. Naimoli et al. found that community recognition is one factor that could improve CHWs' performance (25). Another study showed strategic cooperation for improving CHWs' planning and performance (26). The analysis of motivation factors among CHWs in low- and middle-income countries has also highlighted this issue (6). Besides, a survey of the factors affecting the attraction and retention of CHWs in Tanzania (27) and Bangladesh (28, 29) showed that recognition by the community was also an essential factor.

Another feature of the organizational context found in the present study as one of the sources of motivation for community health volunteers was supervision by community health authorities. Supportive monitoring and training of CHWs can further motivate them to participate in health programs (6). A review of five African countries' experiences in this field has also shown that holding

more and higher quality retraining courses to meet the work needs of CHWs is an essential factor (29). Following a study by Bayati et al., the present study showed that health volunteers considered the quality of performance of health care authorities and managers as one of the influential motivational factors (4).

Another theme that emerged in the present study was the social context of health centers. Naimoli et al. found CHWs' appreciation as one of the essential factors in increasing their performance (26). This finding was also supported in the present study. Sing et al. stated that paying attention to the needs of CHWs was one of the factors affecting their motivation (6). Likewise, the present study showed that paying attention to the health volunteers' demands could increase their motivation for participating in health programs.

Many community health volunteers in this study believed that spiritual factors were essential in continuing to work with health centers and stated that they had continued cooperating with the health centers without material expectations and for the sake of religious beliefs and altruism. Previous studies conducted in other countries also highlighted the role of these motivational factors. For instance, Haile et al. found that the inherent factors that led to voluntary works were empathy, altruism, and religious beliefs (20). Besides, according to Raven et al., one of the essential factors that motivate the participation of CHWs was to serve the community (30). Greenspan et al. pointed to altruism, love of voluntary service, and community service as other motivational factors for CHWs (27). Mpembeni et al. also found that one of the intrinsic motivations of CHWs was their altruism and willingness to serve people (21). Bayati et al. argued that supporting religious factors led to the continued cooperation of the community health volunteers with the centers as activities to be rewarded in the hereafter (4).

Moreover, psychological factors related to community health volunteers' personal beliefs and inner characteristics and feelings also motivate them to participate in health programs. The spirit of social participation and commitment to the role was also found in the present study as psychological factors motivating the health volunteers. Some studies have emphasized personal interest and commitment to service as motivational sources for CHWs (27).

Material factors were also found as factors affecting the behavior of community health volunteers. When a person is paid a good salary for what she does, she will be more motivated to continue her activities. However, the role of material factors in motivating the community health volunteers was not highlighted frequently in this study, and only a small number of community health volunteers stated that they expected to receive fixed amounts as salaries in return for doing their jobs. Some of the most important material factors motivating CHWs in studies conducted in other communities were special fees, allowances, salaries, access to health care for volunteers and their families, and the provision of low-cost and free services (25). In Ethiopia, there is an emphasis on providing free medical services and rewards to health staff (20). Another study found that cash payments for services provided by employees included payment of salaries, performance-based bonuses, and travel allowances (26).

The cultural context was found as another underlying factor affecting community health volunteers' behavior in health programs. The volunteers pointed to the family members' weak support that motivated them to carry out their responsibilities. Sometimes, some of the activities performed by the volunteers were not acceptable to the family because of some beliefs, which reduced their motivation to cooperate in providing health services. Family encouragement to volunteer as a community health worker was also confirmed in other studies (4, 21, 29).

In this study, social factors were also identified as an internal factor driving community health volunteers' behavior to participate in health programs. As social beings, humans always like to find a suitable job position by participating in social activities and being accepted by society members. They also like to have a social status and prestige in society. Gopalan et al. stated that gained public respect and job opportunities were essential motivational factors for CHWs (31). Naimoli et al. found the opportunities for professional growth and public recognition as essential factors influencing workplace presence (26). Raven et al. stated that having social status and prestige within the community is one of the essential factors from CHWs' perspective (30). Sing et al. pointed to the community's good social status and appreciation as essential incentives for the motivation and concentration of CHWs (6). Bayati et al. examined the factors affecting community health volunteers'

decision to end their cooperation with the centers implementing the health program and found that public support leads to the continuation of the health volunteers' cooperation with the centers (4).

Some community health volunteers pointed to the climatic context as one factor hindering their participation in the centers. Climatic factors are not controllable in the short term, but this problem can be solved by providing transportation services on certain days of the week for the community health volunteers to go to the center or perform their duties in the area.

The volunteers also considered the physical context of the centers as an essential factor in increasing their motivation to participate in health programs. The physical context of an organization refers to the dimensions, environmental conditions, space, and symbols used in that organization, which must be considered to improve activities performed by the staff. Assigning a fixed place for training purposes and activities done by volunteers was a feature of the centers' physical context, affecting the motivation of volunteers to participate in health programs. This also induces a sense of significance in volunteers as members of the centers and will motivate them to continue their participation.

This study provided an in-depth analysis of the factors motivating community health volunteers to participate in health programs. However, like all qualitative studies, this study's findings cannot be fully generalized to other contexts and settings.

## Conclusion

The present study showed that the community health volunteers' participation in health programs is influenced by factors such as physical context, organizational context, social context, climatic context, cultural context, increasing health knowledge, material factors, psychological factors, social factors, and spiritual factors. Failure to pay attention to these factors reduces the effective presence of community health volunteers in advancing health programs, increases the possibility of the termination of community health volunteers' cooperation with centers, reduces the quality of care provided, and ultimately wastes training and preparation costs.

Given the vital role of community health volunteers in advancing community health goals, the Ministry of Health and its related health deputies can take these factors into account in managing the community health volunteers' program and make

the necessary modifications to increase volunteers' participation in the realization of health programs.

Given that few specific studies have addressed community health volunteers' motivation in Iran, further research is needed to investigate this issue in other geographical areas. Besides, further studies are needed to increase the generalizability of the present study results on factors motivating the participation of community health volunteers in health programs and use the findings to manage these programs more effectively.

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### Conflict of Interest

The authors declared no conflict of interest in this study.

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