

Ashok Pandey

ISSN:2976-1077 (Online) https//doi.org/10.58196/jhswn/v12.3.2012024.3

Multi-disciplinary double-blind peer review journal

Editorial

Center for Volunteering Excellence

-Ashok Pandey1

¹Public Health Research Society Nepal, Kathmandu

Publishing Process. Received on: Nov 18, 2024 Finalized to publish: Dec 26, 2024 Open Access 4.0

Background

The need for a structured approach to volunteerism has become increasingly evident amidst the evolving landscape of global public health challenges. Across the globe, and particularly in countries like Nepal, public health issues such as infectious disease outbreaks, noncommunicable diseases, and limited access to healthcare have highlighted the critical need for innovative solutions. Addressing these pressing concerns effectively requires leveraging local and global resources while fostering sustainable partnerships. In response to these challenges, the Certified Volunteer Development Program initiated by the Public Health Research Society Nepal (PHRSN) offers a promising approach. This initiative aims to bridge gaps in public health service delivery by equipping individuals with essential skills, knowledge, and motivation to contribute effectively as volunteers. By focusing on training and certifying volunteers, the program aligns with global efforts to strengthen

community engagement and build resilient health systems. Research indicates that well-trained volunteers are instrumental in promoting health literacy, improving health outcomes, and mitigating the impact of health disparities in underserved communities (Dodson et al., 2015). Nepal's unique public health landscape, characterized by geographical diversity and resource constraints, underscores the importance of this initiative. The Center for Volunteering Excellence, envisioned under this program, serves as a hub for fostering volunteerism and advancing community health interventions (Pandey & Gautam, 2020). By providing a structured platform, the center empowers volunteers to contribute meaningfully, whether education. through health community mobilization, or disaster response. Such efforts are supported by global evidence emphasizing the role of community-based interventions in improving public health outcomes (Sacks et al., 2017). As the program evolves, it holds the potential to address key public health priorities while promoting a culture of volunteerism that is sustainable, impactful, and aligned with both national and global health goals.



Ashok Pandey

ISSN:2976-1077 (Online) https//doi.org/10.58196/jhswn/v12.3.2012024.3

Multi-disciplinary double-blind peer review journal

Transformative outcomes

The certified volunteer development program has demonstrated significant outcomes, shaping both immediate public health responses and the longterm development of a skilled public health workforce. To date, the program has successfully trained and certified over 100 volunteers who have actively contributed to critical public health initiatives in Nepal. These initiatives include the Harm Reduction Project, the Search and Destroy Campaign for Dengue Prevention, and the WASH-away Antimicrobial Resistance (AMR) program. The Harm Reduction Project, led by Ashok Pandey, exemplifies the program's impact by training 20 public health graduates (Pandey et al., 2018; Pandey & Parajuli, 2022). These individuals have since played pivotal roles in advancing public health strategies, particularly in addressing substance use and its related health concerns. Similarly, the Search and Destroy Campaign for Dengue Prevention has engaged 68 volunteers, equipping them with the skills to identify and mitigate dengue breeding sites. Two batches of volunteers have completed their tasks, earning certification and contributing to reducing the dengue burden in affected communities (Pandey, 2024; PHRSN, 2024).

The WASH-away AMR Program, spearheaded by Ayuska Parajuli, has trained 12 volunteers who

are actively addressing antimicrobial resistance through improved water, sanitation, and hygiene practices. These volunteers are on track to receive certification within the next six months, further solidifying their contributions to combating AMR's growing global health threat. The program's achievements reflect a dual impact: addressing urgent public health challenges while building a sustainable, competent workforce capable of driving systemic improvements. By integrating training, practical application, and recognition, the Certified Volunteer Development Program ensures the empowerment of volunteers as agents of change.

Structured Pathway to Volunteer Excellence

The Certified Volunteer Program is a thoughtfully structured initiative designed to develop skilled, competent, and motivated public health volunteers. It combines theoretical knowledge hands-on fieldwork. ensuring with that participants gain real-world experience while directly contributing to the implementation of public health programs. The program follows a step-by-step approach, fostering a systematic pathway for volunteer development and empowerment.



Ashok Pandey

ISSN:2976-1077 (Online) https//doi.org/10.58196/jhswn/v12.3.2012024.3

Multi-disciplinary double-blind peer review journal

Step 1: Selection of Participants: The journey begins by identifying and selecting enthusiastic public health students and graduates from health sciences. This ensures a motivated group of individuals committed to making meaningful contributions to public health initiatives.

Step 2: Formation of Communication Platforms: Dedicated communication channels, such as email groups, WhatsApp, or Viber, are established to facilitate smooth coordination and collaboration among participants. These platforms serve as hubs for sharing knowledge, updates, and resources.

Step 3: Introduction and Networking: Participants are introduced to one another, the PHRSN team, and the program's objectives and goals. This step builds a strong sense of community and collaboration, essential for fostering teamwork and collective problemsolving.

Step 4: Training on Public Health Issues: Comprehensive training sessions are conducted to equip volunteers with knowledge on critical public health topics. These sessions incorporate diverse learning methods such as workshops, peer education, transient walks, mock tests, and experience-sharing activities. This ensures that volunteers are well-prepared to address realworld challenges effectively.

Step 10: Inclusion in the PHRSN Roster: Certified volunteers are included in the PHRSN **Step 5: Recruitment of Committed Volunteers**: Based on their interest and performance during the training phase, participants are recruited as active volunteers. This selective process ensures that only the most dedicated individuals become part of the program.

Step 6: Project Participation: Volunteers are required to engage in projects initiated by PHRSN. These projects tackle pressing public health issues, offering volunteers hands-on experience and an opportunity to contribute meaningfully to impactful initiatives.

Step 7: Demonstration of Competencies: Volunteers are assigned tasks to showcase their competencies. This step ensures accountability and maintains high standards in volunteer contributions.

Step 8: Active Engagement and Input: Volunteers are encouraged to participate actively in discussions, provide valuable insights, and collaborate closely with the PHRSN team. This enhances project outcomes and fosters an inclusive environment for innovation and improvement.

Step 9: Certification: Upon completing assigned tasks and contributing to project goals, volunteers are awarded certificates that recognize their achievements and contributions.

roster, a recognition that elevates their professional profiles. This inclusion prioritizes



Ashok Pandey

ISSN:2976-1077 (Online) https//doi.org/10.58196/jhswn/v12.3.2012024.3

Multi-disciplinary double-blind peer review journal

them for future public health projects, advanced roles, and employment opportunities, thus fostering career growth.

This structured pathway reflects PHRSN's commitment to creating a robust volunteer workforce that can effectively address public health challenges. By integrating education, experience, and recognition, the program empowers individuals to play a transformative role in improving community health outcomes. It also aligns with global strategies for strengthening health systems through community-based interventions and capacitybuilding (Bhattarai & Teijlingen, 2024; Woldie et al., 2018).

Conclusion

The certified volunteer program is a cornerstone initiative aimed at strengthening public health capacity in Nepal. By equipping individuals with the knowledge, skills, and certification to address pressing health challenges, the program does more than meet immediate needs it lays the groundwork for sustainable improvements in public health systems. The program's structured approach ensures that volunteers are not only trained but are also competent to handle realworld health issues, fostering a reliable and skilled workforce. This proactive model is especially vital in resource-constrained settings, where a lack of trained personnel often hampers public health initiatives. By creating a sustainable pool of skilled volunteers, the program ensures continuity and resilience in addressing health crises. Moreover, the integration of structured volunteerism promotes community engagement, empowerment, and the cultivation of local leadership in health efforts. These advantages demonstrate the program's critical role in enhancing public health capacity while aligning with global goals of sustainable development and community-driven health solutions. Looking ahead, expanding and replicating such models will be key to addressing health inequities and building robust health systems.

Acknowledgment

Ashok Pandey led the Harm Reduction project with visionary leadership and unwavering commitment to public health initiatives in Nepal. Dr. Ramananda Pandit and Dr. Narayan Bahadur Mahotra, Prof. Dr. Chop Lal Bhusal provided essential support as team members. For the search and destroy campaign aimed at mosquito prevention for dengue, Ashok Pandey served as the team lead, with Chetraj Pandit, Kusum Dhungana, Ayuska Parajuli, Ashok Tandon, and Dr. Nimananda Rijal making invaluable contributions. In



Ashok Pandey

ISSN:2976-1077 (Online) https//doi.org/10.58196/jhswn/v12.3.2012024.3

Multi-disciplinary double-blind peer review journal

the WASH AWAY AMR project, Ayuska Parajuli led the initiative, with Ashok Pandey, Puja Nepali, and Sagun Pokhrel playing key roles in addressing antimicrobial resistance (AMR). Their expertise, dedication, and collaborative efforts have been instrumental in achieving meaningful public health outcomes, and their contributions are deeply acknowledged.

References

- Bhattarai, S., & Teijlingen, E. van T. (2024). Nepal Needs A Two-Pronged Approach to Secure Future of Its Female Community Health Volunteers (FCHVs). *Journal of Manmohan Memorial Institute of Health Sciences*, 9(1), 43–48. https://doi.org/10.3126/jmmihs.v9i1.68640
- Dodson, S., Goos, S., & Osborne, R. (2015). Optimizing health literacy: improving health and reducing health inequities: a selection of information sheets from the health literacy toolkit for low- and middle-income countries. In World Health Organization, Regional Office for South-East Asia. https://doi.org/10.1016/b978-012219803-8/50004-1
- Pandey, A. (2024). Impact of Bacillus thuringiensis var. israelensis (VCRC B17) for Mosquito Larvae Control. *Journal of Health and Social Welfare*, 8(1), 14–16. https://doi.org/https://doi.org/10.58196/jhswn/v8/i1/20240223
- Pandey, A., & Gautam, P. (2020). Key Informant Methods : An Innovative Social Mobilization Strategy to enable Community- based Diagnosis , Treatment and Rehabilitation for People with Disability. J Nepal Health, 18(46), 147–149. https://doi.org/https://doi.org/10.33314/jnhrc.v18i1.1826 J
- Pandey, A., Johorul, J., Joarder, K., Altaf, M., Rahman, R., Mohatra, N., Islam, N., Pravin, S., & Parajuli,
 A. (2018). Situation analysis of smoking and perceptions about harm reduction amongst slum dwellers in Dhaka City.
- Pandey, A., & Parajuli, A. (2022). Evaluating & Developing Tobacco Harm Reduction Strategies among Smokers in Kathmandu, Nepal. SRNT, 183. https://www.srnt.org/page/2022_Meeting
- PHRSN. (2024). Search and Destroy Strategy for Dengue Prevention in Slum Dwellers of Kathmandu.
- Sacks, E., Swanson, R. C., Schensul, J. J., Gleave, A., Shelley, K. D., Were, M. K., Chowdhury, A. M., LeBan, K., & Perry, H. B. (2017). Community Involvement in Health Systems Strengthening to Improve Global Health Outcomes: A Review of Guidelines and Potential Roles. *International*



Ashok Pandey

ISSN:2976-1077 (Online) https//doi.org/10.58196/jhswn/v12.3.2012024.3

Multi-disciplinary double-blind peer review journal

Quarterly of Community Health Education, *37*(3–4), 139–149. https://doi.org/10.1177/0272684X17738089

Woldie, M., Feyissa, G. T., Admasu, B., Hassen, K., Mitchell, K., Mayhew, S., McKee, M., & Balabanova, D. (2018). Community health volunteers could help improve access to and use of essential health services by communities in LMICs: An umbrella review. *Health Policy and Planning*, *33*(10), 1128–1143. https://doi.org/10.1093/heapol/czy094