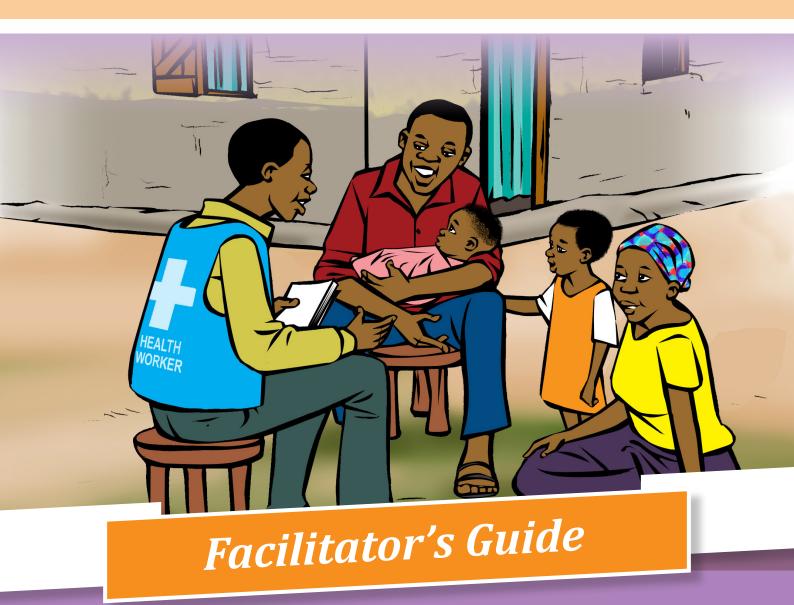
# INTERPERSONAL COMMUNICATION FOR COMMUNITY OUTREACH



# USAID Regional Health Integration to Enhance Services, North-Lango (RHITES-N, Lango)







# INTERPERSONAL COMMUNICATION FOR COMMUNITY OUTREACH

# Facilitator's Guide

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# FOREWORD

This guide is a behavior change communication tool developed to be used by community outreach workers and social mobilizers to promote healthy behaviors. Developed for the USAID Rhites-N, Lango project, that is supported by USAID under contract number 72061718C00004 and the Ministry of Health, Uganda.

The guide was developed in consultation with District Health Educators and Master Trainers and Community Change Agents from the Network of People Living with HIV from Lira, Alebtong, APAC, Dokolo, Amolator, Otuke, Oyam, Kole and Kwania Districts. They contributed invaluable insights to the development of the content.

Our sincere thanks to all of them and those that will use the guide to encourage healthy behaviors.

RHITES-N, Lango SBC Team

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# INTRODUCTION

There are many reasons people do not seek services at health clinics, so it is important for community organizations to motivate people to go for services. The USAID-funded RHITES-N, Lango activity is working with the Government of Uganda to promote positive health behaviors that encourage men, women, youth, and children to visit health clinics. There is an emphasis on maternal and child health, family planning, water and sanitation, nutrition, malaria, TB and HIV.

Community mobilizers are the front line between clinics and people living in the community. They have credibility, know the community members as friends and neighbors, and are trusted source of information. As community mobilizers for health they are responsible to:

- communicate information about key health issues
- dispel myths and misperceptions
- address barriers people face to staying healthy and going to the clinic for services
- encourage people to take steps to prevent illnesses and protect their health
- make people aware of the different types of health services and encourage them to seek services
- begin a dialogue
- listen

To be an effective community mobilizer requires having good interpersonal skills. If it is one-on-one or talking to a group Interpersonal Communication (IPC) involves a two-way dialogue where individuals respect each other, listen, and discuss.

# **EFFECTIVE INTERPERSONAL COMMUNICATION**

Data and experience have shown that one of the most effective ways to affect change is Interpersonal Communication (IPC). It is also one of the most under-executed communication tools we used.

This guide is designed to help providers, social mobilizers, advocates, peers, and community organizers strengthen their communication skills to assist individuals, households, and communities adopt the best practices or behaviors for a healthy and fulfilling life.

The IPC Guide is organized in to two-parts: 1) classroom instruction and 2) practicum or application.

The classroom instruction will outline the step-by-step tools to create an effective interpersonal communication activity, and an applied practicum of role-playing, interaction, and problem-solving.

At the end of the one-day workshop the participants will be able to use these skills to comfortably engage with their community to discuss health issues and services.

# **IPC MODULE**

The IPC module includes:

- The IPC Guide
- PowerPoint Presentation of the IPC Training Guide
- A tip sheet of interpersonal skills
- Pre- and post-surveys to evaluate the workshop
- Conversation cards on health topics
- An extra role-play exercise
- Certificate of Completion

# **ROLE OF THE MASTER TRAINER**

As the master trainer you play a central role in running the training workshop and supporting participants as they implement community activities. Training is only part of the learning process. Your support and mentoring during implementation will be important to the success of the project.

To review your role at the workshop and beyond

- Impart knowledge on IPC and how it can be used for community outreach
- Train participants on the skills needed for IPC
- Guide the development of participants' community outreach implementation plans
- Support and mentor participants as they implement outreach programs

# **INFORMATION FOR RUNNING THE IPC WORKSHOP**

Planning A Successful Training Event

- The one-day training is composed of five sessions.
- The training is designed for civil society organizations (CSO) and community-based organizations (CBO) and community health volunteers (CHV) who interact with individuals and groups in community settings.
- The workshop should be led by two facilitators or at a minimum one trainer and one assistant. Two facilitators share the workload and give participants variety.
- Equally divide the workshop responsibilities and tasks (managing the projector, organizing participants into groups, gathering feedback from the groups, distributing and collecting the pre- and post-test evaluations) between the facilitators.
- Invite a district health official or health expert to introduce the workshop. Their presence will capture the attention of participants and drive home the importance of the training to the government.
- The workshop includes information about IPC for the trainer to deliver and time for participants to interact as a large group and in small groups to practice the various skills. Allow participants enough time for exercises and practice sessions.
- The sessions are designed to be interactive and encourage questions and discussions. Allow participants to ask questions at the end of each presentation of content and exercise debriefing.
- The guide is designed to be easy to use. For each session the guide includes:
  - Purpose of the session what the session is designed to achieve
  - NOTES TO THE TRAINER in a box to give you background about running the session
  - Trainer says: in italics is a script for talking about the information
  - EXERCISES: information for running the skill building sessions
  - A summary section: to review what the sessions covered
  - Power Point Presentation to emphasize the key points of each session
  - A Participants Guide, which is to be distributed to each attendee, includes the visuals and key behaviors be used for each session and as a reminder when they are working in the field

## **GETTING STARTED**

Use this Planning Checklist to organize your workshop.

# LOGISTICS

- Set the date(s) and confirm no conflict with other events or holidays
- Confirm location. Choose a space that is private and quiet, free from outside distractions
- Invite community mobilisers or other individuals who interact with the public
- Confirm trainers (two are best)
- Invite guest speakers (district health officers, clinic in-charge)

# TO DO LIST

- Confirm number of participants
- Order flip charts or paper and markers, one per small group and one for the trainer
- Order refreshments for breaks and water on the tables
- Copy handouts, participant guides, evaluations, certificates needed
- Have materials from MOH and Communication for Healthy Communities Project

## **SET-UP**

- Arrange tables so participants can see each other and the facilitator easily
- Read the entire guide and practice the training program ahead of the real training workshop

# AGENDA

# Workshop Agenda

8:00 - 8:30	Registration and Coffee
8:30 – 9:00	Session ONE: Welcome and Introduction
9:00 – 10:00	Session TWO: Health Behaviors and Barriers to Behavior Change
10:00 - 10:30	Break
10:30 – 12:00	Session THREE: Interpersonal Communication for Behavior Change
12:00 - 13:00	LUNCH
13:00 - 14:00	Session FOUR: Elements of Effective Interpersonal Communication
14:00 – 15:30	Session FIVE: Reinforcing Healthy Behaviors in the Community
15:30 – 15:45	Conclusion

# INTERPESONAL COMMUNICATION FOR COMMUNITY OUTREACH WORKSHOP

# 1- SESSION ONE:

# **INTRODUCTION**

**NOTE TO TRAINER** 

Annex A-PowerPoint presentation

### Slide 2

# Welcome and Introductions: 15 minutes

#### **NOTE TO TRAINER**

- Welcome the group to the meeting. Introduce your guest speaker(s).
- Ask each participant to introduce him/herself and ask if this is their first training on IPC.
- Conduct pretest. (Annex B- Workshop pretest)

# **Objectives of the Workshop and Review Agenda:** 10

Minutes

#### **NOTE TO TRAINER**

Introduce the training workshop by presenting the slide with the objectives. After reading them ask if there are any questions.

### Trainer says:

## Slide 3

By the end of this workshop participants should be able to:

- Understand interpersonal communications and how it can be used in community outreach interventions
- Demonstrate specific interpersonal communication skills
- Engage participants in social and behavior change outreach activities to promote health seeking behaviors

**NOTE TO TRAINER** 

#### Slide 4

Review the agenda for the workshop (Annex 3 – Agenda for workshop)

# 2- SESSION TWO:

# **OVERVIEW OF HEALTH BEHAVIORS**

*Time Required:* **60 MINUTES** 

# Health Behaviors: 30 minutes

## **Purpose of this Session**

Build understanding of the project's key health behaviors, why they require community outreach and the barriers that make behavior change difficult.

## Trainer says:

*The USAID-funded RHITES-N, Lango activity is working with the Government of Uganda to strengthen health services in public and private clinics in the northern districts of Uganda.* 

Health facilities provide care to those who are able and willing to go and get care.

But not everyone is comfortable or able to seek care at the clinic.

- There are people who may be HIV positive and who need treatment
- Pregnant women who want a healthy child but have not gone for prenatal care
- People with TB who need treatment

For many reason people do not get the care they need. This is where community organizations and outreach workers play an important role. Some organizations and outreach staff can bring services to these individuals. Other can motivate individuals to seek care and help them find the services they need.

### Trainer says:

You begin with understanding the actions or behaviors you want people to take. Our goal is to motivate individuals and families to help them overcome the barriers they face to care and help them seek the services they need. You also are presenting health behaviors that help individuals stay healthy.

We are focusing on seven health areas: HIV and AIDS, malaria, family planning, maternal and child health, nutrition, TB, and WASH. Each of these health issues has its own set of behaviors and practices. They are interconnected – hygiene and clean water are critical for all of our health behaviors; TB and Malaria, good nutrition for maternal and child health.

#### **Class Exercise**

#### **NOTE TO TRAINER**

Trainer asks the class to name positive behaviors for each health issue. Trainer begins with one health issue, i.e., HIV and AIDS, MNCH, and writes on the flip chart. The participants then respond with behaviors for each health issue.

#### Trainer says:

Let us name the key health behaviors that people ask you about.

When finished show the slides 6-11 and compare to what the participants named during this exercise.

#### Slide: 6

HIV Prevention and Testing

- Abstain from sex if you are a virgin
- Use condoms if you are sexually active
- Get medical circumcision
- Sexually active adolescents and adults should be tested regularly for HIV
- If a person tests positive for HIV, he/she should start treatment immediately
- Once a person starts HIV treatment, they need to stay on their treatment and take it daily

#### Slide 7

Maternal and Newborn and Child Health (MNCH)

Antenatal Care

- When pregnant visit the clinic four times for check-up
- Be tested for HIV
- If tested positive for HIV start treatment immediately
- Sleep under a bednet
- Deliver your baby in a health facility or with a trained attendant

MNCH -Post Natal Care

- Visit the clinic for care after the baby is born as told by the health worker
- Breastfeed your baby within an hour of delivery and exclusively (no other food or drink including water) for six months
- After a woman delivers a baby, she should use modern contraceptives to avoid pregnancy for at least 24 months

#### Slide 9

Baby and Infant

- Recognize symptoms of malaria and seek prompt diagnosis and care
- Provide prompt treatment for children with diarrhea at the onset of symptoms
- Recognize problems with baby (fever, seizures, heavy coughing, non-movement) and seek care immediately
- Immunize children to avoid infections
- Complete all immunization for children under two years of age

### Slide 10

WASH

- Wash your hands with soap and water, especially after you change a diaper or defecate
- Wash your hands before preparing food or eating

## Slide 11

ТΒ

- If a person has a cough or chest pains they should be tested for TB
- If they are around someone who has TB, they should be tested for TB
- When a person starts TB treatment they need to complete the entire treatment to get better

#### **Group Exercise**

#### **NOTE TO TRAINER**

Trainer breaks the participants into five groups and assigns a health issue to each group. Ask what questions people have about the health issue. Misconceptions? Myths? After five minutes have the groups share some of them with the group.

#### Trainer says: \_

Let's form five groups and I will give you each one of the health topics. In your group, make a list the questions people have asked you about the health issues. Include any myths or misconceptions you also hear. Take five minutes to discuss and we will ask each group to report out a few questions?

#### Summary

- These health behaviors are closely related to one another.
- The information in this section should give you enough accurate information to conduct individual and group outreach.
- People have misconceptions about the health behaviors that create fear about adopting them.
- Your role is to help motivate people to go to health facilities for services. Providers at the clinic will answer their specific medical questions.

## Audiences and Barriers to Behavior Change: 30 minutes

#### Purpose of this section

To understand the audiences that need motivation to seek care and to understand the barriers people face to seeking care.

#### **NOTE TO TRAINER**

The session starts with a discussion of audiences that are the RHITES-N, Lango project needs to reach through community mobilization.

#### Trainer says:

The program has identified groups that need extra community outreach to encourage health seeking behavior. These groups need motivation and encouragement to seek preventive services, testing and treatment for many of the health issues discussed earlier. They include:

- Men age 18-49 for HIV testing and treatment, circumcision, TB treatment, malaria
- Pregnant Women -HIV testing and treatment, MNCH, malaria prevention, WASH
- People with TB -staying on TB treatment until it is finished, HIV testing
- Orphans Testing and treatment, nutrition
- Groups that may be of risk to HIV infection: Testing and treatment, circumcision, condom use
  - Fisher folk
  - Servicemen/women
  - Men who have sex with men (MSM)
  - Sex Workers (transactional sex)

#### Trainer says:

Sometimes there are obstacles you need to address while trying to mobilize individuals for behavior change. Some barriers may be based on your own personal beliefs or experiences, others are related to the health system where you live; and others can be cultural or personal. Understanding and addressing barriers people face is key to helping people change stay healthy.

#### **NOTE TO TRAINER**

Trainer attaches notes to wall with the audiences listed on each note. Share "sticky" notes with the participants and ask them to write down barriers people face getting care and services. Choose one audience at a time and ask for barriers and have people hang their sticky notes on the wall. Review the barriers, ask if any were missed and move to the next audience.

#### Trainer says:

*Each audience we discussed is listed on the wall. For each audience write a barrier to behavior change and post it on the wall.* 

#### **NOTE TO TRAINER**

When all the groups are finished reporting ask one or two of the participants to group similar answers together. Then ask all the participants if any barriers are missing. You will have a slide with additional barriers. Read the ones that the groups did not mention.

#### Trainer says: \_\_\_\_\_

Now that our time is up, are there any barriers we missed? Here are some additional reasons people do not seek health care:

### Slides 13, 14,15

### Access

- Do not know where to go for services
- Must wait long hours for care at a clinic
- Clinic does not have supplies, medicines, services, immunizations
- Work hours do not correspond with clinic's hours

## Information

- Do not know what service they need
- Fear the worse
- Misinformation and rumors about treatment and care

# Stigma

- Lose employment because of illness or pregnancy
- Rejection by family and friends
- Youth feel uncomfortable at clinics because of providers' bias

## **Economics**

- Cannot miss work because will not be paid
- Not covered by insurance
- Transportation to clinic is too expenses
- Unexpected costs when visit clinic or pharmacy

## **Social and Cultural**

- My husband does not give me money to go to the clinic
- Religious leaders are against family planning
- Families in Uganda have many children

## Summary

#### Slides 16-17

- These health behaviors we are addressing are closely related
- People have misconceptions about their health behaviors that create fear about adopting them
- Your role is to provide enough accurate information to help motivate people to go to health facilities
- Providers at the clinic will answer their specific medical questions
- Barriers can be real but there are many that are perceived
- Recognizing what is preventing a person from receiving health service is a critical first step in helping a person or a family overcome them
- Effective interpersonal communication is an important tool in identifying and addressing barriers

## Slide 18

# 3. SESSION THREE:

INTERPERSONAL COMMUNICATION FOR BEHAVIOR CHANGE

Time Required: **60 MINUTES** 

## **Purpose of this Session**

- Define behavior
- Identify elements of effective dialogue: one-way vs two-way communication
- Identify and practice actively listening and two-way communication, skills needed to activate and engage individuals and communities in positive health behaviors

#### Trainers says:\_

*Next, we're going to talk about interpersonal communication. First, we need to define behavior? Can anyone in the group give me a definition of behavior?* 

Select three or four participants and record their responds on flip chart.

Let's compare these to a more formal definition.

### Slide 19

Behavior is the way we act, react, and perform, in response to different stimuli under different situations and conditions.

Different people act differently under the same conditions. Our behaviors are complicated and are determined by many factors. Some are individual factors (knowledge, beliefs, attitudes, values). Others are external factors (families, peer groups, social norms, laws and policies). For example; the behaviors of teen age boys are often influenced by their peers (friends).

In your work, can you share any influences, either internal or external that influence a person's behaviors? For example: a husband, mother-in-law, or boss at work? Is this influence positive or negative? What advice do you offer on how to address that influence?

#### **NOTE TO TRAINER**

Ask for two or three participants to share specific examples. Ask other participants to ask questions about the examples. Understanding the factors that influence behaviors is essential to unlocking ways to motivate behavior change.

#### Trainer says:

For example, some people are more concerned about their children having a good future and may be motivated to change if it would help them achieve this goal.

#### Slide 21

Behavior change can be achieved in a variety of ways but research shows that IPC is done through social mobilization and community engagement is the most effective.

#### [Ask for two or three volunteers to respond to each question.]

Can anyone give me an example of a behavior YOU have started, stopped or modified lately? Tell us what factors influenced your decision to change your behavior? What motivated you?

Thanks for sharing those examples with us.

### Slide 22

Improving the way you communicate can help you create a collaborative relationship with individuals and communities. Identifying what factors influence peoples' behaviors can help you deliver more effective messages during face- to-face encounters. Interpersonal communication can take many forms:

- Face-to-face counselling
- home visits
- peer education
- group discussions

#### **NOTE TO TRAINER**

Trainer asks participants the following question and takes responses from three or four participants.

#### Trainer says:

How can interpersonal communication influence behavior?

Think about some ways IPC can change behavior and I will take responses from a few of you.

#### **NOTE TO TRAINER**

Trainer takes a few responses and writes them on the flipboard.

Interpersonal communication can influence behavior

- Give information to individuals so they can make a positive choice
- Tell people where to go for health services
- Dispel myths and misconceptions that may be barriers to seeking health care
- Learn ways to prevent illness or treat a health problem (foods to eat while pregnancy, warning signs for problems in pregnancy, how to use a condom)
  - Help individuals seek services for routine and acute care
  - Work to create positive, caring attitudes toward people who are ill in the community
  - Encourage conversations between men and women about health decisions

#### Trainer says:

*Let's look at the different ways talking and communicating, both verbally and non-verbally, can impact the trust and tone of a face-to-face interaction.* 

### Slide 24

Let's do an exercise to get started. Choose a partner next to you for a role play exercise. One of you play the role of a woman who has just learned she is pregnant. The other person is the community mobilizer talking to her about keeping healthy while pregnant. Take five-six minutes to interact. In communication we talk about one-way and two-way communication. Before we go into detail about the differences, let's hear from you. Can anyone volunteer to describe one-way and two-way communication?

Select a few participants to share their answers.

#### Slide 25

One-way communication is the way most people in authority talk to those they interact with, educators, healthcare providers, business owners, government officials. They have been trained to talk this way.

#### Trainer says:

This approach often leads to the recipient feeling:

- Talked down to
- Interrupted when tried to speak or to ask questions
- Not listened to/Ignored
- Uncomfortable demeaned, unwelcomed, outcast
- Rushed

#### Trainer says:

How did you feel in your role as the "pregnant women" or "community mobilizer"?

#### Ask for participants response.

Another way is two-way communication where the community mobilizer puts the pregnant woman first and at the center of the interaction. The intention is to gather accurate information but also to engage the individual in dialogue that leads to agreement on an action plan.

#### Trainer says:

- Establishes a dialogue
- Listens attentively
- Exchanges information
- Speaks simply
- Shows respect
- Asks questions

#### **NOTE TO TRAINER**

Ask the participants if the "community mobilizers" used any of these techniques with the "pregnant women". Discuss.

#### Trainer says: \_\_\_\_

#### Do you see the difference?

There are longer term benefits for the mobilizer in using this two-way approach that go beyond the specific interaction. Can anyone suggest these benefits?

Listen for participants' response. It should include: The pregnant feel comfortable and understood. Mutual respect and trust established between you and the individual you are reaching out to forms the basis of a true partnership. If these three points are not covered make sure to cover them as part of the final comments.

# Activating and Engaging Individuals and Community Members

Ask for a few volunteers: write summary of points on the flip chart.

#### Trainer says: \_\_\_\_\_

Before we go on to the next topic, can anyone share the two-way techniques they used? Have you used these before? Did they feel familiar? comfortable?

Now that we have had one practice exercise, let's look at some additional ways you can use two-way communication skills in a discussion with community members.

*There are many communication techniques that encourage open dialogue or two-way communication with community members* 

#### **NOTE TO TRAINER**

Ask the participants to give ways to encourage two-way communication. Write on the board.

#### Trainers Says:

Here are some examples:

#### Slide 26

- Give a warm welcome. Use [culturally] appropriate body language and verbal communication to show respect and caring.
- Show respect. Nod your head, listen to the tone of the voice.
- Listen attentively. Make it clear that you are not in a hurry, that you have their best interest in mind, and want to hear what they have to say.
- Do not interrupt. Allow the community member to finish what they have to say.

- Pay attention to verbal and non-verbal messages. Observe body language, words and things that might go "unsaid," such as feelings or worries.
- Ask open-ended questions. Listen carefully to answers and probe for honest answers.
- Use simple language. Repeat same words to aid understanding.
- Use support materials. Provide additional information and encourage seeking additional information.

#### Trainer says:

We're going to break into small groups now and practice one of the key interpersonal communication skills: active listening. We'll get to some of the others this afternoon and you'll have a chance to practice all the techniques that are mentioned above.

# **Group Activity: Active Listening**

*Time Required:* **30 MINUTES** 

#### Trainer says:

- One will be the narrator; the other will be the listener.
- The narrator will have five minutes to relay a personal experience trying to start or stop a habit of his/her own. For example, trying to stop smoking, increasing activity by walking two times a day for 15 minutes. The listener will NOT TALK during the two minutes.
- At the end of five minutes, switch roles and take five minutes to do the same exercise again.
- You will have five minutes to discuss the experience together and describe what the listener did to show the narrator that he/she was listening or not listening during the exercise. Each group should capture the key points of the discussion.
- Decide which partner will report your results back to the larger group. [After10, minutes reconvene the group. Ask each group to take two minutes to report the results of their discussions.

*After the group reports are completed, ask all the participants the questions below. Select two respondents for each question.* 

#### Trainer says:

Was this harder than you expected? Since the listener could not talk, how did he/she:

- Indicated he/she understood (Made sounds, nodded)?
- Showed interest and respect (use appropriate body language (looked at my eyes, nodded, smiled; did not interrupt; seemed friendly and respectful).

This exercise shows that non-verbal communication can be as powerful as words.

# Session 2: Wrap Up

#### Trainer says: \_

To recap, you are respected authority figures. By using effective two-way communication in interactions with your community leaders and members you can be a powerful motivator of behavior change.

To improve communication with your community what do you do?

#### [Listen for]

- 1. Use two-way communication, both verbal and non-verbal, to improve dialogue and engage community members
  - Give a warm welcome. Ask: "How can I help you?"
  - Show respect. Nod your head, listen to the tone of the voice
  - Observe body language, words and things that might go "unsaid," such as feelings or worries
  - Ask open-ended questions and listen carefully to answers
  - Use simple language and repeat same words to confirm understanding
  - Use support materials to reinforce recommendations
- 2. Actively listen during face to face interactions
  - Listen attentively. Do not rush
  - Do not interrupt

Any questions or comments?

4. SESSION 4:

IPC SKILLS

Time Required: **45 MINUTES** 

#### Purpose of the session

- Describe and practice asking open-ended questions, a skill needed for effective dialogue
- Describe and practice speaking simply, a skill needed to ensure understanding and agreement on good behaviors
- Discuss using support materials during interactions to prescribe and reinforce recommended practices

**Trainer Tips** Have copies of the Facilitator's Guide for this session including graphics of behaviors and talking points.

#### Trainer says:

Does anyone have any questions or comments they from this morning's session?

Any clarifications?

Disagreements?

#### [Pause for discussion -keep to 10 minutes]

We've reviewed the importance of active listening and using two-way communication as being necessary to gain trust, build confidence and establish a dialogue with community members. The next elements of successful interpersonal communication we will explore are:

#### Slide 29

- Asking open-ended questions and probing
- Speaking simply and
- Using support materials to reinforce recommended lifestyle changes

# **Open-Ended Questions**

#### Trainer says: \_

Can anyone give me an example of an open-ended question?

[participants response] Do you usually use these when you are gathering information from community members? Show by raised hands.

*Open-ended questions encourage dialogue and information exchange.* 

Use open-ended questions and probing for more information when a superficial answer is not enough, or when a Yes/No answer is most likely to be incomplete or false.

Why do you think individuals do not offer information to health providers? What could be holding them back from expressing their concerns?

Get suggestions from two or three participants. Listen for: People are intimidated by health providers and health clinics. Every time they do go to the clinic for an illness they are criticized about how they don't take care of themselves or not doing what the nurse said to do.

- Open-ended questions elicit a greater response
- Open-ended questions allow you to follow up with questions or to probe
- Open-ended questions begin with words like "how" or "what" or "can you tell me..."

#### Trainer says: \_\_\_\_\_

*Can you give me some examples of good questions to ask? Here are some others you might find useful:* 

- What is keeping you from taking your child to the clinic? How can we help?
- Why weren't you able to join the support group last week? We missed you!
- Is it difficult for to get to the clinic with three children? Can someone go with you?
  - 1. Yes/No or close-ended questions require one or two-word answers. These are useful to clarify or confirm issues or statements or specific information.
  - 2. Use a combination of open-ended questions and some closed-ended questions to probe about related topics. [Examples: How long have you been taking your TB treatment medicine? Do you take it every day? How can we help you make sure that you stay with the treatment program?

By asking Yes/No questions, they may end up telling you a simplified answer. Asking a combination of questions allows the community member to give you details that come closer to the whole story.

#### Trainer says:

I need two people to volunteer a mock questioning session for the group. One of you is the mobilizer and the other is a mother with a baby. Please use both Yes/No and opened end questions to find out if the individual is attending clinic and if not why and how that can be addressed.

[When the pair are finished, ask the larger group about the questions used by the mobilizer and individual and other questions could he/she have used.]

Now we're going to give all of you a chance to practice asking open-ended and probing questions next.

#### Group Activity

## **Asking Open-Ended and Probing Questions**

Time Required: 15 MINUTES

Slide 30

#### Trainer says: \_

Pick a partner for these next exercises.

You will take turns being the mobilizer and the community member and then switch roles after five minutes. The "mobilizer" can pick a behavior from one of our health behaviors in the Participants Guide. The community member in this exercise, needs to ask questions to get information and set small goals to engage in their health. Use a combination of open-ended, probing and Yes/No questions.

Then each pair will discuss whether the exchange of information:

- Gave the community member correct information to adopt healthy behavior
- Engaged the community member, discuss doable behaviors, and set a plan for specific changes to try

Take 15 minutes to take turns and complete this role play and to discuss the exercise. We'll then ask select pairs to share their experience with the whole group.

#### [After 10 minutes say]

*Here's your five-minute warning. Finish up and be ready to present what worked and what didn't to the group please.* 

#### Group Activity

#### Trainer says:

Volunteers?

*Please tell us what kind of questions you used and whether the exchange of information.* 

[Select a pair to discuss their behavior and what they learned]

#### [Pause for discussion]

*How did it feel to be the community member? Did you feel listened to? Respected? Engaged as a partner in your own life and decision-making?* 

*Now it's time to move on to sharing information with your community in a way that educates and motivate understanding and action.* 

## **Speaking Simply**

#### Slides 31

#### Trainer says:

Speaking simply, in language that is easy for any person to understand should be your goal. This prevents confusion and helps individuals anxious or nervous about being in a foreign environment.

Can you give me some examples of words that you know are difficult for community members and non-educated people to understand? (For example, some health terms we regularly use VMMC, MCH, WASH)

#### Slides 32-33

- It is always better to use simple words to make sure that the information and details are understood
- Repeat the same words to make it easier for them to fully understand
- Sometimes it is necessary to use very simple words to accommodate community members who are not literate

Another way you can make complicated information or recommendations easy-tounderstand is by using support materials and that's our next skill to discuss.

## **Using Support Materials**

#### Slides 34

#### Trainer says:

Once you have raised a person's awareness about a health issue, it's time to talk about small doable steps that a person and the community can take to improve their health and the health of their family.

We have several health issues to cover in this program that we talked early in the training session. For each of these health issues there are key behaviors people need to take.

*Each behavior requires individuals, families and communities to take steps to support these behaviors. Choose a health issue and behavior. (Call on participants to choose one or two.)* 

*Let's start with the first behavior. What steps can people take to change or adopt this behavior? (Write answers on flipboard.) What steps can families take? What steps can communities take?* 

I'll write all your ideas on the flip chart and then we'll talk about them all.

Now let's turn to your participants' guide. In your participant's guide you have conversations cards with illustrations on the front and questions and information on the back to use for social mobilization activities.

#### [Ask participants to locate the Participant's Guide and the conversation cards.]

Take a few minutes to read through the documents and ask any questions.

In the next session we will use the cards in an interactive session, but before we do that can I ask your reactions to the cards?

Do you find this useful?

Do you see any problems to using it in your community setting?

Will community members be accepting of the tool and commitment to the behavior?

[Record comments on flip chart.]

## Session 4: Wrap Up

#### Slide 35

#### Trainer says:

To recap, by asking open-ended questions, speaking simply and using support materials you can:

- Gather accurate information from community members to counsel them on doable actions
- Provide actionable, simple, practical, understandable information to individuals, families and communities to enable behavior change
- Follow-up and reinforce taking small steps to change behavior
- 1. Use open-ended questions and speak simply to gather needed information and ensure your audiences understand what you are recommending and how they can do.

- 2. Use the pictures to reinforce recommended house hold changes and engagement.
  - Check, circle or write in the small steps you and the audiences agreed to try
  - Follow up with them on an agreed upon regular schedule
  - Remind individuals that making practical, doable changes can help them make healthy choices.

Any comments or questions?

## Slide 36

5. SESSION 5:

# REINFORCING HEALTHY BEHAVIORS IN YOUR COMMUNITY

Time Required: 60 MINUTES

### **Purpose of this session**

- 1. Identify ways to monitor progress or reinforce making additional attempts or trying another behavioral option.
- 2. Practice agreeing upon and recording next steps for behavior change.
- 3. Review and practice using the Conversation Cards and other SBC materials)

## **Trainer Tips**

Options for exercises:

- Participants can conduct IPC activities using the conversation cards with other participants. They can practice individual IPC and small group IPC.
- Participants can go outside the training center and use the cards in a nearby community with individuals or small groups.
- Community members can be invited to participant in the training and attend a session where the participants use the cards.

Keep the day on track by serving as time keeper for exercises. Remind participants at the half way point of an exercise, and again five-to-ten minutes before the end to keep groups on schedule.

When the exercises are completed, ask participants to share their experience with the cards.

#### Trainers says:

How you can motivate and reinforce attempts, successes, and failures at supporting healthy behaviors in their homes and community?

[Get suggestions from two or three volunteers. Ask other participants if they've tried these suggestions and how people responded.]

#### Trainer says:

You can help by motivating and reinforcing the positive behaviors individuals and communities have agreed to try when you see them in the community and home visits. When talking to them, use open-ended questions and gentle probing to help you learn about their success or failure with behavior changes while strengthening the partnership you are forming.

When discussing the behaviors, it is important to inquire in a way that is not judgmental and allows the individual to talk comfortably about what has worked and what has not....and why. Then respond to their experiences in different ways:

#### Slide 38

- Offer support for success and encourage continuation of the behavior
- Address failed attempts with reassurance and support to try again or seek support for making the change
- Encourage those who did not try as promised. Identify barriers that the individuals encountered and offer suggestions on how he/she can overcome them
- If the behavior is not possible or practical for the individual to achieve, help them identify a different step to try and have him or her recommit to the new behavior

#### [Ask the group]

Can anyone give us an example of talking to individuals to seek a service (go for TB test) and when you meet them again the person has not done it? What were some of the reasons or barriers they were not successful? How can you help them get family or friends to support them?)

Another way to help individuals make progress with a behavior they are trying to change is to make them conscious of the habit they are trying to modify. The first step in making a successful behavior change is to be aware of the habit itself. For example, ask parents to mark the calendar for all the immunizations they need for the baby in the first year. Ask them to check off each one that the child received.

# **6. SUMMARY AND CONCLUSION**

Slide 39

### Slide 40

To recap this session, to reinforce behavior change:

Ask about lifestyle behaviors/practices and record an individual's answers to raise awareness.

- Discuss specific doable actions to encourage healthy behaviors. Problem solve on reasons the individual feels could prevent them from trying to make some small changes helps break down barriers to change.
- Agree on and record an action plan including gradual, practical steps to try before the next mobilization. Try to obtain the individuals commitment to change.
- Reinforce behavior change in follow up meetings or household visits.

Does anyone have any additional questions or comments?

# Conclusion

#### Slide 41

#### Trainer says: \_

Thank you for your participation. You've all been wonderful.

Any last questions or comments before we dismiss.

One last question: How will you apply what you learned today – part or all of it – to your role as a community mobilizer?

[Discussion]

Good luck. Please feel out the survey and turn it in.

Thank you!!\_\_\_\_



- A. AGENDA FOR WORKSHOP
- B. POWER POINT SLIDES
- C. IPC CHECKLIST
- D. CONVERSATION CARDS
- E. PRE AND POST TEST
- F. ADDITIONAL ROLE-PLAYING EXERCISE

# Annex A

# Workshop Agenda

8:00 – 8:30	Registration and Coffee
8:30 - 9:00	Session ONE: Welcome and Introduction
9:00 – 10:00	Session TWO: Health Behaviors and Barriers to Behavior Change
10:00 – 10:30	Break
10:30 – 12:00	Session THREE: Interpersonal Communication for Behavior Change
12:00 – 13:00	LUNCH
13:00 - 14:00	Session FOUR: Elements of Effective Interpersonal Communication
14:00 – 15:30	Session FIVE: Reinforcing Healthy Behaviors in the Community
15:30 – 15:45	Conclusion

# **Annex B**

## **POWER POINT PRESENTATION**

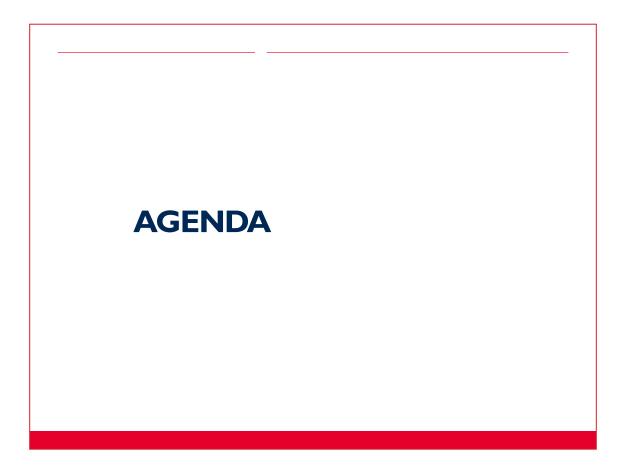


# INTERPERSONAL COMMUNICATION (IPC) WORKSHOP

**USAID RHITES-N, Lango Project** 

Session ONE: Welcome and Introduction

### OBJECTIVES OF WORKSHOP Understand interpersonal communications and how it can be used in community outreach activities Improve interpersonal communication skills of participants Engage participants in social and behavior change outreach activities to promote health seeking behaviors



### Session TWO: Overview of Health Behaviors

### **HIV PREVENTION AND TESTING**

- Abstain from sex if you are a virgin
- Use a condom if you are sexually active
- Get medical circumcision
- Sexually active adolescents and adults should get tested regularly for HIV
- If a person tests positive for HIV, he/she should start treatment immediately
- Once a person starts HIV treatment, they need to stay on their treatment and take it daily

### **MNCH: ANTENATAL CARE**

- When pregnant visit the clinic four times for check-ups
- Be tested for HIV
- If tested positive for HIV start treatment immediately
- Sleep under a bednet
- Deliver your baby in a health facility or with a trained attendant

### **MNCH: POST-NATAL CARE**

- Visit the clinic for care after the baby is born as told by the health worker
- Breastfeed your baby within an hour of delivery and exclusively (no other food or drink) for six months
- After a woman delivers, she should use modern contraceptives to avoid pregnancy for at least 24 months



### **BABY AND INFANT**

- Recognize symptoms of malaria and seek prompt diagnosis and care
- Provide prompt treatment for children with diarrhea at the onset of symptoms
- Recognize problems with baby (fever, seizures, heavy coughing, non-movement) and seek care immediately
- Get you child immunized to avoid infection
- Complete all immunization for your child under two years of age



### ТВ

- If a person has a cough or chest pains they should be tested for TB
- If they are around someone who has TB, they should be tested for TB



 When a person starts TB treatment they need to complete the entire treatment to get better

### **Audiences**

- Men age 14-39
- Pregnant Women
- Orphans
- People at risk of
- HIV infection
- Fisherfolk
- Servicemen
- Men who have sex with men
- Sex Workers (transactional sex)

HIV testing, treatment, circumcision, TB treatment,

HIV test and treat, MNCH, malaria prevention, WASH

Testing and treatment, nutrition

HIV testing and treatment, circumcision, condom use

### **Barriers to Health Behavior**

### Access

Do not know where to go for services Must wait long hours for care at a clinic Clinic does not have supplies, medicines, services, immunizations Work hours do not correspond with clinic's hours

### Information

Do not know what service they need Fear the worse Misinformation and rumors about treatment and care

### **Barriers to Health Behavior**

### Stigma

- Lose employment because of illness or pregnancy
- Rejection by family and friends
- Youth feel uncomfortable at clinics because of providers' bias

### **Economics**

- Cannot miss work because will not be paid
- Not covered by insurance
- Transportation to clinic is too expenses
- Unexpected costs when visit clinic or pharmacy



### **Barriers to Health Behavior**

### Social and Cultural

- My husband does not give me money to go to the clinic
- Religious leaders are against family planning
- Families in Uganda have many children

### Summary: Session Two

- These health behaviors are closely related to one another
- People have misconceptions about their health behaviors that create fear about adopting them
- Your role is to provide enough accurate information to help motivate people to go to health facilities
- Providers at the clinic will answer their specific medical questions

### **Summary: Session Two continued**

- Barriers can be real but there are many that are perceived
- Recognizing what is preventing a person from receiving health service is a critical first step in helping a person or a family overcome them
- Effective interpersonal communication is an important tool in identifying and addressing barriers

Session THREE: Interpersonal Communication For Behavior Change

### **Behaviors**

Behaviors are the way we **act, react and perform**, in response to different stimuli under different situations and conditions.

### **Behavior Change through IPC**



Behavior change can be achieved by a variety of ways

IPC done through social mobilization and community engagement research shows are the most effective

### **Effective IPC**

Identifying what factors influence peoples' behaviors can help you deliver more effective messages during face- to-face encounters.



### One-Way or Two Way Communication

**Exercise**:

- Choose a partner next to you for a role play exercise
- One of you play the role of a woman who has just learned she is pregnant. The other person is the community mobilize
- The mobilizers talks to the young woman about keeping healthy while pregnant
- Take five-six minutes to interact

### **One Way One-Way** Two-Way Communication VS Two Way Most in authority are trained in this **IPC** approach • • Intent is to gather key information

- Draw a conclusion
- Form an action plan to solve the problem or situation

### Communication

- Individual at the center of the interaction
- The intention is to gather accurate information.
- Engage the individual in dialogue that leads to agreement on an action plan

**Techniques to Encourage** Two-Way Communication

- Give a warm welcome
- Show respect
- Listen attentively
- Does not interrupt
- Ask questions
- Pay attention to verbal and nonverbal messages
- Use simple language
- Use support materials

### Session FOUR: Interpersonal Communication Skills

### Three IPC Skills

- Asking open-ended questions
- Speaking simply to ensure understanding and agreement
- Using support materials to reinforce recommended practices

### Asking Open Ended Questions

- Elicit a greater response
- Allow you to follow up with questions or to probe
- Begin with words like "how" or "what" or "can you tell me…"

### **EXERCISE**

Pick a partner for this exercise. You will take turns being a community mobilizer and community member and then switch roles after five minutes.

Pick a health behavior from the Participants Guide.

The "community mobilizer" questions to get information and set small goals to engage the person in behavior change. Use a combination of open-ended, probing and Yes/No questions.

Then each pair will discuss whether the "community mobilizer":

- Gave the community member the correct information to adopt good practices in the home
- Engaged the community member, discussed doable behaviors, and set a plan for specific changes to try

Take 15 minutes to take turns and complete this role play and to discuss the exercise. We'll then ask selected pairs to share their experience with the whole group.

### Use Simple Language

- Helps community members hear the information about what they need to do
- <text>

### Tips for Simple Speaking

- Use simple words
- Repeat the same words to make it easy for the individual person to fully understand what you are asking them to do
- Adjust the words and language based on the literacy level of the individual or community members

### Use Support Material

Use the materials and visuals developed with the Ministry of Health

Conversation cards are useful to help start discussions and let people ask questions

Illustrations are reminders for individuals to make daily small doable changes that will lead to changes over time



### **Session Four Summary**

- Gather accurate information from individuals to counsel them on doable actions
- Provide actionable, simple, practical information to enable behavior change
- Use the pictures to reinforce recommended health actions

Session FIVE: Reinforcing Healthy Behaviors In Your Community

### Reinforcing Positive Behaviors

How can you motivate and reinforce individuals' attempts at adopting positive behaviors that contribute to their good health?



- Offer support for success and encourage continuation of the behavior
- Address lapses with support to try again or seek support for making the change
- Encourage those who did not try. Identify barriers that the individual encountered and offer suggestions on how he/she can overcome them
- If the behavior is not possible or practical for an individual to achieve, help them identify a different step to try and have him or her recommit to the new behavior

### SUMMARY AND CONCLUSION

### **Summary: Session 5**

- Ask about lifestyle behaviors and record answers to raise awareness
- Discuss specific doable actions to encourage healthy behaviors
- Discuss barriers individuals feel could prevent them from trying to make some small changes helps break down barriers to change
- Agree on practical steps to try before the next meeting
- Reinforce behavior change in follow up meetings or household visits
- Identify personal, cultural or social barriers that get in the way of behavior change

### How Did We Do?

How will you apply what you learned today – part or all of it – to your role as a community mobilizer?

Questions and Answers

Comments

Post-training survey

### How Did We Do?

How will you apply what you learned today – part or all of it – to your role as a community mobilizer?

Questions and Answers

Comments

Post-training survey

### Annex C

### **CONVERSATION CARDS**

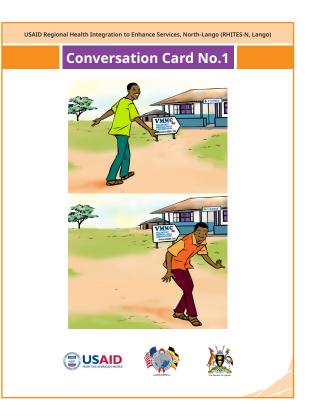
### 1. Voluntary Medical Male Circumcision (VMMC)

### **Discussion Questions**

- What do you think is happening in this picture?
- Why is the man smiling?
- Why is the other man unhappy?
- Why is it important that men are medically circumcised?
- Why do you think men do not want to be medically circumcised?
- Do you know where to go for a medical circumcision?

### **Key Information**

- Voluntary Male Medical Circumcision or VMMC is simple and easy when performed by a trained health provider.
- ➔ It is important because it helps to prevent the spread of sexually transmitted diseases like HIV.
- ➔ You still need to use a condom when having sex even if you have had a medical circumcision.
- ➔ Your visit to the clinic is confidential and gives you a lifetime of protection.
- → VMMC does not affect your being able to have sex and it does not reduce your strength.
- → Take care of yourself and the ones you love.... go to \_\_\_\_\_clinic for a circumcision.



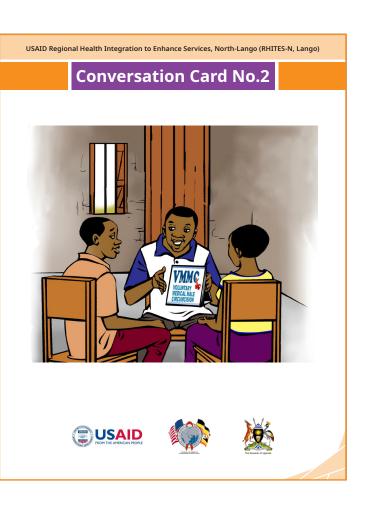
### Medical explanation of the procedure

- Circumcision is not castration. The procedure removes the skin around the tip of the penis it does not remove the penis.
- → Circumcision helps reduce infection and the removal of the foreskin makes it easy to clean your penis.
- → Circumcision does not prevent HIV and other STDS, you will need to wear a condom to avoid these infections.

2. Voluntary Medical Male Circumcision (VMMC) Conversa-tion Card

### **Discussion Questions**

- What do you think is happening in this picture?
- Why do you think the mobilizers is talking to the woman and the man?
- Why is it important for men to get circumcised?
- Why is it important for women that her partner gets circumcised?
- Do you think the man will have a circumcision because his partner is part of the discussion?



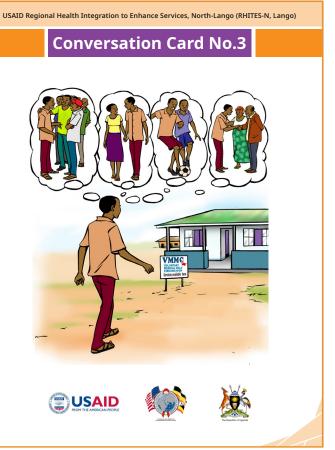
- → Voluntary Male Medical Circumcision or VMMC is simple and easy when performed by a trained health provider.
- → It is important because it helps to prevent the spread of sexually transmitted diseases like HIV.
- → Women support circumcisions because they help reduce infections for both partners and it is hygienic.
- → You still need to use a condom when having sex even if you have had a medical circumcision.
- → Your visit to the clinic is confidential and gives you a lifetime of protection.
- → VMMC does not affect your being able to have sex and it does not reduce your strength.
- → Take care of yourself and the ones you love.... go to \_\_\_\_\_clinic for a circumcision.

### 3. Voluntary Medical Male Circumcision (VMMC) Card

### **Discussion Questions**

- What do you think is happening in this picture?
- What is the man thinking about?
- Why is it important for men to get circumcised?
- Does his wife want him to get a medical circumcision?
- Will his parent be happy?
- Do you think he will get a circumcision?

- → Voluntary Male Medical Circumcision or VMMC is simple and easy when performed by a trained health provider.
- → It is important because it helps to prevent the spread of sexually transmitted diseases like HIV.
- → Women support circumcisions because they help reduce infections for both partners and it is hygienic.
- → You still need to use a condom when having sex even if you have had a medical circumcision.
- → Your visit to the clinic is confidential and gives you a lifetime of protection.
- → VMMC does not affect your being able to have sex and it does not reduce your strength.
- → Take care of yourself and the ones you love.... go to \_\_\_\_\_clinic for a circumcision.



### 4. Couple Visits for Antenatal Care and HIV Testing

### **Discussion Questions**

- What do you think is happening in this picture?
- What are the benefits for a woman going to the clinic when she is pregnant?
- Why should the man go with her to the clinic?
- What does the nurse say to the woman and the man?

### **Key Information**

- ➔ Pregnant women should visit the clinic four times during her pregnancy.
- → She and her husband should plan to deliver the baby in the clinic or with a trained health provider.
- ➔ Pregnant women should be tested for HIV and if she is positive, she should start treatment immediately

### **More Information**

- → Men need to put aside money to make sure women have a healthy pregnancy and delivery.
- → Women need healthy foods, mosquito nets to prevent malaria, and four prenatal visits for a healthy pregnancy and delivery.
- ➔ If the woman is HIV+ she can start treatment right away to avoid spreading HIV to the baby.
- → If the man is HIV+ he needs to get on treatment and use a condom when he has sex with his wife to avoid infecting his wife and baby.

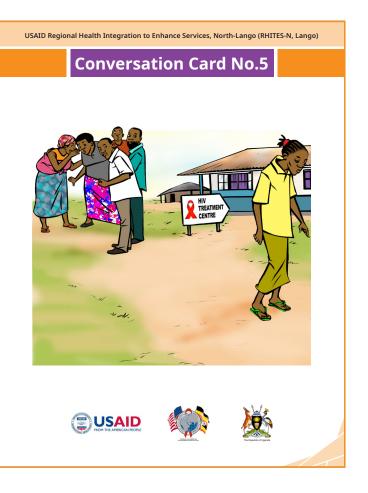


### 5. Stigma

### **Discussion Questions**

- What do you thinking is happen-ing in this picture?
- Why do you think she is standing/walking alone? her?
- How do you think she feels?
- What should be done to change the situation by the community?

- People who take HIV treatment can live a healthy life, marry and contribute to the community.
- ➔ People on treatment say their friends stop talking to them or people gossip about them. (Stigma)



- → These actions make people feel isolated and alone. Some people feel so bad that they don't take treatment, or they stop treatment. This will cause people with HIV to get sick.
- ➔ Treatment keeps people healthy and productive. Support people on treatment and be kind to them.

### 6. TB Treatment and Compliance

### **Discussion Questions**

- What do you think is happening in these three pictures?
- Why do you think he stopped his daily medicine?
- What do you see/think happened when the man stopped?
- What should you do to take your medicine every day?

- → TB is a disease that affects the lungs.
- → TB is an infectious disease and is spread from person to person.
- → TB is a curable disease. It does have a cure and that requires taking medicine for TB every day for as long as the provider prescribes the treatment.
- → Medicines for TB are free and available at health clinics.
- → It can be hard to take medicines for months, especially if you start to feel better but list to your health provider.
- → If someone in your family has TB, make sure they go for treatment and they stay on their treatment.



### 7. Post Natal Care

### **Discussion Questions**

- What is happening in the first picture? Why is the woman at the clinic with her new baby?
- What is happening in the second picture? Why is it important to breastfeed your baby?
- What is happening in these last two pictures? Why is the woman talking to her husband?
- What is she talking to the nurse about?

- → Visit the clinic for care after the baby is born as told by the health worker.
- Breastfeed your baby within an hour of delivery and exclusively (no other food or drink including water) for six months.



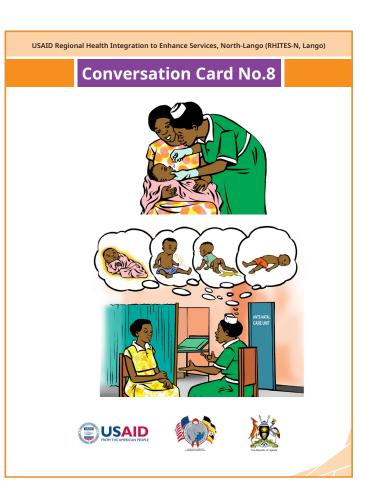
- → After a woman delivers a baby, she should use modern contraceptives to avoid pregnancy for at least 24 months
- → Go to the clinic for information about modern contraceptives.

### 8. Child Health

### **Discussion Questions**

- What is going on in this picture?
- Why is it important to take your child to the clinic?

- Recognize symptoms of malaria and seek prompt diagnosis and care especially for small children.
- ➔ Provide prompt treatment for children with diarrhea at the onset of symptoms.
- Recognize problems with baby (fever, seizures, heavy coughing, non-movement) and seek care immediately.
- ➔ Immunize children to avoid infections.

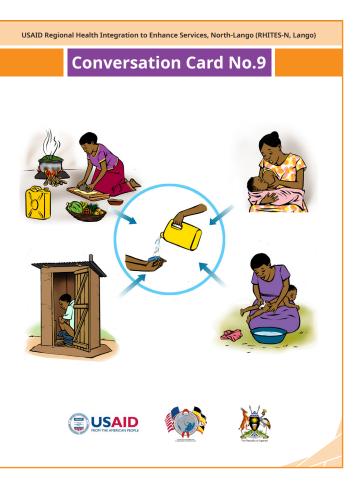


### 9. WASH

### **Discussion Questions**

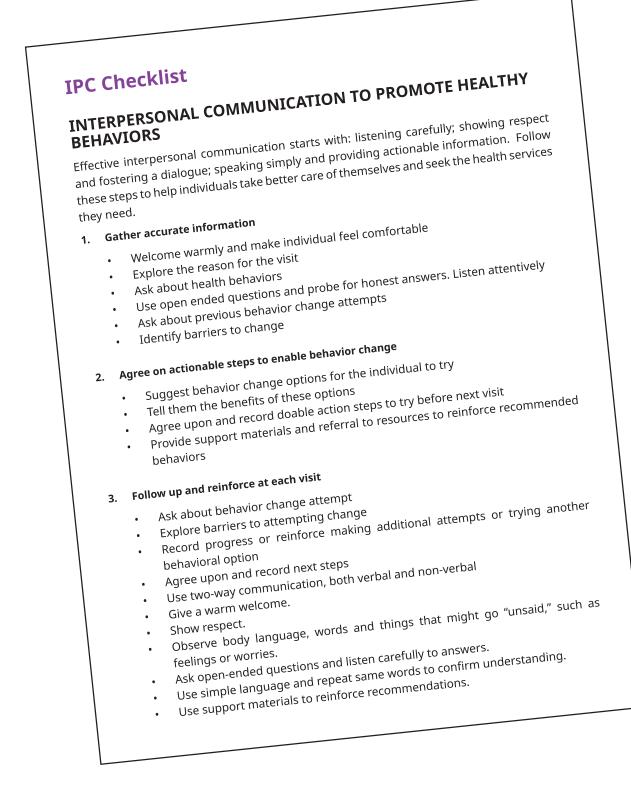
- What is the woman doing in these pictures?
- Why is she washing her hands?
- Why is it important to wash your hands before you prepare food?

- → Wash your hands with soap and water, especially after you change a diaper or defecate.
- → Wash your hands before preparing food or eating.
- → Hand washing prevents illness from spreading to your family.



### Annex D

### **IPC Checklist**



### **IPC Checklist**

### INTERPERSONAL COMMUNICATION TO PROMOTE HEALTHY BEHAVIORS

Effective interpersonal communication starts with: listening carefully; showing respect and fostering a dialogue; speaking simply and providing actionable information. Follow these steps to help individuals take better care of themselves and seek the health services they need.

### 1. Gather accurate information

- Welcome warmly and make individual feel comfortable
- Explore the reason for the visit
- Ask about health behaviors
- Use open ended questions and probe for honest answers. Listen attentively
- Ask about previous behavior change attempts
- Identify barriers to change

### 2. Agree on actionable steps to enable behavior change

- Suggest behavior change options for the individual to try
- Tell them the benefits of these options
- Agree upon and record doable action steps to try before next visit
- Provide support materials and referral to resources to reinforce recommended behaviors

### 3. Follow up and reinforce at each visit

- Ask about behavior change attempt
- Explore barriers to attempting change
- Record progress or reinforce making additional attempts or trying another behavioral option
- Agree upon and record next steps
- Use two-way communication, both verbal and non-verbal
- Give a warm welcome.
- Show respect.
- Observe body language, words and things that might go "unsaid," such as feelings or worries.
- Ask open-ended questions and listen carefully to answers.
- Use simple language and repeat same words to confirm understanding.
- Use support materials to reinforce recommendations.

### Annex E

Γ

### Pre and post workshop assessment forms

	post workshop assessment forms ONAL COMMUNICATION SKILLS TRAINING MENT FORM		
Date	TRAINING		NAL COMMUNICATION SKILLS TRAINING 1 - POST WORKSHOP EVALUATION FORM
		INTERPERSO	NAL COMMUNICATION SKILLS TRAINING   - POST WORKSHOP EVALUATION FORM
YES	articipated in an in-service session on interpersonal commu NO	EVALUATION	1-100-
If YES, were used	NO	Date	
YES	ou able to apply that training to your job?		2 appropriate response and explain your response.
2. What are your	expectations for this training?	Please check th	
		/ holpfi	
			lain lain ink the workshop sessions' content were clear and understandable? Somewhat Very helpful
<ol> <li>Are there areas i (Check All they</li> </ol>	in IPC you'd like to learn more about or practice at this works apply)	2 Do you th	ink the workshop sessions' content. Were deal
onto the triat a	apply) to call more about or practice at this works	Not at al	
listening			xplain
using sim	IDIe Janoura	3. How eff	ective did you think the trainer was? Average Very effective
encouragi	ing two-way	Not eff	active
other	- idis and resources		explain
Are there specific he	alth issues that you find more difficult to discuss with communit	4. One th	ing I learned today Was
members than other	r topics?		thing I am still unsure of is
o you currently talk	topics? YES NO	5 One	thing I am still unsure of is
YESN	to individuals about changing their health behaviors?		t suggestions would you make to improve the workshop?
/	NO	c wh	at suggestions would you make to improve the work and
		6. viii	
-	Thank You		
			sections were new to you?
	INTERPERSONAL COMMUNICATION SKI	LLS TRAINING	t sessions were new to you?
	INTERPERSONAL COMMUNICATION SKI EVALUATION [DISTRIBUTE AFTER THE T	(LLS TRAINING RAINING]	
	EVALUATION [DISTRIBUTE AFTER THE T	RAINING	t sessions were new to your Thank you
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### Pre and post workshop assessment form

### INTERPERSONAL COMMUNICATION SKILLS TRAINING PRE-ASSESSMENT FORM

Dat	e
1.	Have you participated in an in-service session on interpersonal communication?
	YESNO
	If YES, were you able to apply that training to your job? YESNO
2.	What are your expectations for this training?

- 3. Are there areas in IPC you'd like to learn more about or practice at this workshop? (Check ALL that apply)
  - \_\_\_\_\_ establishing a dialogue with my community
  - \_\_\_\_\_ listening
  - \_\_\_\_\_ using simple language
  - \_\_\_\_\_ encouraging two-way communications
  - \_\_\_\_\_ using materials and resources
  - \_\_\_\_\_ other \_\_\_\_\_
- 4. Are there specific health issues that you find more difficult to discuss with community members than other topics? \_\_\_\_\_ YES \_\_\_\_\_ NO
- 5. Do you currently talk to individuals about changing their health behaviors?

\_\_\_\_\_YES \_\_\_\_\_NO

Thank You

### INTERPERSONAL COMMUNICATION SKILLS TRAINING EVALUATION – POST WORKSHOP EVALUATION FORM

Date				
-				

Please check the appropriate response and explain your response.

1.	Did you find the worksh	op sessions helpful?	
	Not helpful	Somewhat	Very helpful
	Please explain		
2.	Do you think the worksł	nop sessions' content were	clear and understandable?
	Not at all	Somewhat	Very helpful
	Please explain		
3.	How effective did you th	ink the trainer was?	
	Not effective	Average	Very effective
	Please explain		
4.	One thing I learned toda	ay was	
5.	One thing I am still uns	sure of is	
6.	What suggestions would	d you make to improve the v	workshop?
7.	What sessions were new	<i>i</i> to you?	

Thank you

### INTERPERSONAL COMMUNICATION SKILLS TRAINING EVALUATION [DISTRIBUTE AFTER THE TRAINING]

Please check the appropriate response and explain your response

8.	Did you find the workshop session	ns helpful?	
	Not helpful	Somewhat	Very helpful
	Please explain		
9.	Do you think the workshop sessio	ns' content were clear and understa	indable?
	Not at all	Somewhat	Very helpful
	Please explain		
10.	How effective did you think the tra	ainer was?	
	Not effective	Average	Very effective
	Please explain		
11.			
12.	One thing I am still unsure of is		
13.	What suggestions would you make	e to improve the workshop?	
14.	What sessions were new to you?_		

Thank you.

### Annex F

### **Additional Role-Playing Exercise**

### Active Listening Role Play: 30 minutes

### **NOTE TO TRAINER**

This exercise is to practice interpersonal skills with different audiences. Ask participants to choose a partner. One participant will be the community member and the other the community mobilizer. Ask the pairs to choose one of the audiences and topics:

- Man/ woman who started medicines for TB but stopped
- Young girl who is pregnant for the first time
- Women with a newborn child
- Man, who does not want his wife to use contraceptive
- Adolescent boy you are telling about condoms or VMMC

### Trainer says:

We are going to practice our IPC skills using a role play. Choose a partner and decide on an audience and health issue from the list on the slide. One participant is the community mobilizer and one is the community person. Conduct a role play for 10 minutes using the skills for IPC that you learned today. When you are finished, change roles and choose another audience and health issue and conduct a role play for 10 minutes.

When the role plays are finished) Spend a few minutes discussing the interaction: what skills were helpful, what did you forget, how far were you were able to get with discussion?)

### Annex G

### **Certification of Completion**

CERTIFICA	TE OF COMPLETION
THIS CERTIFICATE O	F COMPLETION IS HEREBY GRANTED TO
	completed to satisfaction the one-day
	by the Ministry of Health and the USAID Rhites-N
L	_ango project activity:
INTERPERSONAL CO	OMMUNICATION FOR COMMUNITY OUTREACH
INTERPERSONAL CO	
	OUTREACH







Rhites- N, Lango

## **COMMUNITY OUTREACH**

# **INTERPERSONAL COMMUNICATION FOR**

Rhites-N Lango project activity:

day training workshop sponsored by the Ministry of Health and the USAID

This certifies that

completed to satisfaction the one-

Date

CERTIFICATE OF COMPLETION

THIS CERTIFICATE OF COMPLETION IS HEREBY GRANTED TO

