



Background

Guinea's maternal and child health indicators are among the lowest in the world. Even before Ebola hit in 2014, trust and confidence in its health services were low. Ebola's rapid spread further fueled fear and distrust, with many people believing health workers themselves spread the disease.

Guinea's current population of 10.6 million is growing at a 3.1 percent annual rate. Life expectancy is 59 years, indicating a heavy disease burden. According to recent surveillance data, health services in more than 30 health districts are underutilized, especially in areas where Ebola hit hardest. This is due to a lack of quality services and limited confidence in the health system.

As the country continues to recover from Ebola, the Health Communication Capacity Collaborative (HC3) is working with Guinea's hardest hit communities to rebuild both trust in the health system and the quality of care delivered.

This series of case studies examines some of HC3's activities and tools that were part of an overall social and behavior change communication (SBCC) strategy to improve health behaviors and increase the demand for and use of quality reproductive, maternal, newborn and child health (RMNCH) services in Guinea.

Engage Communities with Bridges of Hope

HC3 and its non-governmental organization (NGO) partners used the Bridges of Hope toolkit in Guinea for

community-level engagement to create demand for health services. Bridges of Hope has been used to engage communities, increase their understanding of certain health issues and encourage them to go to their local health facilities for information, care and treatment.

Using this innovative and interactive toolkit, HC3's NGO partners trained community health workers (CHWs) to provide them with the skills and confidence to stimulate dialogue and encourage health behavior change at the community level.

Health education topics included essential maternal, neonatal and child health services, such as antenatal care, facility-based delivery, birth preparedness, child immunization, breastfeeding and hygiene.

Implementing at the Community Level

The CHWs then implemented community-based activities with Bridges of Hope to reach more people through women's networks. These activities supported and complemented the national Gold Star health campaign in Guinea.

The central Bridges of Hope exercise consisted of a literal bridge – a set of wooden rods placed on the ground making a “bridge” the participants must cross without falling into the “water” and being eaten by the “dangerous animals” – seen in the photo below – in the form of picture cards showing a shark, crocodile, snake or hippopotamus.



Crossing the “Bridges of Hope.”

The observers were given “cue” cards developed by HC3, with drawings representing prenatal care, immunization, mosquito nets, hand-washing, breastfeeding, delivery preparedness, hygiene, postnatal care, danger signs of pregnancy and danger signs for a newborn.

The cue cards helped prompt the participants to create a story about the issue depicted on the card. The CHW then used that story to initiate a dialogue with the audience about barriers to good health practices and how to overcome them.

“*The cue card was very useful to educate women about the importance of sleeping under the treated bed nets.*”

Moh Lamine Fofana
Community Health Worker in Hermakono

After discussing the reasons behind the barriers, the attendees developed strategies to address them. Entertainment-education performances and songs were integrated into the activities to educate the public about the use of health services. The visual and auditory nature of Bridges of Hope activities facilitated learning and understanding by the women. This is important in Guinea where the literacy rates are low, especially among women.

Results

HC3’s local NGO partners trained and supervised a total of 650 CHWs from all geographic regions of the project. The CHWs, in turn, have conducted Bridges of Hope activities in their communities on a weekly basis and, as a result, have reached tens of thousands of community members each month. Many of these same health workers were active during the Ebola epidemic, and all were very active during recent malaria, deworming and immunization campaigns.

The Bridges of Hope activities were embraced by the NGOs and CHWs and conducted regularly in communities all throughout the catchment areas. In addition to



Cue card showing polio victims as a result of lack of immunization

using HC3-produced materials, the CHWs added music and entertainment to the sessions and incorporated “Griots,” who are traditional singers, and connected with traditional healers. Local imams and tribal chiefs were also encouraged to participate in the activities to help further disseminate messages about health and use of services.

About HC3

HC3 is a five-year, global SBCC project based at Johns Hopkins Center for Communication Programs and funded by the U.S. Agency for International Development from October 2012 through September 2017. The project is designed to strengthen the capacity of developing countries to implement state-of-the-art SBCC programs. The Ebola emergency response and the post-Ebola recovery response are among the important health areas addressed by HC3.

HC3 is supporting the Government of Guinea, U.S. Government implementing partners and local SBCC professionals to design, produce and implement a package of high-quality SBCC interventions to encourage Guineans to use their local health centers and improve associated behaviors.

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