

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.

Promoting Provider Behavior Change

The community dialogues HC3 conducted in Guinea revealed that one of the keys to increasing demand and

use of services was improving the skills and behavior of health providers to improve client communication and influence positive health outcomes.

During the community dialogues, one of the most frequent complaints concerned the way clients are welcomed and treated at their health facilities. More specifically, community members complained that providers were "not nice" or seemed to be more motivated by money than providing proper treatment. To address these concerns, HC3 developed a training curriculum on Interpersonal Communication and Counseling (IPC/C) skills for health providers and conducted two-day trainings for frontline health workers.

Improving Client-Provider Communication

IPC/C trainings for health providers were held throughout the project period and catchment areas. HC3 conducted these trainings in collaboration with national and local health authorities and in partnership with the Maternal Child Survival Program (MCSP). The trainings provided the tools and skills necessary for providers to welcome patients, facilitate patient interactions, reinforce messages for case management and advocate for patients to encourage their peers to use health services. Health providers also were trained to develop a communication plan that identified how and when to deliver regular health information and distribute SBCC materials, such as fliers and stickers. Following the training session, each provider received a "Participant



IPC/C training for Guinea's health workers.

Booklet” to serve as a job aid.

HC3 received numerous requests to expand this training opportunity to other providers and is continuing to provide mentorship to trained health providers by conducting regular supervision visits. HC3 has maintained contact with many of those trained, either through facilitated supervision visits in Conakry health facilities or personal contact during field visits.

To date, 682 health providers throughout the country received IPC/C training.

“*With IPC/C training, we have learned to always have a smile when meeting patients. We have become informative and we always find the time to guide clients. We are able to tell them which service is free or not.*”

**Health Provider at Sogbe Health Center
Kissidougou**

In July 2016, following completion of the IPC/C training, a telephone survey¹ conducted with 2,375 respondents found positive perceptions of health providers. More than 90 percent of respondents said providers were competent, kind, able to keep information private, open with patients and could meet their health needs. In addition, 79 percent felt that providers treated everyone fairly.

Between 80 to 90 percent of respondents said they received a warm welcome, were treated with respect, were shown care and concern, found the facility clean, felt safe from infection and trusted providers to address their concerns. About two-thirds said the facility they visited had improved in the past two months. While HC3 recognizes that provider behavior change efforts should continue, this survey demonstrated a general appreciation in the community for improved services.

“*The big change I am experiencing myself is to turn off the cellular phone during the consultations and counseling so that I can listen very attentively to my clients and be responsive to their needs.*”

**Dr. Lassane Kourouma
Centre de Santé Hermakono, Kissidougou**

HC3 also conducted a facilitated supervision exercise in Conakry targeting health centers and observed 71 health providers trained in IPC/C. The goal was to assess how well they implemented what they learned based on the following indicators: preparing the education session, welcoming clients, collecting information for diagnostic purposes, case management, self evaluation and reporting. Even though an improvement was seen in most indicators, HC3 found a need to continue reinforcing skills such as greeting clients, encouraging them to ask questions and praising clients who demonstrate healthier maternal, newborn and child behaviors.

About HC3

HC3 is a five-year, global SBCC project funded by USAID from October 2012 until 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.

¹ Respondents to the telephone survey had previously called the 115 Ebola Hotline during the epidemic. These callers were largely based in the capital of Conakry and had higher than average levels of education compared to the rest of the country.

Contact: Hannah Mills – hmills@jhu.edu or Soufiana Kaba – soufiana@jhuccpguinea.org



USAID
FROM THE AMERICAN PEOPLE

healthcommcapacity.org

