COMMUNICATION

Basic training course
for health workers and patients' associations

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TIGRAY
HEALTH BUREAU

CASA
TOOLKIT 1

Abstract. This booklet is a support tool for the training course in communication of the CASA project. It includes basic knowledge on communication, and the role of communication to contribute to sharing, networking, training, planning, and evaluation activities. The volume is organized in 5 lessons including also topics for discussions and questions.

Key words: communication, CASA project, networking, training, SMART goals, health workers

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For information on the CASA project, visit the website: www.casaproject.info

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Preface

I warmly welcome this booklet as an indispensable and instrumental tool which is necessary for effective implementation of both promotional, preventive and curative health services.

This booklet aims to provide imperative methods and approaches necessary to operate useful and comprehensive programs in the Tigray Region in the area of health education and communication to bring about behavioural changes; accordingly, health seeking behaviour could vigorously improve and this in turn would enable the community to better manage their health, and ultimately healthy families at household level would be created.

This booklet also provides the necessary guidelines to all public health professionals, clinicians, data managers, community members of local initiatives, such as People Living with HIV/AIDS organized as an association, to contribute to improve the adherence and retention of patients in care, and others involved in the design and implementation of health promotion education and communication initiatives which should be fully integrated within the general health service.

In the last four to five years there has been a considerable increase in the health seeking behaviour within the community. For this reason, we see an improvement of many services in our Region, for example: maternal health services like the use of long acting contraception, antenatal care and delivery service at health facilities assisted by skilled health professionals and other institutional and community based interventions including Immunization.

I am sure that this concise booklet will serve as a very useful companion and support tool for training in communication, in fact it includes basic knowledge on communication and this will contribute to develop a correct attitude towards sharing, networking, planning, and evaluation activities intended to be applied and developed to fit the overall context of our Region, taking into consideration local culture and believes to help successfully realizing the objectives of the CASA Project.

This booklet will be emanated as an instrumental communication tool to be applied both at the institution and community base levels within the whole National Regional State of Tigray.

Hagos Godefay
Head, Tigray Regional Health Bureau

Foreword

My name is Raffaella Bucciardini.

I have been working since 1992 at the National Institute of Health, in Rome (Italy) which represents the main public body of the National Health Service and which merges research, training and control applied to health protection. I'm a researcher and I have been dealing with many projects on HIV/AIDS both in national and international contexts aimed to contribute to improve the quality of care of people. Over the past fifty years, biomedical research has led to unprecedented increases in life expectancy and quality. Unfortunately, the benefits of scientific discoveries have not been distributed equitably in the world. Achieving the equitable distribution of health requires multiple approaches, including international aid, humanitarian help, and global health approach. Global health represents an emerging and multidisciplinary area for research and practice that aims to achieve the best level of health of people around the world.

The CASA project falls within this context, it is a Training and Operational Research Project to improve the care of people living with HIV infection.

CASA project members working with patients' associations

This project consists of a holistic approach including training, operational research methods along with the active participation of patients associations. This book is part of training activities and I really hope that other books will be produced in the near future.

I would just like to say that sharing of ideas and discussion are the key drivers of the CASA project. I am very happy to coordinate this project and delighted to work together with Italian and Ethiopian partners.

Raffaella Bucciardini

CASA project coordinator
Istituto Superiore di Sanità

Why this booklet and how to use it

This booklet is designed to help participants to develop communication skills and critically apply new knowledge on the field. It is a reference tool that students can easily use whenever they need. It was initially produced in English and then translated in Tigrinya to be used by health workers and patients' associations in the Tigray Region, Ethiopia.

The training course includes **5 lessons** on different aspects of communication, sharing, networking, training, planning, and evaluation activities.

Each lesson is preceded by a **brief summary** and followed by **questions** and **"take home messages"** to help students to evaluate their understanding of new concepts.

Students are encouraged to discuss the contents of each lesson in small groups and critically consider suggestions provided; for example: Is this topic useful for you? Is it clearly explained?

How can it be applied in your working place?

Which difficulties will you face? Which benefits will you get from improved communication? Are images appropriate, appealing, and effective?

This booklet is addressed to health workers and patients' associations, mainly working within the CASA project and committed to take part in a joint effort to contribute to improve global health. The main objective of the CASA project, in fact, is to contribute to improve the quality of care of HIV infected people.

A proper involvement of local health workers and patients' associations is fundamental to reach the project goals.

We hope this course will help you to become fully aware of specific roles and responsibilities within the project and realize how a good communication can help to reach better results.

A pre-test is included, as an Appendix at the end of the booklet, to evaluate students' knowledge, motivation and expectations before starting the course, and then compare initial results with those of the final test.

Some final blank pages are also included for students to write their notes on important issues they wish to focus on, or questions they would like to ask their tutor or teacher.

Participants in this training course are invited to critically consider all suggestions and hints, including visual clues, and discuss them with the other students to maximize the benefits from training and develop critical thinking.

Suggestions and comments to improve the course are more than welcome!

Lesson 1. Why communication is important

The lesson in brief

This lesson explains the objective of the course and provides an introduction to the topics that will be discussed. You will learn why communication is important and have some hints of the different types of communication. A short profile of the CASA project is also included to allow a better understanding of the different roles, tasks and responsibilities of people working within the project.

1.1. Introduction

Welcome to this training course in communication.

My name is Paola De Castro and I will be your teacher in this course. I have been working for many years at the National Institute of Health in Italy, a governmental research body for public health. I have been helping researchers and students to find the best way to communicate the results of their scientific activity.

I am a member of the CASA project team engaged in HIV/AIDS research and training in the Tigray Health Region. I visited Ethiopia for the first time in January 2014 and soon became passionate about this country and wanted to know more about its culture and traditions and, in particular about its health system and the Anti Retroviral Therapy (ART) clinics. I became aware that I had to learn a lot from you if I really wanted to teach something that would be useful to you. In fact, teaching and learning always go together. In particular, as regards communication, traditions and local cultures play a very important role and there is never one solution that fits all: you will have to find your own way to communicate, taking advantage of the suggestions and clues provided in this training course.

I really hope this course will be useful to improve your communication skills and develop critical thinking. Such new skills, associated with your own knowledge, will contribute to both your personal development and to reach the objectives of the CASA project.

I hope you will enjoy the course!

1.2. A few words about the CASA project

CASA project includes operational research and training aiming at improving the quality of care of HIV/AIDS patients in Ethiopia.

The Tigray Health Bureau has full responsibility of the CASA project that is realized in collaboration with Mekelle University and the National Institute of Health in Italy.

In Italian, the word CASA means "home" and this is for us the inner meaning of the project, a home for all of you who wish to share our objectives and contribute to improve global health, through research, training and networking.

In order to develop an appropriate and effective communication strategy within the CASA project and comply with specific assignments, it is important for you to have a clear understanding of the project as a whole and of what is your role within the project.

CASA project is based on two big pillars as below indicated.

1. **Operational research.** HIV infected patients are enrolled in different health facilities in the Tigray Region and they are followed up to provide evidence-based data on how the ART therapy works in a context of clinical practice. Communication skills represent an important way to contribute to improve adherence and retention to therapy.

2. **Training**. It is mainly addressed to health workers and patients' associations having a direct influence on the project achievements.

1.3. Who is involved in the CASA project?

First of all, I wish to introduce the partners of the CASA project, then I will spend some words to explain the roles of the local actors who may participate in the training activities.

The partners of the CASA Project are the Tigray Health Bureau and Mekelle University (in Ethiopia) and Istituto Superiore di Sanità (in Italy).

Tigray Health Bureau (THB) is the public structure competent for the planning and management of health needs at regional level. It is the main Ethiopian institution of reference for the CASA project, having full ownership of the project itself.

Mekelle University (MU) provides its prestige and health care skills to support the project. Moreover, the University guarantees the availability of human resources as well as a working-space dedicated to the project.

Istituto Superiore di Sanità (ISS), the National Institute of Health, is the technical scientific body of the National Health Service in Italy. The ISS is a public institution that combines research, training, service and consulting activities. The ISS works to protect the health of Italian people and is also active leader in global health initiatives. The ISS coordinates the CASA project and supports it providing both human and financial resources.

Now, let's consider the **main local actors** of the CASA project.

They are:

- **Physicians, health officers and nurses**. They are different professionals focused on the care of patients. They provide the daily assistance to patients and make decisions on the medical management. They contribute to the project implementation.
- **CASA local supervisor.** The local supervisor mainly plays the role of intermediary among the staff members and, more generally, between the Ethiopian and Italian institutions involved in the project. His presence is essential to facilitate the execution of all the project phases.
- **Data managers.** They have responsibility for managing the central database and update it with new data collected at health facilities. MU is the location of the central database, where collected data are merged and stored. Data managers periodically visit the health facilities for updated data collection. Data are copied directly at each health facility into common USB pen drives. The updated data are periodically revised at MU, then automatically sent to ISS for additional quality control.
- **Case-managers.** They collect data from health facilities and then enter these data in the CASA project software.
  Case-managers and data managers have to work in close contact throughout the study period.
- **Patients' associations.** Local HIV/AIDS patients' associations develop initiatives to contribute to improve the adherence and retention of patients in care.

Additional information is available on the CASA project website:
www.casaproject.info

In this picture, taken from CASA website, you can see the structures involved in the CASA project within the Tigray Region in March 2015, that is at the moment of issuing this booklet.

The collaboration has been developing and new structures will be added. You may look at CASA project website to have an up-dated picture.

1.4. Target, objectives, topics, and expected results

The course is mainly addressed to health workers and patients' associations who work or come into contact with HIV infected persons or their families. Other target groups such as physicians or researchers may benefit from this training course.

The **primary objective** of this course is to help you to improve communication skills to better perform your tasks both within the CASA project and in other contexts. The course includes basic lessons on communication, networking, training, and activity planning as well as some hints on how to evaluate your activity. At the end of this training course, we expect that you will be able to:

- communicate better,
- organize your activity in a more efficient way,
- benefit from working in a network of collaborating groups,
- share with the others what you have learnt,
- became aware of the importance of communication to reach your goals.

Improving communication skills, developing networks, participating in training activities and understanding the role of strategic planning represent an added value to the CASA project as well as to your own personal growth. To reach the expected results you need to play an active role in this training course, critically consider suggested topics and discuss questions with your colleagues.

1.5. How is this Course organized?

The course is organized in 5 lessons. To reach expected results you will have to read the texts (or watch the videos in English) , take notes if necessary, discuss the topics with your colleagues and use the booklet as reference tool to revise the contents of the lessons.

At the end of each lesson, a list of questions is included to evaluate your understanding of the new concepts. You are encouraged to revise the videos or the booklet, if you think you are not able to answer all the questions.

A final exam is envisaged at the end of the course and you will receive a certificate of accomplishment if you correctly answer at least 70% of the questions included in the final questionnaire. The certificate will be released by the Tigray Heath Bureau.

1.6. Understanding the value of communication

Communication is a very important part of our lives, not only at work, but also in our everyday life. We need to communicate because we do not live in isolation. We are part of a community of people and therefore we need to communicate with the others.

We communicate for different reasons: for example, because we need a piece of information, or we want to receive something, we wish to share ideas or knowledge with the others: family members, friends, patients, nurses, doctors... When you communicate something you expect to get an answer from the other person, an explanation, an opinion...

We always communicate, even if we are not fully aware of it, even in silent or unconscious ways.

Also new born babies do communicate with their mothers, even if they are not yet able to speak, and good mothers understand them.

This picture shows a dialogue among three generations. They all are communicating, even if they are not speaking.

Communication is really an essential part of our lives.

1.7. Selecting the most appropriate communication

There are different types of communication.

It is important to select the most appropriate type of communication, according to the context, to be sure that the others will understand you properly.

Communication is possible not only through speaking, but also by utilizing gestures or other kinds of visual and non-verbal expressions.

Drawings and written texts represent other useful and common types of communication.

You should be able to select the most appropriate type of communication by considering the following elements:

- the **target** you are addressing to, for example, adults, children, adolescents, patients;
- the **objective** of communication, for example, to inform, to ask, to require, to reprimand;
- the **context** where you are , for example, at home, in a hospital, at school, in a bank, in a shop.

A wrong communication often prevents the correct understanding of what you really mean and this can create problems of different nature: from confusion to misunderstanding, damages of different kinds, and even death. So, it is important that you learn to use a kind of communication (words, gestures, images), that the other persons can easily understand without running the risk of misinterpretation.

Now we shall see some examples of the different types of communication.

1.8. Examples of different types of communication

When you talk to a young boy or girl, you will use easy words, short sentences, images, facial expressions, sometimes personal contact. Teenagers have their own languages that often is incomprehensible for adults.

If you talk to your boyfriend or girlfriend you will find other ways to let them know your feelings!

If you have to explain a new working procedure, you must be sure that the others correctly understand it, even if it is complex, so that in the future they will correctly act according to the new procedure.

The picture shows a training session at Alamata Health Center, where it was necessary to repeat many times the new data collection procedure to be sure that it was clear for all.
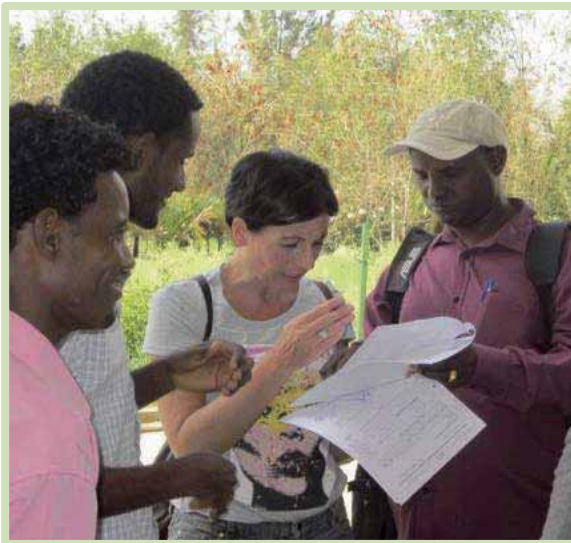
Raffaella is explaining a change in the standard operational procedure and she repeats the new concepts many times in different ways to be sure that everybody understands it correctly.

Look at the images below. What kind of emotion do they express? Joy, sadness, fear, surprise, concern? In the coming lessons you will learn more about it.

1.9. Health communication

To better understand the crucial role of health communication, we should first focus on the definition of health as stated by the World Health Organization (WHO):

> *Health is a state of complete*
> *physical, mental, social and spiritual well-being,*
> *not only the absence of disease or infirmity*

Preamble of the Constitution of the WHO, 1946, entered into force in 1948

The concepts expressed in the WHO definition of health should be considered as the leading principles guiding all of our activities associated with health. That is you should care of the complete well-being of persons affected by a disease, not only just the care of disease, but the "complete physical, mental, social and spiritual well-being". In this sense, communication plays a really very important role, as we will see throughout this course.

Health communication is associated with the strategic use and dissemination of messages related to health, to make people aware of the meaning of well-being and disease, encourage them to adopt healthy practices and lifestyles, sustain positive healthy behaviors, empower them to make healthy choices in their lives. You should be aware that providing or receiving correct information regarding your health is crucial to

- get a disease
- prevent the spreading of disease
- provide the best possible curation
- improve the patients' quality of life.

For example, a correct information on HIV transmission can prevent getting and spreading of HIV/AIDS. Yet, even if a person becomes infected, this person can hugely benefit from assistance and medication provided in local health facilities.

The quality of care of HIV infected people can much improve if they take the correct therapy, when it is due, and if they follow a correct behavior as suggested by health workers or patients' associations.

So it is absolutely important that HIV patients or their relatives are properly informed and become aware of the benefits and risks that they will face if they do or do not adhere to therapy.

Very often a correct health communication can make the difference between illness and well-being, and even between life and death: you can become infected or even die if you do not have the right information or do not properly follow therapy.

Developing a correct health communication strategy, taking into account the leading principles expressed in the WHO definition of health, is a great responsibility to be shared by health workers at different levels.

You should assume such responsibility whenever you communicate health-related information.

Here you see some examples of written/visual health communication.

1.10. The crucial role of health communication

Millions of people have been dying of AIDS all over the world in the last 30 years, especially in Africa, and many are still dying today.

We know that many of these deaths can be prevented.

Science provides recommendations about the correct management of the disease and these recommendations may save millions of lives. Yet there are different barriers that prevent the application of the recommendations issued by the most reliable health institutions such as the WHO. Some questions may help to clarify the concept.

- Are health workers aware of the WHO recommendations?
- Do they really understand their meaning?
- Is there any language barrier that prevents such understanding?
- How far are the health facilities from the patient to receive curation?
- Do people really trust health recommendations?
- How do traditional beliefs meet the healthcare recommendations?
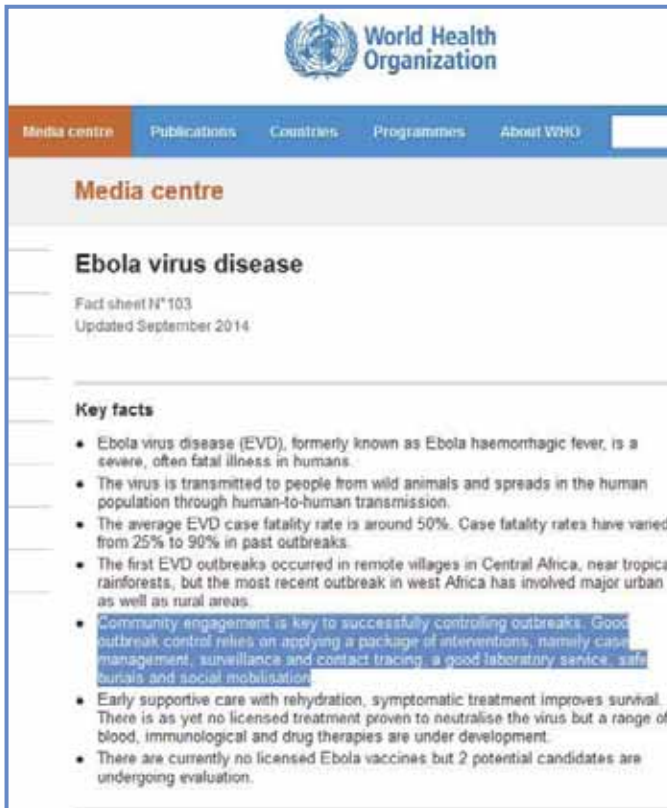
Now consider if these questions may apply to HIV/AIDS treatment in Tigray.

You do not have to write down an answer, but just think of the many possible answers to the above questions; this is part of your training.

We are convinced that an appropriate communication can make the difference, contribute to reduce the number of deaths and limit patients' suffering.

Do you agree? Now consider the way you communicate health information and think if such practices may be improved.

1.11. Example from WHO website on Ebola

The case of Ebola virus, killing millions of people in West Africa is another good example of the crucial role of health communication and community engagement.

In the WHO website on Ebola, you can read:

"*Community engagement is key to successfully controlling outbreaks.* Good outbreak control relies on applying a package of interventions, namely case management, surveillance and contact tracing, a good laboratory service, safe burials and social mobilization."

Do you think this is true also for HIV/AIDS in Tigray? How could community engagement be improved in Tigray? Have you got any suggestion?

Again, you do not have to write down an answer, but just think of it, and possibly discuss it with your colleagues because this is part of your training.

1.12. Benefits from CASA training

CASA training in communication represents a great opportunity for you, in fact it will provide you **empowerment**; that is you will gain new power, through knowledge, to play an active role in your community and help HIV patients to receive better care and therefore live better and longer.

Community will recognize **your role** and be grateful for this. Thanks to training, you will be able to better recognize your responsibilities and you will be able to approach HIV patients and their families in the most effective way, using newly acquired knowledge in communication.

Training will **maximize your effort** within the project and allow you to obtain better results. Your collaboration will be even more precious since you know traditions and habits of the community where you live; you will be able to speak a language that the patients can understand and use the most appropriate words to talk to them.

CASA project, joining research and training activities and involving local people, may become a model for other regions of Ethiopia or other countries in the world to empower citizens to prevent and combat HIV/AIDS and properly disseminate health information at community level.

The **beneficiaries** of CASA project will be people with HIV/AIDS referring to the health facilities participating in the CASA project. HIV patients and their families will gain medium and long term benefits from the project, both as regards the reduced probability of clinical events (mortality and morbidity) and through the improvement of the quality of life.

A training session at Alamata Health Center. Raffaella is showing CASA project website, including pictures of the big CASA team. Everybody is interested and happy to participate in the project.

Being included in a website makes people happy and eager because they feel they are part of a team and so they are encouraged to give their contribution in the best possible way. Indeed Internet provides many opportunities for communication, from blogs to social media, document sharing, e-mails, online training, etc., besides providing a unique opportunity to find useful information in its huge and free libraries and encyclopedias.

Questions on Lesson 1

You are encouraged to discuss these questions in small groups to evaluate your understanding of the lesson and then be able to pass the final exam without difficulty. We have suggested three possible answers, but only one is correct.

1.1. Is communication an important component of our lives?

    a.   No, communication is important only on special occasions
    b.   Yes, communication is an important part of our lives
    c.   Communication is important only if you are sick

1.2. Is communication possible only through speaking?

    a.   Yes, communication is possible only if you are able to speak
    b.   No, there are different types of communication, including non-verbal communication
    c.   No, it is always better keep silent.

1.3. How important is health communication to improve patients' quality of life?

    a.   Health communication cannot help patients to improve their quality of life.
    b.   Health communication is very important to contribute to improve the patients' quality of life.
    c.   Health communication is very dangerous to patients' quality of life.

1.4. Is a proper health communication relevant to reduce deaths associated to Ebola epidemics?

    a. No, health communication is not important to combat epidemics
    b. Yes, communication plays an important role to combat epidemics
    c. No, epidemics do not need any effort in communication.

1.5. Which is the role of patients' associations?

    a. They send data to the Central Unit in Italy
    b. They help to trace patients missing to follow up.
    c. The closely work with doctors every day

1.6. Why is training in communication important for health workers and patients' associations?

    a. Training is important to communicate in a more efficient way with HIV patients and their families
    b. Training is important to learn English
    c. Training is important to have more medications

1.7. Which is the main objective of the CASA project?

    a. To cure tuberculosis
    b. To improve the quality of care of HIV patients
    c. To teach how to read and write

1.8. Which is the main benefit of CASA project training in communication?

    a. Fight Ebola virus
    b. Help developing communication skills
    c. Learn to speak English

1.9. Who is directly involved in the CASA project?

    a.   Only medical staff and nurses

    b.   Only patients' associations and data manager

    c.   Researchers. health officers, nurses, data managers, case managers, patients' associations.

1.10. Is the training course in communication part of the CASA project?

    a.   No, the training course in communication is not part of the CASA project

    b.   Yes, the training course in communication is an important part of the CASA project

    c.   No, the training course in communication is used only in Italy

TAKE HOME MESSAGES FROM LESSON 1

Why communication is important

- Communication is part of our life, we always communicate even if we do not realize it
- Health communication is crucial for health and well-being
- This course will help you to improve communication skills

Lesson 2. Basic knowledge on communication

The lesson in brief

This lesson will provide the basic elements to understand the communication process. You will learn to recognize the different types of communication and how to improve basic communication skills.

2.1.The communication process

As we mentioned in the first lesson, communication is part of our lives and we always communicate something even if we are not always aware of it.

Communization is sharing something with the others, not just providing information. Now we are going to analyze the key elements of the communication process as shown in the figure below.
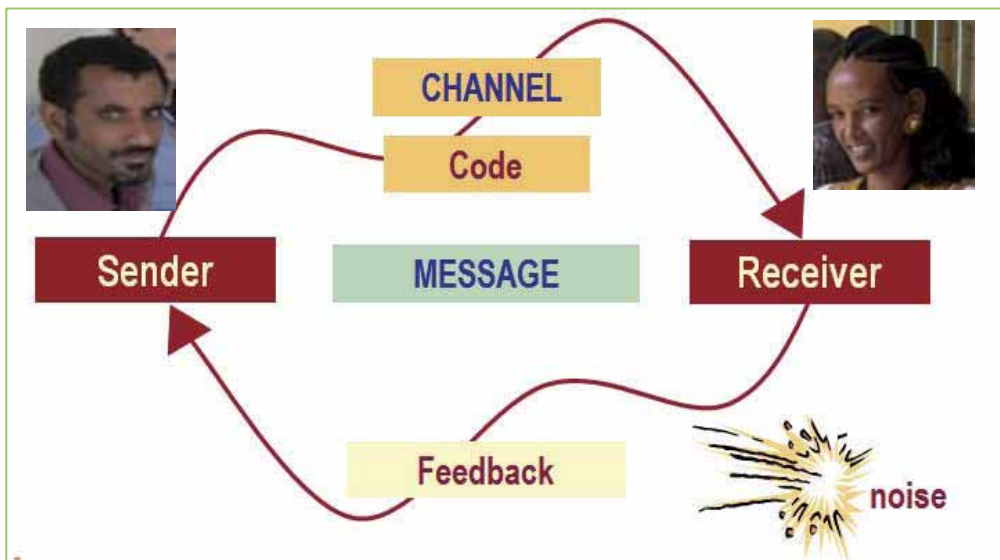
Communication is every exchange of information between individuals and it involves at least two persons: one **sender** and one **receiver.** For example a person who speaks and a person who listens. Communication is possible only if the sender and receiver share a common **code** and utilize an appropriate transmission **channel**.

2.2. Sender, receiver, message and code

Let's now analyze the single elements of the communication process. A person, the **sender** of the message**,** starts communication to accomplish something. For example, a man wants to receive information about where is a doctor and asks it to a woman, the **receiver** of the message.

The **message** "Do you know where is the doctor?" is the objective of the communication. The message is expressed by the sender, using a language (English, Tigrinya, other languages), and is transmitted to the receiver who can understand it only if she is able to manage the same language or code. In fact, a **code** is a shared way of representing the same meaning.

Language is a perfect example of a common code which allows communication among individuals. If you cannot speak English you will never be able to understand a communication in English, even if you wish.

For complete understanding of the communication process you also need to know something about the transmission channel, feedback and noise.

2.3. Channel, feedback, and noise

The **channel** is the physical medium by which communication is transmitted. It may be oral, print, video, digital or other. In some cases a written channel, for example a book or a journal, may be more appropriate to disseminate something, for instance, the results of scientific research; in other cases, oral communication, for example a conversation, a talk, may be more appropriate, also considering that vis à vis communication allows immediate feedback.

Feedback is another very important element of communication. It is the reaction of the person receiving a message. Feedback allows to evaluate the effectiveness of the message itself. Feedback may be represented for example by a spoken comment, a smile, a long silence, a written message, a gesture. Feedback is fundamental both in oral and written communication, in fact, it provides an opportunity to take corrective actions when the message is not completely understood or misunderstood.

Finally, let' talk about **Noise** that is anything that interferes with communication and prevents the correct transmission of a message. Noise is not just physical (when you cannot hear due to external noise), but it includes all those elements that interfere in the correct transmission of a message, for example, distractions, misconceptions, wrong influences.

2.4. Verbal and non-verbal communication

Verbal communication is when we communicate with another person or group of persons by speaking, using a language as a code.

Non-verbal communication is the way we appear to the others even without speaking. It is the so called **body language** which is represented by gestures, postures, eye contact, distance from speaker, the way we dress, and we move; it is the way we look at the person we are talking to, the way we listen to the others.

Both verbal and non-verbal communication represent important ways to communicate something.
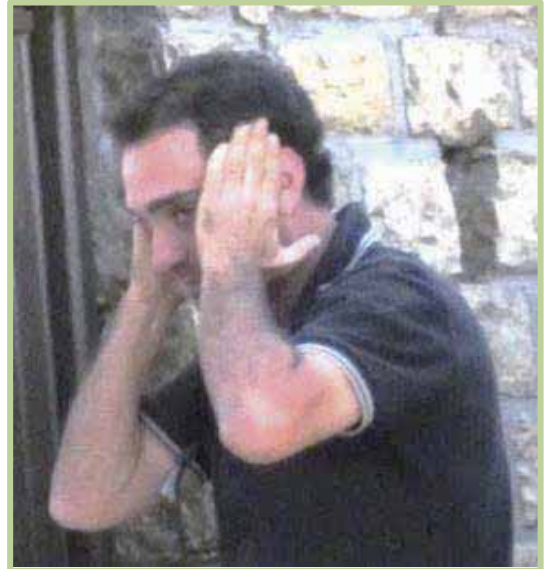
Persons belonging to different cultures and age groups have different ways of communicating in both formal and informal situations, through verbal and non-verbal communication.

In verbal communication, not only the words we use to express concepts are important, but also the tone of the voice and the non-verbal communication.

You should be able to select the most appropriate form of communication according to the specific situation in which you are, the target you are addressing to and the objectives you wish to realize.

2.5. Examples of non-verbal communication

We are not always aware of non-verbal communication and of the meanings that are transmitted even without speaking. Indeed we do not always have full control of our emotions and the associated body language.

Look at the pictures below. What are these guys communicating through body language? Are they communicating the same message or different messages? Do you think they are interested, worried, bored, sleepy?

Non-verbal communication is also represented by the way we look, the way we dress or move, the way we smell.

You can learn to observe details and acquire awareness of the different forms of the body language. This will help you develop new skills to better understand the others and communicate in the most appropriate way.

In the picture you can see a group of nurses and a data manager at Ayder Hospital. They are testing the videos of the course (DVDs) for the first time, in November 2014. Their comments were precious for us to go on with the project of realizing the training course. What can you argue from their body language? Do you think they are interested or bored?

Learning to observe details is important, you can get a lot of information from non-verbal communication.

For example: do these shoes tell you anything about the persons who are wearing them?

2.6. Facial expressions and tone of the voice

We can express the same concept, using the same words, but with a different **facial expression** or **tone of the voice** which may completely change the meaning and feeling of what we are saying. The tone of the voice as well as the content of speech or other expressions of the body language can provide useful clues for the individual emotional status. For example, lower self-esteem may be reflected by hesitancy in the voice; higher self-esteem shows major command of the voice and clarity of speech.

Another example of how you can communicate the same thing in quite different ways: if a person asks for your help and you cannot attend him (no matter the reason why), you could just say: "No" in a rude way and quickly go away, or say "Sorry, I cannot attend you now, I'll come back as soon as possible". Can you think of an example in your daily activity when communication may be improved?

The right tone of the voice and facial expressions are important also when you have to communicate bad news. You could just say, for example, "Now, you must take medicines for the rest your life" in a rude and harsh mode, or you can take time to explain why it is necessary to do so and illustrate the benefits of taking medicines in a quiet and most reassuring way. Remember that you must be honest, therefore it is important not to cheat the patient by promising unrealistic thinks. It is essential to create trust and also anticipate some pain that will come so that they are ready to recognize symptoms and not be afraid of them.

2.7. Listening skills

Listening is another very important component of interpersonal communication skills. It is not just the ability of hearing a message, but it means carefully listening at what the speaker in front of you is saying and paying attention also to the body language that adds a lot of meaning to spoken language.

Listening is key to all effective communication in any field or context, therefore it is important to develop a listening ability. **Active listening** is a skill that can be acquired with practice. It is very different from passive listening. It means that you should be completely focused on what is being said rather than just 'hearing' the message of the speaker.

You should also show the speaker that you are interested in what he/she is saying through verbal and non-verbal messages used as positive reinforcement to encourage him/her to continue. It will not be difficult for a careful observer to know if you are not interested or if you wish to terminate the conversation.

Verbal signs of active listening are words such as "yes, oh, mmm.." that are useful but should be used sparingly not to disturb communication. Non-verbal signs of active listening are smiles, looking into the eyes, posture (leaning slightly forward), mirroring facial expressions, avoiding to show distraction or lack of interest.

In the coming lessons we will provide some practical tips showing the benefit of active listening.

2.8. The concept of empathy

Empathy is part of communication skills. It is the ability to enter into contact with the other person and perceive the world as another person does; it is the ability to share and understand another person's feelings, needs, concerns, or emotional status.

Empathy is different from sympathy which is a way to feel sorry for the other person grieve, but keeps you at a distance. Empathy is being able to really feel what the other person feels. It is the ability to put yourselves in someone else's shoes.

Some people have a natural empathic attitude towards the others, but empathic skills can also be developed with training.

An good advice to help establish a more empathic attitude is to consider the person in front of you as a whole, not a single problem of him or her that you will have to face.

Can you think of a situation in your daily activity where a more empathic attitude would contribute to improve communication and reach better goals?

Imagine you had to assist the lady in the picture: would you be able to establish an empathic communication?

2.9. Written and visual of communication

As for oral communication, also visual and **written communication** utilizes codes. Human beings started to draw their histories on the stones about 35,000 years ago. The alphabets (which were developed much later, about 3,000 years ago), are also written codes assigning conventional graphic forms to sounds or meanings. Before that, knowledge was transmitted only orally.

Written communication has permitted a wider transmission of knowledge. The print (developed about 500 years ago) and then the Internet (started only 20 years ago, including both written and audiovisual communication) completely changed the way of disseminating knowledge which now reaches wider public, especially when it is free online.

Examples of written communication are books, communicating traditional or consolidated knowledge; magazines, newspapers or journals publishing current information on specific issues such as politics, medicine, technology, or fashion; blogs or social networks; e-mails or SMS.

The combination of written and visual or multimedia communication in digital format (CD or DVD or online) can be very effective to reach wide audiences and explain difficult concepts in an easy way.
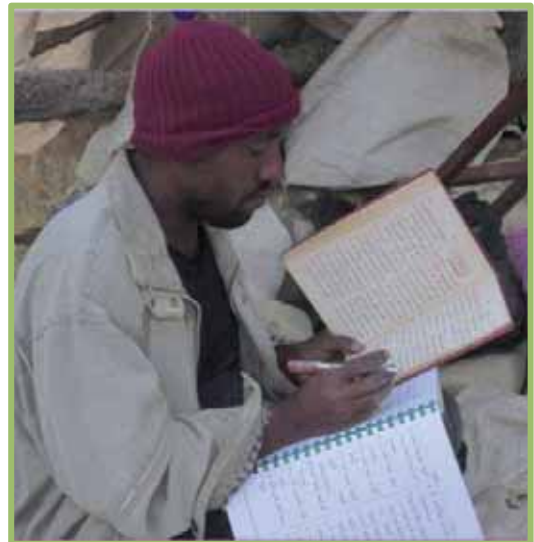
2.10. Examples of written of communication

The pictures below show some examples of written communication.

An old Ethiopian book of the XV century, a traditional book of 1970, a scientific journal published in 2014, a website, a poster of the "World AIDS Day".

You are encouraged to discuss the differences among these different examples of written communication, to consider the main changes of written communication through the centuries and the different objectives and targets of such written documents.
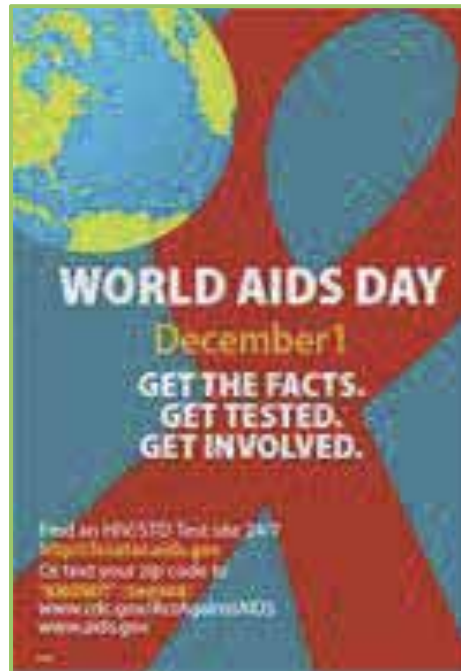
2.11. Examples of visual of communication

Visual communication is very important because the message it transmits is immediate, even if you do not read the texts associated with it, and it is generally remembered more than written or words.

Look at the pictures taken from different AIDS campaigns (from the US National Library of Medicine website).

Do you think they represent good examples of visual communication? Consider the role of drawings, colors, textual messages and font type and size.

Is this green poster effective, according to you? Which is the message it conveys? What is your general impression about it? Do you think it would represent an effective communication on AIDS in your community?

And what about the other poster with the blue frame? Do you think it would be more appealing in your community?

Which are the main difference between the two posters?

Which poster is more informative, according to you?

Which one would be more suitable in your working place?

2.12. Examples of verbal communication

There are **different ways of speaking**. Just consider the different ways of addressing people in different contexts in your daily life and you will get the meaning of the different talking registers, for example, informal, formal, or professional.

Think of the different ways you talk to your family members (parents, grandparents, or children), or friends, and the way you address your boss at work, or you talk to your colleagues or to patients in a health center. Do you address them in the same way? Consider why you use different registers of verbal communication and try to provide an explanation for it.

Taking into account what we have been discussing up to now, do you think there is a way to make communication at work more effective?

The following pages will provide some hints.

2.13. Examples of communication in a health center

When you talk to a person you require his/her attention and at the same time you should be attentive to feedback received. If the other person does not even look at you, it probably means that he/she is not really interested in what you are saying, or has other problems or concerns that prevent a correct communication. If you do not consider the reactions coming from the other person, communication is not correct.

In order to establish a positive communication, an appropriate attitude is required from both the sender and receiver of a message.

An advice to improve communication with patients is to be very attentive to their reactions and not to create information overload, that is not to provide too much information at the same time: keep it short, make simple messages, avoid jargon. For example, a nurse should be able to explain a HIV infected person why he/she should regularly take the ART and be sure that the patient understands, maybe by asking other questions, and make an effort to interpret his/her words and body language. Nurses should not only provide explanations,

but also utilize the feedback received from patients through verbal or non-verbal communication. A patient may not react and be silent for different reasons: because he/she does not understand what the nurse is saying, is not interested, does not care about his/her health, thinks that he/she will not be able to go to the health facility anyway, has no food for his family so therapy is not his/her primary concern.

I am sure you will have plenty of similar examples taken from your experience at work. See if you can improve communication thanks to suggestions provided.

2.14. Additional topics for discussion

We propose here some topics to stimulate discussion in small groups or individual considerations on the different types of communication and different habits people have to communicate something.

Can you think of the different types of written or oral communication that you use in your daily life? And explain why you use them?

If you have to remember something, do you generally take notes on paper, on your hands, on the cell phone, or do you just memorize what you wish remember, without writing anything?

Can you consider how much reading is important? Or how much visual messages attract your attention? Can you consider where do you generally get health information that you need? Do you ask to somebody, or search in the Internet, or read books or magazines? Are you used to writing e-mails or messages on cellphones? Do you think age can influence the above choices?

Do you think patients would prefer to receive information by speaking only or do you think they would also appreciate reading something about their diseases? Or do you think that both oral and written communication should be used to provide patients with the appropriate health information?

Questions on Lesson 2

You are encouraged to discuss the questions in small groups to evaluate your understanding of the lesson, and consider if and how the new knowledge you acquired through this training course can be applied in your activities. Only one answer is correct.

2.1. Is communication possible without a common code?

    a.   Yes, two individuals can communicate even if they do not share a common code

    b.   No, a common code is an essential element of communication

    c.   You do not need to use a common code to communicate something

2.2. Do you think it is important to consider the feedback (reactions) from the person receiving your message?

    a.   No, it is not important to consider the reactions of the other person

    b.   Yes, feedback is very important to be sure that the other person understands the message

    c.   Feedback is important only if you communicate good news

2.3. How important is non-verbal communication?

    a.   We never use non-verbal communication

    b.   Non-verbal communication is not important

    c.   Non-verbal communication is important and conveys relevant meanings

2.4. Do we always have full control of body language?

      a. No, we are not always aware of our body language
      b. Yes, we are always able to control our body language
      c. Body language is irrelevant therefore we do not care about it

2.5. Does the tone of the voice convey any meaning?

      a. No, the tone of the voice is irrelevant to convey feelings
      b. Yes, the tone of the voice is very important and conveys a lot of meaning
      c. Only women can convey additional meaning using a different tone of voice

2.6. What is the meaning of active listening?

      a. It is when the other person speaks aloud
      b. It is when you do not interrupt the person speaking, but you do not care of what he is saying.
      c. It is when you are completely focused on what the other person is saying

2.7. What is an empathic attitude?

      a. It is the ability to speak different languages
      b. It is the ability to enter into contact with the other person and perceive the world as another person does.
      c. It is to impose your ideas so that the other will obey.

2.8. Which of the following is not written communication?

    a. Journal articles and books
    b. Newspapers and magazines
    c. Talking to a patient and listening to his reactions

2.9. Which of the following sentences is not correct?

    a. Cell phones utilize written communication
    b. Journals are not a good example of written communication
    c. Books represent a good example of written communication

2.10. How is it possible to improve interpersonal communication?

    a. Through active listening and focusing on body language
    b. Speaking good English
    c. Without caring of the reactions of the person who listens to you

TAKE HOME MESSAGES FROM LESSON 2

Basic knowledge on communication

- Communication involves different activities, not only speaking
- Effective communication involves listening to the other person
- Non-verbal communication provides useful feedback to evaluate the effectiveness of communication

Lesson 3. Sharing, networking and training

The lesson in brief

This lesson will show the crucial role of communication to share information, to work in a network and participate in training activities. Suggestions will be provided to invite you to consider the importance of developing a network of people engaged in the same activity, and focus on the benefits of working together, sharing experiences, comparing positive or negative results and discuss relevance of knowledge acquired through training.

Coffee ceremony at Alamata Health Centre

3.1. Why sharing is important

Sharing is a way of learning, growing together and feel supported in your activity.

There are different ways of sharing and different things you can share.

For example, you can share information, experiences, feelings, opinions, by talking, writing, drawing, etc. Sharing is a way to communicate.

Sharing allows to express views regarding a particular task you have to perform or a specific topic you are interested in, or a concern you have, and to consider different points of views and perspectives.

By sharing you receive the feedback which can help you review your position and progress in your activity or knowledge; by sharing you receive advice, support or incentives to go on or change your mind.

You might also be discouraged in some activities and be induced to consider different perspectives or different solutions. Remember that also negative opinions can help you to improve what you are doing.

By sharing you can make friends and collaborate in fields of common interest and better reach common goals.

A positive sharing attitude is the first step towards the creation of a network, supporting different forms of collaboration among individuals and groups having common interests, and it is also the basis for effective training.

Sharing can help you to find solutions to difficult issues, feel relieved and happy from support received.

Patients' associations represent a good example of the unique opportunities coming from sharing.

Even in the most difficult situations, sharing your concerns and finding alternative solutions to your problems, together with other people suffering the same problems, can help you a lot.

The creation of a network is a more organized form of sharing.

Did you ever think of the benefits of sharing your working experience in a network of collaboration? Did you ever consider training activity as form of sharing? You are invited to discuss it in small groups.

An association of women supporting HIV patients in Mekelle

3.2. What is a network?

The English word **network** can have different meanings, sometimes difficult to translate with one single word in other languages.

Consider the following examples:

- a spider constructs a *network* of several different threads
- a country has a big railway *network*
- a company has a *network* of many branches
- a research institute exchanges information through a computer *network*
- a group of people works in a *network.*

Can you find the common trait unifying such different uses of the word *network*? Union? Link? Support? Connection?

In the case of people working together, can we define a *network* as a group of individuals, sharing common interests, having common goals and receiving support from collaboration?

Did you ever work in a network?

Do you think that working in network would be useful for you and your work?

How would you better explain the concept of a network to your colleagues?

How important is communication in a network?

This lesson will try to provide suggestions and practical examples for you to find an appropriate answers the above questions.

The picture shows the CASA project team in Mekelle in May 2014.

This is an example of an enthusiastic team of persons, fostering networking, collaboration and training for public health. Each member of the team has a specific role, but we all collaborate and hopefully communicate for continuous improvement of our activities, according to specific goals (SMART goals that will be discussed in the next lesson). We are used to discuss objectives and possible hindrances we hay encounter, we jointly look for solutions, we became friends and enjoy our work.

The team is growing and you will find a complete and up-dated list of the entire group in CASA project website. Go and see, maybe your picture is already there in the website. This is another way of creating a network of people working together, sharing common interests and pursuing common goals.

3.3. The concept of leadership

When you work in a group, or in a network, there is always one person who assumes the role of guiding the group; a person who inspires the group and takes initiatives that the other members of the group are happy to follow. This person becomes the **leader** of the group.

The online Encyclopedia Wikipedia states that "A leader is a person who is able to influence or lead the others".

One of the main **attributes** of a leader is the recognition of the leadership role from the group. A boss is not necessarily a leader.

Indeed, many are the attributes that a leader should have; for example, the ability to have a strategic vision, to innovate, to be creative, to convince and involve people to reach an objective, and make them feel at ease.

The use of authoritative or judgmental approach is not part of the leader's attributes. A leader should be able to control emotions and create a positive and collaborative climate in a group.

Communication skills are key for a leader to engage the others, understand what motivates them, and convince them to collaborate.

It will not be difficult to recognize a leader in a group, just observe how the group moves, or look at the persons in the group: you will easily discover who is the leader of the group.

There is no single model to be a leader: a leader should be able to be flexible and adjust to the context where is works, taking into account the socio-cultural factors that determine people's behaviors.

Some people have natural leadership attitudes, but it is also possible to develop leadership abilities through critical observation of other leaders, considering their successes and mistakes, and thus finding your own way of being a leader.

Leadership ability is not dependent from gender, although in some cultures male leaders prevail. Indeed, both men and women can be leaders.

You will easily discover who is the leader also in groups of children or adolescents. The leader is generally the first who moves and the other follow. In order to influence or change a group behavior, you should first convince and get the approval by the leader of the group.

Members of the CASA working team

3.4. "Train-the-trainer" to multiply knowledge

Now let's consider an example where both the concepts of sharing and leadership apply.

Imagine you are a nurse and that you attended a training course to learn more on the clinical aspects of HIV/AIDS. You are very happy with the course because you have acquired new knowledge that will help you better perform your activity. The quality of care of HIV infected people will improve thanks to the new knowledge that you have acquired in the training course. You are aware that a better quality of care is very important for people living with HIV in your community. Together with you, there were other 10 nurses in the class; they too are happy with the training course and recognize that it is very useful.

You are aware of how many people are suffering from HIV; you now acquired new knowledge that will help nurses improve the quality of care of HIV infected people and therefore contribute to a better living condition; yet you are aware too that not all nurses can have the same opportunity as you had to attend a similar course. You are now well trained, but how could you help the other nurses?

The answer is simple: you will train the other nurses in your health center, you will transfer them the precious knowledge you have acquired.

Now, imagine if each of the 10 nurses who attended the same course will take the responsibility to teach other 10 nurses in health center where they work, there would be 100 well trained nurses!

Can you see the big gain?

This is the so call "train-the-trainer" model, a cost effective way of multiplying knowledge. Of course, communication plays a very important role to make this model work, as well as the networking and leadership skills of people involved.

Do you think it would be possible to apply this model in your own setting? Now I will provide some hints to better understand the model, then we will consider if it is feasible for you.


A break during a CASA training session at Ayder Hospital

3.5. The "train-the-trainer" model

The **"train-the-trainer"** model is based on the concept that first you learn then you teach your colleagues what you have learnt. In other words, you take an active role in training activities by participating in a network of collaboration.

The model can be applied at different levels in different settings. Now, I will explain how it works in very simple terms. There are two basic steps.

1) First of all, a group of selected and motivated **people attend a training course** on a specific subject of their interest. The organizers of the course will take care to adjust the course according to local needs and participants' knowledge level. For example, a group of nurses is selected to attend a training course on HIV/AIDS. Let's call this course **T1**, where T stands for training. It is a T1 course because it is the first, the initial, training course of a training model (called "train-the-trainer") which envisages the replication of training. By replication we mean that people who attended the T1 course should then be able to replicate what they learnt, that is they should be able to become trainers and possibly organize other courses.

2) Attendants of the T1 courses will gain good knowledge on the topics of their interest and feel confident on how to apply such new knowledge. They will have to pass an exam and receive a certificate of accomplishment that certifies their knowledge. So, thanks to this new knowledge on HIV/AIDS and the understanding of the "train-the-trainer" method, they will be able to **organize other similar courses addressed to other people**: the **T2 c**ourses. T stands for training, as we mentioned, and 2 indicates that it is a replication training course, a second course.
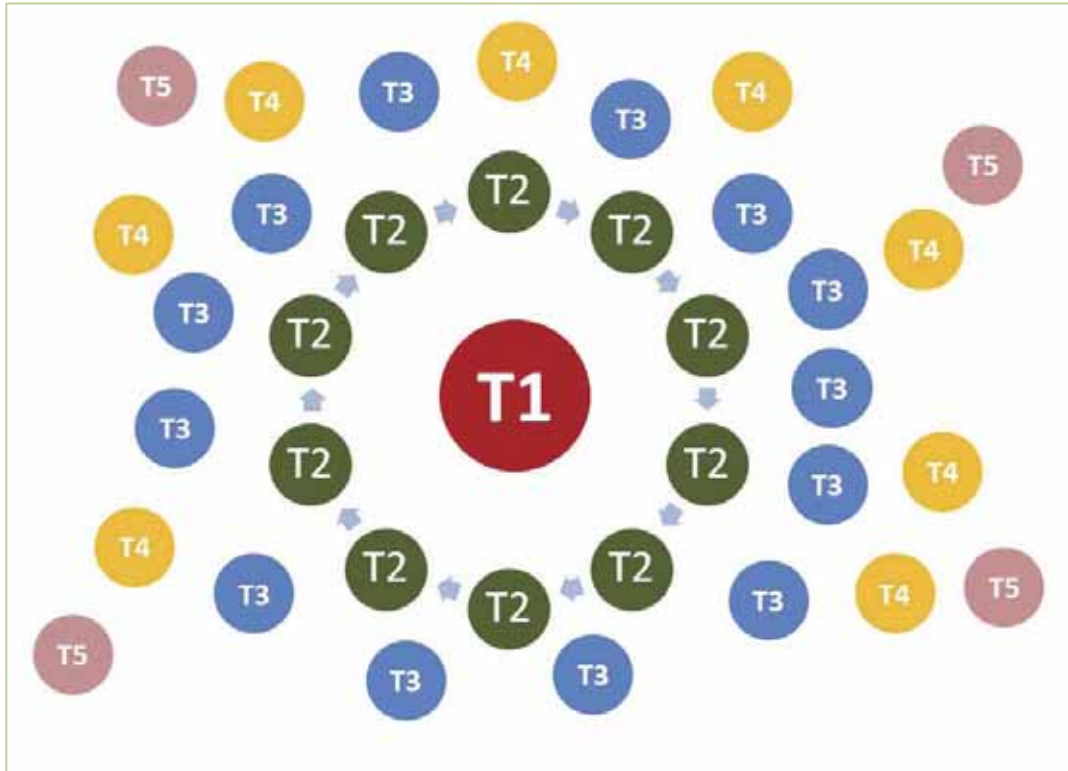
The picture is a visual representation of the "train-the-trainer" model, connecting people attending the training courses. The red ball in the middle represents the initial T1 course and the green balls around it represent the following T2 courses that may be realized by participants of T1 courses. Also participants in T2 courses may be able and willing to replicate knowledge, so we might have another group of T3 courses, the blue balls, or T4 or T5 courses: theoretically an infinite number of courses originating from T1 courses.

Can you get the idea of a network from the picture? Do you think that some leadership skills are necessary to organize a course, or develop a network?

And how important do you think communication is in all the process?

3.6. The role of communication in networking and training activities

We have briefly discussed the importance of being in a network and the benefits of sharing experiences to receive support or provide support, to find better solutions to the problems that we have to face; we also briefly talked about how groups or networks can benefit from an appropriate leadership; and finally we discussed how important it is to participate in training activities and be able to apply new knowledge in your own environment and share such knowledge with the others.

Now let's focus on the role of communication in the mentioned activities.

As we already said, communication has a very important role in any interpersonal relation, and it is particularly crucial in training and networking activities. To successfully reach an objective, in fact, we must be sure that the message that we wish to transmit is clear to the target person; at the same time we must not forget to focus also on verbal or non-verbal messages coming from the others.

Some hints may help to clarify these concepts, but you should find your own way to develop an effective and personalized communication style.

3.7. Partnering with patients

It is particularly important to understand the benefits of establishing a positive and solid relationship of trust with patients, a sort of partnership, where communication plays a relevant role.

In June 2014, the BMJ, one of the most important scientific journals, launched a strategy to promote patients partnership, recognizing that "partnership with patients, their families, carers, advocacy groups and the public is a moral imperative, essential to improve quality, safety, cost effectiveness and sustainability of healthcare". This is particularly true with HIV infected persons often suffering from stigma and isolation.

The concept of partnership perfectly matches the idea of promoting communication among the different stakeholders as an important contribution to improve patients quality of life and well-being. It is also associated with the concepts of active listening, non-verbal communication and empathy that were discussed in Lesson 2.

If you are attentive, responsible and really wish to help persons who need help, even if they do not ask it explicitly, you should be able to develop this sort of partnership with patients and do all your best not to lose any patient deserving care.

3.8. Some hints on how to apply new concepts

It will not be difficult for you to understand the strategic role of communication in the different activities that you perform in your daily life.

Now I will propose you some hints for discussion through a series of questions and leave you the task of answering these questions taking into account your own experiences and perceptions.

See whether you agree or not with the hints provided and how you can integrate such hints with your personal knowledge of the socio-cultural environment where you operate. If you wish you may write down the answers to these hints, but this is not compulsory. The objective of the suggested questions is to help you critically consider the role of communication.

Let's take the example from CASA project.

Do you think it would be useful to create a network among the different people participating in the project with different roles, and exchange ideas on how to improve their work, or the difficulties they can have in carrying out tasks assigned to specific roles, nurses, health workers, etc.?

How would it be possible to create such a network? What kind of communication may be established among the members of the network?

Do you think a leader is necessary to manage a network? Do you think people in the network has to meet periodically? If yes, how often would you advice to have a meeting?

Would you think it useful to take notes of complaints to be reported during the meetings?

What kind of arguments would you use to express disagreement with a standard procedure? How would you persuade or convince a patient to regularly follow therapy?

If you were a case manager, do you think it would be important to communicate data managers your difficulties in getting data, if any?

If you had the opportunity to attend a training course for trainers, would you feel like becoming a trainer yourself? Can you imagine how the model of "train-the-trainer" could be explained to health workers? Would you use drawings to explain it, or the report of personal experiences? Or rely on other people experiences? Would you spend time to listen to different points of views?

Do you think it would be useful for participants in course to share experiences of how they applied new knowledge after the course?

Now it is up to you to consider these hints, and make the best use out of them.

3.9. Role playing

I will now spend a few words to illustrate some techniques that may be useful to observe and understand people's behaviors and find solutions to bring about desired changes.

The techniques are role playing, focus group and tech-back. All of them require good management of interpersonal communication skills. Let's start with role playing.

Role playing is when you ask an individual to perform a role to see how this individual perceives such a role or the situation in accordance with the expectations of society; role playing is also when you yourself play a different role to better explain, to other persons, a situation in a specific context.

I will now provide you two examples to better understand the meaning of role playing and how to use this technique.

Example 1. The teacher Raffaella asks a student to play the role of a HIV infected person, and asks another student to play the role of a nurse attending the patient at the ART clinic. They should mock a first visit. The way the students dramatize the visit will help Raffaella to understand the major perceived difficulties or incorrect procedures.

Example 2. Raffaella herself plays the role of a nurse to show how busy nurses are and may forget to fill in the CASA formats. This performance will help Raffaella explain why case managers should double check both CASA formats and other clinical formats in a climate of collaboration, without penalizing anybody.

Now, I invite you to consider the benefits of role playing and to think of possible situations where you could use this technique.

If you have the possibility, try to practice role playing with your colleagues to explain a difficult procedure. One may play the role of a nurse, the other a patient. See how the nurse could convince patient to follow therapy.

Consider the reactions of the person who plays the role of a nurse and those of the person who plays the role of a patient; compare the roles played and perceived reality to see how much they differ one from the other and draw your own conclusions. This should help you have a better vision of the current situation. Do you think that this exercise may be useful to improve understanding of different points of views and perceptions?

A training session in Alamata hospital

3.10. Focus groups

Focus groups are observational meetings where participants freely talk about their perceptions, opinions, beliefs, for example on a disease, a service, a product.

There are different ways of organizing focus groups: asking questions, observing behaviors and reporting answers and attitudes that will help you to obtain useful information.

In a focus group, people should feel free to interact with the other members of the group. One or more facilitators may help guiding the discussion.

Example. Raffaella organizes a focus group at Mekelle Hospital because she needs to adjust CASA project strategy and wants to know more about HIV infected persons' attitudes and perceptions. For example, she may be interested to know how patients perceive their status, how they describe symptoms, if they feel stigma, if they have difficulties to get to hospital, how family supports them, how they evaluate the service received, etc.

Observation and discussions during the focus group proved very useful, yet language represented a huge barrier, even in the presence of a translator, and a major involvement of a local person would provide better results.

Both focus groups and role playing help identifying clues for action and barriers that prevent change towards a desired behavior; at the same time, they create opportunities for increased peer advocacy. They both require good communication skills.

3.11. Teach-back

Patients generally forget most medical information they receive or are not able to retain it correctly.

Informed patients can better adhere to therapy and feel relieved. Somebody says that information itself may act as a therapy and prescribes patients to become informed about their status, before coming to the next visit.

Teach-back is a technique that may help patients to solve the gap between information received and information that they are able to retain.

Teach-back consists in asking patients to repeat with their own words what the health officer, nurse or doctor just explained them about their disease or therapy. Patients' understanding is confirmed if they are able to explain back again the same concepts in a clear way.

Example: A nurse says to a patient: "I want to be sure that I correctly explained next steps in therapy. Can you please tell me when you are going to come back to the health center?"

This technique can be applied in different contexts and obviously requires communication skills. Can you imagine a situation where teach-back may be useful to you?

3.12. Internet communication, scientific writing, meeting and conferences

Other important ways of sharing, networking and training are represented by the different forms of Internet communication, scientific writing and participation in meeting and conferences.

Internet communication plays a very important role, especially as regards health information. It is important to be able to search online information, to know how to distinguish reliable from unreliable sources and be able to utilize such information for your own purposes. We may consider Internet as a huge library and also as meeting place where you can chat with your friends and share ideas.

Scientific writing is also a very important way of communicating health information and health research. You may write a journal article, a book, a blog. Besides a good scientific content worth publishing, scientific writing requires the knowledge of editorial standards and formats. Especially for researchers and physicians, it is important to be able to publish the results of their activity to share and compare data with other researchers and health operators at national and international level. If you do not show and share what you are doing, what is your activity or your research, the rest of the world will never become aware of your work, your efforts, or your difficulties.

Meeting and conferences represent another valuable opportunity to share and communicate relevant information through oral presentations or posters. There are rules, technical procedures and best practices that you need to know to be able to organize a meeting, to submit an abstract to present a communication

or poster in a conference, and be able to get your paper published in the conference proceedings.

In this basic course on communication, we will not enter into details of the different forms of Internet communication, or scientific writing, and participation in meeting and conferences; these issues, in fact, will be the object of other training courses.

If you are interested to know more about these issues, do not hesitate to ask information about future courses.

Here, we just mention how important it is acquire the appropriate skills for searching and using the Internet, writing an article, taking part in a conference or organizing a meeting to enhance communication, sharing experiences and data, and developing networks of collaboration.

Working together
is also
making friends

3.13. Building your own communication strategy

It is important to recognize that when you work in a team you have both a personal and a collective responsibility to properly carry on your tasks.

We strongly invite you to think of possible answers to the suggested questions and cues, and discuss them with the other students or colleagues when you come back to work, or even with friends or family.

We also invite you to think of other possible questions and cues that may stimulate discussion about your own responsibility and the role of communication in networking and training activities, as well as in other activities that you perform at work and at home.

Discussion and critical considerations of the hints provided are an important part of the training that will induce you to build your own strategy, because as we mentioned, there is no one solution that fits all. It is important to focus on planning, sharing, training and organizing periodical meetings. This can be possible only if you take action and provide your contribution in a responsible way. We therefore invite you to find your own strategy to communicate with your working group and you will soon get the benefits.

Questions on Lesson 3

As for the other lessons, you are encouraged to discuss the questions below in small groups to evaluate your understanding of the lesson. These questions are intended to stimulate discussion. You should select the correct answer: a, b, or c.

3.1. Which is the meaning of network?

    a. Network is a list of things that you shall not do together with your colleagues

    b. Network is a group of interconnected individuals or objects sharing something.

    c. Network is a work that you should do alone

3.2. How important is communication in a network of collaboration?

    a. Communication in a network is not important, it is dangerous.

    b. Communication in a network is very important

    c. It is forbidden for people in a network have any kind of communication

3.3. How important is it to share with your colleagues, impressions and opinions on a new working procedure?

    a. It is not advisable to share any opinion with your colleagues, because you should not care about the results of your activity

    b. Sharing with your colleagues is very important because it is a way of learning, growing together and feel supported in your activity

    c. Sharing opinions is forbidden by the World Health Organization

3.4. Which of the answers below is more appropriate to describe a leader?

    a.   A leader is a person who obliges people to do what he wants

    b.   A leader is able to take initiatives, guide a group and establish a climate of positive collaboration

    c.   A leader uses rude ways to oblige the others to obey his orders

3.5. If you learn new and important skills to better assist patients, would it be advisable that you shared such new knowledge?

    a.   No, it is better to keep secret all important knowledge regarding treatment

    b.   It is forbidden to share scientific knowledge

    c.   Yes it is important to share all relevant knowledge to improve patients' quality of care

3.6. What is the "train-the-trainer" model?

    a.   It is a training model where students are not allowed to share what they learn

    b.   It is a training model where the students first learn and then teach new knowledge to other students

    c.   It is a very expensive training model that addresses only a very limited number of students

3.7. How important is communication in training?

    a.   In training activities, communication is not important because teachers should not care about students understanding

    b.   Communication is very important in training activities because teachers should be sure that students understand the lesson

    c.   Communication has a negative effect in training activities

3.8. How would you explain role playing?
a. Role playing is when you play with a dog in the street
b. Role playing is when you perform a role of another person to better explain a situation
c. Role playing is when you are not happy to play

3.9. What is teach-back?
a. Tech-back is when you teach and nobody understands
b. Tech-back is a technique that helps people to understand and memorize concepts by asking them to explain back to you what you have just explained
c. Tech-back is a way of teaching with your back facing the student

3.10. Which of the following answers is correct?
a. Local beliefs should never not be taken into consideration
b. Focus groups never help to understand people perceptions
c. Role playing may help to understand general perceptions on specific situations

TAKE HOME MESSAGES FROM LESSON 3
Sharing, networking and training

- It is important to share and create networks of collaboration
- New knowledge should be shared with colleagues to improve **working performance**
- Interpersonal communication skills facilitate networking and training
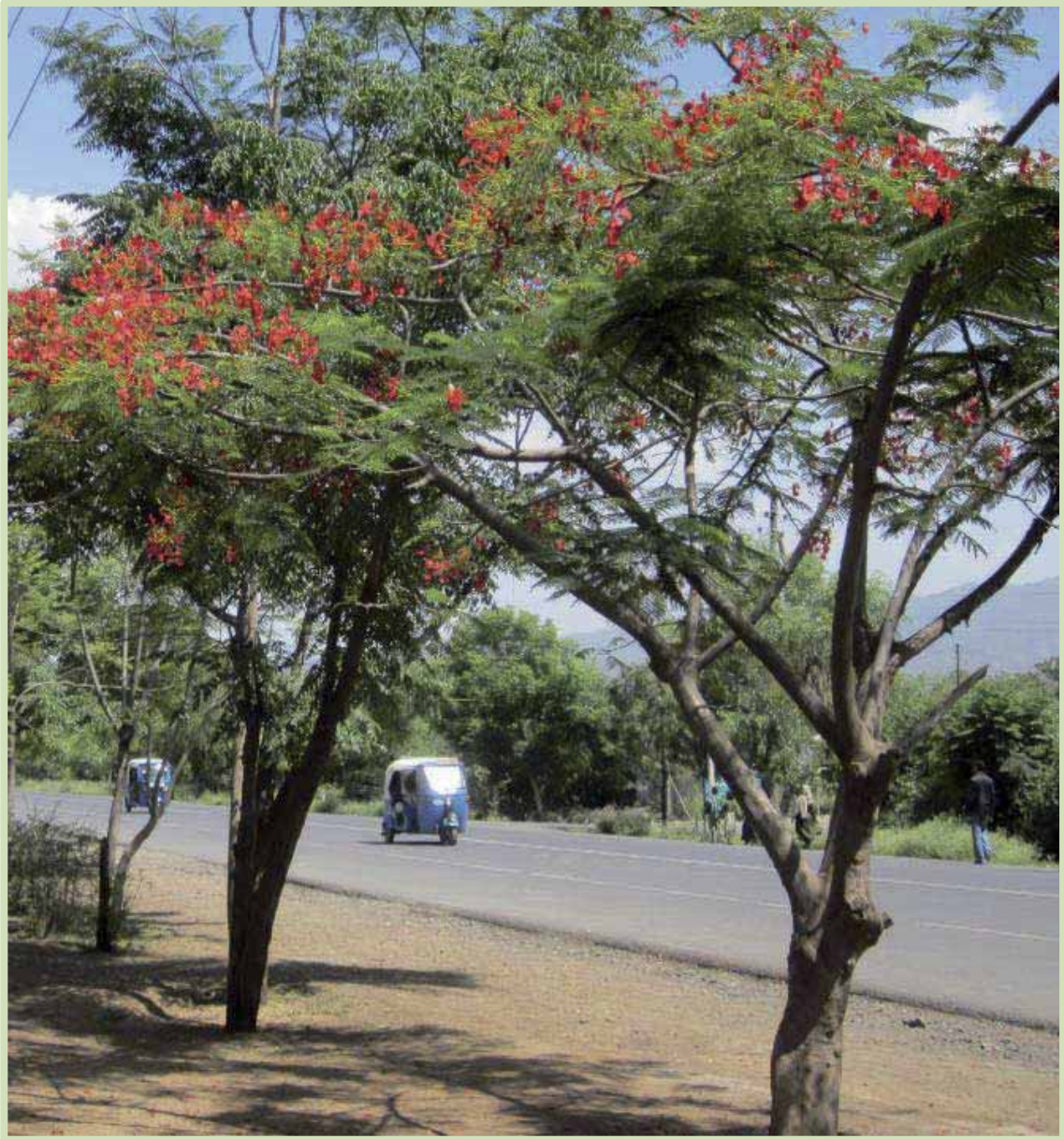
Local transportation in the Tigray Region

Lesson 4. Activity planning and SMART goals

The lesson in brief

This lesson will provide hints to better organize your work considering SMART goals, that is goals which are Specific, Measurable, Achievable, Realistic, and Time-bound. Becoming aware of SMART goals will help you to realize your goals in the most appropriate way. Some examples of the benefits from SMART goals for persons working within the CASA project are included together with suggestions for discussion.

4.1. The meaning of SMART goals

It is not always easy to set goals that are feasible to realize.

A nice acronym, SMART, was created to help to define the best attributes of reasonable objectives and judging their feasibility and appropriateness. Let's see the meaning and concepts associated with each letter of the word SMART.

S →	stands for	**S**pecific
M →	stands for	**M**easurable
A →	stands for	**A**chievable
R →	stands for	**R**ealistic
T →	stands for	**T**ime-bound

The principal advantage of SMART goals is that they are easy to understand and allow you to build your own strategy and reach your own goals.

 Communication is crucial to realize SMART goals.

Let's now consider the roles of the different actors involved in the CASA project and analyze the meaning of the single concepts included in SMART goals to see how they apply to the CASA project.

4.2. First step: understanding your role

CASA project involves a team of collaborating persons committed to improve the quality of care of HIV infected people. The success of the project depends on the work of all the persons involved in the team.

To properly work in a project team, you should clearly understand the general objective of the project, the roles of persons involved (doctors, nurses, data managers, case managers, patients' associations, etc.) and, above all, which are the specific goals you are asked to attain, as well as why and how you shall organize your activity to reach your goals in the best possible way.

SMART goals will help you to focus on the following aspects:

- what is your *specific* role within the project,
- how you can *measure* the achievements of your activity,
- how you can *achieve* the best results,
- how *realistic* your goals are,
- how much *time* you will you require to reach your goals.

Now we will examine the attributes of SMART goals and provide some practical examples inspired by the activities to be performed within the CASA project.

We invite you to critically consider all examples provided and find other examples that could equally fit to explain the meaning of SMART goals to your colleagues.

Your opinion is very important, you should be able to communicate, to share ideas to contribute to reach SMART goals. You may know thinks that the other people do not know, or have ideas that the others do not have, so don't be shy and participate in the debate when it comes to discussing strategy issues associated with SMART goals. Sometimes the acronym SMART is not used, but the concepts included in SMART goals are the basis for strategic planning.

Now we will provide examples to better explain the meaning of specific, measurable, achievable, realistic and time-bound goals. The objective is to help you to memorize these concepts and try to apply them when planning your activities.

A group of persons attending a CASA training session at Mekelle University

4.3. Why should your SMART goal be *Specific*?

In SMART goals S stands for ***Specific*** in fact, it is important for you to understand the specific goal you have to reach in order to comply with it in the best possible way.

A goal is specific when you are able to clearly define which are the specific objectives you have to realize, when, how and why and with whom. A generic goal does not help you to achieve your specific goal. This means that your specific goals should be clear and unambiguous for you and for all those who participate in project team.

A specific goal will prevent misunderstanding of the tasks to be performed and, accordingly, avoid waste of time, efforts and money.

Considering *Specific* goals within the CASA project

Suppose you are a nurse working within the CASA project. Which of the two objectives below better represents your specific goal?

a) contribute improving the quality of care of HIV infected persons
b) fill in the CASA formats for any person enrolled in the CASA project.

The correct answer is b) because it is specific. The answer a) is also true, but it is not specific. Now, can you think of another role performed within the CASA project and its specific goal? For example, which is the specific role of case managers?

4.4. Why should your SMART goal be *Measurable*?

In SMART goals **M**→stands for *Measurable*, in fact, you should be able to measure any activity you perform in an objective way, that is you need to measure progress and have evidence of it.

For example, you need measures to answer these questions: How many patients are missing to follow up? How many questionnaires were collected? How many health centers are involved?

If a goal is not measurable it is not possible to know whether you are making progress towards its successful completion. Furthermore, by measuring activities you can be able to celebrate when you reach expected results, or revise your strategy if something did not work as you wished. You should utilize standard ways and procedures to measure so as to be able to compare activities of different groups and at different periods or places and see why one group provided better results than the other.

Considering *Measurable* goals within the CASA project

Suppose you are a case manager working within the CASA project. Which of the two objectives below better represents your measurable goal?

a) I will work harder and obtain better results
b) In 2014 we input data from 500 questionnaires. In 2015 we will input data from 1000 questionnaires.

The correct answer is b) because it provides measures (data). Now, can you think of another role performed within the CASA project and its measurable goal? For example, which may be the measurable goal of case managers?

Planning with SMART goals is possible only if you know the community where you are going to realize such goals. If you are living and/or working in that community you are aware of the major obstacles you may encounter to reach your objective, the people you can trust, which is the better way to communicate with them. If you are outside the community, you may under or over evaluate benefits and risks coming from the community itself.

To know the community will help you to be SMART.

Mohoni Health Center

4.5. Why should your SMART goal be *Achievable*?

In SMART goals **A** →stands for ***Achievable*** in fact, goals should be attainable considering individual efforts required, as well as time and resources available against possible obstacles. For an goal to be achievable you should be able to answer questions such as "How can this goal be accomplished? How can I involve people to collaborate reaching the goal? How realistic is the goal considering existing constraints?"

Such questions based on "how" should help you identifying the ways your goal can be realized. You should also consider which is the correct attitude to reach the goal, which skills are required, which technical or financial support you need.

Considering *Achievable* goals within the CASA project

Suppose you are a data manager working within the CASA project. Which of the two objectives below better represents your achievable goal?

a) Tomorrow I will collect data from all health centers in the Region.
b) I will consider how many health centers I can reach with available transportation in a day to collect data and, accordingly, I set a plan in order to collect all data from all the 7 health facilities within a week.

The correct answer is b) because it is achievable.

Now, can you think of another role performed within the CASA project and its achievable goals? For example, which may be an achievable goal for a case manager?

4.6. Why should your SMART goal be *Realistic*?

In SMART goals R →stands for *Realistic*, in fact, you should consider the setting where your activity will be performed and evaluate the expected outcomes against people to be involved, knowledge, skills, attitudes and other relevant resources. It is important to recognize people's attitudes and expectations about certain kinds of intervention and existing stigmas. In this regard, community traditions and local cultures play a very important role: only those who really know the community and have the necessary skills can positively interact with the community members.

Therefore, a goal is realistic when it is applicable to the current socio-economic environment and takes into account the major difficulties that may prevent its realization. It is important to set realistic goals to act on people's motivation. Unrealistic goals result in failure and disappointment.

Considering *Realistic* goals within the CASA project

Suppose you are a member of a patients' association working within the CASA project. Which of the two objectives below does better represent a realistic goal?

a) I will contact 5 families in a week because I do not have transportation; I will talk to them and then report why the HIV infected patient living in the family I visited did not show to follow up.
b) I can contact all HIV infected patients in the Region and convince them to go to the health center.

The correct answer is a) because it is realistic.

Now, can you think of another role performed within the CASA project and its realistic goal?

For example, which may be the realistic goal for a nurse working in a health center? And for a local supervisor?

It is important to know people habits, religion and culture to interact with them in a positive way and really understand their behaviors. That is why the programs supported by foreign institutions do not always reach expected results. Each place has its own characteristics and projects that perfectly work in a country will not necessarily work in another country.

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4.7. Why should your SMART goal be *Time-bound*?

In SMART goals **T** →stands for *Time-bound*, in fact, it is important to define a time frame for your activities and goals, by setting a target date. A commitment towards deadlines helps a team to focus their efforts on completion of the goal on or before the due date. The timing of specific tasks should fit with the overall program. A time-bound goal will usually answer questions such as: When shall I start it, when shall I complete it?

Considering *Time-bound* goals within the CASA project

Suppose you are a data manager working within the CASA project.

Which of the two objectives below does better represent a time-bound goal?

a) I will revise all data from health facilities and send the report to ISS.
b) Starting from March 2015 I will revise data from each health center and hospital as soon as I receive them during my weekly visits; then I will prepare a comprehensive report including data from all heath centers and hospitals and send it to ISS in June 2015.

The correct answer is b) because it is time-bound. Answer a) is vague and it is not time-bound, in fact, it does not contain any timing schedule.

Now, can you think of another role performed within the CASA project and its time-bound goal?

For example, which may be a time-bound goal for a member of a patients' association or for a case manager?

4.8. SMART goals and communication skills

The SMART goals are intended as a roadmap to define important attributes of our activity. They are based on available data (such as number of patients at baseline, number of missing patients), and target specific aspects of knowledge, attitudes and behaviors. As mentioned before, local knowledge and traditions are fundamental to reach the objectives of the CASA project.

Communication is very important to effectively reach the project SMART goals.

Every person working for the project should know why they are asked to perform a given activity, and should be able to perform their work according to SMART goals.

Communication plays a very important role within the project as a whole because it is fundamental that each person understands what he/she has to do and why, and ask and receive explanations whenever necessary. It is your duty and your responsibility to ask for explanations if you do not understand, and it is your right to receive an answer. At the same time, you have the duty and responsibility to honestly provide answers to the questions you are asked and any possible suggestion to solve a problem.

As already mentioned, local knowledge together with scientific skills and honest attitude and good will are the keys of the success of a project like CASA. We recommend that you always consider the context where you will be acting, for example, facilities available, personnel able or willing to collaborate with you, patients' distance from health facilities, patients beliefs, expectations, trust they have in health services, etc.

4.9. SMART goals: benefits for patients' associations

Let's now consider some practical examples on how you can better organize your tasks utilizing the concept included in SMART goals.

Task: A member of a patients' association will have to go and search a number of HIV positive patients missing to follow-up and then report back to case managers why they did not show to the visit.
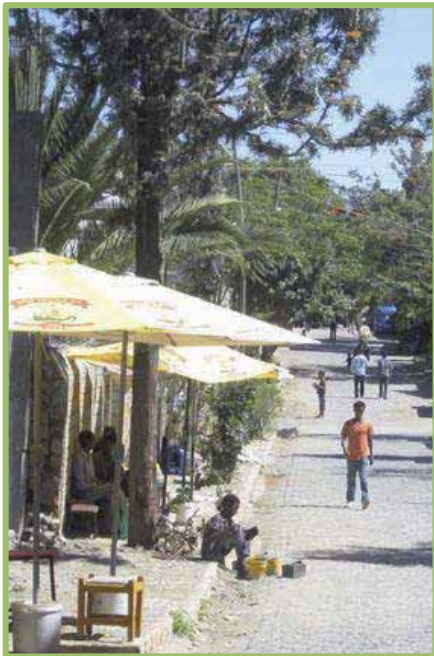
Considering what you learnt in this lesson about SMART goals, reflect on the following questions to see how patients' associations can improve their performance. Is the task clear enough? What shall they do if it is not clear enough? How is the work flow organized? How will they get the list of patients to be contacted? Who are their contact persons for asking explanations? How can they organize their activity in a more efficient way? How many patients will they be able to contact each week? How will they best report the results of their activity? What kind of difficulties may they face? Which shall be the most appropriate communication? Will they have sufficient time to comply with their schedule?

Can you add other questions that will help the patients' associations to design an activity plan according to the task indicated and implement it with success? You are encouraged to discuss it with your colleagues.

4.10. SMART goals: benefits for nurses

Now let's make the same exercise for nurses, utilizing the concept of SMART goals to help them carry out their assignments within the CASA project. We are aware that they are very busy people and that CASA adds extra tasks to their routine activity.

Task: A nurse will have to fill in the CASA questionnaires by asking patients all relevant questions, and then keep all formats updated.

Considering what you learnt in this lesson, reflect on the following questions to see how such task could be carried out more efficiently.

Is the task clear enough? What shall nurses do if their task within the project is not clear enough? What is the difference between CASA patients and other patients? Who are the contact persons for nurses if they need explanations? How could they organize their activity in a more efficient way? How many patients are they expected to visit? When? How will they report data? What kind of difficulties may they face? Which shall be the most appropriate communication to be used with the patients? And with the data managers?

Will nurses have time to properly comply with their schedule? And if not, how can you solve the issue? Can you add other questions that will help nurses or health officers to design an activity plan according to the task indicated and implement it with success?

You are encouraged to discuss it with your colleagues.

Remember that, as teachers and tutors, we can only provide suggestions, but it's you who know the best way to use our suggestions and the new acquired knowledge. You can teach us a lot and working together we can reach the best results.

All that I wrote in this booklet is a mixture of my previous knowledge and experiences and what I learnt during my visits to hospitals and health centers in Ethiopia. I am really grateful of what I learnt from you. I would not be able to teach anything useful for you, if I had not been with you.

4.11. SMART goals: benefits for case managers

Let's make the same exercise for case managers and consider how SMART goals can help them to carry out their assignments in the most efficient way. Case managers are working full time for CASA project so their commitment is different from that of nurses.

Task: A case manager will have to input all data collected by nurses in the appropriate files and regularly provide data to data managers.

Now, considering what you learnt in this lesson, reflect on the following questions to see how the task of case managers could be carried out more efficiently.
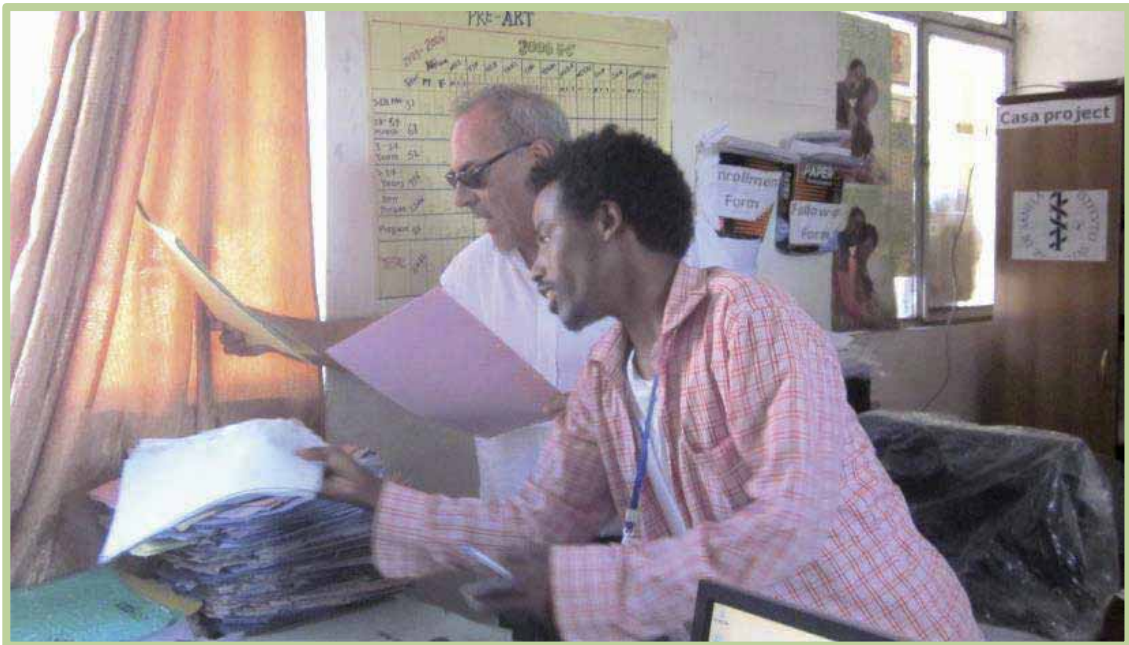
Is their task clear enough? What shall you do if it is not clear? What are the main differences between data collecting procedures among nurses, and data collecting by case managers and data managers? Who are the contact persons for case managers if they need explanations? How could case managers activity be organized in a more efficient way? How many records are case managers supposed to process every week? How will they report data? What kind of difficulties may they face? Which shall be the most appropriate type communication with the nurses, oral, written, both? And with the data managers? Will they have time to comply with their schedule?

Can you add other questions that may help the case managers to perform their task with success? You are encouraged to discuss it with your colleagues. Sometimes it is difficullt to find data if they are not properly written or filed.

4.12. SMART goals: benefits for data managers

Now let's consider possible benefits from SMART goals for data managers

Task: Data managers will have to periodically collect data from case managers at health facilities and input such data in the central database at Mekelle University.

Now, considering what you learnt about SMART goals, reflect on the following questions to see how the task of data managers could be carried out more efficiently, if you set beforehand strategic, measurable, achievable, realistic and time-bound objectives.

Possible questions for discussion: Is the task of data managers clear enough for all? Is communication among data managers fluent enough? And what about communication between data managers and the other health workers? And communication between data managers and the local supervisor? Do you think communication could be improved and how? How do data manager plan their activity? Do they set deadlines for each specific goal? Are all aware of such deadlines? How do they agree on procedures to be followed to carry on their tasks? Do they produce a written report to regularly monitor progress of activities? Do data managers meet periodically to discuss ongoing activities, difficulties encountered, and think of possible improvements? How regularly do they visit health facilities? Would a closer contact with case managers, nurses, and the local supervisor be useful?

How regularly do data managers contact ISS coordination Unit? Do they look for alternative local solutions if they see that something does not work? Now, it's up to you to discuss if and how the use of SMART goals may help data managers to work more effectively and reach better results.

4.13. SMART goals: benefits for local supervisor

Let's now consider some practical examples of how the local supervisor can better organize his tasks utilizing the concept of SMART goals.

Task: The local supervisor plays the role of intermediary between the staff members of the Ethiopian and Italian institutions involved in the project and local persons participating in the project at different levels.
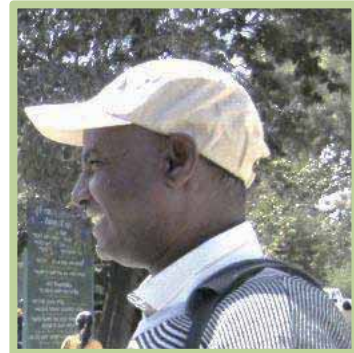
Planning and communication skills are essential for the local supervisor, in fact, he should be able to establish a positive relationship with both the staff members of the institutions involved and with the local persons participating in the project. He has the difficult role of mediator or spokesman of the necessities of the different groups and should always have full control of the development of activities and be proactive to find alternative solutions if something does not work properly.

The presence of the local supervisor is essential to facilitate the execution of the the project, therefore he must be able to collaborate in setting the project SMART goals which should be shared and accepted by both local collaborating persons (health workers, data managers, case managers, etc.) and the staff members of the leading institutions. The local supervisor is a person aware of the local scenario, therefore he should help to: define specific objectives against such scenario, suggest measures to evaluate expected activities, contribute to explain what is achievable in the current scenario, and what is realistically possible within a given time frame. All this perfectly matches the concept of SMART goals and at the same time requires communication skills so that all actors of the project can understand their role and work in a collaborative way.

4.14. Building your own planning strategy

Now that you have a general knowledge of what is the meaning of SMART goals, you should try to make an effort to apply the concept of SMART goals to the tasks assigned to you. To do so, we suggest to follow the steps below indicated.

1. **Be sure you understand task assigned to you**, that is what are you supposed to do as part of the project team. If something is not clear, ask for clarification before starting any activity. Communication is very important in this stage, both on the side of those who provide explanations and of those who ask for it. Don't be afraid to ask if you do not understand, or express disagreement because a clear reciprocal understanding of the current scenario is absolutely necessary to save efforts, time and money. A different opinion may help also those who have responsibility to coordinate the activities and who may not be aware of context-related difficulties.

2. **Organize your activity according to SMART goals**, that is you should be able to define your specific activity; this activity will be organized in a way that allows you to measure the achievements; you should realistic in considering how you will carry out your task considering the context where you act, and the time span when you will terminate your task.

Sometimes, it may be useful to write down a program of activities to be performed, including people to be involved, time schedules, equipment required, expected results, etc. In this way it will be easier to implement your plan and follow progress and the entire team will benefit from a more efficient organization.

We know that sometimes the goals may seem very difficult and very far away. Progress always requires a big effort and commitment. We know it is a long way and sometimes you may feel discouraged, but keep on going, you will reach your SMART goals and we will be happy to celebrate with you. Celebration is another important moment, and we will discuss about it in next lesson!

Do you think the picture is a good visual clue of efforts required and the long way to go? I really like it. Now, to keep on the right track, I invite you to answer the questions on this lesson, and hope you will enjoy discussing them with your colleagues.

Questions on Lesson 4

You are encouraged to discuss these questions in small groups to evaluate your understanding of the lesson, fix new knowledge and see how you can apply them in your activity. Remember, only one answer out of three is correct. This exercise will help you to pass the final test.

4.1. Which is the meaning of SMART goals?

    a. SMART is the acronym of Simple, Missing, Achievable, Rare and Time-forgot.

    b. SMART is the acronym of Strategic, Measurable, Achievable, Realistic and Time-bound. SMART goals will help you to plan your activity in a way that it will be easier to reach good results.

    c. SMART goals represent an easy way to communicate bad news

4.2. How relevant is communication to set up SMART goals?

    a. Communication has nothing to see with SMART goals and their realization.

    b. Communication plays a very important role to set up and implement SMART goals.

    c. SMART goals and communication are not complementary

4.3. How important is it to plan your activity in advance?

    a. Planning the activity in advance is not important, you can do your work without considering any schedule

    b. It is very important to plan activity according to the required tasks

    c. You are free to decide what you wish to do, without keeping into consideration the project objectives, so planning is not necessary

4.4. Why should your goals be specific?

a. Goals should be specific so that you clearly understand when, how and why and with whom you shall do something
b. Goals should be specific to make it more difficult to reach good results
c. Goals should be specific to help you recover from disease

4.5. Why should your goals be measurable?

a. Goals should be measurable because you will earn more money
b. Goals should be measurable to use fantasy and creativity when reporting results achieved.
c. Goals should be measurable to report progress of activity and have evidence of it

4.6. Why should your goals be achievable?

a. Goals should be achievable because you should increase your knowledge
b. Goals should be achievable because you should take into consideration individual efforts required, as well as time and resources available
c. Goals should be achievable because you can spend a lot of money without any concern about it

4.7. Why should your goals be realistic?

a. Goals should be realistic because it is important to consider the setting where your activity will be performed.
b. Goals should be realistic because it is not important to consider the local traditions
c. Goals should be realistic because it helps you to learn to speak English

4.8. Why should your goals be time-bound?

a. Goals should be time-bound because it is better to terminate activity in the morning

b. Goals should be time-bound because it is important to define a time frame for your activities by setting a target date.

c. Goals should be time-bound because you are free to do what you wish during the entire period of execution of the project.

4.9. Is it advisable to follow a time schedule?

a. No, it is always better to be free to do what you wish, especially if you receive a salary, without any concern for expected results

b. It is better to work without a schedule that would oblige you to do what you do not like to do according to a given time frame

c. Yes, it is always advisable to have a time schedule to have full control of the progress of activities and results achieved in a given time

4.10. How useful is it to build a personalized communication within SMART goals?

a. It is always useful to build a personalized communication to reach SMART goals so that each person you are addressing to, for example, a young person or an old one, can better understand you and interact with you

b. In SMART goals it is not important to consider to whom you are talking and if he/she understands what you are saying

c. It is never useful to build a personalized communication to reach SMART goals and you should always use the same way of communicating to every person, both young and adults, men and women.

TAKE HOME MESSAGES FROM LESSON 4

Activity planning and SMART goals

- It is important to understand why planning and setting achievable goals are crucial to get positive results
- Planning includes consideration of local settings and all possible difficulties that may prevent reaching your goals
- Communication plays a very important role in activity planning

Lesson 5. Communication and evaluation

The lesson in brief

This lesson will provide hints on the importance of evaluation at different stages of a project or any planned activity, and the role of communication in the evaluation processes. You will learn how a good, encouraging and positive communication will guarantee better results while a bad, inappropriate or incorrect communication will have a negative impact on the project evaluation.

5.1. Why evaluation is important

Evaluation is a complex process and can be applied in different fields and diverse contexts.

Children at school receive teacher's evaluation, you are evaluated to get a job, you evaluate the quality of a product before purchasing it, a scientific paper is subject to peer evaluation before publication, a project is evaluated to get funded.

Indeed any choice we make is influenced by a form of evaluation that we make in a more or less conscious or structured way.

Evaluation criteria differ according to different elements. For example:

Which is the purpose of evaluation? Who is the evaluator? What or who is to be evaluated, a process, a person, some data? Which is the evaluation period?

There are systematic or scientific evaluation methods and more empirical or practical ones.

The objective of this lesson is not to provide theories on evaluation but to

- explore how communication and evaluation are strictly connected, and
- provide practical hints to evaluate your activity.

5.2. How communication affects evaluation

As we mentioned in the previous lessons, communication is part of our lives and directly influences all of our activities both at work and at home. Let's now consider how communication can have a direct impact on evaluation.

If you do not understand a message, or a task that you are supposed to do, it will be impossible for you to properly react and correctly perform the required activity. This will have a direct consequence on the goals that you or your team are supposed to reach, with a negative impact on the overall evaluation process.

Let's make an example to make it clearer.

Example: Raffaella has a meeting with some members of a patients' association and case managers to explain how they should collaborate to get information about patients missing to follow up. She explains that case managers should provide a list of missing patients and patients' associations will have to go and search the missing patients and report back to case managers. Raffaella speaks English and not all of the persons attending the meeting can understand English very well or feel confident to ask questions in English; such language barriers made communication rather difficult. Raffaella did not realize this problem immediately, and the members of the patients' associations did not quite understand what they should have to do.

This example shows how **language barriers** can have a negative impact on communication.

How do you think that such a situation could be better managed? With a translator? With more questions and answers? Utilizing the role playing or tech-back techniques? Do you remember these techniques that were mentioned on in Lesson 3?. If you don't, go back and check it. Can you imagine other examples showing how communication and evaluation are interconnected? Did you ever experience any failure in performance due to incorrect evaluation of possible obstacles in communication?

Now I will summaries some important concepts relating to communication and evaluation to help you to memorize them and definitively improve planning and evaluation of your activities.

In order to properly evaluate a program or activity you should have a clear idea of **expected results**. As mentioned in the lesson on SMART goals (Lesson 4), it is important to have a time schedule for each activity that should be consistent with the overall program.

Participants in a project should have a **general idea of the project** to better perform and evaluate their activity. As we mentioned, it is important to share, to create a network, to participate in training activities, and all this implies communication skills.

Self-evaluation, that is the ability to critically evaluate one's own activity, is also very important.

Procedures should be very clear. You should always know what you are expected to do, with whom, how, when, etc. It is advisable that you discuss procedures with your colleagues, compare difficulties encountered and successes achieved and discuss the way you solved the problems.

There are many **tools** that may help you better perform your activities, such as written operational procedures, standard questionnaires, record files, diaries, interviews, readings, reports, memos (posters, cards, etc.), check lists, etc.

We are not going to discuss the use of such tools now, but to stress the importance and extraordinary value of communication in planning and evaluating activities.

If something is not clear, or if you think it will not work, it is important for you to **ask for clarification** immediately, ask for explanations, suggest different solutions, provide suggestions.

In other words, it is absolutely important to be able to communicate!

5.3. When to evaluate

Evaluation is an important process to be taken into consideration before starting any program or planned activity and throughout the development of the program itself till reaching the final evaluation stage.

In other words, evaluation should not be made only at the starting or the end of a program, but at regular intervals to adjust procedures whenever necessary: if something is not working as expected, you should find a different way to do it.

Communication among the different stakeholders a project is very important. If goals, rules and procedures are not correctly explained or understood, the project will not work properly.

An initial program evaluation, including data collection on the current situation, is necessary to establish a baseline for actions or plans to be developed.

You need to know the initial scenario, and measure progress of activities keeping into consideration SMART goals (as discussed in Lesson 4).

Evaluation is a joint process involving those who perform an activity and those you fund or manage it and are therefore responsible to see if the activity meets the intended effects.

Evaluation and comparisons of performances of different groups permits to have evidence of who worked better and why, and therefore allows to implement the best possible procedures.

You need to carry on evaluation at regular intervals, within a project or any form of planned activity, and not only at the end of the project.

Evaluation helps you to answer questions on the effectiveness and efficacy of the project. It is important to be sure that the work is well organized and well done, and to be able to adjust procedures whenever necessary, according to results achieved against difficulties encountered.

So, thanks to an appropriate communication strategy during the initial and interim evaluation processes, you will understand if it is appropriate to follow the same procedure, or if it is better to change or integrate the existing procedures in order to guarantee the achievement of the expected results.

5.4. What to evaluate

There are different items that you can evaluate, for example:

- **structures and organizations**, in this case you can consider the physical aspects of a structure (location, building, infrastructure, equipment, etc.) or personnel involved in the organization (n. of staff, salaries, work load, etc.);
- **procedures**, that is what working procedures are followed in the structure, how people participates in theses procedures, how much time is required to carry on the procedure, etc.;
- **results**, that is what program objectives were achieved against planned activities, what behavior changed, how data increased or decreased, etc.

All collected data should be clearly interpreted by the different stakeholders; that is, they should be understandable for all to allow individual and collective evaluations. That is why good communication skills are extremely important in the evaluation processes.

If communication is not good, you may report information and data that are not correct, and therefore become useless and even misleading. Missing data in a clinical format may be a good example of an incorrect and misleading communication; in some cases, this may also be a good example of lack of responsibility!

5.5. Evaluating this training course: how and why

Let's now consider how this training course can be evaluated. We know that adult education is quite different from young education; in fact, adults, already have an important background and well established habits that sometimes may help learning and sometimes make it more difficult. In order to evaluate this training course, we have prepared different tools.

An **initial questionnaire** (pre-test) that you received before starting the course (reproduced in the Appendix of this booklet). This initial questionnaire was intended to get some background information and see how the course can help you to improve your knowledge and skills, and change inappropriate behaviors. This is very important for us because, at stated initially, we want to be helpful and correct strategy whenever necessary whenever we realize that something does not work properly.

There will be also a **final test** to evaluate your skills at the end of the course. Apart from results of this final test, that we hope will be successful for all of you, we are also interested to know your perceptions about the course that may not match the results of the final test. That is why we are going to administer also a questionnaire to evaluate **students' satisfaction**.

All data collected from the above tools (initial questionnaire, final test, students' satisfaction questionnaire) will allow us to evaluate the effectiveness and efficacy of this training course and improve future editions.

5.6. Topics for discussion

Now I will suggest some topics to further stimulate discussion and critical thinking that will help you achieve better results in the evaluation processes and, above all, benefit most from this course.

The first concept to consider is that of **responsibility**.

Do you feel responsible for what you are doing? How important do you think your activity is? And why? Do you really understand your role? Are you used to sharing ideas and challenges with your colleagues?

Do you generally organize meetings when difficulties arise? If not, do you think it would be important to organize such meetings? And who should organize them?

Can you think of any other way that may help to improve communication among health workers, doctors, patients' associations and patients?

Once again, you are encouraged to discuss the above questions and provide possible answers. This will help you to focus on the concepts explained in the lessons, and memorize them, as well as to find the way to apply suggestions included in the course to your own reality.

You will be the best evaluators of local challenges and you will find the best solutions to meet them.

Knowing a little bit more about communication and evaluation may be good stimuli to actively participate in debates on ongoing activities.

5.7. Celebrating

Celebrating is another relevant form of communication.

When you work in a team and meet your goals, it is very important to celebrate results achieved.

Celebrating is a form of reward for engagement; it is a positive reinforce to stress the importance of team work and further motivate people to continue in their efforts, reach other positive results and get satisfaction from that.

There are different ways of celebrating, according to local traditions, cultures and resources available. Celebration requires good communication skills to stress how difficulties were overcome, how important it was to work in a collaborative environment, how much you can learn by sharing, and how happy you can feel when you reach your goals. Celebration has an impact on the project reputation, improves interpersonal relationships among participants and future performances. Can you find other suggestions regarding why celebrating is important? How would you suggest to celebrate results achieved?

Now we are very close to celebrate the end of this course! Any suggestion?

5.8. If you want to know more

As mentioned initially, this course is mainly based on years of experience in communication practices at different levels within a research institute for public health.

Before closing the course, I wish to report only a few links to **essential sources** that may be useful to you, but you should have Internet connection or ask a friend, or may be the local supervisor of data managers to search and print something for you.

 Medlineplus is the most important web portal of medical information for the general public and patients. It is produced by the National Library of Medicine (USA), the organization that produces also PubMed, the most popular medical database in the world, and hundreds of other archives available for free. Some texts are available also in languages other than English; there are some documents also in Tigrinya. http://www.nlm.nih.gov/medlineplus/

 If you have an Internet connection, I advise you to subscribe **HIFA,** (Healthcare Information For All), a global campaign supporting healthcare information for all. You will enter a global forum of discussion that may be very useful and interesting to you. You can directly take part in the discussions and you may also wish to contact your country representative to know more. The ISS is HIFA supporting organization. http://www.hifa.org

Another big opportunity is **Coursera**, an online education platform that partners with top universities and organizations worldwide, to offer online courses for anyone to take, for free. You may select a course of your interest in the area "Health and society". https://www.coursera.org/

To know more about non-verbal and verbal communication and effective communication may go to the **Helpguide** website, a collaboration with Harvard University. The website includes also useful links. http://tinyurl.com/lwyu3he

Wer are going to organize other courses specifically addressing the topic of health information sources and health literacy; in such courses you will have additional information and useful links to online sources.

In any case, if you wish to know more about any specific issue, we will be available to answer your questions, so do not hesitate to contact us, if you need.

5.9. Farewell

Dear students,

it was a big pleasure for me to share with you the experience of this training course. As initially reported, this course was designed for practical purposes, to be useful to you who are contributing to realize the CASA project objectives and participate with your time and effort in the big challenge to improve the quality of care of HIV infected people. As you have seen, the course did not focus on theoretical aspects, but on practice, to be easy for you to read and memorize, and hopefully to be immediately applied on the field.

A training session at Mekelle University

This is the first edition of the training course in communication: suggestions coming from you students are more than welcome to improve the future editions of the course.

Please let us know your comments, what you liked and what you did not like in this training course, and if you are interested to have more lessons on specific subjects mentioned in this course on basic communication skills, including networking, training, planning and evaluation activities.

If you wish to send your feedback about the course, or ask questions, you can send an email to **paola.decastro@iss.it** or contact the CASA project team **contact@casaproject.info**, or talk to us when we will be there again!

I am sure you all will get the certificate of accomplishment and terminate the course with full satisfaction and improved communication skills.

Now I will close the course with a quote from Goethe. This quote represents my best wishes for you all to achieve the highest level of success in your activities.

"**knowing is not enough, we must apply;
willing is not enough, we must do**"

And that is the end of the course. Now it's up to you to make the best use of it! Thank you! Best wishes to you all.

Questions on Lesson 5

As for the other lessons, you are now encouraged to discuss these questions in small groups to evaluate your understanding of the lesson, fix new knowledge and see how you can apply it in your daily activity. This exercise will also help you to pass the final test.

5.1. Which is the relationship between communication and evaluation, if any?

a. Evaluation is not associated with communication at all.
b. Communication has a strong influence on evaluation activities.
c. Communication and evaluation do not have anything in common.

5.2. How important is evaluation in planning activities
a. Evaluation is not associated with planning
b. Evaluation is very important in all the phases of the project planning
c. Evaluation is not so important, so you can either do it or not

5.3. In which phase of the project is evaluation recommended?
a. Evaluation is important only in the final stage of a project
b. Evaluation is important in the initial, intermediate and final stages of the project
c. Evaluation is important only in the initial stage of the project

5.4. What can be evaluated?
a. Only structures where you perform your work and organizations
b. You can only evaluate implementation procedures
c. You can evaluate structures and organizations, procedures and results

5.5. Can improved communication result in improved evaluation?
  a. No, communication and evaluation are not related
  b. Yes, improved communication has a direct influence on results achieved
  c. Evaluation is never affected by good communication skills.

5.6. How important is it to discuss working procedures when you do not reach expected results?
  a. It is better not to discuss working procedures at all.
  b. If something does not work, it is not important to discuss working procedures provided that you receive a salary
  c. It is very important to revise working procedures to understand why you did not get expected results.

5.7. What is the objective of a pre-test before starting the course?
  a. Pre-test allows to measure change after the course completion by comparing initial results with final evaluation
  b. Pre-test is a waste of time
  c. Pre-test is not recommended in training courses.

5.8. What is the objective of a final test at the end of the course?
  a. The final test is necessary to celebrate the end of the course
  b. The final test permits to evaluate students' knowledge and understanding of the topics of the course
  c. The final test is not recommended

5.9. How important is celebrating the good results achieved in a project?
  a. It is not important to celebrate
  b. Celebration is important because it represents a form of reward for engagement, reinforces team work and motivation
  c. Celebration at work is not considered important and is not allowed.

Which of the following sentences is correct?
   a. Every person working in a team shares a kind of responsibility
   b. Communication among the different stakeholders in a project is not important to reach good results
   c. Working in network does not provide any advantage.

▶ # TAKE HOME MESSAGES FROM LESSON 5
Evaluation and communication

- It is important to evaluate progress of activity at different stages
- Evaluation allows you to adjust procedures and get better results
- Communication plays a very important role in evaluation activities

Appendix.
Pre-test for basic training in communication

Students shall answer the following questions before starting the course. This is very important to evaluate both their progress and the effectiveness of the course itself. Tutors will collect the answers that will then be compared with the results of the final test.

Pre-test questionnaire

Your name_____

Age_____ Sex _____

Highest level of education_____

Working place _____Role _____

1. Do you think a course in communication will be useful to you?

☐ Yes ☐ No ☐ I do not know

2. Did you attend previous courses in communication?

☐ Yes ☐ No ☐ I do not know

3. Are you interested to get a certificate of accomplishment?

☐ Yes ☐ No ☐ I do not know

4. How long have you been working for CASA project?

☐3 months or less ☐more than 3 months ☐ more than one year

5. Do you know there are different types of communication?

☐ Yes ☐ No ☐ I do not know

6. Do you think is it important to share experiences?

☐ Yes ☐ No ☐ I do not know

7. Do you prefer to work alone or in a team?

☐ Alone ☐ in a team ☐ I do not know

8. If you do not understand something, do you ask for explanations or you keep silent?

☐ Ask explanations ☐ keep silent ☐ I do not know

9. Do you think is it important for a nurse to spend some time to explain patients why they should take therapy?

☐ it is better to say what patients have to do without any explanation

☐ it is important to spend some time to provide explanations

☐ I do not know

10. Do you generally plan your activity considering specific goals?

☐ No, I do not plan my activity considering specific goals

☐ Yes, I generally plan my activity considering specific goals

☐ I do not know

A focus group of CASA project in Mekelle Health Center

Students' notes

It may be very useful for students to take notes during the course. You can write your notes on a notebook or use these pages to fix important concepts you wish to remember, ideas you wish discuss with your colleagues, questions you would like to ask, suggestions for improvement, and any other matter that you think relevant in this course. You can ask questions to your tutor or send an e-mail to: **contact@casaproject.info**

General comments on the Course

_____

_____

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Questions and suggestions on Lesson 1

Why communication is important

Questions and suggestions on Lesson 2

Basic knowledge on communication

Questions and suggestions on Lesson 3

Sharing, networking and training

Questions and suggestions on Lesson 4

Activity planning and SMART goals

Questions and suggestions on Lesson 5

Communication and evaluation

This booklet is a starting point of a training program focused on health workers capacity building within the CASA project, a partnership of the Tigray Health Bureau of Ethiopia, owner of the project, Mekelle University and Istituto Superiore di Sanità (ISS), the National Institute of Health in Italy. The commitment of community health workers and patients' associations is necessary to complete the training program and make it really effective. The booklet is part of a series training initiatives supported by the Tigray Health Bureau.

Paola De Castro is a researcher at ISS. She is the Director of the Publishing Unit and member of editorial committees of different international journals, strong supporter of open access to scientific information and data. She promotes scientific collaboration for public health and dissemination of health information addressed to different targets, in Europe, Africa and Latin America.

Edited by the Publishing Unit, ISS