Replication Guide for Training on Interpersonal Communication Skills to Promote Key Behaviors for Zika, Dengue and Chikungunya Prevention
Acknowledgments

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Before You Start

This Guide, “Interpersonal Communication Skills for the Promotion of Key Zika, dengue and chikungunya Prevention Behaviors,” is for Environmental Health Officers (EHOs) who will be responsible for sharing the guide’s content with colleagues and field teams in their catchment areas. The document includes clear steps for each session, including learning objectives, an overview of the methodology for dissemination and activities. Presentations and notes, facilitator reference materials and other resources needed for the sessions, as well as practical exercises, are also included.

The workshop methodology is based on the principles of adult education, always taking into account what participants already know, think, believe and do. It incorporates participatory and practical exercises to strengthen interpersonal communication (IPC) skills and enhance dialogue with families. The emphasis is on giving field teams tools to promote key behaviors in Zika, dengue and chikungunya prevention in the context of home visits.

Based on the GATHER® methodology, participants are provided with a structure to help manage the information, tasks and activities that are carried out before, during and after each home visit. Special emphasis is placed on the dynamics and interactions between the EHO and the family in order to achieve better impact, including skills and tools like active listening, asking questions and demonstrating behaviors.

The guide is organized into the following sessions:

- **Session 1:** What does it take to change behavior?
- **Session 2:** Key Messages for the Behaviors with the Greatest Potential to Prevent Zika, Dengue and Chikungunya
- **Session 3:** The 7 Cs for Effective Communication
- **Session 4:** Effective Interpersonal Communication (3 Parts)
- **Session 5:** GATHER® Methodology
- **Session 6:** Key Tips for Preventing Zika, Dengue and Chikungunya tool
- **Session 7:** Practicing with the Key Tips tool
- **Session 8:** Using the Key Tips tool during a home visit
- **Session 9:** Reflections on using the tool
- **Annex:** Supporting Materials
**Who is the Guide for?**

The primary audience for this guide is the environmental health officers who will share the content with their other EHO colleagues (who implement activities to prevent arboviruses, including Zika, dengue and chikungunya) to strengthen their interpersonal communication skills and utilize the *Key Tips* tool during household visits.

**Learning objectives**

**General**
1. Improve interpersonal communication (IPC) skills
2. Strengthen capacity to conduct effective household visits that will reduce the risk of Zika and other arboviruses.
3. Feel confident they can engage all members of a household in the Zika, dengue & chikungunya response

**Specifics**

At the end of the sessions, participants will:
1. Become familiar with how to communicate the key messages regarding the behaviors with the greatest potential to prevent Zika, dengue and chikungunya during home visits.
2. Recognize the importance of effective interpersonal communication techniques to promote the adoption of key prevention behaviors.
3. Be able to use the GATHER© methodology to conduct their home visits.
4. Understand the objectives, content and use of the *Key Tips for Preventing Zika* tool to support home visits regarding key Zika, dengue and chikungunya prevention behaviors.
# Overview of Learning Sessions

<table>
<thead>
<tr>
<th>Time</th>
<th>Session Title</th>
<th>Methodology</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Laying the Groundwork</strong></td>
<td></td>
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<tr>
<td></td>
<td><strong>Session 1</strong></td>
<td>● Introduction -- what does it take to change behavior? ● Reflecting on our own experiences</td>
</tr>
<tr>
<td></td>
<td><strong>Session 2</strong></td>
<td>● Key messages for behaviors with the greatest potential to prevent Zika, dengue and chikungunya ● Presentation on the Zika Priority Behavior Matrix ● Group work exploring barriers and challenges to practicing the behaviors</td>
</tr>
<tr>
<td></td>
<td><strong>Session 3</strong></td>
<td>● 7 Cs for Effective Communication ● Presentation on the 7 Cs ● Group Work: the 7 Cs in action</td>
</tr>
<tr>
<td></td>
<td><strong>Session 4</strong></td>
<td>● Elements of Effective Interpersonal Communication (IPC): Parts I and II ● Presentations on effective IPC ● Group work exploring IPC during household visits</td>
</tr>
<tr>
<td></td>
<td><strong>Session 5</strong></td>
<td>● GATHER© Methodology for Home Visits ● Presentation on GATHER© - an IPC technique for successful household visits ● Group work on each state of the GATHER© process</td>
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<tr>
<td></td>
<td><strong>Putting It into Practice</strong></td>
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<tr>
<td></td>
<td><strong>Session 6</strong></td>
<td>● Key Tips for Preventing Zika, Dengue &amp; Chikungunya: A Guide for Home Visits ● Presentation on the Tips Guide</td>
</tr>
<tr>
<td></td>
<td><strong>Session 7</strong></td>
<td>● Practicing with the Key Tips tool ● Group Work and role play to practice using the Tips Guide</td>
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<tr>
<td></td>
<td><strong>Session 8</strong></td>
<td>● Practice in the Field ● Household visits using Key Tips tool ● Reflection</td>
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<tr>
<td></td>
<td><strong>Session 9</strong></td>
<td>● Reflections on Using the Tool</td>
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</tbody>
</table>
What does it take to change behavior?

**Duration:** 15 minutes

**Learning objective**
Become familiar with other participants in the room and start thinking about the concept of behavior change.

### Overview of Session

| ● Introductions | • Welcome participants and lead introductory activity  
|                 |   o Ask participants to think about the last time they tried to change their own behavior. What helped them to change? What made it difficult?  
|                 |   o In plenary, have individuals share the facilitators and barriers to behavior change and list it out on flipcharts.  
|                 |   o Conclude the discussion by noting that behavior change is difficult. During EHO household visits, keep in mind that some of these behaviors may be difficult to adopt and IPC is a tool to help address family member’s barriers and doubts to adopting prevention practices. |

**Presentation & Notes**
• n/a

**Group Work**
• n/a

**Facilitator Reference Material**
• n/a

**Handouts**
• n/a
Key messages for behaviors with the greatest potential to prevent Zika, dengue and chikungunya

Duration: 45 minutes

Learning objective:
Become familiar with the evidence-based behaviors with the greatest potential to prevent Zika, dengue and chikungunya.

Overview of Session

<table>
<thead>
<tr>
<th>Introduce prevention behaviors (10 minutes)</th>
<th>Presentation: prevention behaviors, emphasizing the four priority behaviors of the workshop:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Use repellent for duration of pregnancy</td>
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<tr>
<td></td>
<td>- Remove unintentional standing water</td>
</tr>
<tr>
<td></td>
<td>- Cover containers</td>
</tr>
<tr>
<td></td>
<td>- scrub containers with brush and detergent</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Group work</th>
<th>Assign each table one of the four behaviors and write on flipchart what they have heard about the following based on their interactions with households:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Attitudes and beliefs about the behavior</td>
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<tr>
<td></td>
<td>- Perceived effectiveness of the recommended behaviors</td>
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<tr>
<td></td>
<td>- Feasibility of doing the behavior</td>
</tr>
<tr>
<td></td>
<td>- External barriers to practicing the behaviors</td>
</tr>
</tbody>
</table>

Materials:
- Markers
- Flipcharts

Presentation & Notes
- Session 2_Key Messages

Group Work
- The Four Priority Behaviors in Barbados

Facilitator Reference Material
- Detailed descriptions of four priority behaviors

Handouts
- Optional: Handout with descriptions of four priority behaviors
**Presentation File Name:** Session 2 Key Messages

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
</tr>
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</table>
| 2       | ![Image](image1.png) | - When Zika arrived, it began as an emergency public health response  
- Little was known because Zika appeared to only be in a few countries  
- We needed to act quickly and accumulate lessons learned |
| 3       | ![Image](image2.png) | - An initial review of the existing materials revealed that over 30 behaviors were being promoted across the Zika response.  
- Not all were efficacious or applicable in every context. Many lacked precision.  
- It was difficult for individuals to manage the large amounts of information  
- Thus, it generated a need to reduce the list into a more manageable one – or to prioritize behaviors |
Following a comprehensive review of the evidence and consultations with USAID and NGOs working in arbovirus prevention, this list of seven behaviors with the greatest potential for Zika, dengue, and chikungunya prevention was agreed upon.

The behaviors that we will be focusing on as most relevant to the Barbados-context are highlighted.

Once the behaviors were prioritized based on efficacy, potential impact and feasibility, the technical specifications were developed.

This document allows those working in Zika and arbovirus prevention to operationalize the behavior matrix with specifics on how to perform each behavior correctly.
**Group Work**

**Presentation File Name:** Session 2_Key Messages

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
</tr>
</thead>
</table>
| 6       | ![Image](image1.png) | • Why is changing our behavior so hard?  
  o The attitudes people have, norms they hear in the community, what they see others doing  
  • The reason is rarely that people are lazy. There are many factors and perspectives that influence behavior change |
| 7       | ![Image](image2.png) | • Assign each table one of the four behaviors and write on flipchart what they have heard about the following based on their interactions with households:  
  o Attitudes and beliefs about the behavior  
  o Perceived effectiveness of the recommended behaviors  
  o Feasibility of doing the behavior  
  o External barriers to practicing the behaviors  
  • Have each group report back |
Facilitator Reference Materials

The Four Priority Behaviors
(consider handing out during session)

Behavior 1: Use of repellent during pregnancy

- Repellents prevent mosquito bites and reduce the risk of vector transmission of Zika.
- Recommended repellents: DEET, Picaridin, IR3535 or lemon eucalyptus oil.
- These repellents are safe to use during pregnancy.
- DEET should not be mixed with sunscreen.
- Review the product instructions and use exactly as indicated.
- Repellents must be applied several times a day to be effective.
- Apply more often if you sweat, swim, or change clothes.
- Both the pregnant women and their partners should use the repellent.
- Women who want to get pregnant should also use repellent.

Remember: There are barriers related to the price of the product and applying the product frequently and systematically.
Key audiences: Pregnant women and their partners

Behavior 2: Remove unintentional standing water both inside and outside of the house, and in communal areas

- Unintentional standing water must be removed weekly (once a week).
- Stagnant water tends to accumulate in tires, bottles, water basins, empty tree trunks, gutters, potholes, large buckets, and other containers without lids.
  Rainwater also accumulates in the lids of water containers, drums or storage tanks if they are in poor condition or are designed in a way that allows the accumulation of water.
- Eliminating standing water in containers in community areas requires a constant and coordinated effort with different actors in the community to eliminate the standing water at schools, hospitals, and other communal sites on a weekly basis.

Remember: People accumulate a lot of items that may be unusable or should be discarded in their yards, and these items become breeding grounds for mosquitoes. The constant elimination of these items must be a priority.
Key audience: Families
**Behavior 3:** Cover water storage containers at all times with a cover that is tight fitting and does not warp or touch the water.

- Water containers should be protected at all times with a lid that fits properly and does not submerge or touch the water. Lids should seal very tightly and be kept on at all times.
- If the lids are in poor condition, they can become mosquito breeding grounds. Lids should be replaced if they are bent or broken.
- The use of lids can work best for long-term water storage containers, i.e., those used infrequently (once a week or less) because the lids are handled less.
- For short-term water storage containers, i.e., those used several times a day or week, the effectiveness covering the lids is reduced because opening and closing the lid increases the chances that it will not be put back on tightly and the wear and tear causes the lid to deteriorate more quickly.
- We must constantly check and be vigilant to make sure there is no hidden mosquito breeding grounds on the lid itself and in any other container that is covered with a lid.

**Remember:** Many water containers that people use do not have lids at all, and some containers are difficult to cover with a tight seal.

**Key audience:** Families

**Behavior 4:** Remove mosquito eggs from the walls of frequently used water containers on a weekly basis

- There are 4 techniques to eliminate mosquito eggs, presented here in order of most effective to least effective:
  - **Technique** - Scrub with bleach and detergent.
  - **Technique** - Dab bleach around the walls just above the water line.
  - **Technique** - Scrub the walls of the container with detergent.
  - **Technique** - Scrub/brush container walls
- Descriptions of how to implement these techniques can be found in the communication tool called “Key Tips for Preventing Zika” as well as the conditions to be considered when choosing which technique to use for frequently used water containers in each household.

**Key audience:** Families
The 7 Cs for Effective Communication

Duration: 45 minutes

Learning objective:
To become familiar with 7 key aspects of effective communication and how these influence/apply to communication during household visits.

<table>
<thead>
<tr>
<th>Overview of Session</th>
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</thead>
<tbody>
<tr>
<td>• Introduction to the 7 Cs</td>
</tr>
<tr>
<td>• Presentation: definition of communication &amp; introduction to the 7 Cs for effective communication</td>
</tr>
<tr>
<td>• Group work</td>
</tr>
<tr>
<td>• Divide into small groups and give each group one of the 7 Cs</td>
</tr>
<tr>
<td>• Have the group brainstorm how they use this C (e.g. capture, clarify, etc.) and apply it in their household visits.</td>
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</tbody>
</table>

Presentation & Notes
- Session 3_The 7Cs

Group Work
- How do you use the 7Cs currently?

Facilitator Reference Material
- n/a

Handouts
- n/a
### Presentation & Notes

**Presentation File Name:** Session 3_The 7Cs

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
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</thead>
</table>
| 2       | ![Image](image1.png) | - While we all communicate, how is communication defined by Webster’s—a leading dictionary of English language?
- It’s really about expressing ideas and exchanging feels, so it’s important that we are able to do this well.
- When we communicate we want our ideas and feeling to be well understood so let’s talk about techniques to improve our communication. |
| 3       | ![Image](image2.png) | - A handy guide is the **7 Cs** for effective communication
- Each element can enhance the way we communicate and help ensure that our exchange of idea and feelings with colleagues is well understood.
- We will review each one to unpack what each element means and how to use it effectively. |
| 4       | ![Image](image3.png) | - **Capture** Attention – break the ice and capture the family’s attention when visiting them for the first time to talk about Zika.
- Start by talking about something that is interesting to the family to get their attention and engage them in conversation. |
| 5 | • **Clarify** the message – clarify myths and incorrect information or beliefs that families have about Zika.  
• A message should convey a single important point--not be loaded with a lot of technical information that may distract and confuse the audience.  
• If technical information is shared, communicate in a way that is easy to understand. |
|---|---|
| 6 | • **Communicate** the benefit of adopting the behavior.  
• People need strong motivation to adopt new behaviors.  
• The best motivator is the expectation of personal gain. |
| 7 | • **Consistency** counts – consistency in the message across different channels and information sources is important.  
• A message that is repeated many times, even with minor variations but always with consistent information, is likely to be remembered more by people. Messages you hear only once in a while are forgotten. |
<table>
<thead>
<tr>
<th>Page</th>
<th>Image</th>
<th>Text</th>
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</table>
| 8    | ![Image](image1.png) | **Cater to the Heart and Mind** – appeal to the hearts & minds of families when talking to them about the need to adopt behaviors to prevent Zika.  
Most people are moved by both emotion and reason. A message that elicits emotion can be effective because people learn when their emotions are awakened.  
If you appeal to the rational and emotional at the same time, the message will likely be even more powerful and will endure even after the emotional part has passed. |
| 9    | ![Image](image2.png) | **Create Trust — to establish an environment of trust and credibility.**  
Information provided to families must come from a reliable and trustworthy source.  
If those communicating the message are people similar to the audience, it's even more credible. |
| 10   | ![Image](image3.png) | **Call to Action** – after hearing a motivating message, people need to know how to begin and what to do - who to call, what to look for, where to go for assistance or guidance. |
### Group Work

**Presentation File Name:** Session 3_The 7Cs

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
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</table>
| 2       | ![Image](image_url) | - Divide participants into small groups and give each group one of the 7 Cs.  
- Have the group brainstorm how they use this aspect of communication (e.g. capture, clarify, etc.) and apply it in their household visits.  
- Each group shares back one example of how they have applied this aspect of communication in their household visit. |
Elements of Effective Interpersonal Communication: Part I

Duration: 10 minutes

Learning objective:
To reflect on interpersonal communication from different perspectives and understand how to integrate elements of IPC into their visits with household members.

Overview of Session

<table>
<thead>
<tr>
<th>Group work</th>
<th>The Good Counselor Activity</th>
</tr>
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</table>

Materials:
- Markers
- Flipchart paper
- Sticky Notes

Presentation & Notes
- Session 4 _Elements of Effective IPC

Group Work
- The Good Counselor Activity

Facilitator Reference Material
- n/a

Handouts
- n/a
### Group Work

**Presentation: Session 4_Elements of Effective IPC**

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
</tr>
</thead>
</table>
| 2       | ![Image](TheGoodCounselorActivity.png) | - Ask the participants to consider the following scenario:
  - Think about someone you go to for advice and what motivates you to talk to them. What do you appreciate about the qualities of the person? About the interaction?
  - Have them to write a maximum of three qualities on sticky notes.
  - Put these responses up on a flipchart. The facilitators should help group similar answers together as they are collected. Share and discuss.
  - End by pointing out that these responses are examples of good IPC. |
Elements of Effective Interpersonal Communication: Part II

Duration: 20 minutes

Learning objective:
To reflect on interpersonal communication from different perspectives and understand how to integrate the elements into engagement and dialogue with household members.

Overview of the session:

<table>
<thead>
<tr>
<th>Overview of Session</th>
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<tbody>
<tr>
<td>• Introduction to IPC</td>
</tr>
<tr>
<td>• Presentation: definition of interpersonal communication and introduction to the four cross-cutting elements of IPC</td>
</tr>
<tr>
<td>• Cross-cutting Elements of IPC Partner Activity</td>
</tr>
<tr>
<td>• Participants reflect in pairs about how they’ve used the cross-cutting elements in their work</td>
</tr>
</tbody>
</table>

Presentation & Notes
- Session 4_Elements of Effective IPC

Group Work
- Cross-cutting Elements of IPC Partner Activity

Facilitator Reference Material
- n/a

Handouts
- n/a
## Presentation: Session 4_Elements of Effective IPC

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<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
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</thead>
<tbody>
<tr>
<td>3</td>
<td><img src="image3.png" alt="Image" /></td>
<td>• Definition of interpersonal communication</td>
</tr>
</tbody>
</table>
| 4       | ![Image](image4.png) | • There are a few styles of communication. One is facilitative.  
• There are four cross-cutting elements that make up facilitative communication.  
• Another style is directive communication, which is one-way, very directive, and the evidence has shown that it is less effective  
• So, let’s talk about what makes up good, facilitative communication  

For the following four slides, share the images of the 4 cross-cutting characteristics of good interpersonal communication (slides 5-8) and ask participants what they think each image on each poster represents. Once they respond, discuss each one of the four features, including the information listed below.
• Communication – verbal communication is the use of words and nonverbal communication is the use of gestures, signs and body language.
• EHOs must know how to "listen" to both forms of communication.
• Being aware of nonverbal cues helps you understand the other person better, and your own body language, gestures, tone of voice, and the words you choose influence communications and relationships, and can reinforce, contradict, substitute, supplement, or emphasize verbal communication.

• Active Listening – pay attention to what people say and remember it. Don't think about what you're going to say next while other people are talking. Concentrate on what is being said and what it implies. Listen actively, consciously.

• Do Not Judge – recognize our beliefs, ideas, attitudes, values and feelings, but do not contaminate the dialogue with our particular opinion. Be cautious of your personal opinions and do not judge.
Session 4

- **Respect Differences** – be aware and respectful of the differences between you (the EHO), and the other person.
- There are cultural, educational, social and other differences. Keep them in mind when giving advice but do not create a divide in the relationship with the other person.
- We must respect and value the people we visit as our peers. Do not fight or ridicule and do not be disrespectful of the beliefs of others.
- **Summarize** – reinforce the need for people to practice these four elements during home visits.
### Group Work

**Presentation: Session 4_Elements of Effective IPC**

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
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</thead>
</table>
| 9       | ![Image](image.png) | • Break participants into pairs  
• **Ask:** What are some of the things you’ve done during a household visit that falls under each of these categories (cross-cutting elements) that have made for a better visit? What are the challenges you’ve faced? How have you tried to overcome these challenges?  
• As one partner shares their specific experience, the other should be practicing active listening, demonstrating good verbal and non-verbal communication, while not being judgmental.  
• Ask for volunteer pairs to share what they’ve discussed and how they used the four elements. |
GATHER® Methodology for Home Visits

Duration: 1 hour

Learning objective:
To become familiar with the GATHER® methodology to utilize during household visits.

<table>
<thead>
<tr>
<th>Overview of Session</th>
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<tbody>
<tr>
<td>Reflection Activity</td>
</tr>
<tr>
<td>Introduce GATHER© Methodology</td>
</tr>
<tr>
<td>Role Play Exercise</td>
</tr>
</tbody>
</table>

Materials:
• Handouts with steps of GATHER© listed

Presentation & Notes
• Session 5_GATHER

Group Work
• Reflection Activity
• Role Play Exercise

Facilitator Reference Material
• Case Study

Handouts
• GATHER© Handout
Presentation: Session 4_GATHER Methodology

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<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
</tr>
</thead>
</table>
| 4       | ![GATHER Image](image) | • GATHER© is a 7-step process to organize the interpersonal communication encounter  
• It comes from counseling in FP service and has been adapted to many interpersonal communication contexts |
| 5       | ![GATHER Image with X](image) | • GATHER© is NOT two people talking at each other.  
• It is a deliberate process that incorporates the principles of good interpersonal communication that we have been discussing into clear steps. |
| 6       | ![Greet the Household Image](image) | • Greet the householder – introduce yourself with kindness and respect to the person who opens the door, stating your name, the work you do, the purpose and approximate length of the visit.  
• Agree with the family to do the visit at that time or schedule a time to come back.  
• Ask who is at home and invite them to join in the conversation, especially if there are any pregnant women.  
• Greet each person in the home and call them by name. |
| 7 | Create an environment where the person feels comfortable, listens, and trusts you.  
|   | Ask them about their concerns, information needs and doubts about Zika prevention.  
|   | Encourage them to ask questions and listen carefully to what they say.  
|   | Maintain eye contact with the person, respect all their opinions and do not scold them.  
|   | Ask permission to take a tour of the house and observe how water is stored to identify possible mosquito breeding sites. If you find any, explain the importance of eliminating them.  
|   | Congratulate the family if they have adopted behaviors to prevent Zika.  
|   | Tell them – explain the desired behavior in simple language and provide other information that may be difficult to understand but will help the family take action (e.g., congenital Zika syndrome).  
|   | Gently and tactfully correct them when they are doing something wrong and explain how to correct their behavior.  
|   | Use educational materials such as posters, brochures, flip charts and cell phone messages.  
|   | Congratulate the person for good behaviors.  
<p>|   | Ask if they have any questions and answer them. |
| 8 |</p>
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</thead>
</table>
| **Help** – along with the family, help identify the solution, steps, and follow-up needed to achieve the desired behavior.  
- Explain the benefits of the new behavior for the family and especially for the pregnant mother and her unborn baby.  
- Encourage and motivate behavioral change as well as providing information. | **9** | ![Image](https://via.placeholder.com/150) |
| **Explain** – demonstrate step by step how to correctly perform the desired behavior to prevent Zika (use of repellents, use of condoms, eliminating mosquito breeding sites, covering stored water containers, etc.).  
- Give the person an opportunity to practice the new behavior with you  
- Help the person if necessary and encourage them to reassure them that they can do it. | **10** | ![Image](https://via.placeholder.com/150) |
| **Review** – what was discussed and ask the person to highlight the most important points and agreements regarding the behaviors discussed.  
- Actively listen to the person to make sure they remember and have understood the information and the steps to follow. | **11** | ![Image](https://via.placeholder.com/150) |
**Group Work**

**Presentation: Session 4_GATHER Methodology**

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td><img src="Image" alt="Reflection Activity" /></td>
<td><strong>Reflection Activity</strong>&lt;br&gt;• Ask individuals to reflect on their current household visits and write down the steps they go through.&lt;br&gt;• Have three people present back&lt;br&gt;• Relate the activity to how everyone has a system they follow when approaching visits</td>
</tr>
<tr>
<td>13</td>
<td><img src="Image" alt="GATHER Role-Play Exercise" /></td>
<td><strong>GATHER© Role-Play Exercise</strong>&lt;br&gt;• Divide participants into six groups and assign each group a step of GATHER©.&lt;br&gt;• Read out the scenario on the next slide.&lt;br&gt;• Each group should prepare a brief role-play demonstrating how they would implement their “letter” in the GATHER process, if they were to visit Peter and Mary’s household.&lt;br&gt;• Groups present their role-play, share observations and experiences in plenary.</td>
</tr>
</tbody>
</table>
Case Study for GATHER® Role-Play Exercise

Peter and Mary have lived together in the same house for many years with their 3 children, aged 8, 12 and 16. Peter’s mother recently moved in after her husband died. Peter is a taxi driver and often keeps his used tires in the yard. Mary makes and sells her special hot sauce on local market days.

A few years ago, when there was an outbreak of dengue fever in their community, they were visited by EHO, who told them how important it was to eliminate standing water from the objects in the yard because they are mosquito breeding grounds. Peter and Mary followed their advice and cleaned up the yard. Over time, they became less vigilant about keeping the yard clean and now Peter is back to storing used tires in the yard; Mary keeps empty bottles and jars there as well in case she needs them.
Session 5

Handouts

GATHER® Handout

G: Greet the person in a friendly and respectful way
- Introduce yourself with kindness and respect to the person who opens the door, stating your name, the work you do, the purpose and approximate length of the visit.
- Agree with the family to do the visit at that time or schedule a time to come back.
- Ask who is at home and invite them to join in the conversation, especially if there are any pregnant women.
- Greet each person in the home and call them by name.
- Create an environment where the person feels comfortable, listens, and trusts you

A: Ask the person about their needs regarding behaviors to prevent Zika
- Ask them about their concerns, information needs and doubts about Zika prevention.
- Encourage them to ask questions and listen carefully to what they say.
- Maintain eye contact with the person, respect all their opinions and do not scold them.
- Ask permission to take a tour of the house and observe how water is stored to identify possible mosquito breeding sites. If you find any, explain the importance of eliminating them.
- Congratulate the family if they have adopted behaviors to prevent Zika

T: Tell them about what they can do to prevent Zika
- Explain the desired behavior in simple language and provide other information that may be difficult to understand but will help the family take action (e.g., congenital Zika syndrome).
- Gently and tactfully correct them when they are doing something wrong and explain how to correct their behavior.
- Use educational materials such as posters, brochures, flip charts and cell phone messages
- Congratulate the person for good behaviors.
- Ask if they have any questions and answer them.

H: Help them find a solution
- Along with the family, identify the solution, steps, and follow-up needed to achieve the desired behavior.
- Explain the benefits of the new behavior for the family and especially for the pregnant mother and her unborn baby.
- Encourage and motivate behavioral change as well as providing information

E: Explain by demonstrating how the practice should be done, step by step, and explain why
- Demonstrate step by step how to correctly perform the desired behavior to prevent Zika (use of repellents, use of condoms, eliminating mosquito breeding sites, covering stored water containers, etc.).
- Give the person an opportunity to practice the new behavior with you
- Help the person if necessary and encourage them to reassure them that they can do it.
R: Review what was discussed and return
- Review what was discussed and ask the person to highlight the most important points and agreements regarding the behaviors discussed.
- Actively listen to the person to make sure they remember and have understood the information and the steps to follow.

Agree on commitments and the next visit
- Along with the person or family, decide and agree on the behavior and actions they commit to adopt.
- If there is more than one behavior involved, choose one or two that will be of greater benefit to the situation in each household.
- Ensure that all required information is filled in on the visit form.
- Schedule a date for the follow-up visit.
- Thank family members for their receptivity and for taking the time to participate in the conversation.
Key Tips for Preventing Zika, Dengue and Chikungunya: A Guide for Home Visits

Duration: 30 minutes

Learning objective:
Understand the objectives, content and use of the “Key Tips” tool

Overview of Session

| Key Tips Tool Presentation | • Introduce the Key Tips Tool, emphasizing how it provides technical guidance on performing the behaviors and steps for EHOs to effectively use GATHER©  
|                          | • Walk through the tool page-by-page, highlighting key aspects:  
|                          |   o The tool begins with a How to Use section. Show the front of the card, which has more images, and explain that the front should be shown to the audience, while the back of the card has more specific information for the EHOs.  
|                          |   o Point out that each card also includes icons at the top, identifying key audiences for that behavior.  
|                          |   o Review the first few cards which focus on disease transmission and the mosquito life-cycle.  
|                          |   o Highlight the cards for the four priority behaviors for Barbados. |

Presentation & Notes
• Session 6_Key Tips

Group Work
• n/a

Facilitator Reference Material
• n/a

Handouts
• n/a

Other
• Key Tips Tool
### Presentation: Session 6_Key Tips

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
</tr>
</thead>
</table>
| 2       | ![Image](Key_TipsTool.png) | - The Key Tips Tool was developed for individuals working in Zika, dengue and chikungunya prevention, and vector control, to help share specific behaviors  
- It allows EHOs to explain the technical specifications to householders in a clear and simple manner. |
| 3       | ![Image](Key_TipsCover.png) | - This is the cover of the Key Tips tool |
| 4       | ![Image](Key_TipsCards.png) | - The Key Tips tool includes information on how to organize a home visit using the steps of GATHER© to promote the key behaviors for Zika and arbovirus prevention  
- The first few pages give guidance to the EHO, and the remaining pages give details on the key prevention behaviors |
<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Session 6</strong></td>
<td><strong>Figure 5</strong></td>
<td></td>
</tr>
</tbody>
</table>

- Each behavior has icons in the top right corner of the card to specify the audience(s) for the behavior. This will help EHOs integrate more individuals into the visit, helping achieve a “whole family approach.”
- Each card has two sides, one with images to show to the family when speaking them.
- The other side includes information for the EHO to help you correctly discuss the behavior with.

| **Figure 6** |  

- Before the cards on the behaviors, there are a few introductory cards, including one on what Zika is and how it is transmitted.
- As you can see, the front of the card has some text, but mostly pictures to help the audience understand what you, the EHO, are explaining.

| **Figure 7** |  

- And the back of the card has much more detail, to help you explain and answer questions that your audience may have.
The Key Tips Tool also includes an explanation of the mosquito life-cycle, so that EHOs can help the audience understand the different phases in which they may find a mosquito around their home.

The EHO side of the mosquito life-cycle card.

An example of a prevention behavior card. This card shows common areas where people should search for mosquito-breeding sites in and around their homes.

On the back of the card you can see the key audiences for this behavior and the key information for the EHO to relay to the audience.

[Continue to walk through the cards for the other behaviors using the slides in the presentation]
Practicing with the Key Tips Tool

Duration: 1 ½ hour

Learning objective:
Practice using the “Key Tips” tool.

Overview of Session

| Practicing with the Key Tips tool | Give participants time to become familiar with using the tool.  
| Two rounds of group practice, with group members playing different roles: one observer, one EHO, and 1-2 household members |

Presentation & Notes
- Session 7_Practicing with the Key Tips Tool

Group Work
- Role Play Exercise: Round 1
- Role Play Exercise: Round 2

Facilitator Reference Material
- Role Play Scenarios

Handouts
- GATHER® Observation Checklist for Household Visits
- How to Provide Feedback
- Challenges during Household Visits

Other
- Key Tips Tool
Presentation & Notes

**Presentation:** Session 7_Practicing with Key Tips Tool

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
</tr>
</thead>
</table>
| 2       | ![Observation Checklist](image) | • We are now going to take some time to practice with the Key Tips Tool  
• We’ll break into groups and role-play a home visit, where some of us will be the householder, one person will be the EHO, and one person in the group will be an observer  
• The observer will use this checklist in order to help make sure we are following the steps of GATHER© as we practice with the tool |
| 3       | ![Giving Constructive Feedback](image) | • Once the role play has finished, the observer should provide constructive feedback to the EHO  
• Walk the participants through the “How to Provide Feedback” Handout |
Session 7

Group Work

**Presentation:** Session 7_Practicing with Key Tips Tool

<table>
<thead>
<tr>
<th>Slide #</th>
<th>Image</th>
<th>Content/Notes</th>
</tr>
</thead>
</table>
| 4       | ![Role Play Exercise](image) | **Introduce the role play exercise**  
**Round 1**  
- Split participants into groups of at least 3 people (1 EHO, 1 observer, 1 household member)  
- Assign each group a priority behavior  
- Individuals assigned to EHO and household member roles practice going through all GATHER© steps for given behavior while observer fills out checklist. Encourage the “household member” to draw from their experiences and portray challenges they face in their visits.  
- Both the EHO and the household member can use the “Challenges During Household Visits” sheet to practice using good IPC in difficult scenarios.  
- Have half the groups present their role-play back in plenary.  
- Plenary discussion on challenges, areas for improvement, etc.  

**Round 2**  
- Groups repeat exercise, but with a different behavior than the last session & switching roles within the practice  
- The other half of the groups present their role-play in plenary  
- Plenary discussion on challenges, areas for improvement, etc.

**Note:** Three scenarios are provided to help guide role play scenarios if desired.
Facilitator Reference Material

Role Play Scenarios

Scenario #1
- Single mom with three kids
- Three drums in the yard, one covered with mesh, one covered with corrugated metal, and the last one covered with broken black container lid. She uses one of these drums for her garden in the backyard.
- Only cleans her containers when they are completely empty of water
- She knows about Zika, dengue and chikungunya but thinks they are transmitted through the air

Scenario #2
- Couple expecting their first child
- They are excited about having a baby, but are also concerned about the costs of their growing family.
- They have heard about dengue and chikungunya, but don’t think Zika is a concern on the island anymore
- Husband is a mechanic and works on the cars at the house, so he has spare tires in the yard
- The wife likes taking care of her plants in and outside of the house

Scenario #3
- Mom, dad, and two kids in primary school.
- The mom has spoken with the EHO previously and the EHO has shown her the larvae and pupae in their open drums. She tries to scrub the containers and cover them to keep out mosquitoes, but the EHO still finds more mosquitoes on a return visit. She has tried to show her husband but she hasn’t been able to convince him that it’s a priority for their family.
- She wants a black tank connected via pipe to the house so they don’t have breeding sites anymore, but the husband will not invest their financial resources toward that purchase.
- The husband is home today during the visit.
# Handouts

**GATHER® Observation Checklist for Household Visits**

<table>
<thead>
<tr>
<th>Points to Observe</th>
<th>Score: ✓, 0, NA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>G</strong> Greet the person with kindness and respect</td>
<td></td>
</tr>
<tr>
<td>1 Greeted householders with kindness and respect</td>
<td></td>
</tr>
<tr>
<td>2 Introduced themselves appropriately (name, project/institution, etc.)</td>
<td></td>
</tr>
<tr>
<td>3 Explained the purpose of the visit</td>
<td></td>
</tr>
<tr>
<td>4 Invited other family members who were present to participate</td>
<td></td>
</tr>
<tr>
<td><strong>A</strong> Ask the person about their needs regarding Zika prevention</td>
<td></td>
</tr>
<tr>
<td>5 Asked open questions to understand the family situation (barriers and motivators)</td>
<td></td>
</tr>
<tr>
<td>6 Listened actively and with interest (e.g., eye contact)</td>
<td></td>
</tr>
<tr>
<td>7 Used language that is simple and appropriate</td>
<td></td>
</tr>
<tr>
<td>8 Used non-verbal language that is appropriate</td>
<td></td>
</tr>
<tr>
<td><strong>T</strong> Tell them about what they can do to prevent Zika</td>
<td></td>
</tr>
<tr>
<td>9 Informed the person(s) about the behaviors that were relevant to them and that they could attempt to practice</td>
<td></td>
</tr>
<tr>
<td>10 Used communication tools and materials well to help explain the topics</td>
<td></td>
</tr>
<tr>
<td>11 Checked that the concepts were understood by asking questions</td>
<td></td>
</tr>
<tr>
<td>12 Correctly described the content of the messages</td>
<td></td>
</tr>
<tr>
<td>13 Clarified myths and incorrect information/beliefs about the topics</td>
<td></td>
</tr>
<tr>
<td><strong>H</strong> Help them make decisions</td>
<td></td>
</tr>
<tr>
<td>14 Identified solutions to the barriers and offered steps to help adopt the behavior(s)</td>
<td></td>
</tr>
<tr>
<td>15 Discussed the benefits of adopting the behavior(s)</td>
<td></td>
</tr>
<tr>
<td>16 Allowed the person(s) to state what behavior(s) they would like to attempt or try to do</td>
<td></td>
</tr>
<tr>
<td><strong>E</strong> Explain by demonstrating the behavior, step by step</td>
<td></td>
</tr>
<tr>
<td>17 Demonstrated how to carry out the selected behavior(s)</td>
<td></td>
</tr>
<tr>
<td>18 Asked the person(s) to describe or perform the behavior(s) to verify comprehension of the steps</td>
<td></td>
</tr>
<tr>
<td>19 Guided the person(s) to state what they will commit to doing</td>
<td></td>
</tr>
<tr>
<td><strong>R</strong> Review what was discussed and return</td>
<td></td>
</tr>
<tr>
<td>20 Reviewed the most essential points that were discussed and agreed to during the visit</td>
<td></td>
</tr>
<tr>
<td>21 Verified that the person(s) understood the commitment by asking questions</td>
<td></td>
</tr>
<tr>
<td>22 Agreed to a follow-up visit, set the day and time</td>
<td></td>
</tr>
<tr>
<td>23 Congratulated the person(s) on their efforts and thanked them for their time</td>
<td></td>
</tr>
</tbody>
</table>

**Total number of items with a ✓ (check)**

**Total number of items with a 0**

*Post-visit feedback:* Congratulate the person for all of the items marked with a ✓ (check), and work with them to make commitments to improve all those items marked with 0.
How to Provide Feedback

Follow these principles to provide adequate feedback:

- Make positive comments about what was done well - "I like it, it was good, that helps, that was excellent, did you believe it?"
- Do not give feedback in a threatening or complaining manner, but in a kind and gentle manner to avoid creating embarrassment and making the person feel bad. If the performance was poor, emphasize the improvements and positive changes observed since the last supervision and then ask how the aspects that need even more work could be improved.
- For aspects that were weak, first ask the person how they feel they did with the action. When the person identifies their own mistakes and reflects on them, it gives them the opportunity to ask themselves how they are doing. These particular aspects can be followed up on the next visit. For example, how do you think it went with...? What did you do to improve...? Do you remember the other techniques we learned that you can put into practice...? What other things can you do...? How do you feel about this or that aspect? What can you do to improve ......?
- Ask why they think there has been little/no progress on those specific aspects that were observed during the supervision (as compared to past supervision, if applicable). This will help to identify potential solutions: whether more training, practice, job aids or reminders are needed to perform better.
- Strike a good balance between positive and negative feedback. People who review and talk more about what they did well rather than focusing solely on what they did wrong are more likely to improve their performance than those who spend all their time talking about what they did wrong.
- Agree on a commitment to improve performance and put it in writing. For example: Shall I come back next month to see if you incorporated this or that element? Do you agree to spend time improving this?
- At the end, ask them to summarize the parts of the visit that went well and those where improvement is required. This will help them to be more committed to what they need to do better the next time.
### Challenges During Household Visits

The table below offers some ideas for handling the challenges volunteers may encounter during home visits.

<table>
<thead>
<tr>
<th>CHALLENGE</th>
<th>SUGGESTIONS FOR HANDLING IT</th>
</tr>
</thead>
<tbody>
<tr>
<td>The family does not want you to visit them.</td>
<td>Explain that you want to talk with the family about how to help them prevent the Zika virus. Thank them and say you’ll come back in two days.</td>
</tr>
<tr>
<td>The family is not interested in the subject.</td>
<td>Talk about the health risks posed by the Zika virus, especially if there are pregnant women in the home.</td>
</tr>
<tr>
<td>They think repellent will hurt the pregnant mother and her baby.</td>
<td>Explain that the repellent you apply to the skin is not absorbed into the body and will not touch the baby. In fact, if the mother uses repellent, it protects the baby from catching the Zika virus and developing microcephaly.</td>
</tr>
<tr>
<td>Mistaken beliefs about transmission and prevention.</td>
<td>Use your communication tools and materials to explain the correct information about how the Zika virus is transmitted and prevented.</td>
</tr>
<tr>
<td>Persons do not feel vulnerable to being infected or affected by the Zika virus.</td>
<td>Explain that Zika can affect anyone and especially pregnant mothers or those who are planning to become pregnant. In these cases, it can cause Zika Congenital Syndrome, including microcephaly which can affect the health and development of the unborn baby.</td>
</tr>
<tr>
<td>Reluctance to try a behavior.</td>
<td>Negotiate a single action as a first step that leads to the behavior.</td>
</tr>
<tr>
<td>Behaviors in the home are influenced by an older person such as a grandmother (or mother-in-law) or neighbors.</td>
<td>Include that person in the home visit as well and clarify misconceptions and mistaken beliefs.</td>
</tr>
<tr>
<td>Person does not feel capable of adopting the promoted behavior.</td>
<td>Demonstrate how to carry out the behavior and offer support in different ways to accompany them in adopting the behavior.</td>
</tr>
<tr>
<td>There are other external barriers such as cost and availability that hinder adopting the promoted behavior.</td>
<td>Point out that the expense of buying the repellent is only while the mother is pregnant and that it is well worth it to protect the baby.</td>
</tr>
</tbody>
</table>
Session 8

Practice in the Field

Duration: 1 ½ - 2 hours

Learning objective:
Practice use of the “Key Tips” tool with actual household members on home visits.

Overview of Session

<table>
<thead>
<tr>
<th>Final preparation for site visits</th>
<th>Remind everyone to bring observation checklists.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Go over how to introduce their visit – explaining it is part of a skills training and this interaction is part of the training.</td>
</tr>
<tr>
<td></td>
<td>At the conclusion of each visit, EHOs should ask homeowner if there is anything they would like done differently during such visits.</td>
</tr>
<tr>
<td>Practice new skills during household visits in community</td>
<td>Participants visit households in pairs, with one EHO acting as the observer while the other fills out the checklist.</td>
</tr>
<tr>
<td></td>
<td>At next household, EHOs switch roles so each gets the opportunity to practice.</td>
</tr>
<tr>
<td></td>
<td>Consider recording the visits with a phone to review afterwards with the group. Remember to ask permission first.</td>
</tr>
</tbody>
</table>

Presentation & Notes
- n/a

Group Work
- n/a

Facilitator Reference Material
- n/a

Handouts
- GATHER® Observation Checklist for Household Visits

Other
- Key Tips Tool
Reflections on Using the Tool and Moving Forward

Duration: 1 hour

Learning objective:
Process and assess using the “Key Tips” tool and using the elements of the IPC tool

Overview of the session:

<table>
<thead>
<tr>
<th>Overview of Session</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discuss Reflections from the Practicum</td>
</tr>
<tr>
<td>Use the key reflection questions to reflect as a group using the Key Tips tool and putting elements of IPC into action</td>
</tr>
<tr>
<td>Review videos (if taken) to see what went well, what could be strengthened</td>
</tr>
</tbody>
</table>

Presentation & Notes
• n/a

Group Work
• n/a

Facilitator Reference Material
• n/a

Handouts
• Key Reflection Questions
Handouts

Key Reflection Questions

1. What aspects of the tool were most helpful in doing the household visit?
2. In what ways did the job aid improve your communication with the household?
3. What aspects of communicating with the household are still challenging?
4. How will the job aid help you better engage everyone in the household (and bring about a Whole Family Approach)?
5. What other things could be happening in and outside of the home to facilitate a Whole Family Approach?
   a. For example: creating space for dialogue at places where men gather – such as sporting events
6. Next Steps: Using the Tool Moving Forward
   a. How can we apply the tool in our daily work?
   b. How should we support each other in practicing good IPC and using the tool?
Supporting Materials

The following pages contain supporting materials for the sessions included in this training of trainers guide. The first section includes easy-to-print versions of the handouts for each session, and the latter section includes the presentation slides.

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Session 2: The Four Priority Behaviors.......................................................................................................................... 49
Session 5: GATHER.......................................................................................................................................................... 51
Session 7: Challenges During Household Visits........................................................................................................... 53
Session 7: GATHER Observation Checklist.................................................................................................................. 54
Session 7: How to Provide Feedback............................................................................................................................... 55
Session 7: Role Play Scenarios........................................................................................................................................ 56
Session 9: Key Reflection Questions............................................................................................................................... 57

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Session 3_The 7Cs............................................................................................................................................................ 66
Session 4_Elements of Effective IPC.............................................................................................................................. 78
Session 5_GATHER.......................................................................................................................................................... 88
Session 6_Key Tips Tool.................................................................................................................................................... 102
Session 7_Practicing with the Key Tips Tool.................................................................................................................. 125
The Four Priority Behaviors

Behavior 1: Use of repellent during pregnancy

- Repellents prevent mosquito bites and reduce the risk of vector transmission of Zika.
- Recommended repellents: DEET, Picaridin, IR3535 or lemon eucalyptus oil.
- These repellents are safe to use during pregnancy.
- DEET should not be mixed with sunscreen.
- Review the product instructions and use exactly as indicated.
- Repellents must be applied several times a day to be effective.
- Apply more often if you sweat, swim, or change clothes.
- Both the pregnant women and their partners should use the repellent.
- Women who want to get pregnant should also use repellent.

Remember: There are barriers related to the price of the product and applying the product frequently and systematically.

Key audiences: Pregnant women and their partners

Behavior 2: Remove unintentional standing water both inside and outside of the house, and in communal areas

- Unintentional standing water must be removed weekly (once a week).
- Stagnant water tends to accumulate in tires, bottles, water basins, empty tree trunks, gutters, potholes, large buckets, and other containers without lids.
  Rainwater also accumulates in the lids of water containers, drums or storage tanks if they are in poor condition or are designed in a way that allows the accumulation of water.
- Eliminating standing water in containers in community areas requires a constant and coordinated effort with different actors in the community to eliminate the standing water at schools, hospitals, and other communal sites on a weekly basis.

Remember: People accumulate a lot of items that may be unusable or should be discarded in their yards, and these items become breeding grounds for mosquitoes. The constant elimination of these items must be a priority.

Key audience: Families
Behavior 3: Cover water storage containers at all times with a cover that is tight fitting and does not warp or touch the water

- Water containers should be protected at all times with a lid that fits properly and does not submerge or touch the water. Lids should seal very tightly and be kept on at all times.
- If the lids are in poor condition, they can become mosquito breeding grounds. Lids should be replaced if they are bent or broken.
- The use of lids can work best for long-term water storage containers, i.e., those used infrequently (once a week or less) because the lids are handled less.
- For short-term water storage containers, i.e., those used several times a day or week, the effectiveness covering the lids is reduced because opening and closing the lid increases the chances that it will not be put back on tightly and the wear and tear causes the lid to deteriorate more quickly.
- We must constantly check and be vigilant to make sure there is no hidden mosquito breeding grounds on the lid itself and in any other container that is covered with a lid.

Remember: Many water containers that people use do not have lids at all, and some containers are difficult to cover with a tight seal.

Key audience: Families

Behavior 4: Remove mosquito eggs from the walls of frequently used water containers on a weekly basis

- There are 4 techniques to eliminate mosquito eggs, presented here in order of most effective to least effective:
  - **Technique** - Scrub with bleach and detergent.
  - **Technique** - Dab bleach around the walls just above the water line.
  - **Technique** - Scrub the walls of the container with detergent.
  - **Technique** - Scrub/brush container walls
- Descriptions of how to implement these techniques can be found in the communication tool called “Key Tips for Preventing Zika” as well as the conditions to be considered when choosing which technique to use for frequently used water containers in each household.

Key audience: Families
GATHER® Handout

G: Greet the person in a friendly and respectful way
- Introduce yourself with kindness and respect to the person who opens the door, stating your name, the work you do, the purpose and approximate length of the visit.
- Agree with the family to do the visit at that time or schedule a time to come back.
- Ask who is at home and invite them to join in the conversation, especially if there are any pregnant women.
- Greet each person in the home and call them by name.
- Create an environment where the person feels comfortable, listens, and trusts you

A: Ask the person about their needs regarding behaviors to prevent Zika
- Ask them about their concerns, information needs and doubts about Zika prevention.
- Encourage them to ask questions and listen carefully to what they say.
- Maintain eye contact with the person, respect all their opinions and do not scold them.
- Ask permission to take a tour of the house and observe how water is stored to identify possible mosquito breeding sites. If you find any, explain the importance of eliminating them.
- Congratulate the family if they have adopted behaviors to prevent Zika

T: Tell them about what they can do to prevent Zika
- Explain the desired behavior in simple language and provide other information that may be difficult to understand but will help the family take action (e.g., congenital Zika syndrome).
- Gently and tactfully correct them when they are doing something wrong and explain how to correct their behavior.
- Use educational materials such as posters, brochures, flip charts and cell phone messages
- Congratulate the person for good behaviors.
- Ask if they have any questions and answer them.

H: Help them find a solution
- Along with the family, identify the solution, steps, and follow-up needed to achieve the desired behavior.
- Explain the benefits of the new behavior for the family and especially for the pregnant mother and her unborn baby.
- Encourage and motivate behavioral change as well as providing information

E: Explain by demonstrating how the practice should be done, step by step, and explain why
- Demonstrate step by step how to correctly perform the desired behavior to prevent Zika (use of repellents, use of condoms, eliminating mosquito breeding sites, covering stored water containers, etc.).
- Give the person an opportunity to practice the new behavior with you
- Help the person if necessary and encourage them to reassure them that they can do it.
R: Review what was discussed and return
  • Review what was discussed and ask the person to highlight the most important points and agreements regarding the behaviors discussed.
  • Actively listen to the person to make sure they remember and have understood the information and the steps to follow.

Agree on commitments and the next visit
  • Along with the person or family, decide and agree on the behavior and actions they commit to adopt.
  • If there is more than one behavior involved, choose one or two that will be of greater benefit to the situation in each household.
  • Ensure that all required information is filled in on the visit form.
  • Schedule a date for the follow-up visit.

Thank family members for their receptivity and for taking the time to participate in the conversation.
**Challenges During Household Visits**

The table below offers some ideas for handling the challenges volunteers may encounter during home visits.

<table>
<thead>
<tr>
<th>CHALLENGE</th>
<th>SUGGESTIONS FOR HANDLING IT</th>
</tr>
</thead>
<tbody>
<tr>
<td>The family does not want you to visit them.</td>
<td>Explain that you want to talk with the family about how to help them prevent the Zika virus. Thank them and say you’ll come back in two days.</td>
</tr>
<tr>
<td>The family is not interested in the subject.</td>
<td>Talk about the health risks posed by the Zika virus, especially if there are pregnant women in the home.</td>
</tr>
<tr>
<td>They think repellent will hurt the pregnant mother and her baby.</td>
<td>Explain that the repellent you apply to the skin is not absorbed into the body and will not touch the baby. In fact, if the mother uses repellent, it protects the baby from catching the Zika virus and developing microcephaly.</td>
</tr>
<tr>
<td>Mistaken beliefs about transmission and prevention.</td>
<td>Use your communication tools and materials to explain the correct information about how the Zika virus is transmitted and prevented.</td>
</tr>
<tr>
<td>Persons do not feel vulnerable to being infected or affected by the Zika virus.</td>
<td>Explain that Zika can affect anyone and especially pregnant mothers or those who are planning to become pregnant. In these cases, it can cause Zika Congenital Syndrome, including microcephaly which can affect the health and development of the unborn baby.</td>
</tr>
<tr>
<td>Reluctance to try a behavior.</td>
<td>Negotiate a single action as a first step that leads to the behavior.</td>
</tr>
<tr>
<td>Behaviors in the home are influenced by an older person such as a grandmother (or mother-in-law) or neighbors.</td>
<td>Include that person in the home visit as well and clarify misconceptions and mistaken beliefs.</td>
</tr>
<tr>
<td>Person does not feel capable of adopting the promoted behavior.</td>
<td>Demonstrate how to carry out the behavior and offer support in different ways to accompany them in adopting the behavior.</td>
</tr>
<tr>
<td>There are other external barriers such as cost and availability that hinder adopting the promoted behavior.</td>
<td>Point out that the expense of buying the repellent is only while the mother is pregnant and that it is well worth it to protect the baby.</td>
</tr>
</tbody>
</table>
# GATHER© Observation Checklist for Household Visits

<table>
<thead>
<tr>
<th>Points to Observe</th>
<th>Score: ✓, 0, NA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>G</strong> Greet the person with kindness and respect</td>
<td></td>
</tr>
<tr>
<td>1 Greeted householders with kindness and respect</td>
<td></td>
</tr>
<tr>
<td>2 Introduced themselves appropriately (name, project/institution, etc.)</td>
<td></td>
</tr>
<tr>
<td>3 Explained the purpose of the visit</td>
<td></td>
</tr>
<tr>
<td>4 Invited other family members who were present to participate</td>
<td></td>
</tr>
<tr>
<td><strong>A</strong> Ask the person about their needs regarding Zika prevention</td>
<td></td>
</tr>
<tr>
<td>5 Asked open questions to understand the family situation (barriers and motivators)</td>
<td></td>
</tr>
<tr>
<td>6 Listened actively and with interest (eg: eye contact)</td>
<td></td>
</tr>
<tr>
<td>7 Used language that is simple and appropriate</td>
<td></td>
</tr>
<tr>
<td>8 Used non-verbal language that is appropriate</td>
<td></td>
</tr>
<tr>
<td><strong>T</strong> Tell them about what they can do to prevent Zika</td>
<td></td>
</tr>
<tr>
<td>9 Informed the person(s) about the behaviors that were relevant to them and that they could attempt to practice</td>
<td></td>
</tr>
<tr>
<td>10 Used communication tools and materials well to help explain the topics</td>
<td></td>
</tr>
<tr>
<td>11 Checked that the concepts were understood by asking questions</td>
<td></td>
</tr>
<tr>
<td>12 Correctly described the content of the messages</td>
<td></td>
</tr>
<tr>
<td>13 Clarified myths and incorrect information/beliefs about the topics</td>
<td></td>
</tr>
<tr>
<td><strong>H</strong> Help them make decisions</td>
<td></td>
</tr>
<tr>
<td>14 Identified solutions to the barriers and offered steps to help adopt the behavior(s)</td>
<td></td>
</tr>
<tr>
<td>15 Discussed the benefits of adopting the behavior(s)</td>
<td></td>
</tr>
<tr>
<td>16 Allowed the person(s) to state what behavior(s) they would like to attempt or try to do</td>
<td></td>
</tr>
<tr>
<td><strong>E</strong> Explain by demonstrating the behavior, step by step</td>
<td></td>
</tr>
<tr>
<td>17 Demonstrated how to carry out the selected behavior(s)</td>
<td></td>
</tr>
<tr>
<td>18 Asked the person(s) to describe or perform the behavior(s) to verify comprehension of the steps</td>
<td></td>
</tr>
<tr>
<td>19 Guided the person(s) to state what they will commit to doing</td>
<td></td>
</tr>
<tr>
<td><strong>R</strong> Review what was discussed and return</td>
<td></td>
</tr>
<tr>
<td>20 Reviewed the most essential points that were discussed and agreed to during the visit</td>
<td></td>
</tr>
<tr>
<td>21 Verified that the person(s) understood the commitment by asking questions</td>
<td></td>
</tr>
<tr>
<td>22 Agreed to a follow-up visit, set the day and time</td>
<td></td>
</tr>
<tr>
<td>23 Congratulated the person(s) on their efforts and thanked them for their time</td>
<td></td>
</tr>
<tr>
<td><strong>Total number of items with a ✓ (check)</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total number of items with a 0</strong></td>
<td></td>
</tr>
</tbody>
</table>

**Post-visit feedback:** Congratulate the person for all of the items marked with a ✓ (check), and work with them to make commitments to improve all those items marked with 0.
How to Provide Feedback

Follow these principles to provide adequate feedback:

• Make positive comments about what was done well - "I like it, it was good, that helps, that was excellent, did you believe it?"

• Do not give feedback in a threatening or complaining manner, but in a kind and gentle manner to avoid creating embarrassment and making the person feel bad. If the performance was poor, emphasize the improvements and positive changes observed since the last supervision and then ask how the aspects that need even more work could be improved.

• For aspects that were weak, first ask the person how they feel they did with the action. When the person identifies their own mistakes and reflects on them, it gives them the opportunity to ask themselves how they are doing. These particular aspects can be followed up on the next visit. For example, how do you think it went with...? What did you do to improve....? Do you remember the other techniques we learned that you can put into practice...? What other things can you do...? How do you feel about this or that aspect? What can you do to improve .......?

• Ask why they think there has been little/no progress on those specific aspects that were observed during the supervision (as compared to past supervision, if applicable). This will help to identify potential solutions: whether more training, practice, job aids or reminders are needed to perform better.

• Strike a good balance between positive and negative feedback. People who review and talk more about what they did well rather than focusing solely on what they did wrong are more likely to improve their performance than those who spend all their time talking about what they did wrong.

• Agree on a commitment to improve performance and put it in writing. For example: Shall I come back next month to see if you incorporated this or that element? Do you agree to spend time improving this?

• At the end, ask them to summarize the parts of the visit that went well and those where improvement is required. This will help them to be more committed to what they need to do better the next time.
Role Play Scenarios

Scenario #1
- Single mom with three kids
- Three drums in the yard, one covered with mesh, one covered with corrugated metal, and the last one covered with broken black container lid. She uses one of these drums for her garden in the backyard.
- Only cleans her containers when they are completely empty of water
- She knows about Zika, dengue and chikungunya but thinks they are transmitted through the air

Scenario #2
- Couple expecting their first child
- They are excited about having a baby, but are also concerned about the costs of their growing family.
- They have heard about dengue and chikungunya, but don’t think Zika is a concern on the island anymore
- Husband is a mechanic and works on the cars at the house, so he has spare tires in the yard
- The wife likes taking care of her plants in and outside of the house

Scenario #3
- Mom, dad, and two kids in primary school.
- The mom has spoken with the EHO previously and the EHO has shown her the larvae and pupae in their open drums. She tries to scrub the containers and cover them to keep out mosquitoes, but the EHO still finds more mosquitoes on a return visit. She has tried to show her husband but she hasn’t been able to convince him that it’s a priority for their family.
- She wants a black tank connected via pipe to the house so they don’t have breeding sites anymore, but the husband will not invest their financial resources toward that purchase.
- The husband is home today during the visit.
Key Reflection Questions

1. What aspects of the tool were most helpful in doing the household visit?
2. In what ways did the job aid improve your communication with the household?
3. What aspects of communicating with the household are still challenging?
4. How will the job aid help you better engage everyone in the household (and bring about a Whole Family Approach)?
5. What other things could be happening in and outside of the home to facilitate a Whole Family Approach?
   a. For example: creating space for dialogue at places where men gather – such as sporting events
6. **Next Steps:** Using the Tool Moving Forward
   a. How can we apply the tool in our daily work?
   b. How should we support each other in practicing good IPC and using the tool?
Zika Prevention Behaviors
+
Tools
Beginning of the Zika Epidemic

• The Zika program began as an emergency public health response
  – Little was known because Zika appeared to only be in a few countries
  – We needed to act quickly and accumulate lessons learned
Behavior Change Challenges in Zika

Too many behaviors: In the first year of the Zika response, we were promoting over 30 different behaviors.

Lack of precision

Difficulty in managing large amounts of information at the community level.
**Behaviors with the greatest potential to prevent Zika, dengue, and chikungunya**

* The four priority behaviors that are the focus of this training are **highlighted**

| Behavior 1 | Use *mosquito repellent* (DEET, Picaridin, IR3535 and eucalyptus lemon oil only), as directed by each product manufacturer **during pregnancy** to reduce the risk of Zika transmission from mosquito bites. |
| Behavior 2 | Use of condoms to prevent sexual transmission of Zika during pregnancy. |
| Behavior 3 | Regularly remove unintentional **standing water** both inside and outside of the house, and in communal areas. |
| Behavior 4 | **Cover water storage containers** at all times **with a cover** that is tight fitting and does not warp or touch the water. |
| Behavior 5 | Eliminate **mosquito eggs** from the walls of frequently used water storage containers **weekly**. |
| Behavior 6 | Attend prenatal check-ups to monitor the pregnancy and learn about the risk of contracting Zika and how to prevent it. |
| Behavior 7 | Seek counseling from a trained provider about modern family planning methods if you do not plan to become pregnant. |
Technical Specifications Content Guide

- Created to assist programs in promoting the 7 behaviors:
  - Specific information on use
  - How to perform preventive behaviors – operationalizing behaviors with greatest potential to reduce risk
  - Harmonize messages
  - Cost-effective

- Frame of reference for the design of communication strategies + preventive messages of Zika + IPC outreach
Seeing From Many Angles

- To persuade others, we need to think about “angles” of “reality”
- Are there different world views?
- Is there only one way to see things?
- How can we develop multiple perspectives?
Group Work

• Each table focuses on 1 of the 4 behaviors--share what they have heard from interactions with households on:
  – Attitudes and beliefs about the behaviors
  – Perceived effectiveness of recommended behaviors
  – Feasibility of doing the behavior
  – External barriers to practicing the behaviors

• 4 behaviors:
  • Application of **mosquito repellent**
  • Regularly **removing unintentional standing water**
  • Covering water storage containers
  • Eliminating mosquito eggs from walls of water storage
Discussion
The 7 “Cs” for an Effective Communication
What is Communication?

• To make known; **Impart**
• To have an **interchange** of ideas
• To express oneself in such a way that one is readily and **clearly understood**
• To be **connected**, to make common
• To converse intimately, **exchange thoughts and feelings**.

Webster’s Dictionary
The 7 “Cs” for Effective Communication

- Capture attention
- Clarify the message
- Call to action
- Communicate the benefit
- Create Trust
- Capture the heart & mind
- Consistency

The 7 Cs
Effective messages should:

- attract attention
- provoke comments & reactions
  - Colors, fonts
  - Images, graphics
  - Sound effects, music
  - Slogans
  - Innovative channel
  - Audience involvement
  - Content
Clarify the Message

• Transmit a single idea
• Is the message simple and direct?
• More = less
• Focus demands sacrifice
• Highlight the main point --avoid technical details that confuse
  ➢ “Need to know” principle
Communicate the Benefit

- What is the personal benefit being promoted?
- What will the audience get in return for taking action?
- Customers buys benefits, not products
- Key benefit is not necessarily a health benefit!
- Immediate benefit typically more effective than a long-term benefit
Consistency Counts

- Messages need to be repeated
- Message can vary but maintain consistency-----
  - Consistency helps familiarize audience to recognize & understand quickly (mental shortcuts—not having to think much)
  - One sight, one sound”: logos, colors, words, sounds, themes, images, models
  - Different materials, partners, channels convey the same message
Cater to the Heart and Mind

• People are moved by emotions and reason---
  – learn more when something touches their emotions
  – emotional appeal often more convincing than facts

• Emotional messages with emotion are best communicated in an entertainment format:
  ❖ songs
  ❖ drama
  ❖ comedy
Create Trust --Tell the Truth

• Does information come from a credible source?
• Who is credible for the target audience?
  – Medical doctor
  – Ministry of Health
  – Neighbors/friends/peers
  – Celebrity –does the audience identify with them?

• Logos

• Level of professionalism: spelling errors, typos, poor punctuation, etc. reflect poorly on the credibility of the information

• Include data
Call to Action

• Persuasive messages can convince the audience to take action
• Once persuaded, tell them clearly how to do it
• What do you want the audience to DO after seeing the communication?
• What action is realistic and doable as a result of the communication?
• Action should be concrete and help achieve your objectives

Call to Action!
The 7 “Cs” for Effective Communication

- Capture attention
- Clarify the message
- Call to action
- Communicate the benefit
- Create Trust
- Capture the heart & mind
- Consistency

The 7 Cs
Group Work: How do you use the 7Cs currently?

Brainstorm how you use your assigned aspect of communication (eg. capture, clarify, etc.) and apply it in your household visits.
Elements of Effective Interpersonal Communication
The Good Counselor Activity

Think about someone you go to for advice and what motivates you to talk to them. What do you appreciate about the qualities of the person? About the interaction?

Write a maximum of three qualities on sticky notes.
What is Interpersonal Communication (IPC)?

Interpersonal communication is the **face-to-face exchange** of information, opinions or feelings, **verbally or non-verbally**, between individuals or groups, which **generates a solution** and **is not merely** the delivery of information.
Cross Cutting Elements of Interpersonal Communication
NONVERBAL COMMUNICATION

Happiness

Sadness

Universal Facial Expressions

Anger

Fear
Active Listening
Non-Judgmental
Respect Differences
Group Work
Cross-Cutting IPC

• Divide into Pairs

• Consider:

What are some of the things you’ve done during a household visit that falls under each of these categories (cross-cutting elements) that have made for a better visit? What are the challenges you’ve faced? How have you tried to overcome these challenges?

  – As one partner shares their specific experience, the other should be practicing active listening, demonstrating good verbal and non-verbal communication, while not being judgmental.
Summary of Good Practices of Effective Interpersonal Communication

- **Types of Interpersonal Communication**
  - Facilitative
  - Directive

- **Crosscutting** of Interpersonal Communication
  - Verbal & Non-Verbal Communication
  - Active Listening
  - Non-judgmental
  - Respect differences

- **GATHER**: Steps of good management of Home Visit

- **The 7 Cs** of Effective Communication
GATHER® Methodology
But first...
Individual Reflection

Take a few minutes to think about your current household visits. What is the process you go through from start to end of the interaction?
Greet the person with kindness and respect
Ask the person about their needs regarding behaviors to prevent Zika
Tell them about what they can do to prevent Zika
Help them make decisions
Explain by demonstrating how the practice should be done, step-by-step, and explain why
Review what was discussed and return
Gather ©

Greet the person with kindness and respect
Ask the person about their needs regarding behaviors to prevent Zika
Tell them about what they can do to prevent Zika
Help them find a solution
Explain by demonstrating how the practice should be done, step-by-step, and explain why
Review what was discussed and return
GATHER © Role-Play Exercise

For your group’s given step, come up with a 1-2 minute role-play that demonstrates that part of the GATHER © methodology using the following case study.
Scenario

Peter and Mary have lived together in the same house for many years with their 3 children, aged 8, 12 and 16. Peter’s mother recently moved in after her husband died. Peter is a taxi driver and often keeps his used tires in the yard. Mary makes and sells her special hot sauce on local market days.

A few years ago, when there was an outbreak of dengue fever in their community, they were visited by an EHO, who told them how important it was to eliminate standing water from the objects in the yard because they are mosquito breeding grounds. Peter and Mary followed their advice and got rid of anything in the yard that could collect water. Over time, they became less vigilant about keeping the yard clean and now Peter is back to storing used tires in the yard; Mary keeps empty bottles and jars there as well in case she needs them.
Key Tips for Preventing Zika: A Guide for Home Visits
Key Tips for Preventing Zika – Job Aid for Household Visits

• Zika and vector control officials, like EHOs, have not had a handy tool to help them share specific behaviors and enhance IPC skills during household visits.

• Useful to operationalize the Technical Content Guide so that promoters can address key preventive behaviors in a simple and complete way with families.
Key Tips for Preventing Zika

A Guide for Home Visits
Instructions on How to Use These Cards

What information will you find in this tool?

- How to organize a home visit using the GATHER steps to promote key behaviours for Zika prevention.

How are the cards organized?

- Cards on pages 1-4 offer guidance to aid you as a Community Volunteer and/or Health Promoter.
- Cards on pages 5-34 detail the key behaviours for Zika prevention to promote during home visits.
- Each behaviour is colour coded to help you identify it.
Instructions on How to Use These Cards

- Each behaviour specifies an audience with an icon:

  - For pregnant couples
  - For couples (Non pregnant women)
  - For families

- Each card has 2 sides:
  - One with images to use when talking with the family,
  - The other with information to help you understand and correctly discuss each behaviour.

**How to use the cards during a home visit:**

- Always have the cards on hand when you conduct a home visit.
- The cards can serve as an aid during home visits, but should not distract from your dialogue with the family or divert your attention from what they say.
- Use the front of the card to communicate with the family and use the illustrations to explain the information, behaviours and specific steps.
- Use the back of the card when you need to remember key information or demonstrate something.
What is Zika?

Zika is a virus that can pass from a pregnant mother to her baby, who could be born with **microcephaly**.

There is NO medicine or vaccine against Zika, and most people do not have/experience symptoms. These are the same mosquitoes that carry the dengue and chikungunya viruses.

How is Zika transmitted?

1. From a mosquito bite by an infected Aedes aegypti.
2. From a pregnant mother to the baby during pregnancy.
3. Through sexual intercourse.

Together as a family, we can learn about Zika to protect the baby!
What is Zika?

ASK Have you heard about Zika?

- Zika is a virus that passes from a pregnant mother to the baby, who can be born with Congenital Zika Syndrome, including microcephaly.
- These babies have a smaller skull and brain size than other babies. This affects their physical and mental development, and can cause problems speaking, listening, seeing, moving or learning.
- There is NO medicine or vaccine against the Zika virus, and it does not present any symptoms in the vast majority of cases, therefore it is important to learn how to prevent it.

How is Zika transmitted?

ASK Looking at the card, can you list the ways Zika is transmitted?

1: From a mosquito bite by an infected Aedes aegypti.
- Mosquitoes become infected when they feed on the blood of a person already infected with the virus. When they bite others, they pass on the virus.
- These mosquitoes bite mostly in the day.
- These are the same mosquitoes that carry the dengue and chikungunya viruses.

2: From a pregnant mother to the baby during pregnancy.
- A pregnant woman who has Zika can pass it to her baby during pregnancy.
- Zika virus infection is one of the causes of Congenital Zika Syndrome, including microcephaly.

3: Through sexual intercourse.
- Zika can be transmitted sexually from a person who has the virus to his/her partner even if they have no symptoms.
- The Zika virus can remain in a man’s semen for at least 3 months.
Apply Mosquito Repellent Throughout Pregnancy

How do I correctly apply mosquito repellent?

1. Read the instructions on the container.
2. Shake well.
3. Spray at a distance of 15 to 20 cm.
4. Apply on the skin.
5. Do not apply repellent directly on the face; use your hand.
6. Apply several times a day.
7. Reapply after sweating or getting wet.
8. Pregnant women need to use it to protect the baby.

Remember, repellent does NOT harm the baby; it protects the baby from the consequences of Zika.

Together as a couple, we ensure pregnant women use repellent!
Apply Mosquito Repellent Throughout Pregnancy

**COMMUNICATE**

- Repellent is one of the most effective and safest ways to protect the baby from the effects of Zika.

- If a pregnant woman gets Zika, she can pass it to her baby. The infected baby can develop Congenital Zika Syndrome, which can lead to microcephaly.

- Using repellent during pregnancy does NOT harm the baby; it protects the baby from Congenital Zika Syndrome.

- It is unknown if homemade repellents provide sufficient protection.

- The repellents that we know do work are those that contain:
  - DEET (between 10%-30%)
  - IR3535
  - Picaridin
  - Oil of lemon eucalyptus (not lemon eucalyptus essential oil)

- Repellent should be applied directly on the skin that is not covered by clothing.

**ASK** How do you correctly apply repellent?

**Review with the pregnant woman:**

1. If you have repellent available, show it to the pregnant woman and read the instructions out loud with her.
2. Demonstrate how to shake the repellent before using it.
3. Spray the repellent at a distance of 15 to 20 cm; this distance is about the size of a hand and a little more.
4. The repellent should be applied to skin that is not covered by clothing.
5. Do not apply repellent directly to the face. Spray it on the hand first and then apply it to the face.
6. Apply repellent several times a day following the specific instructions for that repellent.
7. Reapply after sweating or getting wet.
8. If you only have a little repellent, the pregnant mother is the most important person in the family who should use it, to protect her unborn baby.
Understanding the Mosquito Life Cycle

Why is it important to understand the mosquito life cycle?

To protect against Zika, dengue and chikungunya.

Together as a family, we learn about the mosquito to prevent Zika!
Understanding the Mosquito Life Cycle

ASK What do you know about the mosquito life cycle?

Explain the mosquito life cycle.

Why is it important to know the mosquito life cycle?

- The Aedes mosquito likes to lay eggs where water collects, inside and outside the home.
- If we see a mosquito inside the house, it is likely that there are breeding sites for eggs in the yard or house.
- The mosquito lays its eggs in containers that accumulate water.
- Mosquito larva become adults in 7-10 days. If we eliminate breeding sites once a week, the eggs and larva will not become adults.
Search for Mosquito Breeding Sites in the Yard and House

The Aedes mosquito likes to lay its eggs in:
- Clean water or rain water
- Shady areas
- Water containers where leaves accumulate and can feed the larvae

**In the yard:**

**In the house:**

Use a white container to collect some water from a storage drum to see if it contains larvae:

Dedicate 15 minutes each week to identify places where mosquitoes like to live and eliminate them.

Together as a family, we look for mosquito breeding sites!
Search for Mosquito Breeding Sites in the Yard and House

**ASK** Where should you look for mosquito breeding sites?

**EXPLAIN** that Aedes mosquitoes prefer to lay their eggs:

1. Where clean or rain water accumulates, especially water containers under shade or where leaves accumulate.
2. In water tanks and containers that are not used often.
3. In frequently used water drums.

**DEMONSTRATE** together with the family how to search for objects inside and outside of the house where water can accumulate.

**DEMONSTRATE** How to use a flashlight to illuminate the eggs or larvae and/or use a white container to collect and inspect water from each possible breeding site to see if it contains larvae.

**COMMUNICATE** Dedicate 15 minutes each week to identifying places where mosquitoes like to live and eliminate them.
Eliminate Breeding Sites in the Yard and House

What can we do to eliminate Aedes mosquito breeding sites?

In the yard where clean water or rain water accumulates we can:

- Empty and turn over objects.
- Cover objects and water drums.
- Throw away objects that we do not need anymore.
- Throw away, cover or store tyres away from the rain. You can also poke holes in tyres so water does not accumulate in them.
- Empty and keep gutters on the roof clean.

In the house we can:

Together as a family, we eliminate breeding sites!
How do you eliminate Aedes mosquito breeding sites in the yard and house?

In the yard where clean water or rain water accumulates we can:

- Empty, turn over, cover or throw away objects and containers that accumulate water and remove objects that we do not need.
- Take action regarding tyres. Throw away, cover or store them away from the rain. You can also poke holes in tyres so water does not accumulate in them.
- These actions should be done at least once a week to keep mosquito eggs and larvae from becoming adults. (Remember the life cycle of the mosquito on page 11.)
- When we eliminate breeding sites, mosquitoes will look for other places to lay their eggs, such as roofs and gutters.
- Empty and keep roof gutters clean to prevent mosquitoes from laying their eggs.

In the house we can:

- Change the water in flower vases and animal water bowls every 2-3 days to discard any larvae in the water.
- Discard water that has accumulated in the dishes under flower pots.
Search for Mosquito Breeding Sites Where Water is Stored

Identify frequently used water drums where Aedes mosquitoes like to lay their eggs.

- The eggs are small and dark-brown and can be hard to see.
- When the eggs hatch, it takes 7-10 days for the larvae to become adults.
- Leaves, algae or dirt at the bottom of the drum feed the larvae so they must be removed.

Together as a family, we look for breeding sites!
Search for Mosquito Breeding Sites Where Water is Stored

**ASK** In what type of water container do you think the Aedes mosquito likes to lay its eggs?

**DEMONSTRATE** and identify together with the family the frequently used water drums where the mosquito that transmits Zika likes to lay its eggs.

**COMMUNICATE** and emphasize that:
- The mosquito lays its **eggs** on the walls of these water drums just above the water line.
- The **eggs** are small and dark-brown and can be hard to see.

**DEMONSTRATE** how to find the eggs on the walls of the drum and larvae in the water:
- When the **eggs** hatch, it takes about 7-10 days for the larvae to become adults.
- The leaves, algae or dirt at the bottom of the container feed the larvae, so they must be removed.
Eliminate Mosquito Breeding Sites Where Water Is Stored

Which water containers are not used often?

How to cover water drums that are not used very often?

1. Ensure that the cover used is tight so that it seals well.
2. The cover should NOT touch the water, especially if it is a cloth cover.
3. If the cover is made of cloth, use cloth that allows rainwater to pass through.
4. It must be made of a material that won’t crack or change shape in the heat or sun.
5. You can use a mesh / metal screen with very small holes that an adult mosquito could not pass through.
6. The cover should be used every day and at all times.
7. Keep the cover in excellent condition.

Together as a family, we eliminate breeding sites!
Eliminate Mosquito Breeding Sites Where Water Is Stored

ASK Which water containers are not used often?

DEMONSTRATE how to use covers for water drums that are not used often (less than once a week).

- Ensure that the cover used is tight so it seals well. If the cover shades the water but does not completely seal, it will create the ideal environment for a mosquito to reproduce.
- The cover should NOT touch the water, especially if it is cloth. Cloth covers can create small puddles where the mosquito can lay its eggs.
- If the cover is made of cloth, make sure that the fabric you use lets rain water pass so that it does not accumulate and become a breeding site.
- It must be made of a material that won’t crack or change shape in the heat or sun.
- You can use a mesh / metal screen with very small holes that an adult mosquito could not pass through, as long as it stays in perfect condition and seals well.
- The cover should be used every day and at all times, to prevent mosquitoes breeding in these containers.
- Take care that the cover stays in excellent condition and is replaced as soon as it is ruined or scratched.
Technique—Scrub the Walls of the Water Drum with Detergent

Eliminate mosquito eggs from the walls of water drums weekly

Steps to follow:

1. Completely empty the water container as it may contain larvae or pupae.

2. Use a plastic brush with hard bristles and soap or detergent to scrub the walls of the drum in a circular motion. Scrub the area above and below where the water line is seen to remove the eggs.

3. Scrub the bottom of the container to remove algae and leaves that could feed the larvae. Rinse thoroughly.

4. Repeat the technique weekly.

Together as a family, we eliminate mosquito eggs in water drums!
Technique—**Scrub the Walls of the Water Drum with Detergent**

Eliminate mosquito eggs from the walls of water drums weekly

**DEMONSTRATE** the following steps with the person:

1. Empty the water container completely as it may contain larvae or pupae. If water remains when brushing, eggs can fall into the water and produce larvae.

2. Use a strong plastic brush with hard bristles and soap or detergent to scrub the walls of the container in a circular motion. Scrub the area above and below where the water line is seen to remove the eggs stuck on the walls.

3. Scrub the bottom of the container to remove algae and leaves that could feed the larvae. Rinse thoroughly.

4. Repeat the process weekly as mosquito larvae become adults in 7-10 days.
Individual Review
## Observation Checklist

### Appendix 6: Checklist for Home Visit Observations following GATHER methodology

<table>
<thead>
<tr>
<th>Person making home visit:</th>
<th>Position:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Person observing home visit:</td>
<td>Position:</td>
</tr>
<tr>
<td>Date:</td>
<td>Visit start time:</td>
</tr>
<tr>
<td>Persons spoken to during home visit (Check all that apply)</td>
<td></td>
</tr>
<tr>
<td>Pregnant woman</td>
<td>Woman who doesn’t wish to become pregnant</td>
</tr>
<tr>
<td>Man or partner of a pregnant woman</td>
<td>Family</td>
</tr>
<tr>
<td>Woman of reproductive age</td>
<td>Other (specify)</td>
</tr>
</tbody>
</table>

**Instructions:** During the observation of the home visit mark with a “√” (check) by each item that was successfully accomplished through interpersonal communication. Mark a “0” by each item that was not accomplished during the observation. If for some reason any item could not be scored during the visit, mark it as “NA” for “not applicable”.

<table>
<thead>
<tr>
<th>Points to Observe</th>
<th>Score: √, 0, NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preparation of the EHO/volunteer</td>
<td></td>
</tr>
<tr>
<td>Is appropriately identified</td>
<td></td>
</tr>
<tr>
<td>Has communication materials (eg: “Key Tips for Preventing Zika – A Guide for Home Visits”)</td>
<td></td>
</tr>
<tr>
<td>Has registration forms on hand</td>
<td></td>
</tr>
<tr>
<td>G Greets the person with kindness and respect</td>
<td></td>
</tr>
<tr>
<td>1 Greeted householders with kindness and respect</td>
<td></td>
</tr>
<tr>
<td>2 Introduced themselves appropriately (name, project/institution, etc.)</td>
<td></td>
</tr>
<tr>
<td>3 Explained the purpose of the visit</td>
<td></td>
</tr>
<tr>
<td>4 Invited other family members who were present to participate</td>
<td></td>
</tr>
<tr>
<td>A Ask the person about their needs regarding Zika prevention</td>
<td></td>
</tr>
<tr>
<td>5 Asked open questions to understand the family situation (barriers and motivators)</td>
<td></td>
</tr>
<tr>
<td>6 Listened actively and with interest (eg: eye contact)</td>
<td></td>
</tr>
<tr>
<td>7 Used language that is simple and appropriate</td>
<td></td>
</tr>
<tr>
<td>8 Used non-verbal language that is appropriate</td>
<td></td>
</tr>
<tr>
<td>T Tell them about what they can do to prevent Zika</td>
<td></td>
</tr>
<tr>
<td>9 Informed the person(s) about the behaviors that were relevant to them and that they could attempt to practice</td>
<td></td>
</tr>
<tr>
<td>10 Used communication tools and materials well to help explain the topics</td>
<td></td>
</tr>
<tr>
<td>11 Checked that the concepts were understood by asking questions</td>
<td></td>
</tr>
<tr>
<td>12 Correctly described the content of the messages</td>
<td></td>
</tr>
<tr>
<td>13 Clarified myths and incorrect information/beliefs about the topics</td>
<td></td>
</tr>
</tbody>
</table>
Practicing with the Key Tips Tool
### Observation Checklist

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</tr>
<tr>
<td><strong>H</strong> Help them make decisions</td>
<td></td>
</tr>
<tr>
<td>14 Identified solutions to the barriers and offered steps to help adopt the behavior(s)</td>
<td></td>
</tr>
<tr>
<td>15 Discussed the benefits of adopting the behavior(s)</td>
<td></td>
</tr>
<tr>
<td>16 Allowed the person(s) to state what behavior(s) they would like to attempt or try to do</td>
<td></td>
</tr>
<tr>
<td><strong>E</strong> Explain by demonstrating the behavior, step by step</td>
<td></td>
</tr>
<tr>
<td>17 Demonstrated how to carry out the selected behavior(s)</td>
<td></td>
</tr>
<tr>
<td>18 Asked the person(s) to describe or perform the behavior(s) to verify comprehension of the steps</td>
<td></td>
</tr>
<tr>
<td>19 Guided the person(s) to state what they will commit to doing</td>
<td></td>
</tr>
<tr>
<td><strong>R</strong> Review what was discussed and return</td>
<td></td>
</tr>
<tr>
<td>20 Reviewed the most essential points that were discussed and agreed to during the visit</td>
<td></td>
</tr>
<tr>
<td>21 Verified that the person(s) understood the commitment by asking questions</td>
<td></td>
</tr>
<tr>
<td>22 Agreed to a follow-up visit, set the day and time</td>
<td></td>
</tr>
<tr>
<td>23 Congratulated the person(s) on their efforts and thanked them for their time</td>
<td></td>
</tr>
</tbody>
</table>

**Total number of items with a ✓ (check)**

**Total number of items with a 0**
Giving Constructive Feedback

• Make positive comments about what was done well
• Do not give feedback in a threatening or complaining manner, but in a kind and gentle manner to avoid creating embarrassment and making the person feel bad.
• For parts that they didn’t do well, first ask the person how they feel they did with the action.
• Ask why they think there has been little/no progress on those specific aspects that were observed during the simulation
• Strike a good balance between positive and negative feedback.
Role Play Exercise

• Round 1
  – Split into groups of at least 3 people (1 EHO, 1 observer, 1 household member)
  – Focus on your assigned priority behavior
  – Individuals assigned to EHO and household member roles practice going through all GATHER steps for given behavior while observer fills out checklist.
    • The “household member” can draw from their experiences and portray challenges they face in their visits.
    • Both the EHO and the “household member” can use the “Challenges During Household Visits” handout to practice using good IPC in difficult scenarios.

• Round 2
  – Repeat with a different behavior than the last session & switching roles within the practice
Discussion