

Module 10:

Communicating with parents and involving communities



GLOBAL PROGRAMME FOR VACCINES AND IMMUNIZATION

EXPANDED PROGRAMME ON IMMUNIZATION



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About this module

This module deals with communication between parents (or clients) and health workers and contains suggestions for involving communities in immunization programmes. Additional information is given in the manuals *How to Communicate with Mothers about Immunizations* and *How to Gather and Use Information from the Community*.

1. Communication in general

Communication means delivering messages that can be understood. Health workers not only give messages **to** parents but also receive messages **from** them. In both cases, communication takes place only when the messages are understood.

To make sure that your communication is effective:

- find out what the person you are communicating with already knows, and use terms that he or she understands;
- do not rush;
- acknowledge what the person says or indicates;
- make sure that the person understands you by asking questions that require answers other than “yes” or “no”.

If you ask “Do you understand?” and someone answers “Yes” you cannot be sure that he or she really does understand.

If you ask “When will you bring your child for his next immunization?” and someone answers with the right date, you know that he or she has understood you.

2. Addressing the concerns of clients first

People may come to a health centre or outreach site for some reason other than to seek immunization. For example, a woman may have a sick child or may be worried about her pregnancy. Respond to the patient's concerns at the outset, by giving advice or providing treatment, then screen and, if appropriate, immunize.

Find out whether people have any particular concerns about immunizations and answer these questions straight away. For example, if a woman believes false rumours that tetanus toxoid is a contraceptive she will not care about anything else you have to say. Talk to her about this first of all.

3. The five essential messages about immunization

There are five essential messages that parents, and women of childbearing age who may not be parents, must receive if they or their children are to be fully protected against the EPI diseases.

3.1 The date and time of the next immunization

Be specific. Name the day, e.g., Monday, and the date, e.g., 4 August. Say how many weeks ahead the date is, e.g., “four weeks from today”.

If calendars are not commonly used, give other reference points as reminders, for instance phases of the moon, festivals or other community events.

If you want to set a particular time of day for immunization, come to an agreement about this with the client.

Give the client a written note of the date and time of the next immunization if doing so is likely to be helpful.

3.2 The place of the next immunization

Tell the client where to attend for the next immunization. This is particularly important if you are changing locations.

3.3 The number of visits a child still needs in order to be fully immunized; the number of doses a woman receiving tetanus toxoid still needs

Tell parents how many more visits are needed before their children are fully immunized. Tell women of childbearing age how many more times they have to return in order to secure full protection.

When people make subsequent visits you can help them to feel a sense of accomplishment by praising them for the immunizations they have already received.

3.4 What side-effects may occur

Tell parents what side-effects can be expected for each vaccine given.

If you are giving several vaccines at once, explain the side-effects of each.

3.5 How side-effects can be treated

Advise parents what to do about side-effects if they occur and when to seek professional help.

Each of these messages should be given more than once. The likelihood of their being remembered increases if they are given by different health workers, for example the one giving immunizations and the one completing the paperwork at the departure point. Check clients' understanding by asking questions.

Advice to parents on side-effects:

The BCG sore is normal. Do not put anything on it. It heals by itself and a scar develops.

- **Fever may occur after some injections. This is normal.**
- **Soreness may occur at the injection site. It will disappear after three or four days.**
- **A rash may develop following an injection of measles vaccine. This is normal.**
- **If an abscess develops after an injection, put a dry dressing on it.**
- **Return to the health centre if a side-effect seems serious or continues for more than a few days.**

4. Communicating with groups

Another opportunity for communicating about immunization occurs when groups of people are gathered together, perhaps waiting for immunization or attending community meetings.

The key to communicating effectively with groups is to address the shared interests of the group members. As with individuals, you should deal with group members' concerns at the outset.

Figure 10-A: A group discussion

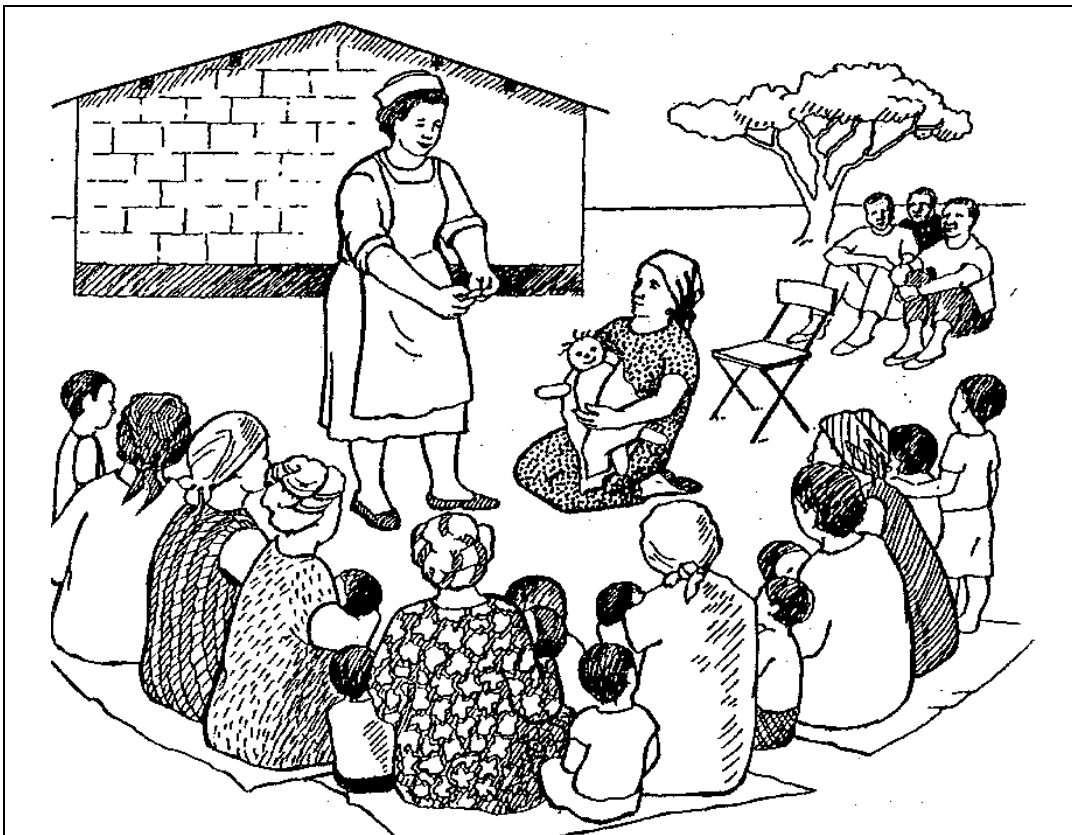


4.1 Group discussion techniques

Discussion provides an effective way to obtain and give information or ideas. Some ways in which you can encourage discussion are indicated below.

- Ask people about their experiences in dealing with a problem or about their knowledge of a topic.
Remember, however, that you are not giving them a test.
- Invite them to ask you questions.
- You do not have to know all the answers. Share the knowledge you have. If you are not sure about something, say so. You can look it up in a book or find out from someone else and respond at the next meeting.
- Tell stories and ask people what they think happened in them, and why.
- Sing songs or encourage people to make up their own songs
- Put on short plays about immunization and encourage group members to create one of their own.

Figure 10-B: Health workers giving a play



- Use visual aids such as pictures to illustrate what you are talking about.
Before using a visual aid, test it on people in the community to make sure that they understand your message. If they do not, change the visual aid.

5. Involving the community in planning immunization services

If a community is to be fully protected against the EPI diseases you have to gain its support. You cannot achieve everything on your own.

- 1) Spend time with local government officials and traditional leaders. They can help you to decide:
 - when to hold sessions;
 - where to hold outreach sessions;
 - whom to seek as a contact person who can mobilize the community and help you during sessions.
- 2) Keep in touch with your local contact person. He or she can help you to remind parents when to bring their children for immunizations, can encourage women to obtain their tetanus toxoid immunizations, and can explain to clients what is going on during sessions. The contact person can also help you to organize outreach sessions and, after having been trained, can sterilize reusable syringes and needles.
- 3) Train local people to help you with the organization of patient flow, the completion of immunization cards, the administration of oral polio vaccine, the provision of health education, and other tasks.
- 4) Give feedback to people in the community on the number of children fully immunized, the number of newborns protected from neonatal tetanus, and coverage in percentage terms. Also report to them on disease incidence in the community. Feedback encourages them to identify problems and solutions.

Working with people

- **Recognize the knowledge and experience of people and help them to learn from others.**
- **Talk *with* people, *not to* them.**