



# Introduction to 7-11

**& CHW Programming/  
Timed & Targeted Counseling**  
**Michele Gaudrault, World Vision**

# Overview of Presentation

- 1. WV's Overall 7-11 Strategy for Health and Nutrition, and the "fit" of CHW/ttC**
- 2. What is CHW Programming/Trained and Targeted Counseling?**
- 3. How was the CHW/ttC Curriculum Developed?**
- 4. The CHW/ttC Curriculum and Methodology**
- 5. In-Country Contextualization**



# World Vision's 7-11 Strategy for Health and Nutrition. Where does CHW/ttC fit in the overall strategy?

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# 7-1 | Strategy for Health & Nutrition

Targets	Pregnant Women: -9 months	Children: 0-24 months
<b>Core interventions</b>	<ol style="list-style-type: none"> <li>1. Adequate Diet</li> <li>2. Iron/Folate Supplements</li> <li>3. Tetanus Toxoid Immunization</li> <li>4. Malaria Prevention and Intermittent Preventive Treatment</li> <li>5. Healthy Timing and Spacing of Pregnancy and Birth Preparedness</li> <li>6. De-worming</li> <li>7. Facilitate access to Maternal Health Service: ANC PNC, Skilled Birth Attendance, PMTCT, HIV/STI/TB Screening</li> </ol>	<ol style="list-style-type: none"> <li>1. Appropriate Breastfeeding</li> <li>2. Essential Newborn Care</li> <li>3. Hand Washing with soap</li> <li>4. Appropriate Complementary Feeding (6-24 months)</li> <li>5. Adequate Iron</li> <li>6. Vitamin A Supplementation</li> <li>7. Oral Re-Hydration Therapy/Zinc</li> <li>8. Prevention &amp; Care Seeking for Malaria</li> <li>9. Full Immunization for Age</li> <li>10. Prevention &amp; Care Seeking for ARI</li> <li>11. De-worming (+12 months)</li> </ol>

# 7-11 Strategy: Behavior Change

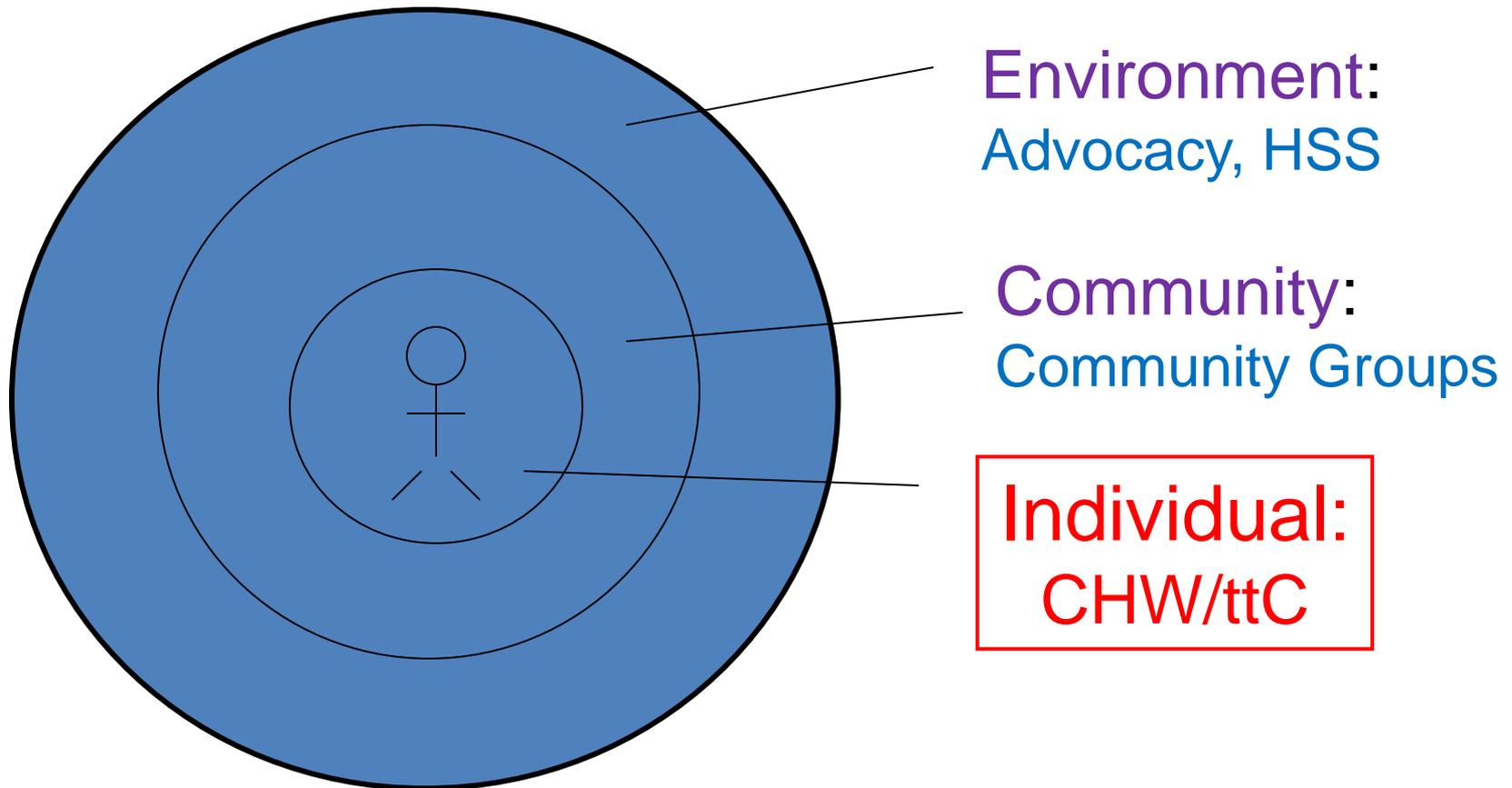
## Intervening at 3 levels for behavior change

- Individual (household)
- Community
- Environment

## Core & additional approaches (based on assmt)

- One core approach at each level
- A multitude of possible additional approaches at all levels; selected based on assessment

# Where does CHW/ttC fit in the overall 7-11 strategy?





# What is CHW Programming/ Timed and Targeted Counseling?

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# What is CHW/ttC?

- Household outreach carried out by Community Health Workers (**CHWs**)
- A curriculum of health & nutrition messages delivered at appropriate **times** and to the appropriate **targeted** audiences (**ttC**)
- A **primary health care** approach to bring preventive and care-seeking messages into hhs for purposes of **behavior change** and **demand creation**

# What are the Objectives of CHW/ttC?

- A. Contribute to CHW programming: a global priority.
- B. Bring behavior change communication into households for:
  - Awareness raising and information
  - Demand creation
  - Preventive and care seeking behaviors
- C. Connect households to the formal health system



# Why Community Health Workers?

Although community health workers are not a panacea for weak health systems, **the evidence base**, despite limitations, does suggest they can have an important role in increasing coverage of essential interventions for child survival and other health priorities.

Nearly 30 years after the Alma Ata declaration, the time is right to reassess the potential contribution of community health workers in accelerating coverage of essential interventions, **particularly in poor and underserved communities.**

*Lancet 2007; 369: 2121-31*



# Why Household-Level Interventions?

Interventions are needed at this level to promote:

- awareness of the issues
- knowledge
- behavior change
- demand for services
- identification of social barriers

... empowering caregivers and children to keep themselves healthy.



# What does this CHW/ttC approach entail?

- CHW programming is set up in such a way that CHWs are **adequately supported** to carry out their work. (CHW program functionality)
- CHWs make a **series of visits to households** where there are pregnant women, and through infancy, organizing **all of the 7-11 messages** into “timed and targeted” sets to be communicated at the most appropriate times, using a counseling and dialogue-based approach
- Caregivers are provided with **information, counseling and support** to promote practice of a host of critical health and nutrition-related behaviors, both **preventive** and **care seeking**.



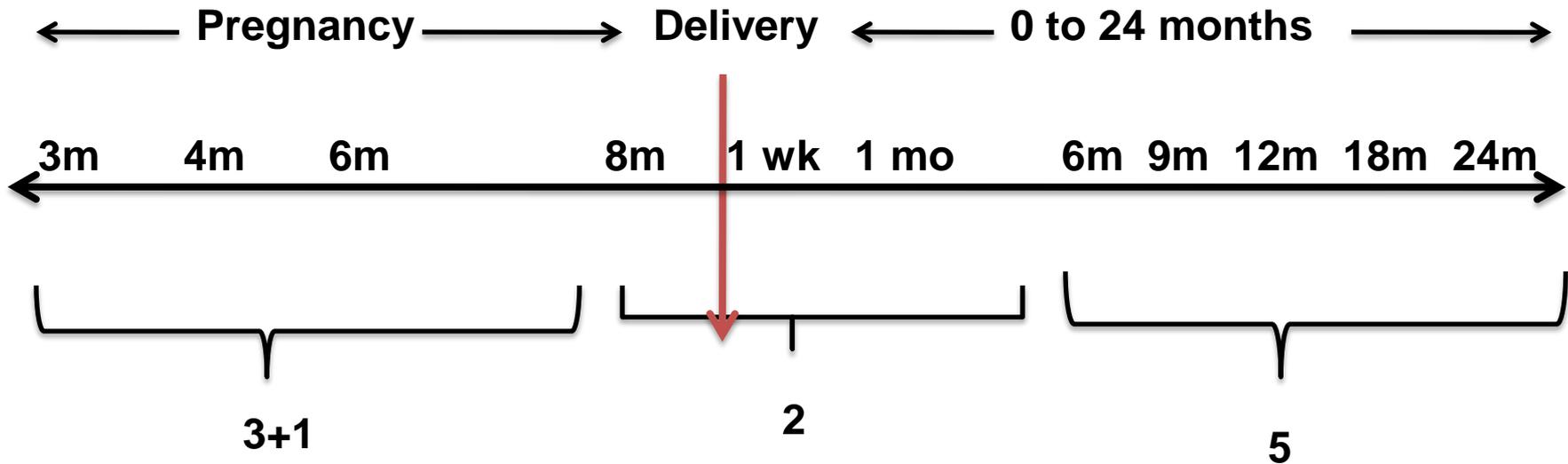
## What does “Timed and Targeted” mean?

Designed to enable messages to be appropriately *timed*: neither too early, lest they be forgotten, nor too late for the behavior to be practiced,

and appropriately *targeted* to those who would practice these behaviors as well as to those who would influence the decision to adopt these behaviors.



# TTC Recommended Schedule of Household Visits





# How was the CHW/ttC Curriculum developed?

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# Background Sources for CHW/ttC Programming

1. Literature Review for Curriculum Development
2. Literature Review for CHW Programming
3. Miscellaneous Evidence Literature supporting various elements of the approach.

*(Literature Review Resources available on request)*



# Key Resources

- WHO/UNICEF CHW curricula:
  - *Caring for the Newborn at Home*
  - *Counsel the Family on Feeding*
  - *Caring for the Sick Child*
- UNICEF: *Facts for Life*
- WV India Timed & Targeted Counseling
- American College of Nurse Midwives (*HBLSS*)
- USAID Health Care Improvement Project



# Materials Development

- Use of WHO/UNICEF manuals as starting point
- Addt'l sessions developed to cover all 7-11 content
- Illustrator contracted to develop job aids
- Drafts sent to WV-internal technical teams, and WHO, for review, feedback, adaptations
- Field tests in Ghana and Swaziland, August 2010
- First ToT February 2011; additional feedback
- Final draft of curriculum, and final graphic design of job aids underway, to complete by March 2011



# Field Test - Swaziland





# The CHW/ttC Curriculum and Methodology

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# The Package of Materials

## Introductory

- Country Readiness Guidelines
- CHW Program Functionality Assessment

## Curriculum

- *Trainer's Guide + CD*
- Facilitator's Manual (3 modules)
- CHW Manual, 3 modules (*literate CHWs*)
- CHW Job Aids: Illustrated Story Flip Books
- Household Reminder Tool: Illustrated Handbook

## Data Collection/Monitoring System



# Facilitator's Manual (to train CHWs)

## Module 1

- Introductory Sessions
- Visits 1-3 (*Pregnancy*)

## Module 2

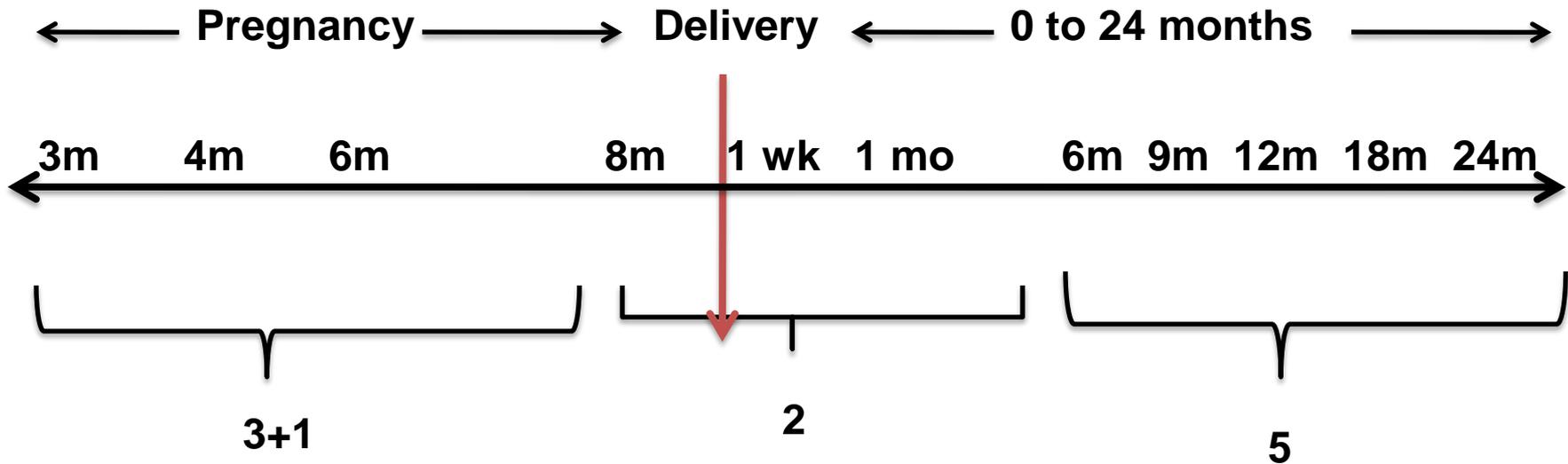
- Visit 4-6 (*Pregnancy, One week, One Month*)

## Module 3

- Visits 7-11 (*6, 9, 12, 18, 24 Months*)
- **Content related to each visit**
- **Simulations of household visits, dialogue counseling**
- **Data collection for each visit**



# TTC Recommended Schedule of Household Visits



## Household Dialogue Counseling Approach

- Avoid top-down presentation of information
- Story-based to enable “codification” of reality & reflection on own experiences
- One or two “problem” stories and one or two positive stories per visit. All messages contained in stories and household handbook
- Dialogue-based. Enables “barrier analysis” and response
- Negotiation for trials of improved practices, using the household handbook



## Standardized Household Counseling Steps

**Step 1:** Review previous meeting and actions that the household agreed to try

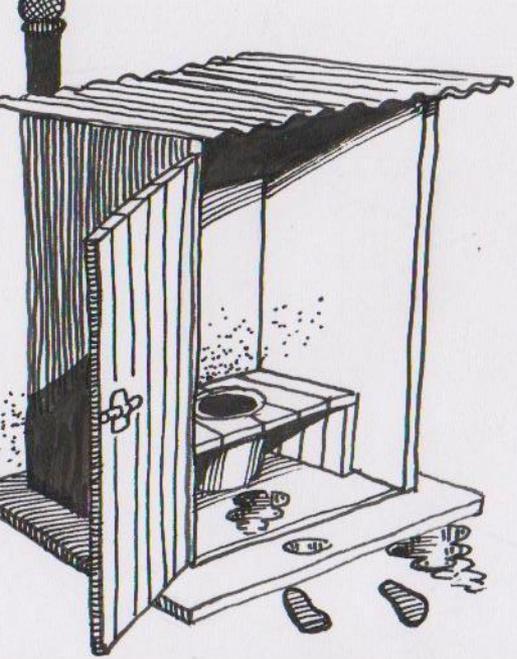
**Step 2:** Problem Story and Guiding Questions  
*(Guiding Qs lead users from analyzing as outsiders, to personalizing the issues)*

**Step 3:** Positive Story and Guiding Questions  
*(Guiding Qs lead users from understanding the benefits of the actions, to personalizing)*

**Step 4:** Dialogue and “Negotiation”, using Household Handbook













## Example Guiding Questions

1. At the end of the story, Biba's baby died. What happened in the story that might have caused that?
2. Can you tell me about pregnant women in this area, about the work that they do and how much they push their bodies when they are pregnant? Is it similar to Biba's situation, or different? How?
3. Is it common for people to sell nutritious crops because they need the money, instead of eating them? Explain.



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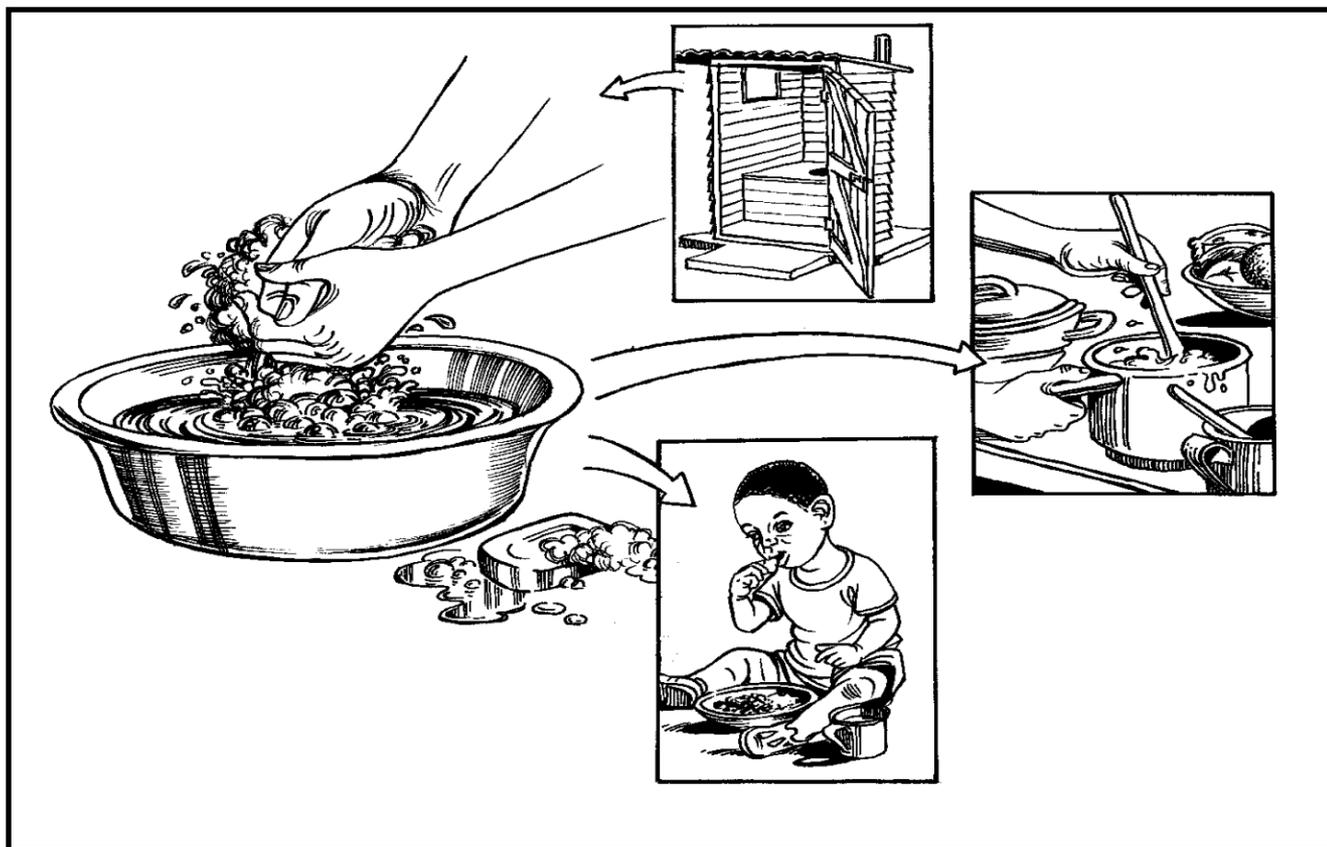


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# In-Country Contextualization

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## In-Country Contextualizations

- Dialogue with MoH; decisions re:
  - Facilitators and Supervisors for CHWs
  - Profiles of CHWs
- Curriculum Choice (this, or MoH curriculum, or other, or a mix)
- Curriculum Contextualizations (epidemiology, foods, transport, health services, names, etc.)
- Illustrations (use generic set vs. localize/redo)
- Delivery approach (household vs. group)
- Monitoring indicators



# Questions?

- About the overall 7-11 strategy
- About the behavior change framework, both for 7-11 in general, and the ttC approach
- Literature reviews and evidence for CHW/ttC programming
- The CHW program functionality assessment
- Curriculum development, curriculum overview
- Illustrations
- Dialogue counseling and negotiation methodology

