



Building Trust and Empathy

Enabling Healthcare Workers to Prepare,
Respond, and Recover from Emerging Pandemic
Threats and Infectious Diseases Outbreaks

Building Trust and Empathy

Enabling Healthcare Workers to Prepare,
Respond, and Recover from Emerging Pandemic
Threats and Infectious Diseases Outbreaks

This resource is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The contents are the responsibility of Breakthrough ACTION and do not necessarily reflect the views of USAID or the United States Government.

Introduction

The COVID-19 pandemic put immense pressure on the healthcare system in Nigeria and increased the burden on the overall health and well-being of many healthcare workers. In a bid to address some of this burden on healthcare workers, Breakthrough ACTION-Nigeria developed the **“Building Trust and Empathy Around COVID-19: A Client-Centred Communication Approach”** training curriculum aimed at promoting positive client-provider interactions that ensures healthcare workers have the tools and capacity to address vaccine hesitancy (among themselves and with their clients) and encourage COVID-19 prevention, testing, and vaccination as outlined in national guidelines and policies, and take care of themselves in high-stress situations such as the one COVID-19 presented.

Breakthrough ACTION-Nigeria designed the curriculum for healthcare workers in regular and close contact with clients at health facilities and in communities. It uses a collaborative learning approach, an interactive model that allows healthcare workers to constantly interact and update their knowledge around COVID-19 – and other infectious diseases – using hands-on practice, post-training coaching support, and visual job aids. These approaches also aim to build healthcare workers’ empathy for clients and themselves, improve client (and provider) experience and quality of care, improve health outcomes related to COVID-19, and, ultimately, healthcare workers’ resilience in the face of health emergencies.



The COVID-19 Pandemic: Increased Pressure on an Overwhelmed System

The emergence of the COVID-19 pandemic in Nigeria in 2020 put even more pressure on the health system.

The COVID-19 pandemic meant that many healthcare workers across the country were burned out from the workload of an inadequate system piled on by the uncertainty of the COVID-19 pandemic.¹ Some signs of burnout include the loss of motivation, feeling detached from clients, fatigue, reduced performance in everyday tasks, withdrawal or isolation, procrastination of certain tasks, outbursts that set the people around them on edge, and sometimes, using substances to cope.

Dr. Iriemivbo Jude Ohiwe, the Medical Director of the Sudan United Mission Hospital, Iboko, Ebonyi State, chose the latter to cope with the stress he was dealing with, even before the COVID-19 pandemic set in.



“

Since 2016, I have been an alcoholic. I drank a lot. In 2016, I was earning N153,000 monthly. I could get paid today. By tomorrow, I [would] have spent N118,000 in one night. I didn't buy food. ”

Dr. Jude grew in his career as a surgeon and as a health facility leader. With his advancement, he faced more stress and made more money. However, the more money he made, the more he spent on getting alcohol, exacerbating his addiction.

“

When I realized beer was making me full, I abandoned it. I went to whiskey. 40%, 43% [alcohol]. You know the phrase, 'alcohol in the bloodstream'? That was the life I was living. I was just a walking keg. When I decided to do more work, more attention was building up. The attention was getting too much I needed to calm down. I didn't know any other way. ”

¹ [Burnout status of healthcare workers in the world during the peak period of the COVID-19 pandemic](#)

Dr. Jude knew the effects that substance dependence would have on him. Yet, the pressure of working in two branches of the facility and seeing hundreds of clients every day got to him.

"I was going to die eventually."

Some other healthcare workers took their frustrations out on the job and, by extension, their clients. They did what they were required to do. Still, it wasn't with the necessary empathy or affective communication – **the exchange of thoughts, opinions, and feelings, which has the potential to arouse emotion in individuals engaged in the exchange** – that ensured their clients' holistic health and well-being of their clients.

While healthcare workers were found to be a reliable source of information during the COVID-19 pandemic,² clients everywhere do not want to be cared for by people who do not treat them empathetically.

**A little more
than one-third
(34.5%)**

of respondents in a cross-sectional study conducted among 337 civil servants working in Ibadan, Nigeria, considered good service

delivery the most important factor affecting health-seeking behaviors.³ The health-seeking behavior of any group of people, community, state, or nation is usually indicative of the development and economy of the group.

"Many health workers are leaving the system, so people tend to flare up. They tend not to address the patient very well, not communicate. So the basic thing was that communication was lacking. Health workers themselves were not showing empathy to the patient," shared Sikiru Amawo Oluniran, a Clinical Pharmacist at the University College Hospital, a tertiary health facility in Ibadan, in Oyo State.



² [Covid Vaccines Acceptability Insights Introduction, Johnson & Johnson Global Public Health](#)

³ [Factors Influencing Health-Seeking Behaviour Among Civil Servants In Ibadan, Nigeria \(O.O. Latunji and O.O. Akinyemi\)](#)

Reaching Healthcare Workers with Key Messages Around Empathy and Trust

Breakthrough ACTION-Nigeria was already implementing a suite of interventions to prevent the spread of COVID-19, increase testing, and ramp up vaccination for the COVID-19 vaccine. These included a package of systems strengthening and community-based interventions.

With these approaches, Breakthrough ACTION was creating demand for COVID-19 vaccination, which could have been derailed by overwhelmed healthcare workers with poor attitudes in providing services to people and the need for self-care among healthcare workers. Breakthrough ACTION ideated how to combine quality demand creation and commensurate service at the health facility by addressing healthcare workers as a critical audience, channel, and champion. The project thus developed the **“Building Trust and Empathy Around COVID-19: A Client-Centred Communication Approach”** training curriculum.



The BTE training curriculum, ideally done between two to three days, is divided into three parts: the interpersonal communication and counseling (IPCC) modules adapted from the IPCC guide of the Health Promotion Division of Nigeria's Federal Ministry of Health (FMoH); effective communication about COVID-19 vaccination and testing, addressing vaccine hesitancy, managing misinformation; and supporting healthcare workers to deal with stress and fatigue. These three parts are further split into six modules with the goal to:



Demonstrate quality interpersonal communication and counseling skills.



Build trust with clients.



Identify techniques for exhibiting empathy and compassion during client interaction.



Understand how best to communicate COVID-19 vaccination and address vaccine hesitancy.



Find ways to cope with stress as healthcare workers navigate the unnerving situations posed by the COVID-19 pandemic.

Breakthrough ACTION-Nigeria designed and delivered the Building Trust and Empathy training curriculum as a participatory, in-person training that included reflection exercises, role plays, and practice sessions that promoted dialogue and supported healthcare workers with building new skills to self-reflect on stress and burnout issues. The curriculum promoted empathy for healthcare workers and the opportunity to support each other when

they deal with stressors like burnout, increased stress levels when dealing with infectious diseases, etc., by following these steps.



Training Master Trainers: The project started with a training of trainers who would oversee the training in Ebonyi and Oyo States and Nigeria’s Federal Capital Territory (FCT).



Advocacy and Engagement Among Health Facility Leadership: These Master trainers would then train other trainers from the three states where this approach would be implemented. The ripple effect was that the trainers in the states would step it down further to their colleagues in the facilities where they work.

To start with, Breakthrough ACTION advocated with various stakeholders – government partners, facility managers, healthcare worker associations, etc. – on the need to improve the quality of care for healthcare workers and their clients.

"We did several advocacy and engagement to provide an understanding of the Building Trust and Empathy training. You cannot do advocacy in a hurry. Entry into advocacy is very key. If you get it wrong, you may not get the support of the key stakeholders," explained Dr. Stella Akinso, the Building Trust and Empathy Training Consultant in Oyo State. This advocacy was cross-cutting in the three states of Ebonyi, FCT, and Oyo.



"...we now engaged the facilities individually on advocacy. We made the leadership understand this implication through structural communication from the Building Trust and Empathy training. And they now engage their staff at that level."

**Dr. Terfa Simon Kene,
Building Trust and Empathy Training Consultant, FCT**





"We did effective advocacy. We had to engage health workers, the leaders of the health workers. We defined what we wanted to do from start to finish and the training content."

Dr. Utulor Chinwoke Alfred,
Building Trust and Empathy Training Consultant,
Ebonyi State

These stakeholders then selected participants that could best relay the information they gleaned to their colleagues. With the buy-in of key stakeholders, Breakthrough ACTION-Nigeria trained 681 healthcare workers in Ebonyi, 1,209 in Oyo, and 1,036 in FCT between August and December 2022. The participants were representative of the Nigerian healthcare worker population and included doctors, nurses, pharmacists, laboratory scientists, and facility managers.

Breakthrough ACTION: Changing Healthcare Worker-Client Relationships

Some participants were wary about the training, especially as there were still a lot of misgivings around COVID-19. Gabriel Rebecca, a Nursing Officer at the Karshi General Hospital in the FCT, was not looking forward to or keen on the training. *"I didn't know that that was what would happen in the training. When I saw the topic, I thought it was one of those COVID-19 workshops."*, she scoffed.

More than 450 km away, Dr. Jude shared similar sentiments. *"I had zero expectations. The only thing I expected was to go there, drink, sleep. That was all I expected to do. I bought a lot of drinks."* Yet, both healthcare workers committed to participating in the training.



Rolling out Participatory In-Person BTE Training

The participatory nature of the training ensured that healthcare workers were engaged in the different aspects of the training. As the focus moved to the well-being of the participants in their roles as healthcare providers, this piqued their interest.



During the [session on] healthcare workers' well-being, it was like that topic was the most important for all the healthcare workers because they found out they hardly have time for themselves. When they get burnt out, they don't know where to go, and sometimes they get depressed because of overwork. Sometimes they have challenges with their mental and physical health, and they do not know where to turn to."

One thing about the training that was also intriguing is the health worker's wellbeing. That was factored into the curriculum. And so, the training was holistic. From that training, I made up my mind that I would take care of myself."

Dr. Oke Emmanuel Oluleke, Dental Surgeon, Head of Clinicals, and Focal Person for Infection, Prevention, and Control, Karshi General Hospital, Abuja



Demonstrating Empathy to Healthcare Workers

By showing empathy to the healthcare workers and understanding the pressures they were under due to a myriad of socio-economic factors, Breakthrough ACTION was also able to connect why it was important to be empathetic to clients. This empathetic understanding was important to Dr. Jude.



"I have attended a few [training], and it sounded more like a lecture, like 'you should be here cause you don't have any other place to be. So I am giving you a lecture; you have to take it.' But these [Building Trust and Empathy] people were more considerate in passing information. Here, we are interacting. There were so many interactive sessions where we learned about empathy and had to talk about different scenarios," he enthused.

This made Dr. Jude more receptive to the training. He soon began to pay more attention as the training progressed. But paying attention meant cutting down on the alcohol, a feat that had Dr. Jude so disoriented that he couldn't see clearly the next day. The facilitators, including Breakthrough ACTION's Senior Program Officer, Dr. Joseph Edor, expressed care about his situation. *"When I went home that night, I heard what everybody said. I went to the room [and thought]...there is a better way to live. That is the highlight for me. In fact, the highlight of my year. Because I know what it [the alcohol addiction] has cost me financially and what it has cost me in my relationships. So, being in that setting where I had no expectation of anything ...I knew it was a problem. Today, I realize that this was not a spiritual encounter. No. It was just people's personalities, and yeah, it just did the magic for me."*

Dr. Jude emptied his bottles and said he was on the path to recovery.

Building Trust and Empathy: The Future of Health in Nigeria

The healthcare workers especially appreciated the role of empathy, of putting yourself in another person's shoes, as instrumental to improving the health-seeking behaviors of clients, the overall continuum of care, and the self-care of healthcare workers.

A direct result of this training approach was the number of healthcare workers, originally COVID-19 vaccine ambivalent – people who are not convinced of the threat of COVID-19 as a disease and lack the motivation to get vaccinated but have few barriers to uptake – soon sought and took the vaccines when the opportunities presented themselves.

Beneficiaries of the training all agreed on one thing: The Building Trust and Empathy training curriculum goes beyond COVID-19. It is an essential aspect of healthcare. If healthcare workers are empathetic to their clients, their clients are able to trust them better and develop a wholesome relationship that, in turn, improves clients health-seeking behaviors and enhances their overall health and well-being. *"COVID-19 brought this training [but]...you need to build trust among, for example, people with HIV. You need to build trust among diabetic patients. You need to build trust among people with high blood pressure, like other chronic diseases. And so, empathy cuts across our work,"* shared Dr. Oke Emmanuel Oluleke, a Dental Surgeon, Head of Clinicals, and Focal Person for Infection, Prevention, and Control at the Karshi General Hospital, FCT.

The healthcare workers agreed that all health service providers should receive the training. Dr. Kolawole Oluseyi Akande, a Senior Lecturer at the College of Medicine, University of Ibadan, and Consultant Gastroenterologist at the University College Hospital in Oyo State, stressed this: *"Because it has been found out that empathy and effective communication are important in increasing our patient satisfaction and confidence in our services as health workers, the recommendation is that all healthcare workers in Nigeria should go through this training."*



"Seeing my colleagues as facilitators of the [step down] training, fellow healthcare workers like me, and hearing it [vaccine safety] from them convinced me to get vaccinated."

Nwigboju Chukwuemeka, Registered Nurse, St. Patrick's Mile Four Hospital, Ebonyi

"In reality, one of the facilitators said he tested positive [for COVID-19], and after that, he took his vaccine. That alone encouraged me. I refused to take the vaccine even when I was pregnant. I didn't know that the vaccine was safe during pregnancy. And I asked them there, and they told me, 'Yes, the vaccine was safe'. And when I came back to my facility, I took my vaccine, and I knew it was safe."

Gabriel Rebecca, Nursing Officer, Karshi General Hospital, Abuja



"With the lessons I got from the Building Trust and Empathy [training], I was taught how to balance my services, that I shouldn't be partial in my service delivery, and that I should render my care and services equally how I want to be treated."

Chinyere Christiana Eneje, Nurse, Institute of Child Health, Alex Ekwueme University Teaching Hospital, Ebonyi



"As doctors, we are always about patients and their well-being; most times, we don't look inward to ourselves. So, from the [Building Trust and Empathy] training module, there is an emphasis on your own well-being as part of the general aspect of caring for patients."

Dr. Oke Emmanuel Oluleke, Dental Surgeon, Head of Clinicals, Karshi General Hospital, Abuja



"We, as healthcare workers, have to change how we approach things to have a better outcome for our patients. So I will advise that training like this [the Building Trust and Empathy training] should be routine."

Sikiru Amawo Oluniran, Clinical Pharmacist, University College Hospital, Ibadan, Oyo



"I wasn't expecting much because I thought, 'COVID-19 again?'. I never wanted to get vaccinated. I never wanted anyone to talk about vaccines. But after the training, all my mentality about the COVID-19 vaccine was debunked. No one told me to go get vaccinated."

Nurse Rita Mbam, Sudan United Mission Hospital, Iboko, Ebonyi State



