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CURRICULUM FOR THE CHANGE AGENT DEVELOPMENT PROGRAM

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Foreword



I am delighted to introduce the Capacity Building Support Plan (CBSP) and all its associated support materials that have been designed and tailored to meet the needs of all levels of staff within the Health Promotion Department of the Ghana Health Service.

One of the key aims of the revised National Health Promotion Policy (2013) and the National Strategy and Action Plan for Health Promotion (2014-2018)

is to build the capacity of health promotion staff at all levels. The CBSP provides an excellent contribution to helping us achieve this objective. Made possible through support from our partner Communicate for Health, a USAID funded project and colleagues from the Human Resource Department, GHS it has been designed to fill some of the critical capacity gaps amongst the HPD. It is timely as we introduce the new cadre of Technical Officers in Health Promotion at the district level and continue to work hard to increase the effectiveness of our existing national and regional health promotion teams.

I welcome this programme and have high hopes for its ability to strengthen the effectiveness of health promotion staff within my Department. I look forward to excellent results and encourage health promotion officers to make the most of this great opportunity.

Mrs. Grace Kafui Annan
Deputy Director/Head of Health Promotion Department,
Family Health Division
Ghana Health Service.

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Mrs. Eleanor Sey, Deputy Chief Health Promoter, HPD, Ghana Health Service¹.

Purpose of this document

This document provides a brief introduction to the background, purpose and targeted participants of the Change Agent Development Programme (CADP). It provides details of the curriculum content and learning objectives participants can expect to achieve through their involvement.

Background to the Change Agent Development Program (CADP)

One of the aims of the National Health Promotion Policy (2007) and the draft National Strategy and Action Plan for Health Promotion (2014-2018) is to build the capacity of health promotion staff at all levels.

A key result area of Communicate for Health, a five-year USAID funded project (2014 – 2019) is to strengthen the capacity of the Health Promotion Department (HPD) to effectively co-ordinate and deliver Social and Behaviour Change Communication (SBCC) and health promotion campaigns. Working with the Ghana Health Service (GHS) Health Promotion Department (HPD) the project has developed a Capacity Building Support Plan (CBSP) with three key elements:

- ‘Change Agent Development Program’ (CADP) for national, regional and district level staff.
- ‘Set for Change’ (SfC) a series of six action learning sets for the new cadre of district Technical Officers for Health Promotion (TOHPs).
- ‘Change Challenge Fund’ (CCF) an open competition for participants who have completed either of the above to apply for funding of up to 6,000 GHC to implement an innovative SBCC initiative at the district or regional level.

Other additional support and encouragement is available to consolidate learning and prompt the adoption of behaviours, through free on-line courses from Health Compass a USAID funded global initiative, mobile text messages, tool kits for planning and delivering effective activities and support the creation of individual personal development plans.

Purpose and expected outcomes of the CADP

The purpose of the Change Agent Development Program (CADP) is to strengthen individual capacity and fill existing skills and knowledge gaps of select national, regional and district-level staff of the Health Promotion Department to effectively coordinate and deliver SBCC and Health Promotion Campaigns.

Expected Outcomes of the CADP are that by the end participants will have:

- a deeper understanding of, and acquire new skills and knowledge in evidence based SBCC theory and practice.
- learned strategies and tactics for applying the new knowledge and skills in their work setting.
- developed insights, new ideas and techniques on how to tackle and influence social norms that negatively impact health.
- a greater awareness of current SBCC campaigns and practical ways to utilise and co-ordinate them effectively at regional, district and community level.
- increased their understanding of the Health Promotion (HP) role and improvement of individual personal effectiveness.
- be equipped to transfer SBCC knowledge and skills to peers through an organised system of mentorship
- acquired the skills required to implementing innovative SBCC interventions at a local level supported through the Change Challenge Fund.

Approach of the CADP

- **Tailored to specific need:** CADP curriculum has been tailored to meet the needs of the HPD identified in the organizational capacity needs assessment conducted in May 2015 using the Technical and Organizational Capacity Assessment tool (TOCAT), review of the skills and qualifications description (job description) of HPD staff in June 2015 and the individual HPD staff capacity assessments conducted in July 2015.
- **Up to date, evidence based, theoretical and practical:** CADP content provides up to date ideas and evidence on the latest theory and practice in SBCC and brings experienced and well respected experts in the industry together to deliver both the critical theoretical underpinnings of SBCC as well as practical examples from Ghana and elsewhere.
- **Increased Personal Effectiveness:** CADP also supports participants to examine, understand and develop their own leadership style and personal effectiveness in advocacy, influencing and lobbying skills; and ability to build strategic partners and coalitions critical to successful SBCC at community, district, regional and national level.
- **Connected to real-life context, daily work and contemporary SBCC and health promotion campaigns:** The learning approach seeks to connect participants' daily work with the learning objectives to ensure that the programme is imparting an increased awareness of the practical and theoretical processes as they relate directly to the campaigns and priorities they are working on through USAID's Communicate for Health and more broadly in their HPD roles.
- **Use of Current Campaigns:** Current campaigns will be used as case studies to

demonstrate the SBCC process alongside those that HPD have been involved in for example, Cholera and Ebola for reflection and continual improvement. Contributors such as regional and district directors, local government, NGOs and development partners will share the experiences of their role, the imperatives that drive their work priorities and how to best collaborate with them, to help participants better understand those they seek to partner with.

- **Mixed methods:** Different approaches of presentations, video, role-play, practical group work on realistic tasks, panel question time, case studies drawn from current SBCC work will be used to tailor to different learning styles as well as consolidate learning throughout the programme. The residential setting will allow for maximum attention and input of the participants through evening contributors and homework.
- **Continuing and cascading the learning:** Participants will develop personal development plans (PDPs) to guide their continued professional development and get advice on accessing free available resources for continued development. In addition, participants will gain skills in mentoring peers to share learning and resources from the CADP and support mentees develop their own PDPs to guide their continuing professional development.

Participants

Approximately 25 participants from the HPD at national, regional and district level are expected to participate in the first CADP to be held in July 2017. Lessons learned from this first CADP will be used to improve subsequent Change Agent Development Programmes delivered to TOHP in later years.

Prospective participants will be required to make an application from which only 25 will be selected based on the quality of their application against a pre agreed criteria. This competed approach has been adopted with the intention of ensuring:

- limited resources are invested in the most resourceful, committed and motivated staff
- greatest impact and effect is achieved in terms of increased skills, knowledge and experience
- both a demand and a value for training and development is created
- those who have never received any training or personal development before and/or have the greatest need are targeted.

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Learning will be cascaded beyond the programme through a structured and organised system of mentoring. Participants will be expected and supported to act as mentors to their peers and share the learning and resources from the programme.

Pre and Post CADP Assessment

Pre and post training assessments will be conducted to determine how successful the CADP training has been in increasing the SBCC knowledge, skills and competence of individual participants.

The same questions will be asked in both pre and post test assessments. The difference between an individual's scores and ratings in the two assessments will be used as an indicator of whether an individual has increased his or her SBCC knowledge, skills, and competencies during the programme. The ratings can suggest whether further training or capacity strengthening is needed and in which specific SBCC competencies. The overall scores will be used to determine the quality of the programme.

The perspective of the participants in terms of appropriateness of the content, teaching and learning approaches and the contributors ability to convey the content will also be assessed through open ended questions in the post assessment questionnaire and a post programme discussion. Here the strengths, weaknesses, highlights and areas for improvement will be examined and participant suggestions and reflections captured. This qualitative feedback will be important to help improve the next CADP delivered to the TOHPs in the following project year.

To gauge the impact of the programme a survey will be sent (on-line, mobile or email), four to six months later to each participant to find out how they have applied what they learned during the CADP and whether they have transferred their SBCC knowledge and skills to colleagues/mentees. In addition, a telephone follow up will be made or a site visit from the Regional Health Promotion Officer to identify progress, offer encouragement and provide a support and supervision role. In addition, a joint team from Communicate for Health and HPD will undertake random supervisory visits to selected beneficiaries to find out how they have applied what they learned during the CADP and whether they have transferred their SBCC knowledge and skills to colleagues/mentees.

Curriculum Content and Learning Objectives

The CADP programme will be organised into sessions that look at specific areas. The content of each session and the associated learning objectives are described below.

8. Curriculum content and learning objectives

The CADP programme will be organised into 1, 2 and 3 hour sessions that look in depth at specific skills or knowledge areas. The content of each session and associated learning objectives, a list of additional resources and the details of the session presenter are set out in the following pages alongside links to the power point presentations of contributors.

Health Promotion Principles and Practice

Foundations of Health Promotion and Sustainable Development Goals (SDGs) in the Ghanaian Context: This session provides a comprehensive overview of the foundational principles of health promotion practice. In addition, key domains of health promotion practice including advocacy, community mobilization/social mobilization, and health communication will be examined. The presentation will then contextualize the Sustainable Development Goals by delineating the crucial role of health promotion in the attainment of the SDGs.

Learning Objectives

By the end of this session participants will:

- Be able to describe the key principles underpinning health promotion practice in Ghana and elsewhere
- Appreciate the major domains of health promotion practice in Ghana and elsewhere
- Become familiar with emerging trends in health promotion practice globally and in particular Ghana.
- Appreciate the essential role of health promotion in the attainment of the SDGs in Ghana

Presenter: Mr. Paul Okyere, Lecturer – School of Public Health, KNUST

Theoretical Underpinnings of SBCC

Overview of the theoretical underpinnings of both social and individual behaviour change and the steps to develop, implement and monitor an effective SBCC approach: This session will explore the underpinning theories of social and behaviour change and the steps to developing a successful SBCC intervention built around three key components: social mobilisation, advocacy and behaviour change communication. These steps will include: identifying and understanding the behaviours it is sought to change through situational analysis/formative assessments; understanding how to apply relevant theories, drawing on the existing evidence base and good

practice; developing a strategy with SMART communication objectives; identifying targeted populations and channels; creating effective material and message design; implementation through the media; community mobilization; social media and technology; advocacy; then monitoring through indicator development, data collection, analysis and utilization of monitoring data.

Participants will follow one recent SBCC campaign developed in Ghana to see first-hand how these steps above were taken to produce a campaign. In addition a past campaign (developed by either a health implementing partner in collaboration with HP or led solely by the health promotion service) will be examined and considered in light of what has been learned in terms of strengths and weaknesses, context, opportunities and constraints. This will allow for some reflections and how campaigns can be improved in the future.

Some of the steps such as media buys, the creative process, community mobilization, advocacy and monitoring and evaluation will be examined in more practical 'how to' detail in later sessions.

Learning Objectives

By the end of this session participants will:

- Understand the some SBCC theories and models with emphasis on the socio-ecological model to better understand how the presenting issues/problems/behaviours can be influenced through SBCC.
- Understand the steps to developing a strategic SBCC intervention.
- Discussed the role and examples of advocacy, social mobilization, and behaviour change communication in SBCC.
- Assessed a current SBCC intervention against the planning process for evidence based SBCC.

Presenter: Mrs. Joan Schubert, Chief of Party for Communicate for Health, USAID/FHI 360.

The Role of Culture in SBCC

How does culture and tradition shape us and influence what we do, can we change it?: This session will be in two parts, first a lecture followed by small group discussions. Part two will examine a real life case study of how an aspect of a culture was changed and a traditional practice ultimately ended to improve health outcomes.

Part One: Our culture shapes us. It informs how we think and behave but what does this mean for those of us who seek to influence and change behaviour? Culture shapes and influences us but what influences and changes culture? What do we mean by culture, how does it shape us and what can influence it? These sessions will examine the powerful role of culture, traditions, beliefs, values and gender in shaping and influencing how we live our daily lives and how they can be influence

to bring about improved health outcomes and social change.

Presenter: Prof. Kodjo Senah – Lecturer, Department of Sociology – University of Ghana, Legon.

Part Two: The spirit child phenomenon has been part of the cultural beliefs of the people of Kas-sana Nankana in the Upper East Region of Ghana for decades. It was also a practice and belief that resulted in the death or out-casting of children and women from the community in order to protect the wider community from the perils of the evil spirit allegedly possessing. Through a range of community based approaches over time, the beliefs of this community changed and this practice was successfully ended and those who were once the guardians of it have become the greatest advocates for its demise. AfriKids were a catalyst in this change and will share their approach and work over the last decade with this community. This session will examine how this social change was achieved and what were the key principles and approaches used.

Presenter: Mr. Nicholas Kumah Cudjoe, Executive Director - Afrikids, Bolgatanga.

Learning objectives

By the end of this session participants will:

- Define and understand the relevance of culture to health related behaviour.
- Gain insights into a wide range of practices that are influenced by culture but negatively affect health.
- Understand the history of health related cultures, the relationship between culture and social norms and finally how to influence and re-shape these.
- Know how to challenge social norms appropriately and how to approach taboo or controversial issues such as family planning in conservative communities.

Formative Assessment in SBCC

Understanding the situation around the problem you seek to address: Formative assessments, whether a comprehensive situational analysis or a rapid formative assessment, are critical to ensuring an SBCC intervention is built on evidence as opposed to assumptions and really 'touches' and 'speaks' to the target audiences you seek to influence. This session will help participants understand the importance of this step and in practical terms how you go about an assessment based on available time, resources and the issue being addressed. Examples of previous assessments carried out for existing SBCC campaigns and social marketing activities will be reviewed. This session will end with a group exercise designing a rapid formative assessment.

This is a very practical session and will be an opportunity for participants to use the results of a formative assessment to design an appropriate communication approach that includes advocacy, social mobilization, and behaviour change communication ensuring materials and messaging directly touches the heart of the situation/problem.

Presenter: Dr. Collins Ahorlu, Lecturer, Noguchi Memorial Institute, University of Ghana, Legon

Learning objectives

- Appreciate the importance of understanding the people affected and involved, the context in which they live or work, and the role that gender plays in a problem before deciding how to address it.
- Able to design a formative assessment and apply the results to outline a strategy for an SBCC intervention.
- Know how to segment and prioritize audiences, create SMART communication objectives, select the most effective approach and channel mix for a program.
- Understand relevant gender issues and consider how it should be tackled in SBCC plans.

Designing and Implementing SBCC:

Designing and implementing effective Social and Behavior Change Communication programs: It can be tempting when developing SBCC to dive into the creative work first on the assumption that the behaviour sought is known and much is known about the context around existing behaviours. This should be avoided as the process of creating effective communication products is both a science and an art. Participants will know from the previous session that they need the results from the formative assessment to inform the creation and testing of effective communication products. There is a science to creating concepts, visuals, and text that is based on evidence and situation analysis and an art to creating products that evoke emotion, motivate audiences, and fit within the communication strategy.

The shift in terminology from Behaviour Change Communication (BCC) to Social and Behaviour Change Communication (SBCC) is a recent milestone in health communication that reflects renewed emphasis on improving health outcomes through more healthful individual and group behaviours as well as strengthening the social context, systems and processes that underpin health.

SBCC for health is a research-based, consultative process that uses communication to promote and facilitate behaviour change and support the requisite social change for the purpose of improving health outcomes. To achieve social and behaviour change, SBCC is driven by epidemiological evidence and client perspectives and needs. SBCC is guided by a comprehensive ecological theory that incorporates both individual level change and change at broader environmental and structural levels. Thus, it works at one or more levels: the behaviour or action of an individual, collective actions taken by groups, social and cultural structures, and the enabling environment.

SBCC employs innovative, Interactive Research Techniques to ensure a deep understanding of

people's needs and preferences using a message brief and Seven C -Module. A key feature of the 7 C-Module describes a learning cycle and the steps to behaviour change encouraging deeper and in-depth understanding of the target beneficiaries including the environment within which they find themselves to be able to craft messages that will engender behaviour change.

SBCC will integrate best practices from disciplines such as social psychology, user-centered design, anthropology, behavioral economics, social marketing, and other behavioral sciences as well as the use of proven practices such as:

Innovative, interactive SBCC research techniques to ensure a deeper understanding of people's needs and preferences.

Participatory action research and media, ethnographic methods, value systems research, and commercial marketing techniques.

Infusion of User-Centred Design approaches that will ensure that the end-user is an integral part of intervention design, formative research, prototyping, and implementation.

Theory-based Socio-Ecological Model which will recognize the relationship between people and their environment and allow participants to find underlying causes and tipping points for change.

Employment of Small, Doable Actions (SDAs) that are more likely to be adopted by targets because they are considered feasible by individuals and are effective from a public health perspective when practiced consistently and correctly. Citing examples from WASH and malaria Campaigns among others.

The completion of creative briefs using the above theories and practices will assist in the generation of materials and campaigns that will be pretested and used for campaigns on a myriad of health related topics across the country.

This session will help participants to find their way through creating and testing effective communication products. Materials do not stand-alone; they support certain interventions or activities. For example, posters and billboards normally work as reminders of the messages and content of a TV or radio spot. Materials also support activities and vice versa. For example, peer education sessions can engage audiences around messages of a television or radio campaign. It is important to think about how activities and materials support each other during the creative process.

This session will involve the use of formative assessment to inform the design, creation/ development and testing of effective Social and Behavior Change Communication Materials/ Campaigns. This session will help participants to find their way through designing, creating and testing **effective Social and Behaviour Change Communication Materials/Campaigns**. From a creative brief, participants will use the results from formative research to help shape their creative outputs. The session is built around practical SBCC tools and encourages teaching through actual

field examples. It will also motivate participants to apply what they learn to their own programs. Participants will be able to assess their learning throughout the session through practical learning. The entire session will utilise an approach in which the facilitator and participants will contribute in different—but equally important—ways to the learning. Participants will be provided with relevant SBCC content—concepts and examples including setting up learning exercises that will give participants ample time to grapple with ideas, debate the content, and practice new skills. Based on a review of current literature, this session aims to clearly define SBCC, and clarify key health communication terms. It is meant to help participants more precisely select and define their approaches, programs and activities.

Equally, the session will employ a socio-ecological model to view the complex interplay between individual, interpersonal, community, and societal factors that affect behaviors. It will assist participants to select interactive, participatory strategies to ensure a holistic view of people's desires, needs, and barriers and facilitators to change.

Lastly, participants will be exposed to some very practical insights into how a number of the current campaigns built around the Good Life Live it Well concept and its recent refresh have been developed from the creative brief through to testing, implementation and monitoring. They will also get to understand the purpose and how to develop a Creative Brief which will serve as the bedrock for material and SBCC Campaign development.

At the end of this session participants will:

- Understand how to use formative data and the creative brief to effectively develop messages and SBCC Campaigns.
- Understand the guidelines for creating complementary SBCC materials and campaign activities.
- Know the value of how to plan and lead for stakeholder reviews and audience pre-tests leading to finalization of materials and campaign launch.

Presenter: Mr. Maurice Ocquaye, Executive Director – Infinity970

Understanding Social Mobilization in SBCC

Understanding social mobilization, one of three key approaches within an effective SBCC strategy: This session will explore the concept of social mobilization for creating wider participation and ownership of change. Creating a momentum for change involves identifying and developing advocates, building coalitions, creating enabling environments and platforming issues and messages. Social mobilization may be associated with the use of media including TV, social media and social networks, champions, national advocates and profile events. While at a community level the above can be further enhanced with more localised approaches to engage people and create a momentum for the messages and the need to change.

The values and principles that need to underpin effective social and community mobilization and the development of advocates for SBCC and use of community volunteers will be examined through the analysis of existing models alongside real life effective examples.

Participants will explore social and community mobilization activities in Ghana. Examine ways recent or existing programs can be technically improved in a resource constrained environment and how to work effectively in this area at a local level.

Learning Objectives

At the end of this session participants will:

- Understand the critical role of social and community mobilization to social and behaviour change.
- Be aware of examples of social and community mobilization activities that promote SBCC
- Identify the key characteristics and principles of successful social and community mobilization efforts from some real life examples.
- Know how to plan and execute community mobilization to support the implementation of a national SBCC campaign locally.

Presenters: Mr Edward Adimazoya, Deputy Chief of Party, Communicate for Health FHI360/USAID & Alhaj Sufyan Abubakar – Deputy Chief Health Promoter, HPD/GHS.

Advocacy, Building Strategic Partnerships, Alliances and Collaborations

This session will look at how to advocate effectively to raise resources for SBCC, as well as gain the commitment of political and social leadership. How can you be a successful advocate at the national, regional and district level and what does that involve? Who are the key individuals, groups, structures and organisations that should be targeted?

The critical importance of building both formal and informal strategic partnerships, alliances and collaborations, what form these partnerships and alliances may take or look like and finally the techniques and approaches to building and sustaining such partnership through some existing examples will be explored. Understanding how to develop and grow strong strategic partners at all levels to promote opportunities for shared efforts in relation to promoting social and behaviour change across sectors and within key CSOs. Some examples of successful strategic partnerships will be examined for example, the ICC HP, a formal national strategic partnership, it's role, the challenges, potential and opportunities it presents for the HPD to gain support and leverage will be explored. The session can be seen as an opportunity to consider how the HPD can be considered as an expert resource internally within the Government as well as identify the kind of investments needed for a successful ICC HP.

The session will also look at how to work more effectively with donor agencies through greater understanding of: how they work; the different operating environments they work within; their priority setting and decision making processes.

Learning objectives

At the end of this session participants will:

- Understand the basic principles of advocacy;
- Understand the potential role of partners, allies, and gatekeepers in subsequent phases of the SBCC program and know how to apply some practical ways to engage them
- Know how to apply different strategies and advocacy approaches, ways to: influence decisions; create champions; profile your agenda.
- Critically assess the potential partnerships and collaborations that can be developed to support your objectives.
- Reflect on the ICC HP, its role and potential for replication at regional and district level.
- Better understand donor agencies, how they operate and how to work with them.

Presenter: Dr George Amofah, Former Deputy Director General of Ghana Health Services and Senior Technical Advisor to Communicate for Health and HPD/GHS.

Understanding Social Marketing

Understanding Social Marketing and where it fits within SBCC: The impact of SBCC ultimately often hinges on services or commodities being available. Social marketing and SBCC work in a complementary way. SBCC that drives people to a health facility or increases demand for a product or service that is not available or cannot be easily accessed such as contraceptives, water purification tablets, treated bed nets act., will have little impact on health outcomes. However, when combined with a social marketing approach then impact can be achieved.

Social marketing occurs when commercial marketing techniques are effectively adopted and applied to a development context for social results and health improvement. The social marketing process that leads to the introduction and establishment of a product into the market include researching the market, branding the product, establishing price points through willingness to pay studies, understanding the target group, creating sales out-lets close to the target group, training the distributors in the use of the product, marketing and sales of commodities.

In this session social marketing of commodities such as contraceptives, long lasting nets and other health related products will be examined in this session through real life case studies.

Two very well established social marketing organisations and a creative agency will share their experiences in Ghana of marketing health commodities for health improvement. Health Keepers is a community agent distribution system supported by below the line social marketing while DKT is

a national distribution system supported by significant above the line social marketing and some community based experiential marketing.

Learning objectives

At the end of this session participants will:

- Understand the principles and processes for social marketing a commodity.
- Know how to identify the opportunity for combined efforts between SBCC and social marketing of commodities.
- Acknowledge and understand the need for commodity or service availability or access for the target group.

Presenters: Mr Daniel Mensah, Director of Health Keepers, Ghana and Mr. Antonio Quarshie-Awu-sah, Country Director, PSI. A copy of a presentation from DKT will also be shared.

Working with Media

How to work effectively with the media: The world of TV, radio, newspapers, journalists can be quite different to that of health promotion specialists. Different rules operate, what we think they may be interested in, they may not be. This session will provide very practical hands on tips on how to work with people in this field. How to negotiate discounted rates when buying airtime on radio or TV requires not only some understanding of the industry, the language and terms used, but also perhaps some contacts and even some previous purchasing history. This session will help fill in some of the gaps to increase understanding of how the media works and how to get the best out of working with them.

In addition, the session will give a broad overview of what you need to know in the following areas: how to design a creative brief; how to make a radio or TV buy; how to monitor to ensure you are getting what you are paying for; how to hold a press conference; how to write a press release; how to get it widely circulated and used; and more generally but importantly how to invest in and nurture sustainable relationships with selected media colleagues/contacts.

Learning objectives

At the end of this session participants will:

- Understand the world of media, how it works and how you can get the best out of it
- Know how to write a press release, get it out there and get it used.
- Know how to make a 'media buy' for radio or TV air time and monitor it.
- Have tips on how to invest and nurture a relationship with one or two key contacts in the media.
- Understand the role of the MoH / GHS press officers and what they can offer in the way of support.

Presenters: Mr. Andy Nana Opoku, Media Advisor, Communicate for Health and Mrs. Rebecca Ackwonu, Public Relations Officer, GHS.

Working with Mobile Technology in Health Promotion

Increasingly mobile technology is playing a significant role in Ghanaian society. Ownership of mobile phones is estimated to be over 80% and with improved network coverage across the country, it provides a direct communication route into communities and people's daily lives. Even those who may not own a phone, such as women or teenagers in some of the poorer or more remote areas of Ghana, still have access to a mobile.

This session will cover in practical terms the different ways in which mobile technology can be used as part of an SBCC intervention. These different uses include: 1) large highly co-ordinated messaging services that are integrated into the work of the health care system such as MOTECH which sends voice messages to all pregnant women registered with a local CHPS in a number of regions as well as small local interventions with targeted groups using simple technology and with very low resources; 2) collecting data on recall of messages heard or intention to change behaviour to evaluate SBCC interventions; and, 3) to gather data to help design interventions; to help consolidate learning from a training programme or a decision making aid on a mobile phone to be used by a health care provider.

The session will also touch on the role of the mobile technology companies, how to access open source platforms and services for free or low cost. VOTO and Grameen Foundation will share some of the ways they are currently using mobile technology for SBCC as well as give very practical hands on demonstration of the platform they use. Participants will have the chance to design their own simple SBCC intervention using this platform.

Session lead: Dr. Nii Heward Mills: Social and Behaviour Change Communication Advisor VOTO Mobile, Mr. Sam Dogbatse: Head of Programmes, VOTO Mobile and Mr. David Hutchful, Director of Technology and Innovations, Grameen Foundation Ghana.

Learning objectives

At the end of this session participants will:

- Understand the uses of mobile technology for SBCC and how to determine when they are appropriate.
- Know how to design a simple SBCC intervention using the VOTO platform.
- Be introduced to the role of the TELCOs and how to work with them.
- Gain an overview of how mobile technology is currently being used in Ghana to promote health and improve health systems.

Working Community Radio to Create Change

This session will be led by Ghana Community Radio Network (GCRN) and will provide information on where community radio stations exist, the coverage and type of listeners they have, it will explain how community radio stations are organized and managed, how frequently they are on air, how they balance pre-recorded and live broadcasts and how they have worked with health promotion and the GHS in the past will be examined including what has worked well and what has worked less well.

An introduction to some of the different ways in which community radio can be used for health promotion and SBCC, from resource intensive participatory approaches to the production of radio programmes with the community themselves through to live call in's. GCRN will give top tips on how to get the best out of working with community radio stations. This will include the need to build relationships, develop a dialogue and a clear understanding of what is being sought from the program. It is also important to ensure that stations not only receive materials and key messages from national campaigns but are also provided with a good understanding of the tenets and rationale behind the campaign so that the station can make best use and develop programmes effectively around them.

A presentation from a community radio station will describe the process they went through to develop a successful community radio programme as part of an SBCC intervention and share lessons learned and pitfalls to avoid including the miscommunication of messages and experiences working on taboo or controversial issues.

The session will describe the key to a good working relationship and end product as well as the production process, good programme formats suitable for radio and how to involve local people in the design, production and broadcasting of a radio programme. Participants will work in small groups to develop a step-by-step process on how they will go about working with a community radio station to develop a radio programme.

Session lead: Mrs. Wilna Quarmyne, Executive Director, Ghana Community Radio Network

Learning objectives

At the end of this session participants will:

- Understand how a community radio station works, is funded and managed.
- Understand how to determine if community radio is a suitable channel for the messages you seek to communicate.
- Know how to work effectively with a community radio station to produce a successful programme as part of an SBCC intervention.

- Understand how to engage local people and professionals in the programme production to create ownership and greater impact within the target groups.

Planning and Co-ordinating SBCC

In this session guidance on processes for planning and budgeting for the development and then subsequent implementation of an SBCC plan will be provided. Participants will be grouped and tasked with two possible challenges. One group will respond to a national cholera outbreak by developing a budgeted action plan for SBCC, another group will be required to develop a plan and budget for the local implementation of a national campaign. Background Information or scenario for each challenge will be provided such as the available budget and the time available. Groups will then be asked to develop an action plan to cover: who/what organisations need to be involved in the development and implementation of the campaign, their roles and responsibilities; the target populations for the intervention; the communication objectives; identify appropriate activates and channels for the messages, materials and resources required; evaluation indicators methods and tools identified.

Session Lead: Mr Mathew Kobina Okor Ahwireng, Regional Health Promotion Officer, Central Region, GHS.

Learning objectives

By the end of the session groups will have:

- Developed a costed plan of activities against objectives.
- Identified key partners in the implementation and co-ordination of a SBCC intervention
- Adjusted implementation plans based on a template of anticipated costs.
- Refined their rough implementation plan into a detailed work plan including targets, resources and a timeline.

Monitoring and Evaluation in SBCC

This session will look at the importance of monitoring and evaluation and the different approaches available to do this from a number of different angles:

- o monitoring and evaluation of a national health promotion function and adopting the national routine HP monitoring system and data collection
- o designing the monitoring and evaluation of health promotion interventions including those at a local level
- o measuring social and behaviour change
- o monitoring and evaluating the impact of SBCC interventions.

Most importantly this session will be a practical opportunity to confront existing problems and discuss progress being made on key issues such as the current HPD M&E system. Using the

classroom as a laboratory to explore and test out ideas and thinking.

The session will also touch on the evidence base for SBCC and share some published work in this area. UNICEF will be present to describe the RCT they are undertaking which sets out to evaluate the comparative effectiveness of three community based approaches to SBCC: community theatre, mobile technology and community radio.

Working in the same groups as in the earlier planning session, participants will develop some indicators and a monitoring approach for the SBCC activities they developed earlier.

Session Lead: Mrs. Eunice Sefa, M&E Advisor Communicate for Health and Dr Godwin Y. Afenyadu, Senior Capacity Development Advisor, Evaluate for Health.

Learning Objectives

At the end of this session participants will:

- Have awareness and understanding of the national routine M&E data set for HP and reporting mechanisms.
- Know how to develop indicators and monitor locally designed SBCC activities.
- Understand the issues and approaches to measuring behaviour.
- Know how to access the body of evidence for SBCC as an effective intervention for improving health outcomes.

Writing Winning Proposals

Undoubtedly, implementing SBCC programs require the use of financial resources which are not always available due to dwindling government funding to Ministries, Departments and Agencies (MDAs). It is therefore imperative to equip the participants with the knowledge, skills and abilities for writing proposals to source funding from other donor agencies for the implementation of innovative SBCC programs. The session should articulate the key elements of a winning proposal. Clear distinction between technical and financial aspects of a proposal should be made. The session will also discuss the log frame, an M&E plan and a budget as key elements of a proposal. Emphasis would be made on writing proposals to source funding from donors, partners, MMDAs and private sector. **The session will also introduce the participants to the Change Challenge Fund (CCF) which is designed make funds available to the CADP and SfC beneficiaries on a competitive basis.**

There will be group work that allows participants to develop proposals and present for discussion.

The goals of the workshop are to:

- Strengthen the capacity of health promoters in order to gain vital skills in:
 - o identifying resource mobilization opportunities
 - o analysing resource mobilization opportunities
 - o developing proposals towards resource mobilization
 - o implementing resource mobilization strategies.

Educate participants on ways of putting available resources to optimum use, eliminate wastage as much as possible and take steps to grow the Department's finances or funding.

By the end of this session participants will have:

- Understood the concept of proposal writing.
- Understood the steps to developing a winning proposal.
- Discussed and understood the key elements of a proposal.
- Understood the difference between a technical and financial proposal.
- Developed and present a proposal in groups.
- Identified key sources and partners to whom to present proposals to for consideration.

Workshop Outline

Module 1 – The aid ecosystem in Ghana. There are the big traditional development partners such as the UN, EU, USAID, DFID, JICA, etc and there are also private sector actors who fund a lot of development initiatives under their various CSR programmes. In addition to that, there are also non-traditional donors such as the Bill & Melinda Gates Foundation, Mastercard Foundation etc.

Module 2 – Planning and developing a grant proposal. What do you do before submitting a grant proposal? 80% of all grants and contracts are won before the competition. You should therefore design HPD's programmes and image so that the potential donor understands and appreciates what HPD stands for in relation to other organisations. The importance of networking and building relations with all actors and stakeholders at the district level is emphasized.

Identifying your strengths – Securing funding begins long before the proposal reaches the donor. You therefore need to know how to present yourself and the work you do in one minute – which is the time it takes to gain the attention of top executives and decision makers.

Proposals - The purpose of a proposal is to persuade the funding agency to do something. A proposal offers a plan to fill a need. Their proposal should therefore answer the questions of...

- WHAT you are proposing
- HOW you plan to do it
- WHEN you plan to do it
- HOW MUCH it is going to cost

The RFP process – Every RFP asks the questions Who? What? When? Where? Why? How many? How much? So what?

- Characteristics of Winning Proposals – They are well written, responsive and persuasive, use research and evidence to back claims
- Characteristics of a Good Pitch
- Characteristics of Losing Proposals
- How to lose
- Importance of Performing
- Resources available to you
- Internal processes

Module 3 – Writing the Grant Proposal

The nine basic components of a proposal.

- The proposal summary
- Introduction of the institution
- Problem statement
- Project objectives
- Project methods or design
- Project monitoring & evaluation
- Project management arrangements
- Sustainability
- Project budget

Presenter: Mr. Michael Ohene-Effah, Independent Development Consultant

Leadership and Personal Development

Often the focus of capacity strengthening centres solely on technical skills in SBCC as the primary requirement for an effective health promotion officer. This session however recognises and addresses the personal and professional skills that are also needed to be effective. Participants will gain a level of personal awareness of their own and others individual styles of working. This session will be enlightening and motivating as well as build skills and confidence.

Using professional development tools and materials participants will gain a greater understanding of their professional profile in terms of their strengths and weaknesses and key areas for improvement to work more effectively alone, with others in their team and across organisations. This exercise will help participants work on developing their own leadership style appropriate for their role and define in actions to test out as a way of improving their 'day to day' effectiveness and later in developing their personal development plan.

Presenter: Mr. Adetor Frank Kwasi – Senior Organizational Development Specialist, Communicate for Health

Learning objectives

By the end of the session participants will:

- Have a greater understanding of their personal and professional strengths, weaknesses and development needs to be an effective health promotion officer.
- Have an understanding of the importance of an awareness of personal presentation of self and the ability to recognise different styles of working of others for effective collaborations
- Be able to recognise and value the working styles of others and be better able to work with colleagues and stakeholders across other organisations.

Unpacking the tool kit of an effective change agent

This session will engage participants in a review of their job description for HP within the wider system, roles and relationships within the system, challenges faced and anticipated, strategies and opportunities for greater effectiveness. Participants will gain a better understanding of their roles and responsibilities and that of others and identify the key personal and professional skills needed to be more effective.

Learning advocacy and influencing skills can help them be more effective in the political and social environment in which they operate. They will develop an understanding of the use of political skills within organisations, revisit their professional values, sharpen or awaken an opportunistic mind set, and understand how to manage both upwards and across in order to get the best from their colleagues. How can these be used in the day-to-day working life of a HP officer to promote change and work towards the broad objectives of the HP strategy?

A simulation exercise which will involve some role play and a light hearted approach will be used to generate important insights amongst participants of ways to increase their effectiveness and influence in their HP role through the use of advocacy, political skills, personal awareness of self-presentation and understanding the working styles of others.

Learning objectives

By the end of the session participants will have:

- Better understanding of the HP role, the technical and personal skills and attributes needed and practical ways of how to develop these in order to be more effective.
- Understanding and ability to effectively and appropriately use political and advocacy skills to promote change and implement tactics and strategies for advocacy and influence.

Presenter: Mr. Adetor Frank Kwasi – Senior Organizational Development Specialist, Communicate for Health.

Developing Personal Development Plans

This session will introduce participants to the concept of a personal development plan as a structured way of thinking about the range of technical and personal skills you may need to develop and improve upon, in order to do your current job effectively. It is also help an individual think about how they may want to progress their career in the future and how to plan for that too. PDPS are the basis of Continuing Professional Development (CPD). CPD embraces everything that you do to improve your job performance and is another way to ensure that you achieve the right abilities to do your job and maintain/enhance your expertise and your lifelong employability.

Participants will have already looked at their role and their job description in a previous session and the kinds of activities and responsibilities they are required to conduct. Participants will also have examined their strengths and weaknesses in technical knowledge and skills but also personal skills such as working within a team, personal presentation skills, influencing skills etc. and begin to establish areas where they feel they need to improve and develop. Through the use of a template participants will consider a series of questions such as: 1) what do I want to learn; 2) what do I have to do; 3) what support and resources will I need; 4) how can I access these; 5) how will I measure success; and, 6) how regularly will I review progress? Based on this participants will develop SMART goals for themselves to help ensure they are clear about what they want to do, and that it is attainable, realistic and time bound,

Given that financial resources are likely to be limited guidance will be offered on how to access free resources such as on-line courses, consider self-directed learning through journals or electronic resources, shadowing more senior colleagues or colleagues in other organisations to have a better understanding of their work, stretch assignments and to think creatively about how they can achieve their learning objectives.

Facilitators should support participants to create PDPs that are realistic and achievable but also aspirational. Part of the mentoring role of participants will be to offer support to their mentees in developing PDPs so the investment in developing their own well, will prepare them for this.

Learning objectives

By the end of the session participants will have:

- An appreciation of the value of a PDP
- Clarified a series of goals for their own personal professional development.
- Developed an action plan for how to achieve these goals.
- Know how to access free on line resources and other ways to access low or no cost

professional development.

Presenter: Mr. Adetor Frank Kwasi – Senior Organizational Development Specialist, Communicate for Health

Introduction to the Mentoring Scheme and the role of the mentor

Mentorship is a relationship in which a more experienced or more knowledgeable person, the mentor, helps to guide a less experienced or less knowledgeable person. The mentor may be older or younger, but will have a certain area of expertise to share or help steer, guide or counsel the mentee. Participants will be mentoring their peers to share with them the new knowledge they have gained from the CADP and will help and support their mentees to develop a personal development plan of their own.

This session will introduce the mentoring scheme to participants, their role as mentors and what is expected of them. Participants will be provided with a handbook that has been designed to support them in carrying out this role.

The mentor programme aims to support the creation of a community of practice within the HPD by creating a structure for the cascade of knowledge and provision of mutual support and encouragement. This will help improve performance and motivation and build strong relationships between HP staff. The result sought is i) appreciation of the value of routine sharing ideas, lessons learned, successes and failures, challenges and opportunities with colleagues and peers to provide support, inspiration and evidence and ii) the development and pursuance by HP staff of personal development objectives and plans.

Learning objectives

- Understand the objectives of the mentor scheme and how the scheme will be managed.
- Know what will be expected of you, how to provide mentorship to your mentee and how to access support if needed.
- Understand the mentor handbook and how to use it.

Presenter: Mr. Adetor Frank Kwasi – Senior Organizational Development Specialist, Communicate for Health.

Different World Views: Invited Evening Contributors

Being able to understand your wider professional environment and who and how the key players within it work are as important as technical skills if you want to have impact and leverage resources and a profile for your SBCC work. Guest evening contributors have been invited to offer an informal and relaxed window into the world of wider stakeholders and those in positions of power and influence either within a district, region or at a national level to give some insight into their perspectives, how they work and operate who they are accountable to and what that means for their professional priorities. Health Promotion Officers need to understand the environment and the roles and responsibilities of those they seek to influence or collaborate with if they are to successfully navigate their way around organisations with different cultures and priorities. They need to influence people, create partnerships and collaborations and raise the profile of health promotion and attract resources. These sessions will help the participants get that better understanding and to hear first-hand from those they may seek to influence or collaborate with. There are a range of different types of speakers to draw from for the different CADP participants. Speakers for the CADP for national and regional staff will be different from those for the CADP for TOHP.

World View of a District Health Director

Health Promotion Officers at all levels work with the District Directors yet what is it that makes these people tick? What are their priorities? How do they see their role? Who manages them? What are their bottom lines? What keeps them awake at night? What are their biggest challenges? How and when will health be de-centralized into local government? What will that mean for the district health management team? What do they think of the role of health promotion and if you want to get their attention and engage them in a collaboration what do you need to think about and do? Listen to them first then ask questions later.

By the end of the session participants will have a better understanding of

- the overall role and responsibilities of the speaker
- how they work and their key relationships
- how their priorities are set
- what professional issues keep them awake at night
- how they are measured in terms of their performance and what they are accountable for
- how resources flow to them and how they can use them
- the best approaches to use to influence them.

Guest Speaker: Mrs Patricia Antwi, District Health Director and key contributor to the design of the CHPS National Policy Awutu Senya District

World View of a District Coordinating Director

How does local government work? How do the elected representatives work with the management in local government? Given health is influenced by wider determinants such as education, environment, housing, transport, infrastructure etc. how do those in local government understand and see the role of health promotion? These are very critical and influential roles within a District that can impact on policies, decisions and resource allocations not only to do with health but all other sectors that can have an effect on the health and well-being of people and communities. What do we know about the role of these important district figures and how they work, what their priorities are, what influences them, what do they see as their greatest challenges as well as opportunities? What keeps them awake at night, what do they know and think about health promotion and how can you help them in their role and have an influence on their decisions?

By the end of this session participants should have an understanding of:

- the overall role and responsibilities of the speaker
- how they work and their key relationships
- how their priorities are set
- what professional issues keep them awake at night
- how they are measured in terms of their performance and what they are accountable for
- how resources flow to them and how they can use them
- best approaches to use to influence them.

Guest Speaker: A District Coordinating Director.

World View of a National NGO: Hope for Future Generations

NGOs play a critical role in the health space and yet often do not get the credit they deserve or have a voice at the policy and planning table. How NGOs work with development partners and their implementing partners such as projects like C4H may for some within the government organisations have been an area of contention for the and perhaps even for the HPD, some of whom feel they have seen NGOs as receiving funds for work that they could do.

This session provides an opportunity for participants to see the distinct role NGOs play and how they can be more proactive in their relationship with them to achieve the same goals and to work collaboratively with like-minded NGOs to achieve common goals. Greater collaborations at the national, regional and district level can only create stronger partnerships and collaborations in improving the health of Ghanaians. Having a better understanding of how NGOs operate, their challenges and their strengths is a very good place to start.

Guest Speaker: TBD