

REPUBLIKA Y'URWANDA



MINISTÈRE Y'UBUZIMA

CAPTAIN AND COACH APPROACH

**A TOOL TO AFFECT
BEHAVIOR CHANGE
AMONG YOUTH IN
RWANDA**



USAID
FROM THE AMERICAN PEOPLE



JOHNS HOPKINS
BLOOMBERG
SCHOOL OF PUBLIC HEALTH
Center for Communication Programs



Introduction



Participants of a captain training program in the Tare sector in Nyamagabe district

The Behavior Change and Social Marketing (BCSM) project is a five year project funded by the support of the American people through the United States Agency for International Development (USAID) and implemented by Population Services International/Rwanda, Johns Hopkins Center for Communication Programs (JHU-CCP), CHF International (CHF) and a network of Rwandan Partner Organizations. The cooperative agreement provides technical support, contributing substantially to Rwanda's national goals and the targets of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and President's Malaria Initiative (PMI). CCP is developing health communication activities and building capacity and technical skills with Rwandan institutions to create sustainable programs.

The project, led by these aforementioned organizations, has been implementing activities to increase the utilization of various products and change negative cultural norms and practices that prohibit their use. JHU-CCP has taken the lead role in capacity building for behavior change communications, focusing specifically (although not exclusively) on two of the five BCSM project objectives. JHU-CCP has been providing technical assistance to RPOs in rolling out and expanding interpersonal communication strategies through four flagship community mobilization activities that have been initiated in year one and two of the BCSM project. These community mobilization activities by the RPOs will ensure synergies by providing the interpersonal communication component for the mass media campaigns being rolled out by PSI.

One of these flagship community mobilization activities is the 'Captain and Coach Approach.' Derived from an entertainment education strategy, it utilizes the popularity of soccer in Rwanda as a mechanism for disseminating health information for hard to reach out-of-school youth. This

approach has been successfully utilized to increase knowledge and reduce misconceptions around HIV/AIDS, family planning, and malaria as well as address socially taboo topics (including cross-generational and transactional sex). The feature of this approach is to equip out-of-school youth with key message on reproductive health and life skills to enable them to benefit from the adult support provided by the “Coaches.” Community coaches, in addition to their role on the football field, are trained to be guardians of their teams’ health by: (1) sharing knowledge with the youth; (2) communicating responsibility with captains; (3) being role models for young people to mentor them in their decision making. CCP supports existing RPOs in implementing their respective activities by involving the trained captains in message delivery and supervising them so that they feel they can contribute too to the contract performance initiated at the sector level to improve the health indicators within their respective districts.

When are Captains and Coaches Needed?

The purpose of the “Captain and Coach Approach” is to help participants gain the skills and practical strategies necessary to manage sexual and negative pressures and make positive choices. This is so that they can carry out a long and healthy life. It is imperative that captains, after evaluating specific problems to address in their own village, unlock the community resistance that has been identified. Objectives of this program include:

- Increasing the understanding of HIV / AIDS
- Ending stereotypes and stigmas associated with HIV / AIDS
- Increasing the awareness of the risks associated with HIV / AIDS
- Providing the opportunity to learn practical knowledge associated with HIV / AIDS
- Helping young people to make informed decisions related to HIV / AIDS
- Educating young people about HIV prevention techniques (including abstinence and fidelity)
- Making youth services that are related to HIV / AIDS available in the community, including counseling centers and voluntary testing and treatment
- Incorporating the awareness of gender issues and roles of women in homes and relationships
- Promoting an understanding of the reasons to stay alive and in good health
- Getting youth to create their own HIV / AIDS messages and encourage their communities through outreach activities

Who are Captains?

A “Youth Captain” is like the captain of a football team. They are capable of both helping to lead others and acting as a role model in their community. As a model of good behavior, captains encourage their peers by providing necessary support; they aid with proper decision making and with the adoption of healthy behaviors. Being a captain is completely voluntary and the community youth are given the freedom to make the choice to participate on their own, without being forced. Captains use their talents and free time to work with other young people



Youth captains and several members of their team as they participate in a soccer tournament.

and their communities to curb HIV / AIDS in the country. With peers, captains carry out various activities and share their knowledge about HIV with their families and communities.

A captain is a young man or woman who is chosen based on their leadership abilities. Captains are selected by

local authorities in collaboration with youth structures. They are chosen on the basis of their capacity to be a leader, to be a role model for their peers, to help others, and to advocate for others.

Captains:

- Are an example for the rest of the community
- Commit to the training and program responsibilities
- Are self confident (not too shy or too aggressive)
- Are honest
- Are friendly and love other kids
- Are willing to speak openly about HIV / AIDS
- Are confident in their choices
- Do not discriminate against, or reject, PHA
- Are able to listen without being judgmental

Who are Coaches?

"Coaches" are trainers, supervisors, role models and leaders in their community. Using this program, coaches will have the power to have a direct impact on the decisions young people make in relation to their health and behavior. They must agree to be a good role model before participating in the program and they must accept the responsibilities of being a coach. They pledge to join all the other coaches from around the world to fight against the spread of HIV / AIDS and to teach young people to stay healthy and take care of those affected by HIV / AIDS.

At the district level, coaches are chosen by field officers/BCSM project members and coordinators of the structures of the young people. At the sector level, coaches are chosen by the representatives of the agents of community health and the representatives of the structures of the young people.



A group of community coaches after a coach training session.

Coaches:

- Practice the prevention messages that they pass on to young people and communities
- Create a relaxed and fun learning environment
- Actively listen to participants
- Adopt a nonjudgmental attitude toward others
- Develop trust and respect among participants
- Are honest about what they do or do not know
- Know vital health information and guide young people to services and resources
- Are at ease while talking about sensitive topics (HIV / AIDS, abstinence, condom use, etc.)
- Are confident in their presentation skills and techniques
- Are motivated to actively implement the program
- Pay attention to age, gender and the public situation when adapting different activities appropriately
- Are flexible (things do not always go as planned)

The Advantages of the Captain and Coach Approach

The program combines a set of objectives and competitive sport-specific activities in order to elicit a behavior change among young people. This is an opportunity for young people to experiment with these behavioral changes collectively as a team and as individuals. The program first identifies clear objectives and the team members then work to achieve these objectives through the implementation of program activities. Once all objectives are met, team members celebrate by conducting multiple events for their community in order to raise awareness of HIV / AIDS. The "Captain and Coach Approach" emphasizes that solely knowing

the facts about HIV / AIDS is not enough to stop the spread of these diseases. Young people need to ACT! Young people can make a difference and reverse the epidemic of HIV / AIDS.

The coaches and captains identified participate in an initial training workshop to learn various games and activities. Captains also practice leading the program for their teammates, their country, and their communities. After this workshop, coaches and captains meet their team of youth and are prepared to lead them through the program. Coaches must work constantly to develop their own knowledge, attitudes and behavior regarding HIV / AIDS and help all members of their community to do the same.

Who are the Beneficiaries of the Captain and Coach Approach?

The Captain and Coach Approach targets any specific groups where resistance to the adoption of positive health behaviors has been identified in a community. Consequently, beneficiaries usually include community youth and parents. Additionally, captains themselves benefit from training as they develop the skills necessary to become a leader in their community.

Typical programs geared towards the youth often provide limited information and ignore the various factors that influence attitude and behavior. The "Captain and Coach Approach" seeks to target the out-of-school youth population because they are usually the most ignored among a community. Young people constitute a group at risk: they are ignorant, they often take too many risks and they are easily influenced by peers.

The target audience consists of:

- Underprivileged boys, girls, orphans and vulnerable children age 10 and over
- Community-based organizations dealing with youth
- Community players specializing in the health and well-being of youth

How is Captain Training Facilitated?

The activities of the captain training are organized by theme, and the different subjects follow a proposed progression. The general flow includes captains getting to know each other, setting goals for the team, developing communication and personal skills, gaining an awareness of HIV / AIDS and their stigmas, and organizing awareness activities in the community. Captains are taught to think of these activities as an opportunity to do "homework". Whenever possible, captains take home what they have learned and share it with their family or their neighbors. The coaches can use sport-specific activities such as stimulants and ice breakers and are encouraged to be creative. Often the participants themselves have good ideas for simple activities that can be used for this purpose.



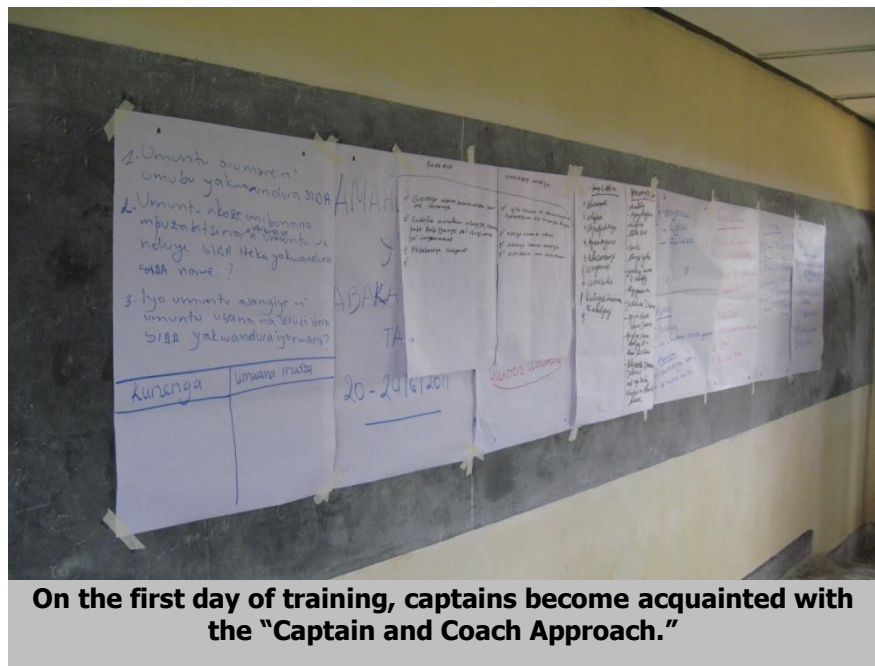
Grace Uwizeye, a program coach and BCSM BCC officer, leads captains in training activities.

Coaches assist with facilitating the work of the captains and help to clarify the captain role and remind these individuals of their responsibilities. They encourage, motivate and inspire the captains. Concrete examples of the responsibilities of a Coach volunteer include assisting the captains as they draft their action plans, aiding the captains in the IPC meetings, advocating for young people, and provide

captains with IEC material. Coaches are also capable of connecting captains to local authorities in order to facilitate their work.

Captain Training Session Themes and Lessons

The captain training has been designed to take place over 5 days. The training is aimed at building the capacity of youth participants in conducting community outreach activities, increasing their interpersonal communication skills and ensuring that they have up-to-date and accurate information on HIV/AIDS, Family Planning, Malaria, and maternal and Child Health. Progression of activities:



On the first day of training, captains become acquainted with the "Captain and Coach Approach."

1) Presentation of the Program and Start-Up Activities

Beginning activities used in training are aimed at generating trust and support among the participants. This introduction to the program sets the ground rules and presents participants with the goals of the training.

2) Personal Values

These activities are designed to help young people develop the skills and values necessary to take a position on certain issues based on their value system. This section focuses on knowledge of HIV / AIDS, sexually transmitted infections (STIs) and other life circumstances that may jeopardize their future.

3) Decision making, Peer Pressure, Choice and Consequences

The activities featured during this component of the training examine the issues that young people face as they explore their sexuality; young people can be knowledgeable enough to make informed and healthy choices for themselves. The activities in this section help to prepare participants to explore the issues of HIV / AIDS that follow in subsequent sections.



Captain training activity in which participants partake in a series of soccer-based exercises related to risks, consequences, and how certain choices affect an entire community.

4) Styles of Communication

Activities in this section are designed to give participants the opportunity to practice good communication skills and discuss why good communication is so important in relationships and risky situations.

5) Basic knowledge of HIV / AIDS

This section discusses the transmission of HIV, various HIV and STI prevention methods, and some basic scientific information relating to HIV / AIDS. Just like how soccer coaches must arm themselves with the knowledge necessary to guide their players to become the best football players they can be, the coaches of this program should also be familiar as possible with HIV / AIDS in order to answer questions from participants and prepare them for the game of life. Coaches should be aware that information on HIV / AIDS can be technical and difficult to understand. If necessary, contact with knowledgeable individuals and experts from the community to get the right answers is a

viable option. Coaches should tell participants that they will seek out answers they do not know and, if appropriate, invite experts to the sessions in order to answer questions from participants.

6) Evaluation of Risk

The activities in this section help participants explore and evaluate their risk of contracting HIV and other STIs. This section encourages participants to choose a specific strategy in life that will serve as their guide for safe behavior.

7) Strategies for HIV Prevention

This section explores the different strategies that participants can use to prevent HIV infection, an unwanted pregnancy, and STIs. Abstinence and mutual fidelity are covered in these activities.



Captains prepare sketches that highlight how youth should address community sex workers, sugar mommies, and sugar daddies.

8) Coping with Stigmas

Stigmas have been driving the HIV / AIDS epidemic because they maintain ignorance among a community. Additionally, discrimination both causes and exacerbates fear, shame and denial about what is really going on. When vulnerable people in the community are isolated, everyone suffers; families, marriages, friendships, social networks and religious organizations collapse. The activities of this section are intended to help young people reevaluate their attitudes and thoughts of people living with HIV / AIDS and develop a greater sense of compassion for these individuals. Additionally, this section teaches youth how to support a person infected and affected by HIV / AIDS.

Planning for Community Mobilization and Engagement

To develop programs and activities that will be effective in their own village, a captain can first identify the problems that relate to HIV / AIDS and sexuality in their own community and then think about what they can do to fight effectively against HIV / AIDS. Captains should consider four questions during this stage in development: (1) What are the issues of sexual health and HIV in our community? (i.e. too many pregnancies among young girls, too many girl prostitutes, friends do not believe in AIDS, young people drink much alcohol, etc.) ; (2) Who will help us to mobilize to fight against the spread of HIV / AIDS and who is active in our community? ; (3) Who in our community serves as a distraction and who will be able to aid us with our programs? ; (4) Where are the locations that we can organize activities in our community?

After identifying the specific problems present in the community, captains should rank them in order of importance and develop a strategy to address the categorized problems. Captains next need to implement an approach that will allow them to solve the problems related to sexuality and HIV / AIDS in the community. Three questions will help them during this process: (1) What health problems among those identified can we help solve? What type of activity will we use? ; (2) Is there enough space and equipment for these activities in our community? ; (3) Who can help us to accomplish these activities?

Captains are encouraged to, under the supervision of coaches, organize events and disseminate information in the community. After training, captains should carry out at least three activities in their communities: (1) an activity for parents; (2) a day of outreach for youth, parents and community members; (3) an activity to fight against stigmas and to support PLWHA.

Communication

Communication is an exchange of ideas and feelings between two or more individuals, and is a key facet to the "Captain and Coach Approach." Furthermore, public speaking is a very important component to being a captain. He/she must speak clearly, loudly and slowly in order to be heard and understood. Before speaking in public, captains must prepare the life-saving messages and arguments that they will be presenting. Additionally, captains should be prepared to respond to questions from the audience. Types of communication emphasized in this approach:

1) Interpersonal Communication (IPC)

Interpersonal communication is the exchange between an individual and the people around them and there is a real exchange between a person who brings news and those who listen (i.e. the conversation with a relative or friend). Captains conduct behavioral change interpersonal communication (IPC) sessions with peers and disseminate messages during the community events.



Examples include:

1. Visiting youth centers and anti-AIDS clubs in order to conduct IPC sessions
2. Discussing health problems like HIV / AIDS with an entire family
3. Focusing an awareness session on STI / HIV / AIDS
4. Performing door-to-door visits (targets for this approach include young house employees who are not able to attend IPC group sessions and unmarried young mothers who are ashamed to be around other young people during public IPCs)

2) Mass Communication

One uses mass media in order to get in touch with people who live far away from each other or to reach a large number of people in an area where it is impossible to see everyone.

Examples include:

1. Utilizing radio campaigns in order to reach a large audience
2. Organizing entertainment education activities (i.e. sketches, songs, poems) to disseminate messages to large audiences

To conduct an effective conversation, a captain must be knowledgeable of the issues facing the youth and must speak clearly in response to any questions from his/ her peers. Captains collaborate with other partners in order to provide educational materials to distribute.

Community Activities

There are many activities that a captain can plan and organize (under the supervision of the coaches) in order to make a difference in his/her community. After training, captains become

identified as peer educators and are responsible for a team of about twenty-five to thirty young people. The group usually gathers once or twice a week for training sessions and community activities.

Captains can distribute educational material about STDs / HIV / AIDS and direct their peers to HIV/AIDS health centers and reassure them about the quality of services (treatment, reception, confidentiality). Additionally, captains can make presentations, role plays, and demonstrations for community viewers and work with a fellow captain to facilitate possible peer counseling sessions. Initiating discussions about HIV / AIDS with family members and answering the questions and concerns of their peers is also appropriate.

In coordination with community IPCs, captains can implement a variety of activities in order to raise awareness in their community:

1) Organize a Sports Day

A sporting event is an ideal opportunity for a captain to meet other young people and other members of the community. This event can help captains to motivate young people and aids captains as they seek to attract an audience for IPCs

2) Invite Stakeholders

A captain can invite a health care provider, a person living with HIV / AIDS, or a campaigner against HIV/AIDS to visit the community during a group gathering. The speaker can answer the questions posed by the group and share his/her knowledge, testimony and advice in the fight against HIV / AIDS.

3) Create Information Stands

A captain can identify the organizations, shopping centers, markets and events that would be willing to accept an information stand for the community. Captains can share handouts and pamphlets on HIV / AIDS and related topics and also answer any questions that youth and parents may have. Captains can use this opportunity to disseminate information and messages at various public gatherings (i.e. community work projects, solidarity camps, evangelization campaigns, etc.).

4) Create a Poster Display

A captain can identify a frequented location in their sector or district to spread a popular poster campaign. Passersby and residents will be educated by these displays in the streets, at work or in public buildings. Shopping centers are a great location to target as well because young people frequent these locations (especially during the evening).

5) Organize an Educative Field Trip

Captains can plan to take a group of youth in an orphanage to visit an NGO that fights against the spread of HIV / AIDS. Captains should organize for a representative of that organization to speak to the group and hold a question and answer session.

6) Organize activities for OVC and PLWHA

Captains must take the lead in the fight against stigmas and support OVC and PLWHA, and they can share gifts with these individuals. They can invite PLWHA to share a meal or to attend captain and coach activities in the community.

Expected Results of the “Captain and Coach Approach”:

- A decrease in rates of infection among youth
- An adoption of safer sex practices among youth
- An increase in risk perception among youth
- A postponement of the onset of sexual relations
- A reduction in the number of sexual partners among youth
- Participants learning their HIV status and living according to the results
- An increase in healthy and informed decision-making among participants
- A feeling of pride and accomplishment among participants
- A sense of empowerment among participants through a knowledge and understanding of HIV
- Participants valuing their own lives
- Participants being inspired to reach other members of the community



Captains demonstrate what they have learned about HIV/AIDS as they respond to a series of questions posed by a program coach.

Conclusion

The Behavior Change and Social Marketing project (BCSM) is an integrated project aimed to promote healthy behaviors in different domains including HIV/AIDS, family planning malaria, maternal and child health and gender based violence. The “Captain and Coach Approach” falls under the umbrella of activities supervised by the BCSM team and is an entertainment education program focused on changing the attitudes of out-of-school youth. Peer educators (captains) and adults (coaches) guide these young people and educate them on good health practices. The approach aims to encourage young people to explore issues relating to reproductive health and works to make sure that out-of-school youth acquire the skills

necessary to enable them to manage the risks posed by HIV / AIDS, STDs, unwanted pregnancies and gender based violence.

Future challenges of the “Captain and Coach Approach” include a potential poor choice of captains and the difficulty of finding out-of-school youth. Additionally, there is a need to act on the various other factors that influence the sexual behaviors of young people (i.e. poverty, economic dependence, alcohol abuse and drug use).

Positive results of the “Captain and Coach Approach” that have been identified thus far consist of an increased use of VCT services among youth. Increased visits to health facilities in order to ask for information related to reproductive health/family planning and increased positive behaviors related to HIV prevention and unwanted pregnancy prevention (i.e. abstinence, condom use, pill use, etc.) have also been noted.

In addition to supervising existing captain and coach programs, CCP will supplement these activities by the reproduction of existing communication materials for distribution to participants during community mobilization activities. After outlining step by step procedures on how to initiate and implement these community mobilization activities for sustainability and expansion to other RPOs in BCSM covered districts, CCP will continue to produce its Distance Learning Program designed to provide ongoing capacity building and mentoring program.



Ryan Kirlin, a BCSM intern and student at the Johns Hopkins University, with youth captains and coaches during training in Nyamagabe district.

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