

# MODULE 1

# BUILDING TRUST

This module is designed with the aim of building basic skills related to persuasion and communication about infectious diseases and their vaccines.

**Note: this module was designed in the context of communication activities about diphtheria for local people. When applying this module, you can easily change the content to apply to any infectious diseases and the relevant vaccines.**

## SOFT-SKILL FOCUS

- Present as trustworthy
- Be sympathetic.
- Be confident.
- Be clear.

## TECHNICAL KNOWLEDGE FOCUS

- Diphtheria disease and its risks.
- Diphtheria vaccine and its benefits.
- Side effects of the vaccines.

## MODULE STRUCTURE

This module has the total time length of 120 minutes with the structure as below:

<b>Step 1</b>	ACTIVITY 1: <i>Warm up activity</i>	10 minutes
<b>Step 2</b>	ACTIVITY 2: <i>Discussion on the content of the communication task</i>	10 minutes
	ACTIVITY 3: <i>Reflection - Happy and Unhappy moment</i>	20 minutes
	ACTIVITY 4: <i>Addressing cause factors</i>	20 minutes
	- <i>Tea break</i> -	
<b>Step 3</b>	ACTIVITY 5: <i>Role Play</i>	30 minutes
	ACTIVITY 6: <i>Discuss the solutions and Reflection</i>	20 minutes
<b>Step 4</b>	Review and closing	10 minutes

### Note for facilitators:

This module uses "role-playing" as the main learning tool, so that participants can discuss and test solutions in situations where the community members disagree with or oppose their point of view. These scenarios are set in the context of an ongoing local diphtheria vaccination program and the required immunization targets not being achieved.

<b>Materials</b>	• Bingo handout for warm-up game (of activity used)	• Pens/ Pencils	• Table 1 template
	• Diphtheria flashcard/posters	• A5 papers	• Table 2 template
		• A0 paper or board	• Table 3 template
		• Tapes	• Table 4 template

## STEP 1: Warm-up and introduction

*This step includes 01 activity – Total time length: 10 mins*

### After this step, participants will:

- Feel relaxed and comfortable to speak within session.
- Share understanding about the tasks of communication about the vaccine.

Facilitators can use games, fun activities or informal group discussion to learn about the monthly tasks of Health Collaborators (HCs). Through sharing about what they have or have not done (or the challenges they have experienced), the facilitators can then elaborate and start the conversation about the skills and knowledge sharing of the whole training program.

### ACTIVITY 1: Games suggestion

*Time length: 10 minutes*

#### Two Truths, One Lie:

All participants form a circle. Each is invited to say 3 things about what they have done/achieved in the last month. However, only 2 things shared are true and one is a lie. The rest of the group must identify which is a lie.

#### Bingo with 9 numbers:

Each participant is given a sheet of paper with a 9-box grid. A clue is written on each square of the grid (about person's hobbies or features, etc). Participants will talk to one another in order to find the person that matches the provided clue and will write that person's name in the relevant square. The fastest to complete the full grid is the game winner. Some small rewards for winners is recommended.



#### **Note for facilitators:**

- Facilitators note down some key points about the tasks mentioned by participants during this activity.
- The activity can be as simple as a request: “**please share what you have done this past week or month**”. HCs are given time to share about their activity. If this activity is implemented, it is advised that the facilitator asks participants to sit in a circle, so people face each other and start sharing from the person sitting to the right of the facilitator.
- Seating and sharing in a circle sets the scene for open discussion.

## STEP 1: Warm-up and introduction

This step includes 01 activity – Total time length: 10 mins

### ACTIVITY 1: Games suggestion

Time length: 10 minutes



*Warm up with game-based activity in a training session.  
Training for health collaborators in Dak Lak.  
Photo credit: OUCRU, 2023.*

***Let's share more ideas on warm up activities!***



## STEP 2: Address challenges in communication about the diphtheria vaccination

This step includes 3 activities – Total time length: 50 mins

### After this step, participants can:

- Address and reflect on the challenges they are facing in communicating about diphtheria.

In this step, the facilitator will support all participants clarify which tasks and aspects of their work as Health Collaborators that the training is targeted at enhancing. Then participants will identify and analyse the challenges that they are facing in communicating about vaccines.

### ACTIVITY 2: Discussion on the content of the communication task

Time length: 15 mins

Following the warm-up game ‘what I have done/achieved over the past month’, facilitators share the notes they have written about participants activities onto a board or piece of paper on the floor. Then ask participants:

- **Which things belong to their communication tasks?**
- **Which tasks are still missing from the list?**

Discuss and share as a group about understandings of the tasks of village health collaborators, especially communicating about infectious diseases and vaccination (See below for suggestions).

Write responses on A0 paper for all to see. Participants can then write answers on handout (See Appendix - Table 1: A “job description” for communication about infectious disease and vaccination”).

#### Table 1: A “job description” for communication about infectious diseases and vaccination

Tasks including:

- ❖ Disseminate information about infectious diseases;
- ❖ Disseminate information about vaccination program and schedule;
- ❖ Convince local community to participate in vaccination program;
- ❖ Convince local community to implement prevention measures;
- ❖ Other?



## STEP 2: Address challenges in communication about the diphtheria vaccination

This step includes 3 activities – Total time length: 50 mins

### ACTIVITY 3: Reflection - Happy and Unhappy moment

Time length: 15 mins

Facilitators ask participants to think about when they communicated about the diphtheria vaccination (recently), and to write down their answers to following on coloured paper provided:

#### The happiest / most exciting moment; and The most unpleasant/ annoying/ disappointing moment

After providing time for participants to answer, facilitators ask participants to elaborate or clarify their notes and give time for participants to share their stories, both happy and unpleasant ones .

When finished, you will have a list of events like this:

Table 2: Happy and Unhappy moment

#### The happiest/ most exciting moment



- Convinced someone to get vaccinated;
- Many people showed up to vaccinate;
- Being complimented as knowledgeable about vaccines and diseases;

#### The unpleasant/ annoying/ disappointing moment



- A person refused to get vaccinated;
- A child was too sick to get vaccinated;
- Someone said they did not trust you because you are newly recruited health collaborator;



*Do you have any note or reflection about this activity?*



## STEP 2: Address challenges in communication (cont.)

This step includes 3 activities – Total time length: 50 mins

### ACTIVITY 4: Addressing cause factors

Time length: 25 mins

Once all happy and unhappy moments are listed and shared, participants are asked to explore the factors/reasons that these moments happened.


All participants are divided into 2 groups and have 10 minutes to do their tasks of:

- One group exploring the **factors that contributed to the happiest moments** and;
- The other group exploring **factors that contributed to the unhappy moments**.

When finished, they will be asked to divide these identified factors into 2 categories:

- **Internal factors**
- **External factors**

See the example below:

 <b>Table 3: Addressing cause factors</b>	
<b>INTERNAL FACTORS</b> (Factors from within, including strengths and weaknesses of the individual which can be changed gradually with training, exercise and other supports, where needed.)	<b>EXTERNAL FACTORS</b> (Factors from outside influences that we cannot control e.g. time pressures on people, geographical location, transport... )
Don't have enough information to answer...	Local people are very busy and not at home...
Haven't had training on these skills...	It is too hard to travel to the village...
Being unconfident...	The children were sick on the date of the vaccination distribution...
.....	.....
.....	.....
.....	.....

## STEP 2: Address challenges in communication (cont.)

This step includes 3 activities – Total time length: 50 mins

### ACTIVITY 4: Addressing cause factors (cont.)

Time length: 25 mins



Group discussion and presenting discussion results on papers and color notes. Training for trainers in Dak Lak. Photo credit: OUCRU, 2022.

***Do you have any note or reflection about this activity?***



## STEP 3: Discuss solutions

This step includes 2 activities - Total time length: 50 mins

**After this step, participants can:**

- Explain how vaccines work verbally and visually.
- Make a list of tips on communicating with people about certain vaccines.

**Materials:**

Roleplay materials

Handout - Table 4: "I can make communication more effective by..."

### ACTIVITY 5: Role Play to find solutions

Time length: 30 mins

Task for each group: **"Convince the community member(s) to bring the child to the vaccination day and have them vaccinated"**.

**How to role play:**

- The facilitator provides participants with a set of **materials**.
- Participants are divided into **groups of three** people, and have five **minutes** to discuss their **communication plan**.
- Then 3 - 4 participants will take turns to **play the role of the "community member"**.
- Each group will try to deliver their communication plan in their turn of role-playing in the form of a typical conversation.
- Each interactive role play will be in 3 minutes or **finish whenever the "community member actors" agree** to bring the child to the vaccination centre/location.
- Group members **can support and help each other** during the role plays

**Set of materials includes** (not limited to):

- Information about diphtheria, the diphtheria vaccination;
- Graphics about diphtheria;
- Relevant magazines or photos from magazines.;

**Clues for preparing communication plan:**

- What to bring?
- What to prepare? How to arrange this information?
- Which information must be delivered?
- Be mindful of the cultural diversity and local dynamics.

**Suggestions of community members' roles:**

- A housewife with 2 children (1 and 4 years old); neither are vaccinated.
- A housewife who doesn't speak Vietnamese with a 1-year-old son who has never been vaccinated.
- A father who has a 10month old infant who had cried and experienced swelling from the first dose of TDPs. diphtheria.

## STEP 3: Discuss solutions

This step includes 2 activities - Total time length: 50 mins

### ACTIVITY 5: Role Play to find solutions (cont.)

Time length: 30 mins



Practicing presentation skills. Training for health collaborators in Dak Lak.

Photo credit: OUCRU, 2023



#### Note for facilitators

- In this module, the role-play scenarios are about the diphtheria vaccination context to explore the difficulties and solutions when communicating about the vaccine. This topic can be flexibly changed to match the current local context and vaccine program.
- Facilitators should encourage participants to explore roles and other scenarios that are more practical to their daily work when implementing a role-play activity.

### STEP 3: Discuss solutions (cont.)

This step includes 2 activities - Total time length: 50 mins

#### ACTIVITY 6: Discuss the solutions and Reflection

Time length: 20 mins

In a role-play, the participants can either successfully convince the community members or not. It is necessary to ask all participants to reflect upon the following:

- a. *Have you encountered a similar situation? - How did you feel at the time? – What did you find most challenging at the time?*
- b. *What was happening in the role play? What has been done well? Why?*
- c. *What do we learn from here? (Pay attention to language, body language and use of materials, etc. )*
- d. *What was not solved? What would you do differently? (Participants can act instead of just describing their solution).*
- e. *From the role-play, what do you think would make communicating about vaccination more effective?*


You can fill in the table below with identified lessons learned:



**Table 4: “I can make communication about vaccination more effective by...”**

Be simple and clear.

Selecting information to form the message and not too technical



Always being ready to response to question and concerns

Explaining the importance from my unique point of view

Knowing that I respond to rejection by...

My language being clear and easy to understand...

Preparing...

My attitude being positive...

## STEP 3: Discuss solutions (cont.)

This step includes 2 activities - Total time length: 50 mins

### ACTIVITY 6: Discuss the solutions and reflection (cont.)

Time length: 20 mins



*Group discussion to solve a problem and present the results on paper. Training for health collaborators in Dak Lak. Photo credit: OUCRU, 2023.*



#### **Note for facilitators**

- In the role-play, discussion and reflection activities, it is essential to highlight 'what lesson can we learn from this' in order to do a better job in the future, rather than pointing out what may be right or wrong in an approach or opinion.
- Facilitators should encourage participants to write down notes in their journals, on coloured sticky notes, or on the board during discussion and reflection. This helps them to follow up and remember the points discussed.

## STEP 4: Review and Closing

Time length: 10 mins

### Review activity: *The reflective journal*

Hand out and introduce the journal to participants and how it will be used over the course of the training to support their learning.

Spend 5 minutes for participants and facilitators to individually complete Training No 1 and the review section in the journal.

### Closing activity: *The learning circle*

All participants are asked to stand in a circle. The facilitator will have a small object to toss around to assign whose turn it is to speak. Whoever has the object will answer these two questions:

- *How am I feeling right now?*
- *What I find the most useful from today's session?*

These questions help the facilitator understand more about the dynamic of the group and get to know more about the participants. It is also helpful for the participants to reflect after a long session with much technical knowledge and information. More than that, this activity is relaxing and suitable for a new group of learners, in which some people might feel shy to express themselves in a group.

### Outcome checklist:

- Share understanding about the tasks of communication about vaccines.
- Use materials to verbally explain how a vaccine works.
- List of challenges health collaborators are facing in communicating about vaccines and vaccine-preventable diseases (for example: diphtheria).
- List of tips on communicating with people about certain vaccines.