

Tackle the AIDS Pandemic Through Community Workers-and Educators in South Africa, Using the Blended Learning Format

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HEALTH[e]FOUNDATION

HEALTH[e]LIVING
South Africa

Introduction

South Africa:

HIV prevalence rate of 18,9 percent (age 15-49).

Due to the severe shortage of human resources in the healthcare sector, community workers play an important role in providing health education, provision of primary health care, community empowerment and preventing HIV/AIDS.

Community workers function as a bridge between the community and the health care system.

The words said by the late South African President Nelson Mandela "Education is the most powerful weapon which you can use to change the world" capture the core of the Health[e]Living program: education for change, learning for life.

What is Health[e]Living?

A blended learning program that aims to train community workers in viable facilitation skills and knowledge which they use to teach young people in their communities about prevention of HIV.

Methods

Blended learning format: participants enjoy both onsite training as well as distance-based learning using computers or tablets.

The program starts with a kick-off workshop followed by a three-month distance-based self-study period. In this period, participants study the informative modules and practice activities of the Health[e]Living program within their community.



The emphasis of the activities is promoting a healthy lifestyle amongst young people aged 12 year and older in different communities. Young people will learn about topics like negotiation skills, sexuality, gender, reproductive rights, prevention of HIV/AIDS and other STIs, nutrition and addiction.

The individual knowledge gain was assessed via pre- and post-test scores per module. Qualitative data was collected using focus group discussions.



In 2014 and 2015, a group of 105 community workers in the Western Cape, South Africa, participated in the Health[e]Living training program divided in 3 separate groups. The majority of participants were female (n=69). The average age was 35 year, most of them worked as counselors (33%), community workers (12%), or students (14%). At the start of the course, 22% of all participants stated they never or rarely used a computer.

Results

Gain in skills

Outreach of the program resulted in a number of 971 trained youngsters.



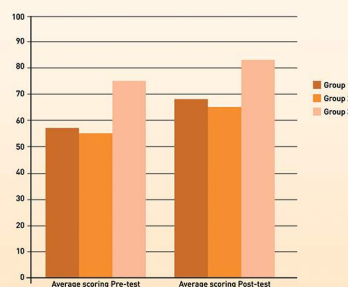
Gain in knowledge

The overall increase in knowledge of community workers after completion of the training program was 12,7%.

The most significant knowledge increase was found in the modules Substance Misuse, Addiction and Global Aids (21,3%), and HIV & Human Rights (18,5%).

The outcomes of the focus groups confirmed community workers valued the content of the modules and used the knowledge and skills they gained in daily practice:

"The program is very good, informative and a useful tool for our community. It will definitely help us grow as community facilitators." -- (Community worker, Cape Town)



Revision

Due to the low completion rate and low outreach numbers the program was revised after the first two groups. Changes were made in: Target group, Content program (see table 1), Onsite training, Measuring impact, and Sustainability.

Table 1: Overview Modules

| | Group 1 + 2 | Group 3 |
|-------------------------------------|---|---|
| Theoretical oriented modules | Prevention of HIV Women and HIV Substance Misuse, Addiction and Global AIDS Adherence Importance and Support Methods of working with people living with or vulnerable to HIV HIV & Human rights | Prevention of HIV Women and HIV Substance Misuse, Addiction and Global AIDS |
| Practical oriented modules | Facilitator skills* Client Management* Communication and decision making skills* Sex and Gender* Healthy Body* Safe Sex* STIs* | Facilitator skills Client Management Communication and decision making skills Sex and Gender Healthy Body Safe Sex STIs |

*No tests included

Conclusion and Discussion

- Blended learning is an effective method to train community workers in up-to-date knowledge and skills in order to educate youngsters in communities on prevention of HIV
- Important: adapt the program not only to cultural context, but also to the theoretical background of community workers themselves and the specific issues that play a role within communities

Which methods can be used to measure the long-term impact of the program?

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