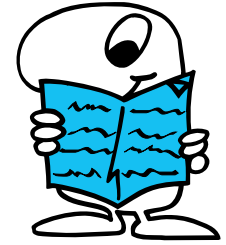


Initiative for Sub-District Support



Kwik-Skwiz
#3

A DISTRICT COMMUNICATION STRATEGY FOR HEALTH

The issue

Communication strategies for health in South Africa today risk being equated with the installation of computers! This brief highlights two points:

First, comprehensive communication strategies need to be thought out very carefully.

Second, computerisation of health facilities can be a waste of time and money unless there are clear reasons for use and adequate technical and user support.

An approach to developing a communications strategy

The scope of the strategy

Three questions should be asked in developing a communications strategy:

Who needs to be communicating with whom?

- Target

What do they need to be communicating about?

- Content

How can they communicate?

- Process and means

1. Target of communication

You should define the various groups in the district who need to be communicating. For example, community members need to talk to clinic managers, and nursing practitioners need to talk to doctors at the district hospital.

2. Content of communication

You should specify what these various groups need to talk to each other about i.e. define information flows. For example, the clinic manager needs to communicate with the district office about monthly statistics, duty rosters, equipment and drug requests. The hospital needs to communicate laboratory results and referral follow-up back to clinics.

3. Process and means of communication

You need to decide how this communication should occur eg. In routine meetings, in writing, by transport, or by fax, telephone or email.

Situation analysis

Having defined the scope of your strategy, you should assess the existing situation to identify its strengths and problems:

- Flows of information within health services
- Communications infrastructure, both for community and health services (transport and roads, telecommunications, computer availability and service providers)
- Skills at facilities (ability to use fax, computers, email etc)

Formulating a strategy

Your strategy should aim at strengthening the ability of identified target groups to communicate effectively.

This may entail one or more of four support strategies, namely:

- *systems development* (negotiating and opening channels of communication)
- *infrastructural development* (negotiating telephones, electricity, transport and roads)
- *training* (switchboard/ fax/ computer/ email)
- *applications development* (health promotion material, transport request forms, access to information resources, laboratory result forms etc)

A realistic approach to computerisation

Principles

As there is a roll-out of computer installation in health services in South Africa, the following points should be noted:

- Computers have the potential to improve work efficiency and communication.
- We need to shift away from the use of computers primarily by administrative personnel to their use by health service managers and health workers.
- District and facility managers should be computer

literate and have access to word processing, computing and electronic communication.

- Computer infrastructure and installation must be appropriate. For example, expensive networks and satellite link-ups are not a priority in facilities without water, fridges, good drug supplies or equipment.
- Technology frequently obscures the main focus, which is communication.

Lessons from HealthLink

HealthLink is an initiative to promote electronic communication as a tool for management and support for health workers. We have learnt three important lessons through its implementation over the past two and a half years, which we want to share with provinces involved in computerisation.

1. Build and extend your networks around specific uses

We have found that a critical mass of users does not necessarily translate in high usage of the system. It is best to plan extensions of the network around specific applications. For example, a system for accessing laboratory results electronically may be the reason for extending the network from a central laboratory to several health centres.

2. Your computerisation strategy must have three arms: technical, user support and application.

There is a need for continuing technical support to ensure that the computer remains in operation. Technical support cannot always be provided from head office, and an important component of the strategy is to build local capacity to manage the system locally.

Another critical aspect is to develop uses (applications) for the computer. For example, deliberate effort is needed to get mentors based at training institutions to begin to provide distance-support to local health workers.

But the most neglected component is *user support*. Many people have never used a computer, nor even a typewriter. User support needs to be sustained over a period of time until people feel comfortable using the facility. In-service, on-site training is better.

3. Identify "champions" who will use the technology

One of the most successful uses of HealthLink has been a discussion group for rural doctors, who do not require much user support and had expressed a clearly defined need to communicate with each other. In a rural clinic in Impendhle, a particularly enthusiastic nurse uses email to communicate with her tutor and to access information. These people can help encourage others to realise the potential of new technology.

Three ideas from the ISDS

As you implement a communications strategy, consider these three ideas from the Initiative for Sub-District Support.

1. ISDS has employed a town and regional planner to help districts develop their communication strategy. The thinking is that communication is a crucial tool for rural development, that should not be the exclusive domain of 'IT' personnel and computer wizards.
2. In Underberg/ Impendhle/ Pholela, the district health management team has convened a "community telephone forum" to convey the community's telecommunications needs to Telkom. Hopefully, this will result in a plan for the installation of 'phones throughout the community in the near future. Telkom is very enthusiastic about such meetings, as it provides them with an entry into specific rural communities and allows discussion about security and prevention of copper wire theft. (Telkom has contractual obligations to install over a million telephones in rural areas within five years - so make use of this opportunity!)
3. In two of the four sites, we have commissioned trainers from local NGOs, technikons or high schools to provide continuing support to new users over the next few months. This is an effort to overcome the initial fears and discomfort that many people have with starting to use computers. ■

This brief was compiled by David Harrison, with input from Andrew Boule and Vishal Ramduny.

What is Kwik-Skwiz?

Kwik-Skwiz is a brief designed for busy health service managers and health workers. It aims to keep you informed of progress with the Initiative for Sub-District Support, and to share lessons and experiences from different sites across South Africa.

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