

BEHAVIOR PROFILE: HEALTH WORKERS TREAT CLIENTS WITH KINDNESS AND RESPECT

HEALTH SYSTEMS
STRENGTHENING GOAL

Health Goal: Catalyze transformation of a holistic health system to sustain equitable improvements in health for all

BEHAVIOR

Health workers treat clients with kindness and respect



BEHAVIOR ANALYSIS		STRATEGY	
BEHAVIOR AND STEPS	FACTORS	SUPPORTING ACTORS AND ACTIONS	POSSIBLE PROGRAM STRATEGIES
<p>What steps are needed to practice this behavior?</p> <p>Behavior</p> <p>Health workers treat clients with kindness and respect</p> <p>Steps</p> <ol style="list-style-type: none"> 1. Empathize with the need for kind and respectful care 2. Recognize the importance of kind and respectful care for better health outcomes 3. Seek better understanding of community practices 4. Gain increased understanding of each client's situation 5. Commit to practicing kind and respectful care with clients 6. Ask for training on kind and respectful care 7. Know where to find positive role models and seek to do what they do 8. Discuss kind and respectful care practices with peers, friends and family 9. Derive personal pride and satisfaction from adopting kind and respectful care 10. Seek/receive feedback from clients/caregivers and supervisors on kind and respectful care practices 	<p>What factors may prevent or support practice of this behavior?</p> <p>STRUCTURAL</p> <p>Service Provider Competencies: B Health workers do not treat clients with kindness and respect because they have not received training to provide kind and respectful care.</p> <p>Service Experience: B Health workers do not treat clients with kindness and respect because they do not receive mentoring or feedback from supervisors on practicing kind and respectful care.</p> <p>Service Experience: B Health workers do not treat clients with kindness and respect because health facilities and supervisors do not offer any incentives or rewards for kind and respectful care.</p> <p>Service Experience: B Health workers do not treat clients with kindness and respect because they may feel too overwhelmed with heavy workloads, too many clients, and poor work environments.</p> <p>SOCIAL</p> <p>Family and Community Support: B Health workers do not treat clients with kindness and respect because these providers' family members, friends and neighbors may value their income and positions more than they value how the provider treats their clients.</p> <p>Family and Community Support: M Health workers may treat clients with kindness and respect because clients who appreciate their providers may offer gifts or prayers for them.</p> <p>Family and Community Support: M Health workers may treat clients with kindness and respect because they have peers who practice kind and respectful care so they are more likely to do the same.</p> <p>Family and Community Support: B Health workers do not treat clients with kindness and respect because they do not have role models to emulate kind and respectful care practices.</p> <p>Norms: B Health workers do not treat clients with kindness and respect because clients are not accustomed to having kind and respectful care from</p>	<p>Who must support the practice of this behavior, and what actions must they take?</p> <p>INSTITUTIONAL</p> <p>Policymakers: Develop policies to enforce the right to respect and to hold providers accountable for respectful care.</p> <p>Policymakers: Reassess compensation and establish a system of incentives and rewards for kind and respectful care.</p> <p>Peers of Providers: Compliment other providers who they see practicing kind and respectful care.</p> <p>Peers of Providers: Talk with and give feedback and advice to other providers who they see treating clients with disrespect.</p> <p>Supervisors/Mentors: Ask for and implement a supportive supervision tool that includes monitoring and providing constructive feedback on kind and respectful care.</p> <p>Supervisors/Mentors: Show kindness and respect to providers during supportive supervision - role modeling kind and respectful behavior.</p> <p>Managers/Health Center Heads: Reassess staffing and adjust workloads as possible.</p> <p>Managers/Health Center Heads: Establish a Provider-of-the-Month Award to recognize providers who exemplify kind and respectful treatment of clients.</p> <p>Managers/Health Center Heads: Create a work environment that encourages kind and respectful care- from demonstrating through leadership to installing kind and respectful care reminder posters in exam rooms and waiting rooms.</p> <p>District Health Officers: Plan and budget for training of health workers in kind and respectful care.</p> <p>District Health Officers: Establish a client feedback system utilizing radio, social media or community score cards to elicit polls and feedback on "most respectful" provider and "most respectful health centers".</p> <p>District Health Officers: Budget for systems of feedback, incentives and rewards for kind and respectful care, as well as a adequate compensation for all health workers.</p> <p>COMMUNITY</p> <p>Community Leaders: Facilitate community discussions about kind and respectful care in local health facilities, including using</p>	<p>What strategies will best focus our efforts based on this analysis?</p> <p>Strategy requires Communication Support</p> <p>ENABLING ENVIRONMENT</p> <p>Partnerships and Networks: Create joint health leadership, health staff and client opportunities to provide feedback and discuss improvement, to quality service provision</p> <p>Policies and Governance: Create innovative recruitment, retention and professional development policies and guidelines, including incentives, rewards and compensation.</p> <p>SYSTEMS, PRODUCTS AND SERVICES</p> <p>Quality Improvement: Refine and revise supportive supervision guidance and training to include sessions with role playing on kindness and respect, empathy, active listening, and an affirming communication.</p> <p>Quality Improvement: Create on-the-job refresher sessions for staff.</p> <p>Quality Improvement: Develop and distribute reminder tools for providers to practice kind and respectful care.</p> <p>Quality Improvement: Establish a Provider-of-the-Month Award to recognize providers who exemplify kind and respectful treatment of clients.</p> <p>Client Exit Surveys: Develop and promote SMS text messaging and social media services for clients to provide instant feedback and answer quick survey questions on their provider experience. Routinely monitor and report on client feedback.</p> <p>DEMAND AND USE</p> <p>Advocacy: Create patients' rights multi-media package (print, radio, television, social media) discussing their roles and responsibilities in quality service delivery and disseminate to clients.</p> <p>Communication: Develop tailored provider package with information on culture of kindness and respect, clients rights, etc. in handy, user-friendly format designed with behavior at the center based on human-centered design principles.</p> <p>Collective Engagement: Create peer-to-peer sharing sessions for providers to share experiences and celebrate kind and respectful care practices.</p>

health workers, and so do not expect or demand it.

community score cards to rate the quality of care.

Norms: Health workers do not treat clients with kindness and respect because they do not view kind and respectful care as typical or expected in health facilities. They may also not be treated kindly and respectfully by their supervisors or superiors. B

HOUSEHOLD

Spouses: Talk with their spouses who are providers about opportunities and challenges in treating clients with kindness and respect.

Children: Talk with their parents who are providers about how their work is going and whether they treat their clients with kindness and respect.

INTERNAL

Attitudes and Beliefs: Health workers may treat clients with kindness and respect because they appreciate positive feedback and expressions of gratitude from their peers, clients, and supervisors. M

Attitudes and Beliefs: Health workers do not treat clients with kindness and respect because they may have classist attitudes toward their clients and may look down on them if they have a lower education level or if they are poor. B

Attitudes and Beliefs: Health workers do not treat clients with kindness and respect because they may believe that some clients are lazy or stubborn and therefore do not want to be kind or respectful to them. B

Self-Efficacy: Health workers do not treat clients with kindness and respect because they may not believe that treating clients with kindness and respect will make any difference in their clients' health outcomes. B

Knowledge: Health workers do not treat clients with kindness and respect because they may not know that kind and respectful care is important in providing quality care. B

Skills: Health workers do not treat clients with kindness and respect because they may never have had an opportunity to observe or practice kind and respectful care during their training or mentoring. B