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Communication  
&  
Human Behaviour

DIARRHOEAL DISEASES MANAGEMENT  
SELF INSTRUCTIONAL SERIES -NO 1



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Communication  
&  
Human Behaviour

CONTRIBUTORS

Dr. Nahid M. Kamel

Dr. Ahmed N. Abdel Moneim

Dr. Mohamed Labib Ibrahim

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**INTENDED USERS:**

Within the context of the task-based curriculum for practicing physicians, residents and house-officers

**POTENTIAL USERS:**

Newly appointed physicians  
Undergraduate medical students  
Undergraduate students of the High  
Institute of Nursing

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TO THE LEARNER

This is a self- instructional unit that covers communication and human behaviour in relation to diarrhoea. The unit is self contained. Upon completion, you will be expected to accomplish the objectives stated in the unit. So it is important that you follow closely the directions below.

DIRECTIONS

- 1- Read through the unit in sequence from beginning to end.
- 2- Read carefully the objectives. They will tell you what you are expected to learn from the information in the unit. They also indicate what you will be asked on the Post-Test of the Inservice training Course.
- 3- Read information Section 1
- 4- Write your answers to the practice questions at the end of Information Section 1 on a separate sheet of paper. Do this without looking back at the information.
- 5- After you write your answers, look at the answers given on the next page, in order to check your work.
- 6- If any of your answers are incorrect, go back and read the information in Information Section 1, then make another attempt to answer the same practice questions. Make sure that all your answers are correct before moving on the next section. ( Information Section 2, etc....)
- 7- Proceed through the entire unit in the same manner.
- 8- Be ready for your final assessment.

TO THE TRAINER

This unit should be distributed in the first day. The information provided will help the trainees understand behaviours in relation to diarrhoea. Also it will provide information related to the principles of communication. This will provide trainees with the principles needed for interviewing mothers in history taking as well as in health education activities.

REMEMBER

Distribute this unit at the end of day one.

Instruct the learners to read the material carefully and follow up the direction.

Next day make sure that learners responded correctly to the questions .

Discuss their problems .

Use the progress test as a post test for this unit to ensure that they learned the subject.

## INTRODUCTION

An important background of health work is the knowledge of what makes people healthy and why they become ill, particularly knowledge of people's own actions and behaviours.

Behaviours change all the time as a result of changes in the environment, demographic background of the population and in the culture. In all communities, there are already many kinds of behaviours. Some of these behaviours promote health, prevent illness and help in controlling disease and disability. These acceptable healthful behaviours should be identified and encouraged by health workers. However, there are also behaviours that can cause illness and disability. These unhealthy behaviours should be identified, analysed and corrected.

As health workers we should learn and understand what makes people behave as they do. We should understand the difficulties people often face when trying to make improvements. We should be able to communicate efficiently with them to be able to listen, understand and help them.

In the first section of this unit you will read about the different kinds of behaviours related to diarrhoea. In Section 2 you will be able to understand the reasons why mothers behave the way they do. In Section 3 you will learn about the different barriers that may block your communication and educational activities. In the last section you will be exposed to principles of communication.

OBJECTIVES

Upon completion of this unit, the learner will be able to:

- 1- classify beliefs
- 2- Given a case history will be able to identify:
  - a- behaviours that
    - cause diarrhoea
    - control diarrhoea and dehydration
    - prevent diarrhoea
  - b- barriers to using a health center
- 3- Given a case history will be able to criticise the process of communication

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INFORMATION SECTION 1

HUMAN BEHAVIOUR AND DIARRHOEA

An important background to health work is knowledge of what makes and keeps people healthy and why they become ill. There are several factors that determine health at the level of individual, family and community. These factors include human biology, health care system, life styles and the environment. Figure 1

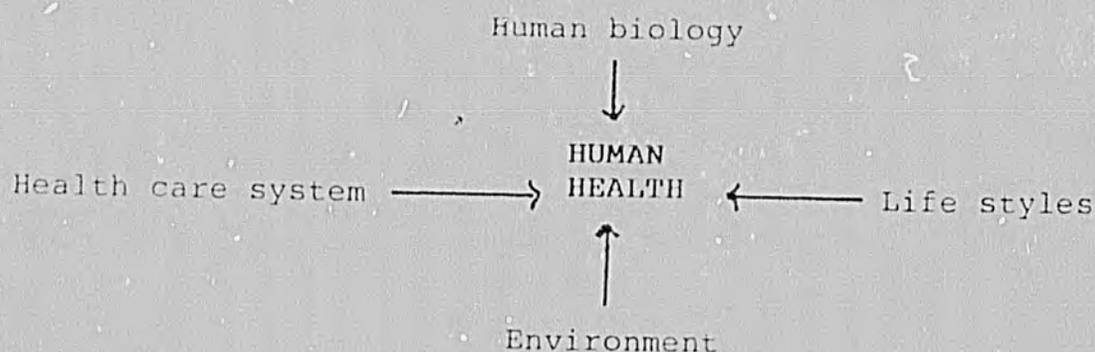


Figure 1

There is another reason why people become sick or stay healthy. This is their own actions or behaviours. In all your activities as a physician it is important to be able to identify the behaviours that cause, cure or prevent a health problem. It is important to understand these behaviours. This knowledge will help you to select the right way and the method to deal with the problem at hand.

Now let us take diarrhoea as an example. Diarrhoea is one of the most important health problems and a major cause of death in infants and young children. Mortality from diarrhoeal diseases is usually due to dehydration. Diarrhoea is a common symptom of many diseases that are often the result of poor sanitation and lack of personal hygiene.

So what are the behaviours that can cause diarrhoea ?

These behaviours include the following :

- o Feeding children with bottles
- o Not washing hands before eating or handling foods
- o Eating raw vegetables and fruits without washing them
- o Using dirty plates, cups and spoons
- o Defecating anywhere on the open ground
- o Not washing hands after using the W.C
- o Disposing of refuse openly
- o Leaving foods uncovered

What are the kinds of behaviours that can control diarrhoea and dehydration ?

These behaviours include the following:

- o Allowing the child to take plenty of fluids such as clean water, soups, rice water
- o Continue breast feeding the child
- o Never starve a child
- o Ask for professional advice once diarrhoea occurs
- o Give ORS by cup and spoon
- o Follow doctor's instructions as regards feeding and diarrhoea management



When a child has watery diarrhoea, giving ORS by cup and spoon treats dehydration and controls diarrhoea. If given early, ORS can prevent dehydration

What are the kinds of behaviours that help in preventing diarrhoea ?

These behaviours include the following:

- o Breast feeding and proper weaning practice
- o Using clean water for drinking and cooking
- o Washing hands with soap and water before preparing food, before feeding a child and before eating
- o Washing plates, cups and spoons with clean water and soap
- o Defecating in sanitary latrines and using W.Cs
- o Covering food to protect it from dust, insects and animals



BREAST FEEDING HELPS  
IN PREVENTING DIARRHOEA

INFORMATION SECTION 1

PRACTICE QUESTIONS

1- State five factors that affect human health.

- 1-
- 2-
- 3-
- 4-
- 5-

READ CAREFULLY THE FOLLOWING AND THEN RESPOND TO THE QUESTIONS STATED:

Fathia is a wife and a mother who lives in a village. She has six children. Fathia 's husband is a farmer. Fathia is a proud housewife. She likes her house to be clean. She covers all food with a clean cloth. She washes thoroughly her pots, plates, spoons and cups. Also she washes all food items before they are cooked or eaten.

Fathia 's house has no water supply, or latrine. Fathia collects water from the municipal source. She stores her water in the zeer. She used to cover the zeer, but her children uncover it so many times. In the end she did not pay any attention to whether it is covered or not.

Fathia's family uses a corner in the yard for defecation. They have only a pit. Fathia cleans her hands thoroughly with soap and water after defecation. Her children usually defecate anywhere. Fathia does not tell them to wash their hands. She feels that children's excreta are not dirty.

Fathia breast feeds her children until they are twelve months of age. She also takes them to the center for having their vaccinations. However, she insists that her children wear blue stones to prevent the evil eye and to protect them

Fathia does not like to go to the rural center. The doctor sometimes is not there, and the nurse is too young to understand her needs. Moreover, she does not think that the nurse

is friendly. During Fathia's last visit to the center to vaccinate her youngest child against measles, the nurse kept them waiting while she was telling the laboratory assistant about a film she has seen. There were no chairs and Fathia had to stand and wait.

When her youngest child was ill with diarrhoea, Fathia chose to consult the daya and the herb seller ( the Attar). Fathia's mother in law told her to stop all foods to let the child's bowels rest. The daya told her to give fluids. The Attar told her to give weak tea and " Yansoun". Her neighbour told her to give the child ORS.

Fathia thought about all the advices that she had received. She decided to give ORS. Her neighbour is considered by all the people in the village as a wise woman.

2- Identify behaviours that can cause diarrhoea

3- Identify behaviours that can control diarrhoea

4- Identify behaviours that can help in preventing diarrhoea

INFORMATION SECTION 1

ANSWERS TO PRACTICE QUESTIONS

1-

- 1- Human biology
- 2- Health care system
- 3- Environment
- 4- Life style
- 5- Human actions and behaviours

2-

- Leaving water in the zeer uncovered
- Defecating in the yard
- Children not washing their hands after defecating

3-

Giving ORS for treating dehydration

4-

- Breast feeding
- Taking the child for measles vaccination
- Using clean water for drinking and cooking
- Washing utensils
- Washing hands after defecating
- Covering food

## INFORMATION SECTION 2

### REASONS WHY MOTHERS BEHAVE THE WAY THEY DO

There are various behaviours that can cause diarrhoea, can control the disease and can help in preventing it. Knowledge of these behaviours is not enough. You should also be able to understand the reasons why mothers behave the way they do so. To do so the following questions should be answered:

- o Is there a cultural reason ?
- o Are people compelled by the resources available to them to behave so ? Do they lack the resources needed to change their behaviour?
- o Are they influenced by other people in their family, neighbourhood or community ?
- o Are their behaviours whether healthy or unhealthy a result of their knowledge and attitudes ?

Let us discuss these questions one by one .

#### IS IT CULTURAL ?

The normal behaviours and beliefs of individuals in a community form a way of life. This is what we call a culture. Each culture has its own special way of doing things, and its own beliefs about why things should be done in that way. This common pattern of behaviour helps individuals in the same culture to understand and feel comfortable with life. You have to appreciate the fact that **NO CULTURE IS WRONG OR RIGHT. NO CULTURE IS SUPERIOR OR INFERIOR.** Each is simply one life style that people has adopted. You should appreciate the fact that cultures have been developed over thousands of years by people living together and sharing experiences in a certain environment. You should realise that cultures continue to change sometimes slowly, sometimes quickly. These changes may occur naturally or due to contact with people of other cultures.

Beliefs are part of the culture itself. Beliefs are usually held very strongly. Our beliefs are influenced by our grand parents, parents and other people that we respect. Beliefs are often difficult to change. We can classify beliefs as:

Neutral beliefs

Helpful beliefs

Harmful beliefs

Neutral beliefs are beliefs that are neither good nor bad. In our culture, mothers believe that children should wear blue beads. They believe that blue beads will prevent the evil eye. Well such beads won't harm the child, but also will not help him.

Helpful beliefs should always be encouraged. Urban families believe that raw milk is not safe. This is correct. As a physician you should promote this belief.

The belief that children with diarrhoea should be starved is very harmful, and this type of belief should be discouraged. Starving means withholding fluids and food. Fluids are needed to replace losses. During diarrhoea the small intestine loses its capacity to absorb water and electrolytes. Instead it secretes electrolyte rich fluids. If these fluids are not replaced, the child will be dehydrated. Moreover, in addition to causing acute dehydration, diarrhoea impairs the nutritional status. Studies show that diarrhoea cases that were fed recovered sooner, and gained weight better than those who were not.

Concentrate in your health education activities on trying to promote healthful beliefs and to change only the harmful ones. Mothers may get angry if too many of their beliefs are challenged. This will make them very resistant and they will refuse to cooperate with you. Ignore neutral beliefs. Deal only with harmful beliefs according to their importance without criticising or blaming mothers.



, A NEUTRAL BELIEF  
THIS CHILD IS WEARING AROUND HER NECK BLUE BEADS  
TO PREVENT THE EVIL EYE

IT IS NOT NECESSARY TO CHANGE SUCH A BELIEF

It is important to use your knowledge and understanding of a culture to plan health education activities. The value of children for Egyptians for example, can be used positively in your health education activities. By stressing the importance of keeping children healthy you can encourage a mother to attend the rehydration center early when the child has diarrhoea and influence her to bring her child to a health center for a vaccination.

In Egypt, you can also use religion to support your health activities. You can quote from the Koran and Sunna to promote healthy behaviours in child care. Islam for example promotes breast feeding :

" THE MOTHERS SHALL GIVE SUCK TO THEIR OFFSPRINGS,  
FOR TWO COMPLETE YEARS FOR THOSE WHO DESIRE TO  
COMPLETE THE TERM "

Surat II Bagara Verse 233

In all your activities, you have to understand the culture of your community and their beliefs- and- respect them. You should remember that because of your training you belong to what is called a "professional culture ". You have your own ideas, and ways of doing things that are often quite different from those of the community you serve.

The first thing you should do to understand the culture of the community is to look around,listen carefully, observe and try to understand. If a mother listens and does not contradict you,it does not mean that she understood; or that she is stupid. In our culture we respect doctors and nurses,we respect our elders and we respect those who are educated. She respects you. To communicate effectively with her, you must respect her too.

#### IS IT DUE TO RESOURCES AVAILABLE ?

What do we mean by resources ? Resources include facilities, money,time,help given,skills and so on. The location of resources is also important. It must be nearby and available if a person is to use it.

Here is an example:

Fattomah is a wife and the mother of six children. She lives in a village. She is looking after her own family as well as her inlaws. Her house is quite big. She is supposed to do all the housekeeping,cooking duties and look after the animals. She also has to help her husband in the field.

Fattomah is very busy. She has very little time to spare. She does not use the services of the rural unit regularly. The unit is far away and she has to walk for quite a distance.

The family can easily feed the children well. Eggs,milk and vegetables are all available to them. However,

the family has no running water in the house. Fatoumah has either to obtain her water from a near by canal or walk for a distance to obtain water from the municipal water source. Fatoumah uses the canal water.

There are various examples of lack of resources that can explain behaviours. In this case the woman lacks time, the unit is situated far away from her house. She has no running water in her house and the canal is nearby.

#### ARE THEY INFLUENCED BY OTHERS ?

One reason for our behaviour is that we are influenced by people who are very important to us. When someone is important to you, you listen to what he or she says and often behave the way he or she does. This is equally true to every body, including mothers. So, who can influence mothers ? Grandparents, husbands, relatives, religious leaders, close friends, people with experience and special skills and people who try to help them when they are in need of help. You and your team can be a part of the group if you show interest, concern and succeed in establishing a relationship with mothers.

#### ARE THESE BEHAVIOURS A RESULT OF THEIR KNOWLEDGE AND ATTITUDES

Knowledge comes from experience. Once mothers successfully rehydrate their children, they will learn that ORT is the method of choice for managing dehydration. Mothers also may learn this from other mothers who have used ORT. Knowledge differ from beliefs. Beliefs are usually derived from parents, grandparents, and other people one respects. Attitudes reflect our likes and dislikes. They often come from our experiences or those of people close to us. As educators our attitudes towards the people we are educating have an influence on what they learn and on their attitudes and behaviour too.

Here is an example.

Khadiga went to the rehydration center. The doctor examined her child, wrote down the treatment plan. She asked him what is wrong with her child; he did not answer. He seemed so unconcerned. Now Khadiga has a bad attitude towards this doctor. She does not like him. That bad attitude could encourage Khadiga not to attend this center again. This might mean as well that Khadiga will not learn or remember what the doctor told her. The nurse in the rehydration center noticed that Khadiga is not comfortable. She discussed the condition of her child and the treatment plan. She gave her the first cup of ORS and showed her how to hold her child and how to give ORS. The nurse smiled at Khadiga, and told her to call her if she needs any help. The nurse is sympathetic, friendly, and understanding. Khadiga likes the nurse. Her good attitude towards the nurse may have a stronger influence on Khadiga's behaviour and future attendance at the center than her bad attitude towards the doctor.

Khadiga's attitude might also affect the attitudes of her neighbours and friends. Usually, we are influenced by our attitudes. However, sometimes we are unable to do so.

INFORMATION SECTION 2

PRACTICE QUESTIONS

1- Enumerate factors that influence behaviour

2- Classify beliefs.

INFORMATION SECTION 2

ANSWERS TO PRACTICE QUESTIONS

1-

- o Cultural factors
- o Resources available
- o Influence of important people
- o Knowledge and attitudes

2-

- o Neutral beliefs
- o Helpful beliefs
- o Harmful beliefs

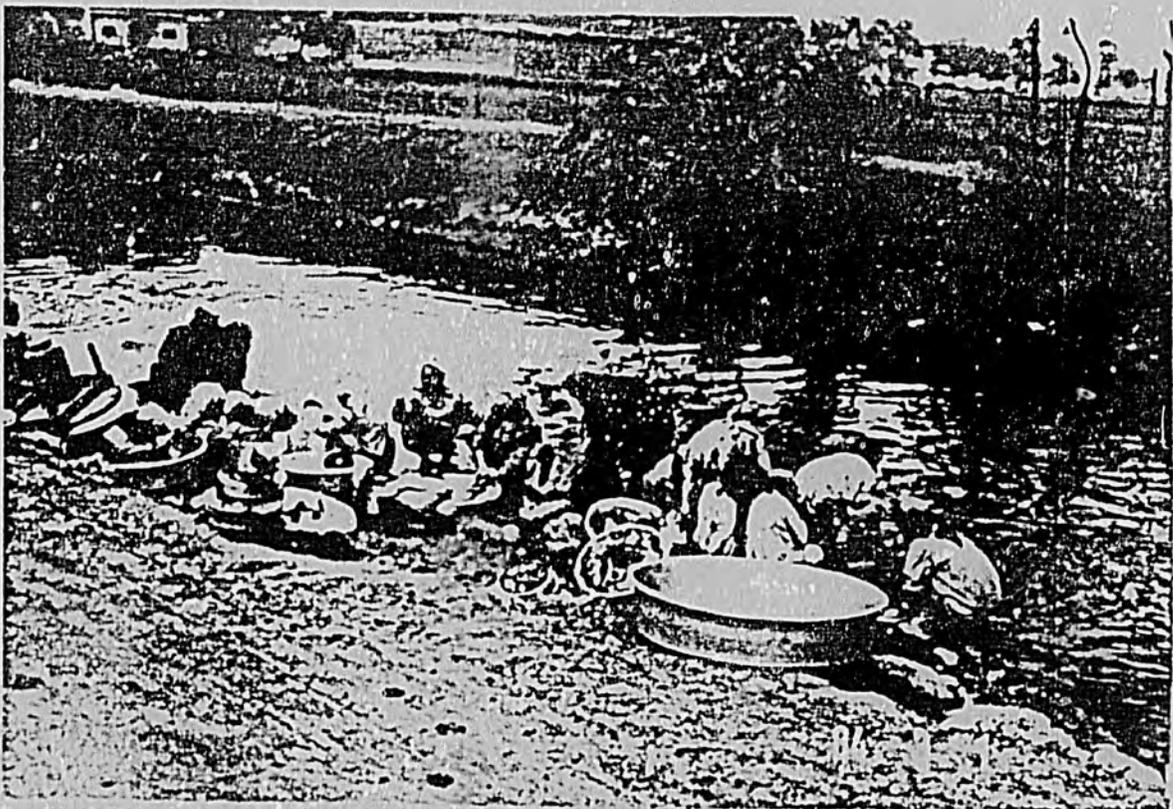
INFORMATION SECTION 3

BARRIERS

WHAT IS A BARRIER ?

A barrier is something that blocks the process of education, and limits the communication between facility staff and community members. Barriers can be experienced by individuals, community-based or associated with center's staff and the services they render.

Dear learner, think about your culture, attitudes and beliefs. Study the community you are working with. What are their beliefs, attitudes and knowledge about diarrhoea prevention and control? What are the resources available to deal with this health problem? Ask yourself if your center is properly located and well operated or not? How do staff members behave with the consumers of the service? This is important because these factors can be barriers to your communication activities.



Lack of water supply- Cultural barriers

Barriers that may interfere with the educational and communicational activities include examples such as

- PHYSICAL : mothers are not comfortably seated.
- TIME : mothers can not stay any longer
- SOCIAL : illiteracy
- CULTURAL : beliefs on the cause of disease, treatment, feeding and prevention.
- ATTITUDINAL : lack of faith in services rendered  
attitudes towards diarrhoea  
attitudes towards the health team  
attitudes towards ORT, medicine, drugs.

As a physician, communicator and educator you have to understand these barriers and deal with them.



A well operated rehydration center facilitates communication and education

INFORMATION SECTION 3

PRACTICE QUESTION

Read carefully the following and then respond to the question stated:

Nabaweyah is an average village woman. She is illiterate. Her house is far away from the rural center. However, she goes to the center only for vaccination. Her husband is the one who insists that she goes to the center for this service. She does not believe that any vaccine can protect against disease. A "hejab" is more effective as all diseases are caused by the evil eye.

During her last visit the center was too crowded, and she stayed for hours. The doctor scolded her for not coming on the correct time. She did not like him as he embarrassed her in front of the villagers. The nurse was even more rude. The nurse was too young to deal with any of her problems. She was not married.

1- Identify barriers to the use of the rural health center.

INFORMATION SECTION 3

ANSWER QUESTION

1-

- |                |   |
|----------------|---|
| 1- Physical    | Crowded center  |
| 2- Time        | Delay in having the service                                   |
| 3- Social      | Illiteracy  |
| 4- Cultural    | The nurse is too young<br>to understand her needs<br>Evil eye |
| 5- Attitudinal | Negative attitude towards<br>the physician and nurse.         |

## INFORMATION SECTION 4

### PRINCIPLES OF COMMUNICATION

You have learned that there are many kinds of behaviours that promote health, prevent diarrhoea and help in its control. These are the behaviours that should be identified and encouraged.

Some behaviours, however, are harmful. These are the behaviours that should be dealt with. As members of the health team we should help the community members to adopt healthful behaviours.

You can not force or push people to change their behaviours. Instead you must convince them of the importance of changing their behaviours. To do this, you must give people the information and facts that will help them decide to change their behaviours. But their decision to change is not the final step. You have to work with them to change their behaviours.

### HOW DO WE WORK WITH MOTHERS ?

How can we work with mothers and help them learn the skills needed to prevent and control diarrhoea ?

To enable mothers to learn these skills we need to :

- 1- Establish a good relationship
- 2- Communicate clearly
- 3- Encourage participation
- 4- Avoid prejudice and bias

## HOW DO WE ESTABLISH A GOOD RELATIONSHIP ?

In order to establish a good relationship with mothers, you must be visible to them, first of all. They must see you at work and feel you support them and care about their children's health. Do not hide behind a desk. Instead you must reach out to the mothers. You have to show them what to do to help their children, and to teach them how to do it. You must listen to them. You must always be available to help when they need it. If you succeed in giving mothers skills to continue in caring for their children when they return home, mothers will feel they have accomplished something. They will also appreciate you for your concern and for your interest in their children's welfare.



Dr. Ilham is training a mother on how to give ORS

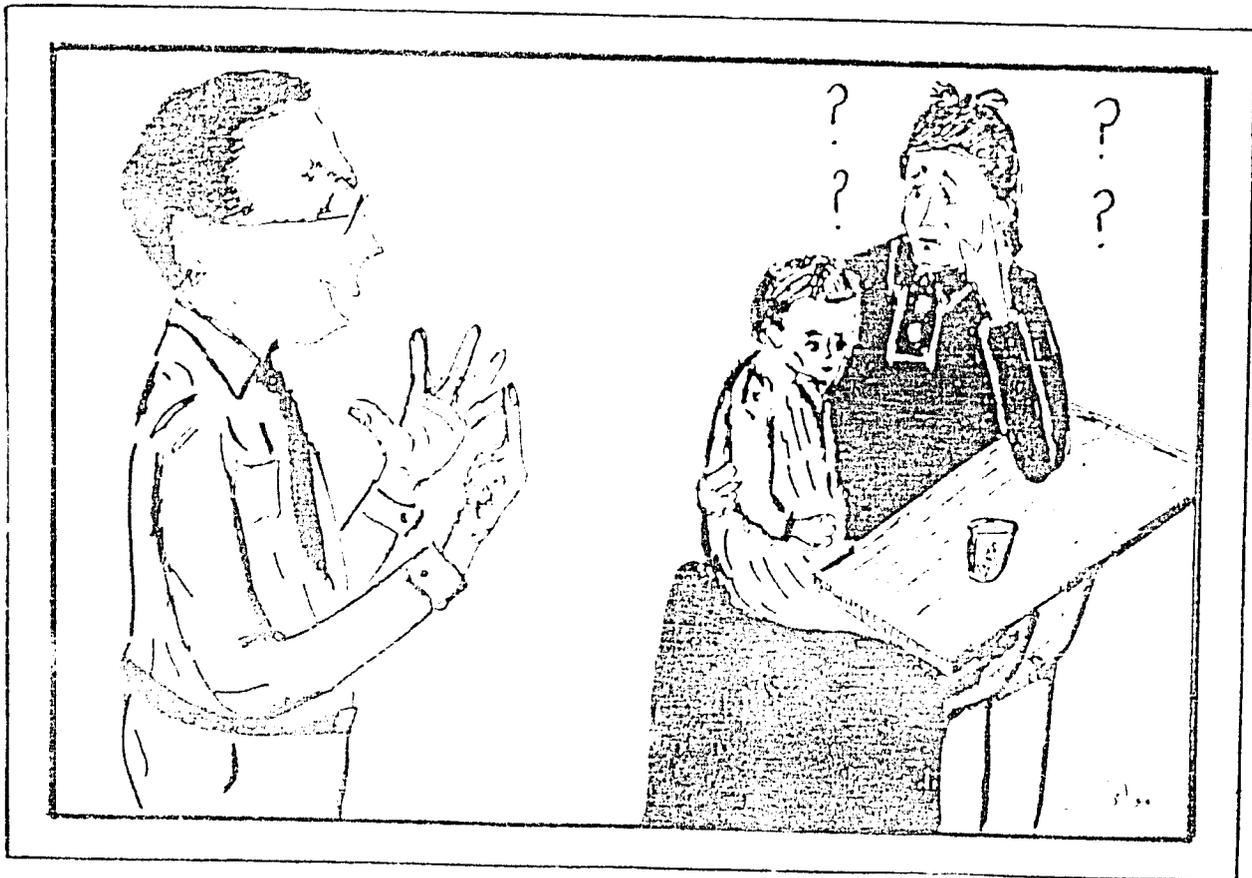
This will help her establish a relationship

## HOW DO WE COMMUNICATE CLEARLY ?

A good relationship cannot exist without sharing ideas, feelings, thoughts, information etc. Building good relationship with people is an important part of developing communication skills. Communication skills are needed in health education.

Communication is a process in which a message is passed from one person to another. It has four elements:

- 1- The communicator for example the physician-the person who communicates
- 2- The communicant: the person that the doctor communicates to the " mother "
- 3- The communique: the message passed from the doctor to the " mother " .
- 4- The menu of communication " sympathy, clarity, feedback etc "



MAKE SURE ALL WORDS WRITTEN OR SPOKEN USED  
TO EDUCATE MOTHERS ARE CLEAR AND SIMPLE

In all your communications with mothers, you are giving them several kinds of messages:

- 1- Give information to the mother:
  - the services provided by the rehydration center
  - how diarrhoea occurs
  - the signs of dehydration
  - how to manage dehydration
  - how to prevent diarrhoea
- 2- Give instructions to the mother i-e
  - how to mix ORS
  - how to hold a child
  - how to administer ORS
- 3- Share your opinion with mothers i-e
  - how you feel about breast feeding
- 4- Encourage mothers to give their opinions i-e
  - asking mothers what they think are the reasons that their children have repeated episodes of diarrhoea
- 5- Change attitudes i-e
  - convincing mothers that they must not be afraid of diarrhoea but must treat early to prevent dehydration
- 6- Enable mothers to understand and do things i-e
  - the importance of feeding during diarrhoea and what kinds of foods and liquids to give
  - how ORS works and how to prepare and administer it
- 7- Help mothers make decisions and take actions in the future i-e
  - what mothers should do to maintain hydration at home
  - When to come back
  - how to avoid diarrhoea in the future

To communicate skillfully you have to :

- o Talk and present your message clearly
- o Listen and pay attention to what the other person is saying or doing
- o Observe carefully to be sure the person understands the message
- o Discuss and clarify anything that is not clear

1- Talk and present your message clearly :

The goals of good communication is to make sure that mothers understand the messages you are stating. So you have to:

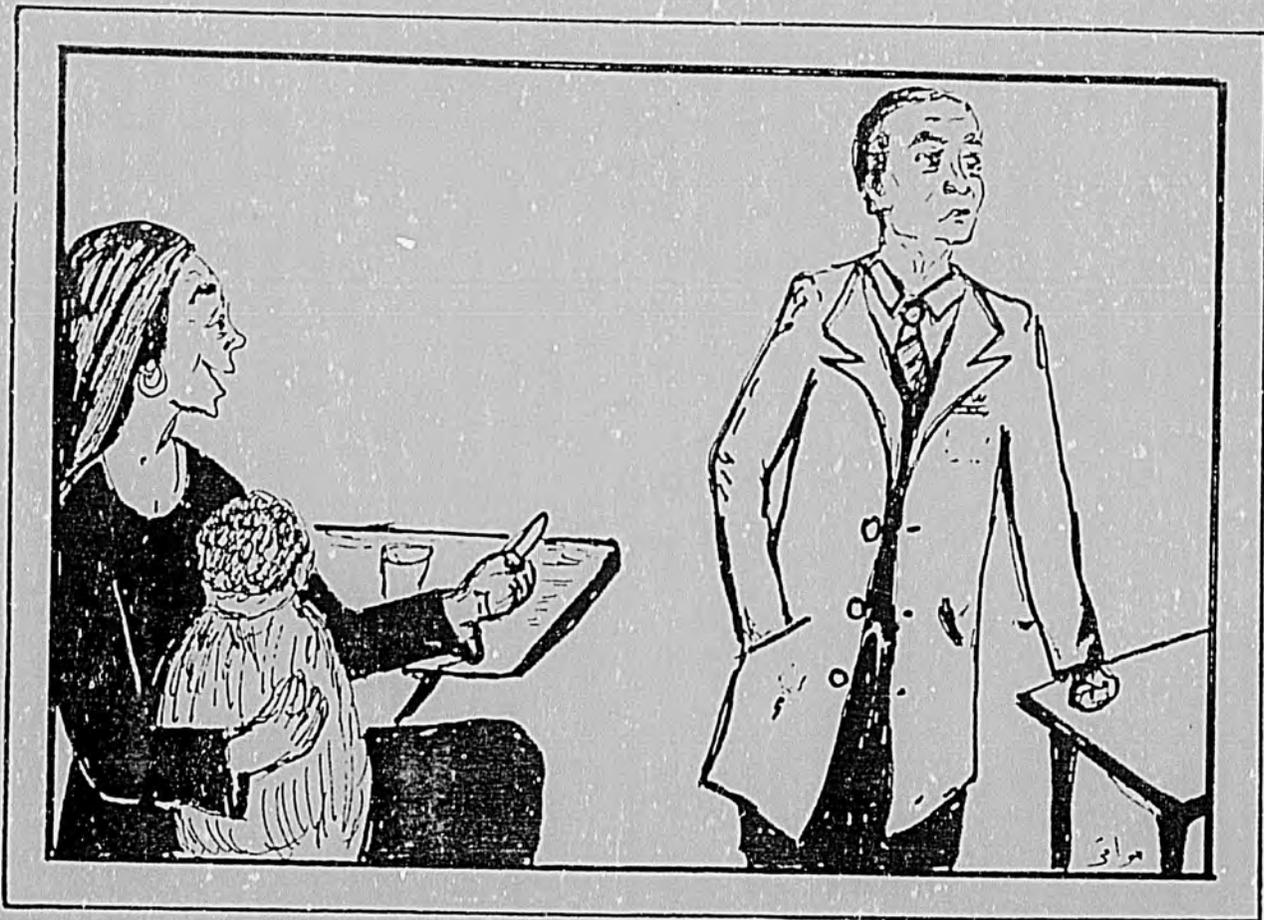
- o Use as few words as possible
- o Keep your messages short and clear
- o Use words that are easily understood
- o Use the vocabulary mothers use
- o Give one message at a time

If you talk too much, mothers will miss or forget the message. Use words that people will understand. Avoid medical terms. Use words and ideas familiar to mothers. For example use the word " clean your hands thoroughly " instead of " disinfect your hands". Use names of materials they usually see and possess. For example you can state for foods rich in potassium " bananas- tomatoes -and not pine apple.

2- Listen and pay attention:

Communication involves both giving and receiving. Listening is important for good communication. You have to listen carefully to understand the interests, ideas, opinions that mothers are communicating to you. By listening you can see if the mother understands your message or not.

Listening is a way of showing respect. While listening, do not look around the room or at anything else. Look at the mother. Do not allow anybody to interrupt your time with her. Do not busy yourself with work, or tasks while the mother is talking to you. Being silent is not the same as listening. Mothers will accept your messages better when they feel you are listening to theirs.



IS THE DOCTOR LISTENING TO THE MOTHER ?

3- Observe carefully :

The position of body reflects how a person is feeling. Take notice of this. People copy other's postures when they are in agreement. Be observant. When someone feels nervous, he may shrink his head as though hiding. He may fold his arms across his legs or over his abdomen. Folding of the arms sometimes means that a person does not want to accept another's point of view, or it may mean he is frightened and is defending himself.

Body positions alone usually can not tell how a person feels. But they are good clues when you put them together with what a person is saying, how he is talking and his facial expressions. Look for non verbal clues. More powerful messages are usually conveyed through non verbal clues than through words themselves. Look for the following when you deal with mothers:

**Eye contact** : Does the mother look directly at you when she is speaking ? listening ? Does she look at somebody else ?

**Eye movement** : Does she look at you steadily, or do her eyes move from place to place?

**Muscle tension:** Is the mother tense or relaxed ?

**Posture** : Is she leaning forward -i-e eager to listen or is she sitting straight up ?

**Habits** : Does the woman play with objects ( a key, spoon, cup etc ) Does she bite her nails, swing her legs, or tap her foot ? All these mean that she is probably nervous.

**Silence** : Is the mother very quiet ? Why ? because she is thinking about what you are saying? Or is she thinking about something else ? Is she shy ? ashamed ? Are her beliefs different from what you are telling her to do ? Have you spoken about something she feels is private ?

**Voice and rate of speech :** Does the woman sound nervous ? bored ? or angry ? Is her speech extremely slow or is it rapid ? Is she hesitant ?

When you educate others be sure that your non-verbal messages indicate your concern ,attitude and other good feelings.

4- Discuss and clarify :

After listening carefully,you have to make sure you heard the mother correctly. You should also find out if the mother has heard you correctly.

Testing that you have heard each other correctly is important. Repeating what the mother has said but using different words is a good way of seeing how well you understand the mother's comments. Also, you have to check how well you understood the feelings she communicated to you. Show the mother that you respect her feelings. Encourage her. Do not respond to what she is communicating by using words such as:

But this is stupid !  
How ignorant you are !  
This is nonsense !

This will kill your communication. Mothers will be offended and won 't hear anything else you say.

You should always look for information to help you understand the mother,you are talking to. Ask questions that are directly related to what the mother has said not ones that introduce a new topic. Asking questions can help you know if you understood or not. It also helps you receive feedback on your behaviour and the messages you have given. If you find that the mother was a bit confused, and did not understand your messages you should try another way to give her the needed information that will help to influence her feelings and ideas.

Let us study this example. If the mother tells you she is breast feeding her child,this information is useful. It is relevant to your message on the prevention of diarrhoea. You should give her immediate feedback. Tell her how good breast

feeding is, how it helps her child to grow and how important it is in the prevention of diarrhoea. On the other hand, sometimes you have to suggest another behaviour, if the mother's behaviour is not appropriate. For example when mothers tell you they withhold liquids during diarrhoea, help them understand why the opposite is right. Always emphasize positive behaviours rather than criticise negative ones. Note that:

**QUESTIONS CAN MAKE COMMUNICATION BETWEEN TWO PEOPLE  
MORE ACCURATE GIVE FEEDBACK AND RECEIVE FEEDBACK.**

After listening, discussing and clarifying it is good, also to summarize. In your summary, you have to repeat briefly what you thought was said. Then ask another mother, if you have understood her ideas and meanings correctly. Encourage the mother also to summarize your words. This kind of discussion between people results in good communication. Always remember to: summarize and repeat briefly.

Here is a list of some communication skills:

- o Using clear, simple common words
- o Active listening
- o Observing very carefully
- o Checking your understanding
- o Expressing and describing feelings
- o Seeking, offering and sharing information
- o Giving and receiving feedback
- o Encouraging positive behaviours
- o Suggesting alternatives or different ways to behave. But never criticizing people for negative behaviours.

Finally, you should be well prepared in advance. You have to choose the subjects of discussion according to the mothers' needs and interests. You should be relaxed. In all your health education activities you should **not just talk**; talking is one sided. You should **communicate** - that means carrying out a two way discussion.

PEOPLE WILL BE MORE RECEPTIVE WHEN THEY FEEL  
YOU ARE PART OF THEM

You should believe in what you are saying. You should be seen to practice what you preach. This will give credibility. Credibility as you know requires that if you expect mothers to behave in certain way, you should be a model for that behaviour.

A PERSON IS BELIEVED FOR WHAT HE/SHE SAYS  
IF

HE/SHE IS SEEN TO PRACTICE WHAT HE /SHE SAYS

HE/SHE IS RESPECTED BY THE PEOPLE

HE/SHE HAS SUCCEEDED IN ACCOMPLISHING WHAT WAS  
EXPECTED OF HIM/HER

INFORMATION SECTION 4

PRACTICE QUESTION

Read carefully the following case history and respond to the question :

Dr Nabeel is the physician in charge of the rehydration center. Mothers attending the center respect him and like him. To day, he was very busy. He was asked to attend to an urgent problem immediately. He asked Dr. Salem to train and educate four mothers. He asked him to find out their needs and discuss their problems.

Dr. Salem just joined the center two days ago. He was very keen to work in the reception area of the center. He likes to examine children and write down management plans. He feels that this is what a doctor should do.

Dr. Salem thinks that any one can carry out health education activities. Dr. Salem approached the four mothers. He started lecturing them about diarrhoea and the mechanism of fluid absorption and dehydration. He drew the villi of small intestines. He explained to mothers that the body loses potassium, sodium as well as water during diarrhoea. He stated that dehydration is a serious condition and that doctors are the only ones who can diagnose signs of dehydration. At this point one of the mothers tried to question him. He told her not to interrupt his thoughts. Then he continued talking about oral rehydration.

Dr. Salem explained that personal hygiene is important as a preventive measure. He explained that it is also important to keep the home and the clinic clean. He looked at one mother and said : " If you were clean, your child would have had no diarrhoea " .

The tomargiah approached the group. Dr. Salem asked her if the director of the facility was still in his office or not. He told her that he wanted him for an urgent personal matter. The tomargiah said he had left the office five minutes ago. Dr. Salem became upset. He took a last cigarette from the packet and throw the packet away.

Dr. Salem looked at his audience. Only two mothers were sitting. Both were staring at the door. One looked tense and the other bored.

#### Question

List the mistakes made by Dr. Salem in the way he communicated with mothers.

INFORMATION SECTION 4

ANSWER TO PRACTICE QUESTION

1-

Dr Salem lacked interpersonal skills. He did not communicate .  
The following are samples of his mistakes:

- 1- He did not prepare the subject for the discussion
- 2- He did not establish any relationship with the four mothers
- 3- He did not encourage any participation- When the mother interrupted him, he told her not to do so
- 4- He did not listen
- 5- He did not observe the mothers except in the end
- 6- He used academic words-The topic was irrelevant to their needs
- 7- He talked rather than discussed
- 8- He did not ask any question to make sure that the women understood
- 9- He did not give or receive feedback
- 10- He did not summarize
- 11- He interrupted his communication, by asking about the director
- 12- He discussed the importance of cleanliness, yet he threw a box of cigarette on the floor
- 13- He offended one of the women by saying she was not clean

SUMMARY

Dear doctor

You have been exposed to a Self Instructional Unit on "Communication and human behaviour." You now understand the different behaviours related to diarrhoea: behaviours that prevent, control or cause diarrhoea. You also learned that there are several factors that influence behaviours. These include cultural factors, resources available to the mother, her knowledge, attitudes and the influence of other people on her. You also realise that there are several barriers that can affect the utilization of health services. These barriers can be time. It can also be physical, social, cultural or attitudinal barriers. You also learned that to change the behaviours of mothers you have to work with them. You have to establish a good relationship, communicate clearly, encourage participation and avoid prejudice. These principles are important to apply in all your education and communication activities.

## BIBLIOGRAPHY

- Samuels, Mimi and Samuels, Don : " The Complete Handbook of Peer Counselling " Miami, Fl : Fiesta Publishing Corp, 1975. p.113- pp 119-120
- World Health Organization : " Education for Health, manual on health education in primary health care. Draft. pp 3-45