



PATA

2024 Summit

Do it Right. Do it Together. Do it Now!



Creating and Sustaining a Culture of Care

Updates on the Face of Care Research

6 November 2024

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with

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PATA 2024 SUMMIT

This research is informed directly by the expertise and lived experience of frontline providers in the PATA network, and we thank you for your participation.

Background: Why are we doing the 'Face of Care' Research?

- Frontline providers are the backbone of the paediatric-adolescent HIV response!
- Yet, they face challenges, that resulting in wellbeing and performance-related issues.²
 - challenging workplace conditions,¹
 - workforce shortages,²
 - inadequate infrastructure and resources,³
 - inadequate training and supervision,^{2,3}
 - blame for poor adolescent health outcomes
- At the individual level, many frontline providers experience significant psychosocial challenges including stress, burnout, demotivation and secondary traumatic stress.
- At the organizational level, these circumstances affect performance, workplace culture, service delivery, morale, and attrition.¹

Goals & Objectives:

- 1) **Understand**: contextual realities of frontline health workers
- 2) **Document** their experiences, challenges and resilience-promoting factors
- 3) **Explore** what constitutes an enabling environment?

Where?

24 sites, 12 Countries: eSwatini, Kenya, Malawi, Mozambique, South Africa, Tanzania, Uganda, Zambia, Cameroon, Ethiopia, Nigeria, and Zimbabwe

Who? 801 Multi-occupational frontline providers

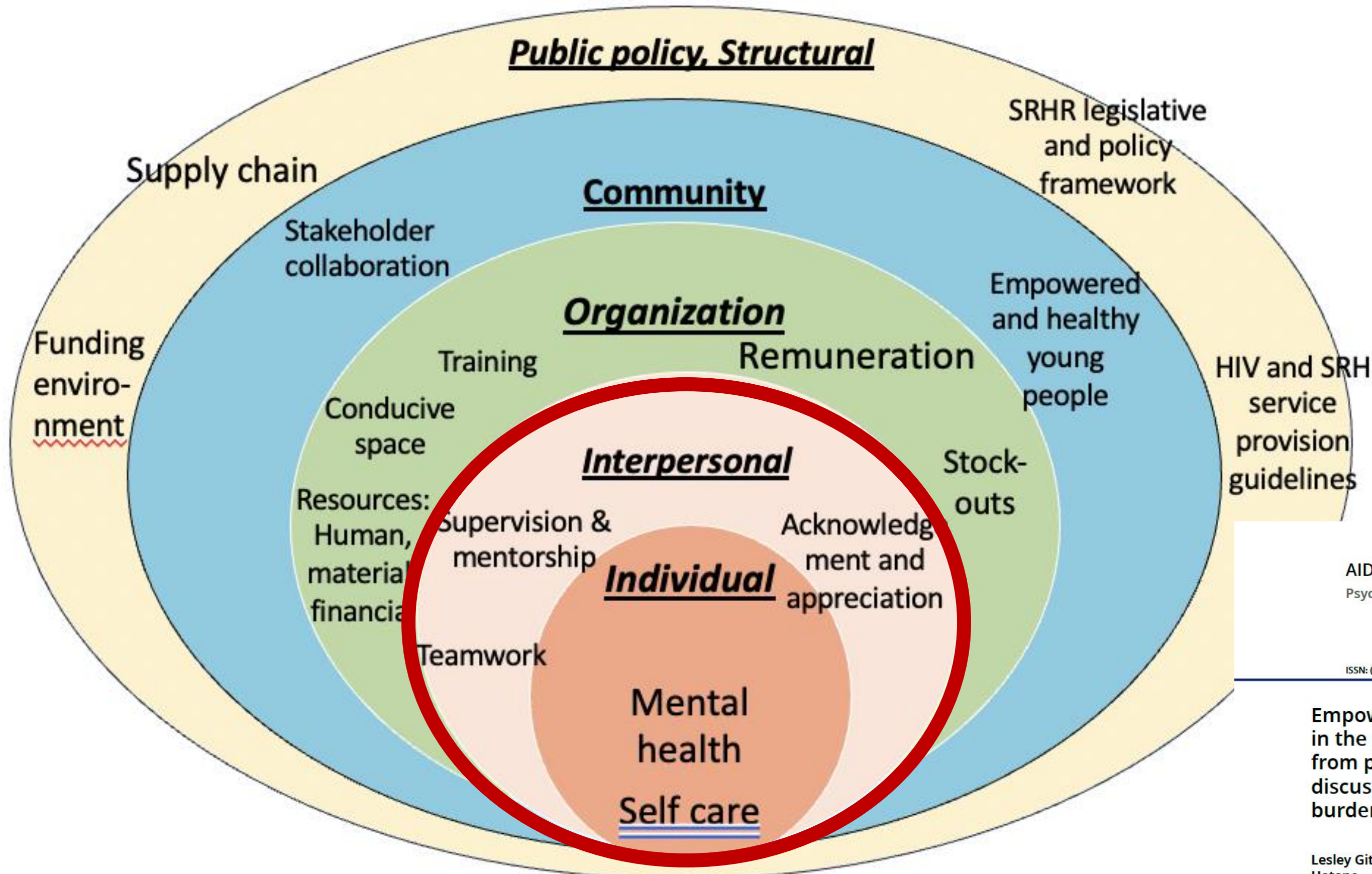
How? (Methods) Word associations, priority setting, group discussions

2022 Face of Care Research



Frontline providers in the paediatric-adolescent HIV response care about their work!

...Yet they face challenges across multiple levels.

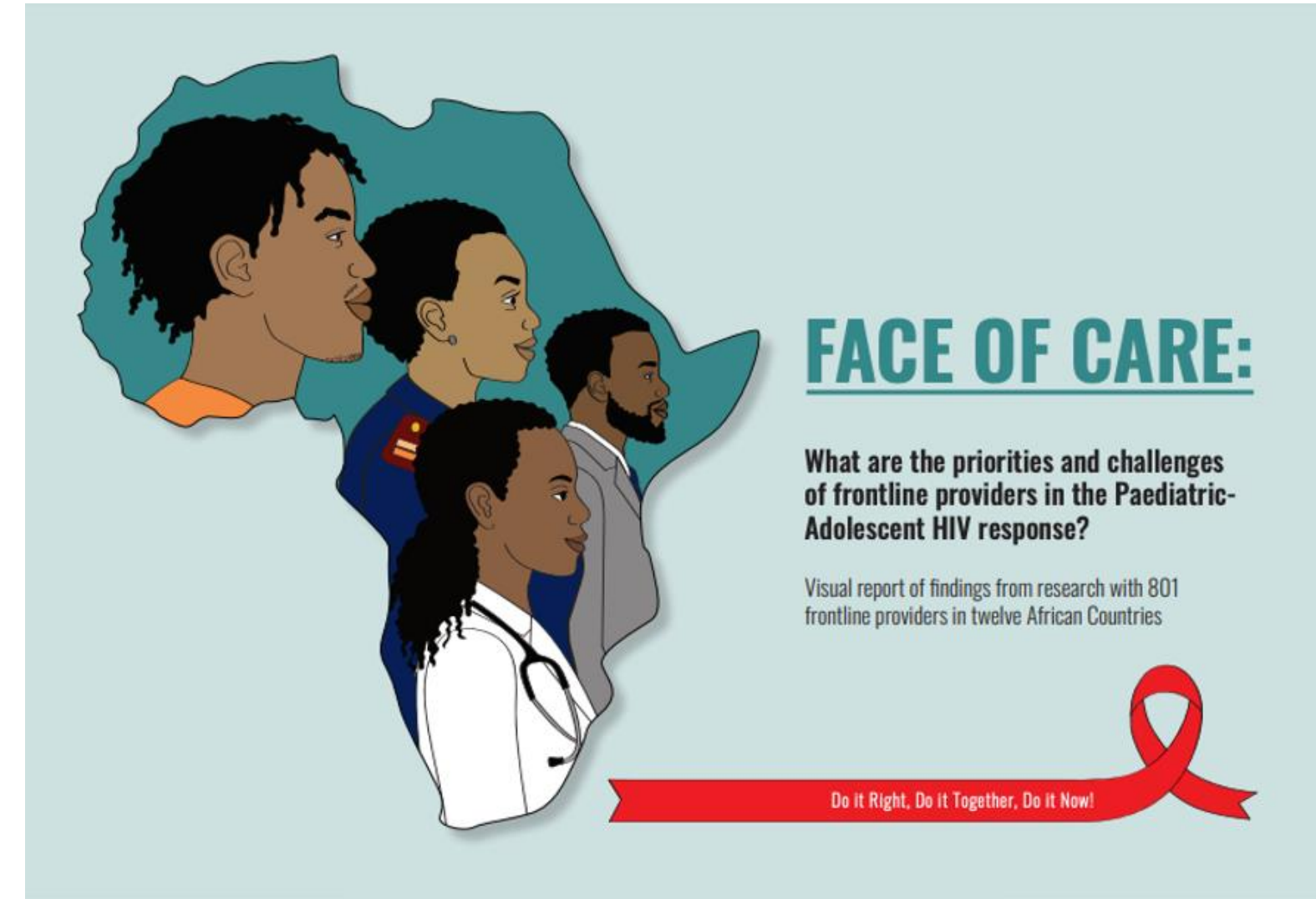


Empowering and supporting frontline providers in the paediatric-adolescent HIV response: results from participatory priority-setting and group discussions in twenty-four sites in twelve high HIV-burden African countries

2023 Face of Care Research

Goals and objectives:

- (1) **Conduct a survey** to better understand frontline provider mental health, work related quality of life, empowerment and job satisfaction
- (2) **Share findings from 2022** research through **visual participatory methodologies**;
- (3) **Mobilise evidence** to support improved frontline worker wellbeing, seeking advice on action items to create safer and more enabling spaces;

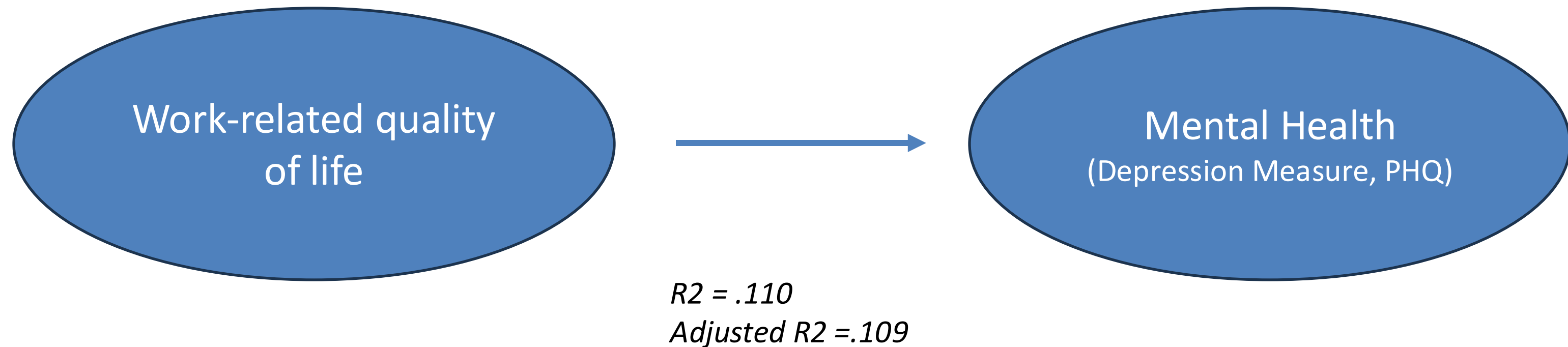


1. → Please indicate your age range:			
<input type="checkbox"/> 18-29 years	<input type="checkbox"/> 30-45 years	<input type="checkbox"/> 45+ years	
2. → Gender:			
<input type="checkbox"/> Man	<input type="checkbox"/> Woman	<input type="checkbox"/> Non-binary	<input type="checkbox"/> Prefer not to say
<input type="checkbox"/> <u>Self Identify:</u> _____			
3. → Please indicate your affiliation:			
<input type="checkbox"/> Health provider at a health facility		<input type="checkbox"/> Community-based implementing partner	
<input type="checkbox"/> National/Regional NGO		<input type="checkbox"/> National Ministry of Health official	
<input type="checkbox"/> International partner organisation/multi-lateral/donor		<input type="checkbox"/> UN agency	
<input type="checkbox"/> Other (please specify): _____			

HCP and Mental Health

Variable	Cohort, N=617	PHQ (depression measure)		<u>% with PHQ >4</u>	PHQ, mean (SD)
		<4, n=320	≥4, n=242		
Gender, n (%)					
Man	389 (63.0)	207 (64.7)	150 (62.0)	42,02	4.08 (4.62)
Woman	220 (35.7)	108 (33.8)	91 (37.6)	45,73	4.16 (3.99)
Non-binary	5 (0.8)	4 (1.3)	0 (0)	0	1.75 (1.26)
Age, n (%)				0	
18-29 years	220 (35.7)	92 (28.7)	114 (47.1)	55,34	5.14 (4.70)
30-45 years	285 (46.2)	158 (49.4)	102 (42.1)	39,23	3.68 (4.08)
>45 years	111 (18.0)	69 (21.6)	26 (10.7)	27,37	2.93 (4.05)
Occupational Group, n (%)				0	
Nurse	171 (27.7)	105 (32.8)	51 (21.1)	32,69	3.12 (3.73)
Peer Supporter	94 (15.2)	31 (9.7)	56 (23.1)	64,37	5.59 (3.93)
Counsellor	70 (11.3)	33 (10.3)	31 (12.8)	48,44	4.77 (5.50)
Research/Other	65 (10.5)	43 (13.4)	20 (8.3)	31,75	3.35 (3.85)
Administration/Program Manager	61 (9.9)	26 (8.1)	28 (11.6)	51,85	5.41 (5.70)
Community Health	55 (8.9)	25 (7.8)	25 (10.3)	50	4.80 (4.61)
Physician	50 (8.1)	31 (9.7)	12 (5.0)	27,91	2.56 (3.69)
Social Worker/Psychologist	40 (6.5)	21 (6.6)	16 (6.6)	43,24	3.95 (3.68)
Pharmacy	6 (1.0)	3 (0.9)	2 (0.8)	40	2.80 (2.17)
PHQ					
Mean (SD) score	4.09 (4.39)	1.27 (1.17)	7.82 (4.29)		--
<4, n (%)	320 (51.9)	--	--		
≥4, n (%)	242 (39.2)	--	--		

Survey: Work-related quality of life and depression



Discussion

- There is a relationship between **Work-related quality of Life and Mental health (depression)** for frontline providers
- Those who have better work-related quality of life have better mental health, those who have worse work-related quality of life have poorer mental health
- This relationship between work-related quality of life and mental health exists after controlling for age, gender and professional occupation (i.e., nurse, peer supporter, counsellor...)

Qualitative findings: Work-related quality of life and depression

Because even health workers, they are overburdened, they are, they become also emotional, they have those burnouts, but there's nowhere where we are provided these services... can we create this space?

Work environment alone is not enough, it also needs a little help... Each and every one of us in this place may need a little help...workers need more support for their mental health and wellbeing...

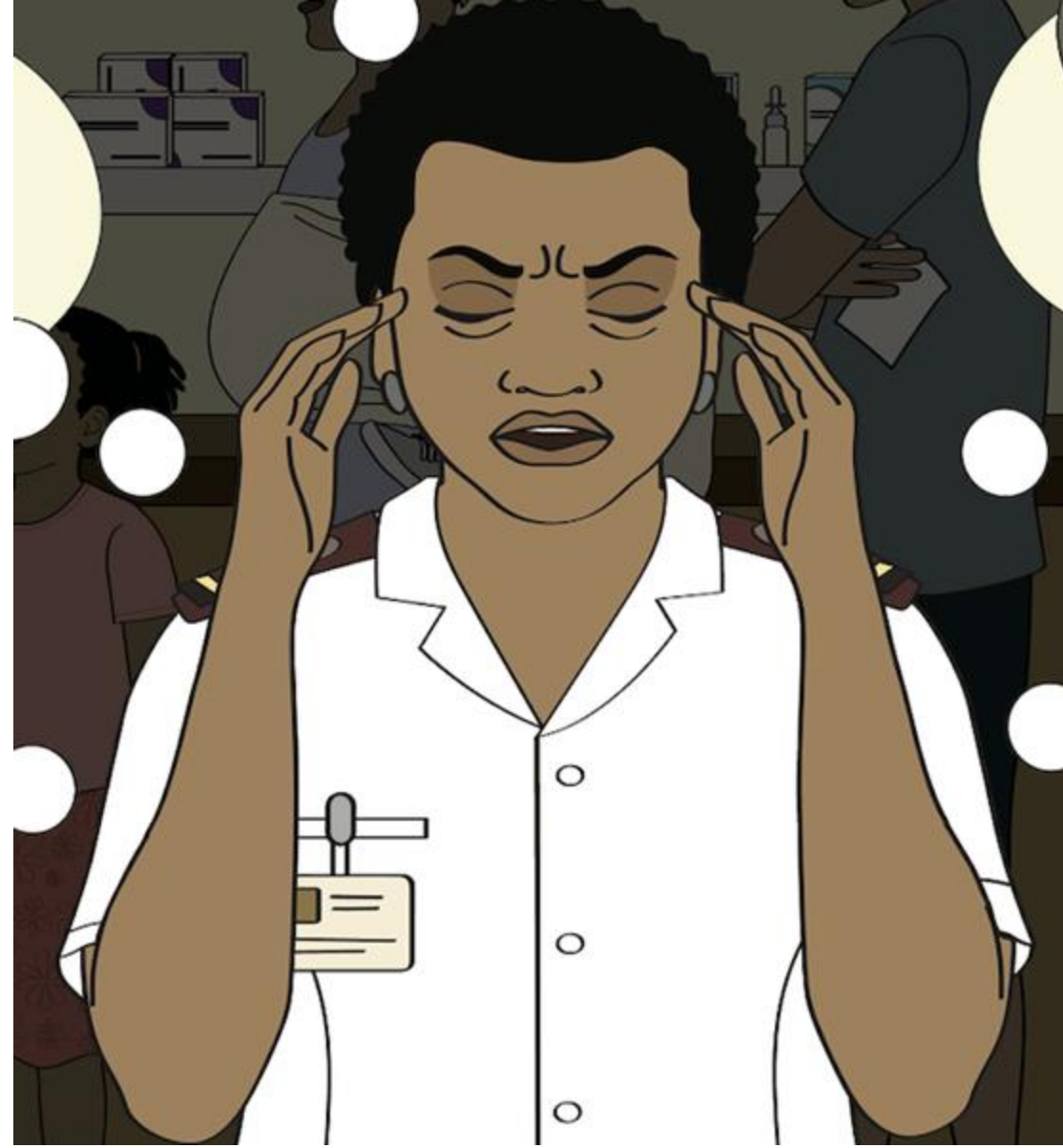
We concentrate so much on others so that we forget ourselves that we also need to be mentally healthy. And because of that we can also go into burnouts because we are too much overwhelmed with work... this will put us in danger in terms of our mental wellbeing.

Sometimes we have lack of material needs and everything else creates a mental confusion for the provider and it may even extend to the patient in the healthcare unit .**We think that with the creation of better work conditions we can improve the mental health and well-being.**

Discussion

What does this mean for supporting frontline provider well-being?

*... Let's make sure frontline providers experience
GOOD work related quality of life!*



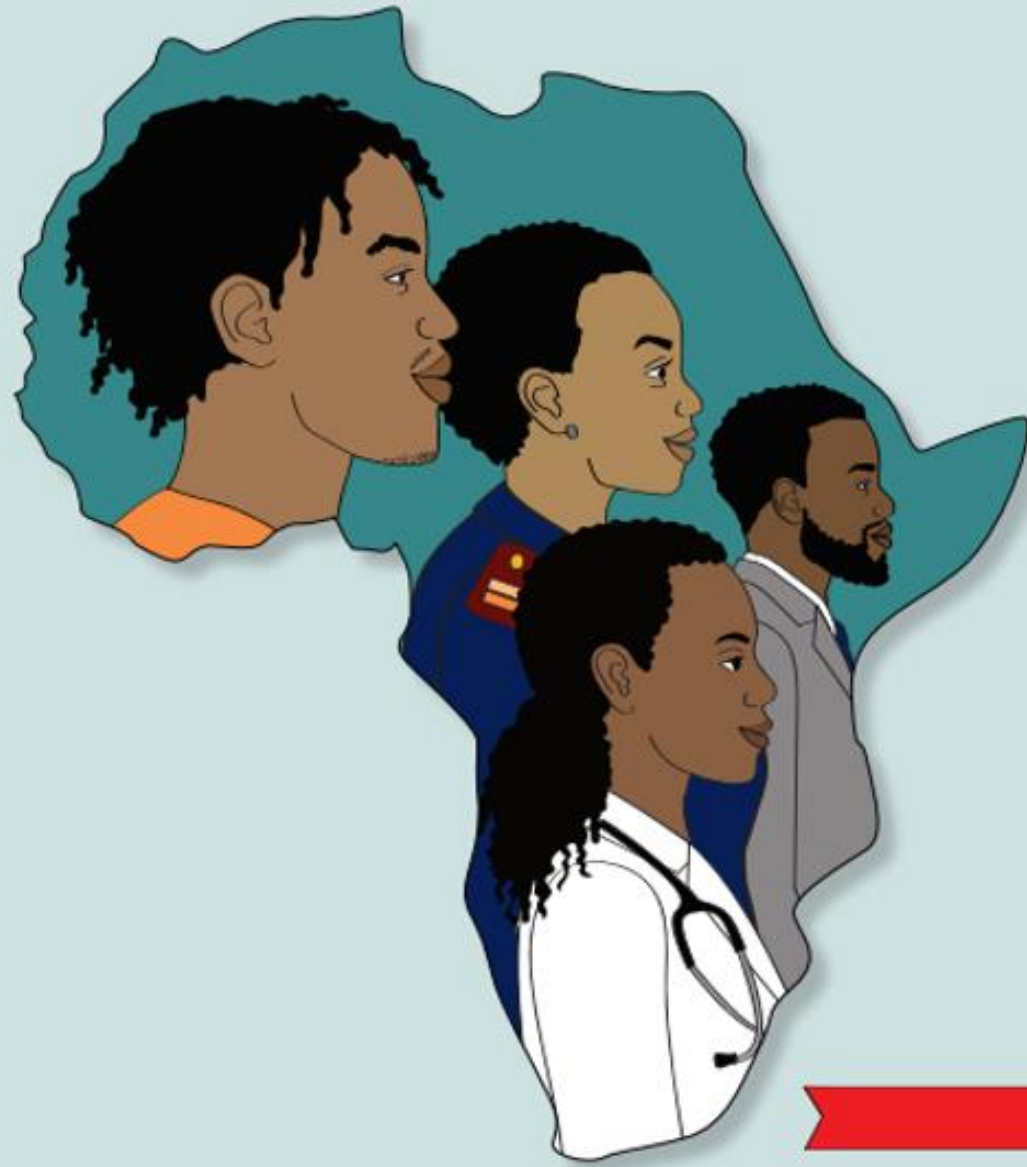
Mental Health and Self Care



Acknowledgement and appreciation



Supportive supervision and mentorship



FACE OF CARE:

What are the priorities and challenges of frontline providers in the Paediatric-Adolescent HIV response?

Visual report of findings from research with 801 frontline providers in twelve African Countries

Do it Right, Do it Together, Do it Well



Mental Health and Self-Care



Mental Health & Self Care: Challenges

...they are burnt out with workloads. So they are working and working and working... now emotional challenges that are related to healing difficult stories from children and adolescents....When children are talking stories, sometimes you start now feeling the pain... These things, they also disturb us mentally.

...burn out, even if we have the best environment and we don't care for ourselves, it's not going to bring big success. We are dealing with people who have problems, but we are also humans and we have problems... we don't have a space to air them out, also there is no good procedure for airing them, so all of these contribute to spoil the mental health and once the mental health is spoilt, then efficiency is also going to be messed up.

We talked about mental health on its side but self-care is also an integral part... we forget the self-care part of it because the self-care is the grassroots to help you to have mental health because first, right?

teach our healthcare providers how they can be healing their stress

Check in with each other... even if it's via WhatsApp, you know, just to say "Hey, how are you? How are you doing

Active counselling for the staff, which could be **one-on-one**, or which could be in a **group** session.

Self-Care and Mental Health: Suggestions from YOU

Peer-pairing... support groups... psychosocial support.

Create a **listening and orientation** counselling space for service providers

Psychologists to come at the facility and help guide you and enhance your mental status

Skills for self-care and debriefing.

Spiritual support

Once a week or month, **sitting down and engaging one another** on the past things: how did work run? where did stuff not go well? How can we improve? Where am I getting stuck?

Self care and mental health suggestions (continued)

Play cards

Lunch time you can... everybody has a right to (**take a break**)

Physical activities. Team-building. Football... hiking... to **interact with each other**....

Create environments outside the hospital, where there could be psychological exchange, where it could be more **relaxing**, where it could be more **fun**... talk about their problems... to **get to know each other better**.

Projects and social activities in the general planning of activities. **Emotional wellbeing programs to help us understand ourselves better.**

Recreational moments... organize social, the braais. & **BIRTHDAYS!!!**

Some great initiatives where you **eat the head**, where you eat the cow-head, **you do manicures you do all sorts of things.**



Acknowledgement and Appreciation: Challenges

So we looked at the picture. Is this how it is in your workplace?

We all agreed no.

it's too perfect and we don't normally see this, it's an ideal picture though....

What can be done to change this? A lot.

... there is no appreciation so from our leads, it is only God. It is assumed that when they pay the salaries, they assume that the staff are okay, and there is no need for other appreciation. (This affects) mental health as it is said.

Acknowledgement and Appreciation: Suggestions

Get out of there (the health facility) to create a sense of understanding that we are at the same level

Social groups can help create a social happy environment of joy, we can comfort the colleague

Bringing awards, invaluable incentives can be given. Maybe for the funnies, the cleanest, the slimmest...

Giving them that **recognition** you know, just acknowledging them. **Employee of the month.**

Show **solidarity** among colleagues... **make everyone feel that they're part of the team**

Awards every year ... dependent on your target so like everyone was motivated... so that they can be win this prize.

Words and motivation... A simple word elevates the person's self-esteem... when you give a hug to your friend, you save the life. In short, a hug saves the life.

Have a **box in which we put the motivating words** in the book. In each person, when they arrive, they have the opportunity to take away the words...it also changes the mood of the people who are with us.

Just **simple words of appreciation** like well done, good job, it goes a long way to actually boost the morale of the staff

Some **recognition or kind of award ceremony**, it equally helps to improve their sanity at work and even maybe pushes them to be more productive

Supportive supervision and mentorship: Challenges

“... supervision is not very, very common, mentorship, is not very, very practised it is very core and pivotal to ensure that the quality of care is maintained... If it is available, it’s once in a while... I am saying that mentorship is very, very, very valuable because it helps us to be empowered on the job and it also help them to know that they are doing it right. ...”



Supportive supervision and mentorship: Suggestions

Debriefing with the supervisors should be organized **continually**

Mentorship should be done at **high level**

A **suggestion box** at the facility level

Approachable means anyone can reach you if there's anything

Regular supportive supervision meetings for the staff to ask questions and share their worries.

Clear channels for communication and feedback mechanisms

Try to **take time to know their employees....** sometimes someone may be going through

Leadership at all levels... if there is **not biases** among the leaders themselves then it will be very difficult for the peers to follow this.

These mentors need to **guide**, they need **somebody they can look up to** they need somebody they can be accountable to.

Shadowing where for example I'm a nurse by profession, we say okay you work with me for a day in my life and **see what it takes to be a nurse and what it involves.**

Supervision in the way of creation, ... Maybe it is a theoretical supervision in a different place from what I usually think.

We need **continuous mentorship because learning is not a one day issue...** not quarterly, it should be **frequent...**

Thank you for the work that's being done". we need appreciation

Then **we need regular meetings...**help us to discuss on our **indicators, our performance and other challenges** can be addressed in that meeting

OVERVIEW OF WORKSHOP INTERVENTION THEMES

1. Mental Health/Self Care:

- Supporting frontline health workers' mental well-being through interventions like peer support programs, mindfulness activities, and mental health resources
- The goal is to reduce stress and burnout and promote a healthy work-life balance.

2. Acknowledgement and Appreciation:

- Interventions that emphasize recognizing and valuing the contributions of health workers through team-based activities, non-financial incentives, and regular acknowledgment.
- The aim is to boost morale, foster teamwork, and enhance job satisfaction.

3. Supervision and Mentorship:

- Interventions involve structured guidance and mentorship programs to strengthen clinical skills, provide learning opportunities, and create a supportive work environment.
- This theme focuses on continuous professional development and building strong support networks.



Mental Health and Self Care



Acknowledgement and appreciation



Supportive supervision and mentorship

Which type of intervention do you think will best support the well-being of frontline providers in the paediatric-adolescent HIV response?

GO TO MENTIMETER: 1458 9338



Thank you

Questions? Comments?

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