

A Will to “Do Better” in Youth Family Planning Service Delivery: The Interpersonal Communication and Counseling Experience in Liberia



Background

Interpersonal communication and counseling (IPCC) is a critical part of the provider-client interaction and is key to improving maternal health and meeting contraceptive and family planning (FP) demand among all clients, including youth. Strong interpersonal communication is essential for an FP service provider to understand a client’s unique needs and challenges and to guide them through FP decision-making. Increased dialogue also helps providers build trust with their clients and encourages them to actively take part in their own care.¹ Good client-provider relationships are of particular importance when working with youth, as adolescent minds are in the midst of critical neurodevelopment that makes them more prone to risk-taking and impulsiveness.² Coming into a counseling session with a lens of compassion and empathy can lead to mutual respect and greater internalization of health advice. A baseline study carried out by Breakthrough ACTION in Liberia showed women who reported receiving high-quality FP counseling were 20% more likely to adopt a long-acting reversible contraceptive method than those who reported receiving low-quality counseling.³ Findings from a separate, facility-based assessment conducted by Breakthrough ACTION in Grand Cape Mount County showed service provider behavior was a barrier to women’s facility-based FP and maternal care service use, which is of particular concern as 30% of pregnancies in Liberia are among young women between 15 and 19 years of age.⁴

[Empathways](#) is a three-round card deck designed for one-to-one use between young people and FP service providers in provider training or other contexts. The card deck comprises a series of discussion prompts intended to spark rapport and joint reflection between the providers and youth.

Empathways aims to develop empathy for young clients among FP providers and to encourage those providers to use this empathy to catalyze more youth-centered FP service delivery. Since the tool’s release in 2021, Empathways has been [adapted for use with different audiences and for different health goals](#).



To contribute to the government’s goal of improving healthcare providers’ service delivery behaviors, Breakthrough ACTION supported the Liberia Ministry of Health to develop its first [national IPCC curriculum](#). The Ministry of Health will use the curriculum to train new providers and make it part of in-service professional development training.

Breakthrough ACTION worked with the Ministry of Health to incorporate the Empathways tool as a practical exercise into the section of the training curriculum that focuses on improving FP and maternal, newborn, and child health (MNCH) service delivery to young clients. While the IPCC curriculum includes values clarification exercises, Empathways’ specific, practical focus on developing providers’ empathetic communication and active listening skills with young clients made it a solid complement to the other curriculum material. The Empathways activity offers a hands-on opportunity for providers to examine and design plans to overcome biases in contraceptive and FP service delivery to youth.

Curriculum Roll-Out

Breakthrough ACTION worked with the Ministry of Health and other stakeholders to organize two-day IPCC training workshops in ten counties (Grand Bassa, Grand Cape Mount, Grand Gedeh, Grand Kru, Lofa, Margibi, Maryland, Montserrado, Nimba, and Rivergee) between June and July 2022. A total of 275 service providers (170 male, 105 female) and 30 youth (18 male, 12 female) participated in the workshops.

At least twenty-five providers and three youth participated in each workshop. County- and national-level master trainers facilitated each session, with technical assistance from Breakthrough ACTION. The first day of the workshop focused on the basic principles of IPCC and client-centered approaches to FP and MNCH care and counseling. Day two focused specifically on providing these services to young clients. Participants had the opportunity to dive into the role of empathy in delivering quality youth FP and MNCH services before being introduced to the Empathways cards. In each county, the master trainers invited three young people to participate in the Empathways sessions and demonstrated how to use the tool with three providers. Other participants observed the process and the results of candid interactions. With help from the facilitators, workshop participants processed the exercise together, and then gave feedback on their experiences in plenary.



A provider and a young woman use the Empathways cards during an IPCC training in Grand Cape Mount County. Photo credit: Breakthrough ACTION

Monitoring Curriculum Use

Breakthrough ACTION captured key conversations and insights that providers shared during report-outs and plenary discussions in each training. One month after each workshop, Breakthrough ACTION worked with County Health Teams to conduct monthly monitoring visits to gauge provider progress in applying their new IPCC skills. They also conducted complementary quarterly visits to cross-check and verify findings from the monthly monitoring activities.

Monthly and quarterly visits included direct observations of client-provider interactions along with provider and client interviews. These activities assessed providers' use of IPCC skills, such as greeting clients, allowing for individual and informed FP method choice, and more. A monitoring checklist also captured providers' progress in implementing the skills they learned using Empathways.



The Empathways deck includes rapport-building cards that invite FP service providers and youth to see each other as individuals, outside of the client-provider relationship.

Results

Overall, the training workshops helped awaken providers' awareness of how their biases negatively impact how and whether they deliver FP services to young clients. Many expressed they were guilty of treating adolescents poorly or differently from other clients. In Lofa County, some providers mentioned they would keep an adolescent waiting and preferred taking an adult client because they thought adolescents were "too young to be having sex." Some providers said they "never took time" to counsel youth well. Some service providers also reflected on how they had been treated when they were younger—one provider specifically recounted how poorly she had been treated as a pregnant teen. Through these conversations and reflections during the Empathways activities, service providers said they realized how unfairly they treated youth and promised to change by returning to their facilities with a positive mindset and applying their knowledge in providing quality FP services to their young clients.

Providers and young people liked the Empathways cards and approach. They praised the tool's ability to form trust and understanding between providers and youth, even though the process felt time-consuming.

Post-training qualitative monitoring reports showed a gradual improvement in service providers' attitudes toward young clients. During monthly and quarterly follow-up visits, feedback gathered from clients and service providers showed providers had improved their client-centered communication, empathy, and counseling skills, particularly with youth, in delivering FP and MNCH services.

"Empathways is actually a good method for working with young people who come to get services from our various clinics. If we really take this method seriously, we will do better with youth who come to our clinics every day."

– Provider, Grand Cape Mount County

"This way of working with us (young people) is actually good. It makes it easy to speak freely about our problems. If this continues, it will make more young people to feel free to come to hospital."

– Youth, Montserrado County

During a visit to Grand Cape Mount County, some providers said they had previously hesitated to counsel young clients about contraceptive methods, avoided it altogether, or provided rushed or limited counseling. However, Empathways helped them improve their interaction with youth. For example, they said they now talk more with their young clients, feel increased empathy and understanding toward young people, and are more open to discussing FP-related issues, including contraception. Now, they take the time needed to ensure their young clients receive quality counseling and feel respected.

At the Worhn Clinic in Margibi County, two months after providers participated in the IPCC and Empathways training workshop, a young female client expressed amazement at the sudden, positive change in how service providers treat clients at the clinic. According to the young woman, she had previously felt service providers wanted to get through visits with young clients as quickly as possible; now, providers were making an effort to engage with youth before the counseling session and get to know and understand their individual needs and circumstances. These changes, and others, made the clinic environment more relaxed and welcoming for young clients, who now feel more comfortable seeking assistance for FP.

Conclusion

Breakthrough ACTION is focused on designing, developing, and implementing social and behavior change activities that positively influence health outcomes for all Liberians, including reducing teenage pregnancy by increasing youth access to contraception and quality FP information and services. Embedding Empathways into the national IPCC curriculum helped service providers realize counseling young clients is a different and delicate task. Providers must treat youth with empathy to encourage openness and friendliness and fully involve them in their own reproductive health care and decision making.

The Ministry of Health at all levels—national, county, district, and clinic—has expressed an appreciation for the new IPCC curriculum. Health Facility supervisors, service providers, and youth have embraced the Empathways approach and consider it a valuable tool to improve FP and MNCH service delivery, particularly when working with young people. In 2023, Breakthrough ACTION will work with the Ministry of Health in Liberia to integrate the IPCC curriculum—including the Empathways tool—into the County Operational Plan for service provider training workshops. The Ministry of Health has asked Breakthrough ACTION to scale up the IPCC curriculum, extend it to more health facilities, and continue to reinforce its application with mentoring and coaching to help FP service providers apply their newly-acquired skills directly to their work with young clients.

Though the IPCC curriculum training has set into motion a shift in rigid norms related to how young people and service providers interact, such changes are gradual by nature, and ongoing supervision, continued training, and further conversations and engagement between service providers and young people are needed to reinforce and foment the shift. Breakthrough ACTION will continue to provide technical assistance to County and District Health Teams and the Ministry of Health to plan training sessions that include more youth and afford more time for all service providers to have hands-on experience with the Empathways approach.

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