Educators’ Perspectives of HealthWise Zambia: An evidence-based, life and leisure skills programme in Zambian high schools

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World Federation of Occupational Therapists Congress 2018
Cape Town, South Africa
Interprofessional team of researchers from:
Background

• HealthWise is an evidence-based, risk prevention, life skills programme
• Implemented by trained educators in high schools (Grades 8 and 9 students)
• Three previous studies in Cape Town, South Africa
• 65 high schools involving 17 000 Grade 8 and 9 students
• First school-based, longitudinal, randomised control design studies conducted in South Africa to report any positive findings on substance use and sexual risk
The next step ...

• Lack of evidence-based programmes in Africa
• Need to determine if HealthWise would be beneficial in other African countries
• Explore how HealthWise might be adapted
• Zambia
Zambia – a ‘least developed country’
(The DAC list of ODA Recipients, 2012)

Green = Zambia's agriculture
Red = Zambia's struggle for freedom
Black = Zambia’s people
Orange = Zambia's copper industry and mineral wealth
Fish eagle = the Zambian people's ability to rise above the nation's challenges
Challenges facing Zambian Youth
(United Nations Population Fund, 2016)

- 4.8 million young people aged 15-35 years (37% of population)
- High child marriage prevalence rates (32% women married by 18 years)
- Teenage pregnancy: 29%
- HIV prevalence rates: 8% of youth aged 15-19 years
- Low contraceptive use among young people (28% married adolescent girls using modern methods of contraception)
- Low condom use: 40% girls and 49% boys aged 15-24 years used a condom
- 58% girls drop out of school (teenage pregnancy and child marriage)
- 41% adolescents reporting having ever drunk alcohol (Swahn et al., 2011)
• Clear need for effective risk prevention programmes
• Established partnership with Lusaka Apex Medical University to implement HealthWise Zambia
HealthWise: Grade 8 Lessons

1. Self-Awareness
2. Managing Anxiety
3. Managing Anger
4. Exploring Free Time
5. Free Time in my Community
6. Beating Boredom & Developing Interests
7. Overcoming Roadblocks
8. Decision Making
9. Managing Risk
10. Avoiding Risky Sexual Behaviour
11. Myths & Realities of Drug Use
12. Avoiding & Reducing Risk
Methodology

• **Aim**
  – Implement and evaluate HealthWise in Lusaka, Zambia

• **Objective of this study**
  – Understand educators’ perspectives of the usefulness and relevance

• **Six high schools randomly selected**

• **Twelve educators participated in a one day training workshop (April, 2016)**

• **Implemented HealthWise with Grade 8 students (May to November 2016)**

  Participated in school-specific, focus groups (2017)
## Theme 1: Relevance of HealthWise

<table>
<thead>
<tr>
<th>Theme 1</th>
<th>Categories</th>
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<tbody>
<tr>
<td>Relevance of HealthWise</td>
<td>Created a supportive environment</td>
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<td></td>
<td>Teaches values</td>
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<td>Most useful lessons: anger management, decision making, avoiding risky sexual behaviour (activity: how sexually transmitted diseases spread)</td>
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<td></td>
<td>Lesson “gave permission” and enabled educators to give students correct information about sexual issues</td>
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<td>Able to apply HealthWise to situations happening in the class room and at home; therefore it changes behaviour</td>
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<td>However, some parents and other educators questioned the relevance of HealthWise as they regarded content as “non-academic”</td>
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## Theme 2: Cultural Conflicts

| Cultural conflicts | Traditional cultural norms are conservative: made teaching sexuality in school a challenge for educators. Cultural norm is not to talk about sex to children, as this is regarded as taboo  
Religious conflicts (eg. Symbols/icons used in student work book – “the eye”)  
Conflict with traditional cultural norms: traditionally for some Zambian people, beer is given to children as it is believed to be nourishing  
Cultural differences (eg. traffic light symbolising risk recognition – unfamiliar in some parts of Zambia) |
### Theme 3: Environmental Characteristics

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<th>Categories</th>
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<tr>
<td>Environmental characteristics</td>
<td>Lack of resources - the costs of printing the student work books</td>
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<td>Quality of printed workbooks was poor</td>
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<td>Limited time to teach HealthWise</td>
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## Theme 4: Programme Design and Delivery

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<th>Categories</th>
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<td>Programme design and delivery</td>
<td>Educator training: two day training would be better</td>
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<td>Student work books were useful</td>
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<tr>
<td></td>
<td>Educator training manuals were helpful</td>
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<td>Educators requested assessment tasks to be included as part of HealthWise</td>
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Implications

• Community participatory approach to programme adaptation is vital to ensure cultural relevance

• The leisure focus provides opportunities for occupational therapy involvement in mainstream high schools in Zambia
Conclusion

• Educators felt that HealthWise was useful and relevant for Zambian adolescents
• Challenges provide insight into how to adapt HealthWise for future use in Zambia
• Strengthened south-south research collaboration and promoted internationalisation between researchers and universities on the African continent
Thank you!

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References


