

BACKGROUND

- Human Centered Design (HCD) is a collaborative approach to designing solutions to complex problems through understanding end user needs and contexts.
- Interventions are more likely to succeed when they are context specific
- In October 2017, L10K's focus on service delivery support expanded to include health system strengthening (HSS)
- L10K's used HCD to design and implement innovative HSS strategies, approaches, and activities to improve professional and service delivery experiences of health managers, service providers, and clients.

L10K'S HCD PROCESS

1. Trained project staff in the HCD approach
2. Formed the HCD design team
3. Conducted two rounds of collaborative solution development workshops with the MOH, RHBs and ZHDs.
4. L10K supported RHBs to apply HCD solutions and replicate the process themselves

METHODS

Identify design barriers and challenges

SN	Barriers	Design Challenge
1	Health system support	How might we develop a better approach to provide health system support to MOH and RHBs with lasting effects?
2	Community engagement	How might we design alternative strategies that are more effective to forge stronger community engagement in agrarian regions of Ethiopia?
3	Integrated supervision	How might we redesign a more convenient for supervisors and supervisees and more effective ISS approach and tools in SNNP region?
4	Clinical mentorship	How might we design a more mentee and mentor friendly mentoring approach in Amhara region?
5	Compassionate, Respectful & caring professional	How might we make compassionate and respectful care a routine practice of all health care providers?

Engage stakeholders in three-part design process

Inspiration: Immersive learning for empathetic understanding of context, culture and desires

Ideation: Workshop-style engagement to synthesize, brainstorm, and discuss co-designed solutions

Implementation: Iterative process of testing and adapting solutions.

FINDINGS

- Better community engagement strategies are needed
- The Women's Development Army (WDA) is central to linking community with Community Health Workers (CHWs) and Health Extension Workers (HEWs)
- Existing mechanisms in the health system can be amplified to improve community engagement

Community engagement strategies

WDA Strategy

Challenges

- HEWs cannot support the number of WDAs
- Communities aren't engaged in WDA leader recruitment
- WDAs have limited facilitation and negotiation skills
- WDAs do not engage men and youth
- WDAs are not motivated

Solutions

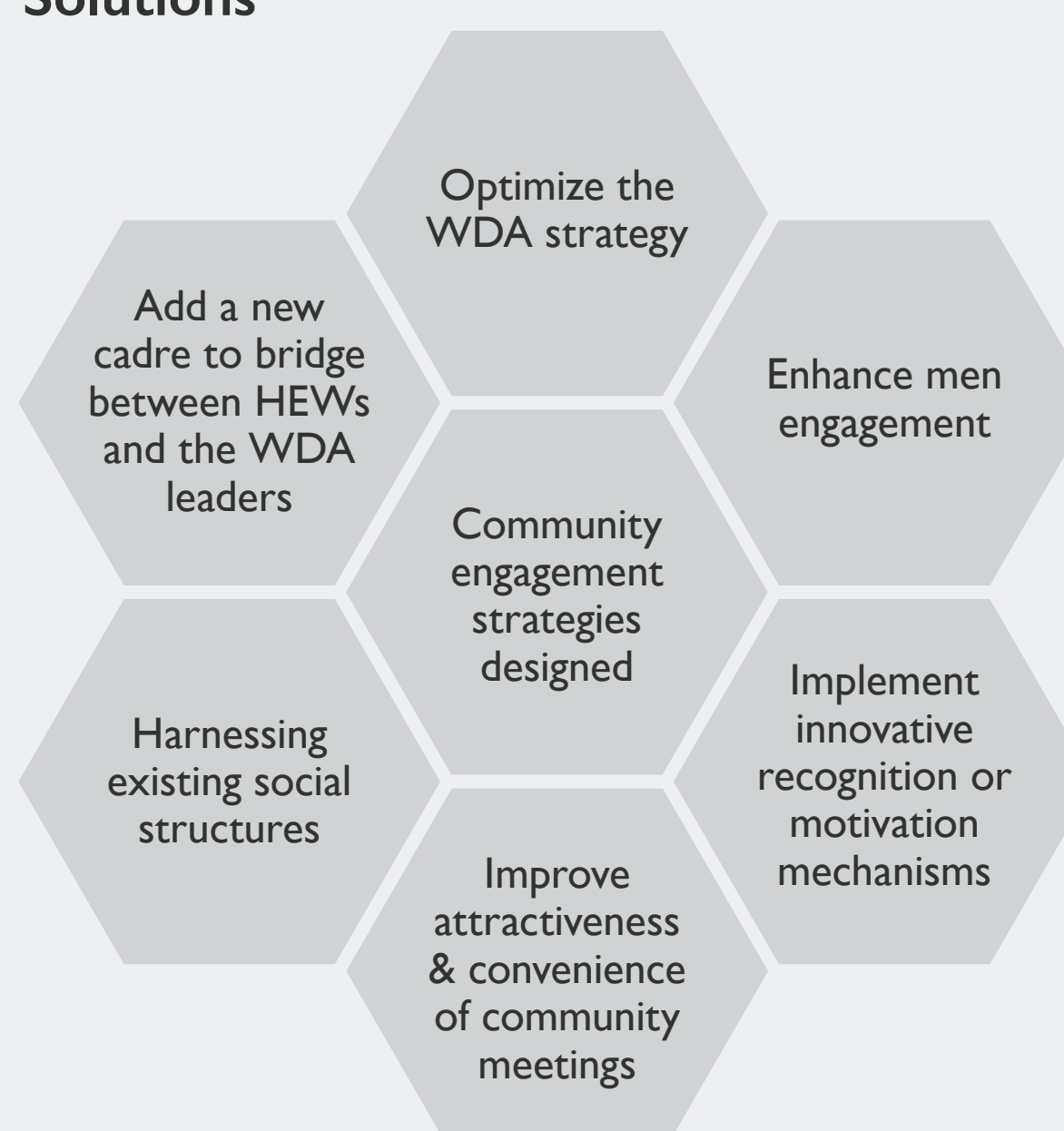


Figure 1: Community engagement strategies from the HCD process

LESSONS LEARNED

- HCD enabled identifying key bottlenecks, desires and contexts of health workers, managers and clients
- The participatory approach was essential to designing feasible, tailored solutions to local contexts
- The HCD process resulted in better collaboration of stakeholders and implementation follow-up, including by local government and leadership.
- The design process was critical to addressing human resource needs and technical skills gaps
- The learnings from the process of designing community engagement options informed the national policy dialogue on designing community engagement approaches

Supportive supervision and mentorship tools and processes

Challenges

- One-way communication from supervisor
- Fault-finding tone instead of supportive
- Support is not context-specific enough to be relevant
- Weak technical capacity of supervisors

Solutions

- Increase supervisors' or mentors' interpersonal, communication and supervisory skills
- Strengthen activity coordination
- Tailor the supervision tools
- Design more interactive methodologies for mentoring

Compassionate, respectful and caring (CRC) practices

Challenges

- Poor quality of client-provider interaction
- Limited adherence to ethical practices

Solutions

- Mentor to improve client-provider interaction
- Increase health worker motivation to implement CRC
- Identify and immediately address non-CRC behaviors and practices