

## **The effect of Open Educational Resource materials in HIV prevention activities in Ghana.**

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Misguided beliefs of causes and effects of chronic diseases in cultural settings and other health seeking behaviours made the incorporation of HIV and AIDS control program into the health care delivery system in a health region very difficult. People accepted much of the unfounded beliefs in disease transmission and care than the scientifically proven sequential development patterns of diseases.

A socially identifiable and highly respected group is the regional association of queen mothers in this region. It is worthwhile to note that every community in this region has a queen with the ability to engage power systems for social action and decision making.

75 community queens with interest in HIV prevention education and sexual behavioural change were selected and provided with Open Educational Resource materials on HIV prevention and management to build their capacity as social entities and structures that carry an atmosphere of authority and recognition for social configuration and confluence in a health region. The OERs being readily accessible to a greater number of people, useful for teaching, learning assessment, adaptation and sharing ; set in motion a coherent system of collaborative engagements of political and social advocacy for the acceptance of behavioural change for effective scientific and cultural HIV prevention practices devoid of stigma and misconceptions. Within a quarter they mobilized the sexually active, and in and out of school youth in their communities to learn and practice effective HIV prevention.

97 community meetings were organized for 1105 youth during the period under review. 10 community durbars and cultural displays on responsive reproductive health practices to combat HIV infections were organized. 3450 households and families became part of the change wave for HIV prevention, stigma and discrimination reduction, and social inclusion for HIV clients. 47 clients and their partners were treated for sexually transmitted diseases and other opportunistic infections. The queens were not trained teachers, but their zeal and dedication for influencing effective behavioural change was commendable, mixing passion with willingness, stretching towards a better goal in fighting HIV was the magic.

OERs facilitate easier and effective adaptation and sharing of knowledge, and its extensiveness in teaching of behavioural change communication for health promotion and disease management can count in the assessment pot of political economy and health economics.

