

Summary: The month of July was the third month of field level implementation. For the MTOs, July 2013 also was busy with the shadowing of field workers (FWs) and providing basic troubleshooting services to them. Like June, the Dhaka-based team visited another two upazilas from each district and monitored the eHealth pilot implementation. In addition, at the end of July, the orientations for the NGO workers took place. This monthly project report contains brief activity information for the month of July. For detailed information, please contact the pilot contact point; details can be found at the end of this report.

Regular Monitoring and Basic Troubleshooting

Based on the monthly visit rotation, the Monitoring and Troubleshooting Officers (MTOs) visited each FW twice in the month of July. During this rotation, the group of MTOs visited a total of 297 FWs (146 from Sylhet and 151 from Chittagong). The remaining six (6) workers in Sylhet were visited on the first day of August. During the visits the MTOs helped the FWs with the eToolkits and eLearning courses.



Generally during the same fortnightly visit, the MTOs collect the assessment sheets. However by the month of July all workers had finished taking all of the courses and had scored more than 85%. Therefore during the month of July no one submitted any assessment sheets to the MTOs.

During the whole month of July in Chittagong total five (5) troubleshooting services were provided to the FWs (one HA and four FWAs). A majority of the complaints were from the Patia upazila (three out of five) while Hathazari and Boalkhali each had one complaint. The types of problems reported included i) eToolkit icon missing on desktop, ii) Keyboard not working, iii) Taskbar went upside down, iv) Netbook froze and was not shutting down from "Start" button; and v) One of the PDF files was not opening fast enough (because the FW removed the relevant supporting software).

All these problems were solved in the field by i) Reinstalling the eToolkit; ii) Restarting the netbook using the main power button (solved over the phone); iii) Installing the relevant supporting software for faster PDF file loading; iv) Setting the keypad setting from "Control Panel"; and v) Readjusting the

display setting from "Control Panel."

From Sylhet in July, a total of six (6) troubleshooting services were provided to the FWs. The types of problems reported included i) Installation of various software (Avro Bangla Typing Keyboard, Bangla Lion Internet Modem); ii) Have personal items (songs, movies and videos); iii) Changed the setting for keypad; iv) Changed the settings of speakers from notification area; v) Deleted the eToolkit icon from desktop and vi) Rotation of the display taskbar.

Except for one FWA, the rest were Has. Half of the complaints were from South Surma (three out of six), while two were from Golapgonj and one from Bianibazar. All these problems were solved in the field by i) Removing and uninstalling all the unnecessary objects and software from the netbook; ii) Setting the keypad setting from "Control Panel"; iii) Setting the speaker setting from "Control Panel"; iv) Reinstalling the eToolkit; and v) Readjusting the display setting from "Control Panel."

In addition, two (2) netbooks from Sylhet (ID #BKMI 281, BKMI 153) and two (2) from Chittagong (ID #BKMI 041 and BKMI 222) had to be brought back to Dhaka to give to the vendor for repair. The problems were i) Broken display with broken USB port, distorted operating system (OS) and charging point (ID #BKMI 281); ii) Broken/malfunctioning USB ports (ID #BKMI 222); iii) Power supply button not working (ID #BKMI 153) and iv) Display not coming up (ID #BKMI 041).

Except for ID #BKMI 281, all other netbooks were covered by the manufacturer's warranty and were delivered back to the FWs within five (5) working days. For the ID #BKMI 281, the netbook was too severely damaged (listed above) for the MTOs to resolve the issue in the field. Field-based examination and shipment to Dhaka took six (6) days. Then the netbook was sent to the vendor to sort the USB port and display issue; the netbook came back within two (2) days. Then the Eminence IT team restored the OS and reinstalled the eToolkit and eLearning. It went back to that FW within 10 days. But because she was away for training, the repaired device reached the HA in 17 days.

While netbooks were being repaired, FWs were provided with a backup netbook to make sure that they could continue their counseling activities.



Orientation of NHSDP Staff

The orientation with the “NGO Health Service Delivery Project (NHSDP)” clinics took place from 28th to 31st July in both the pilot districts (In Chittagong on 28-29 July and In Sylhet on 28-29 July and 30-31 July) and covered 33 participants from 14 clinics under three Partner NGOs.

In Chittagong the training was held in the project headquarters for FDSR situated in the road from Anowara to Patia upazila. A total of nine (9) participants participated in the training including the project director of FDSR, four (4) service promoters (SP), and four (4) counselors from four FDSR clinics situated in the pilot upazilas. One representative from the NHSDP Dhaka office observed the two days training given by two facilitators from Eminence. A representative of BKMI was also present in the sessions to observe the training and orientation process. In Sylhet there were two batches – one with the SSKS clinics held in the SSKS project head office in Sylhet Sadar, and another with the Shimantik clinics in the Shimantik head office in Golapgonj. The SSKS training was on 28-29 July. A total of 16 people attended the training including one (1) clinic manager, seven (7) counselors, seven (7) SPs and one (1) clinic assistant. A team of two (2) facilitators provided this training from Eminence. A representative of BKMI was also present in the sessions to observe. The Eminence CEO and the technical coordinator of the project were also present during this four-day training visit. The NHSDP Chief of Party (CoP) also visited the SSKS training session for a brief session on the first day. In Golapgonj upazila in Sylhet district, the training took place with SPs and counselors from three (3) Shimantik clinics. A total of eight (8) people attended the training including one (1) clinic manager, three (3) counselors and three (3) SPs. A team of one (1) facilitator and two (2) MTOs provided this training from Eminence. One (1) representative from the NHSDP Dhaka office observed the two (2) days training.

The offline versions of the eToolkit and eLearning courses were installed in each of the trained counselors' laptops. In addition, all the existing PCs in the head offices in both Sylhet and Chittagong were installed with the eToolkit and eLearning courses. The MIS person from the project office was provided with a basic troubleshooting and installation training by the MTOs. Lastly one flash drive with installation software and instructions were given to each of the 14 clinic managers from Sylhet and Chittagong.



Monthly Monitoring Visit by Dhaka Team

The second monthly monitoring visit took place from 6-8 July where the representatives BKMI and Eminence travelled to two (2) selected upazilas from each of the pilot districts. The ultimate goal of these visits was to facilitate the process of pilot implementation, to make improvements to the ongoing intervention, and to document experiences for learning and sharing.

In Sylhet the selected upazilas were Bianibazar and Golapgonj; while in Chittagong, it was Boalkhali and Anowara. In July the visit was for three (3) days instead of two (2) days – keeping the last day for Dhaka-based government officials to meet with the FWs. The field log was similar to last month with four (4) FGDs, four (4) KIs with workers, and four (4) counseling session observation and four (4) interviews with clients. In Sylhet on the second day was utilized to meet with the Civil Surgeon (CS) and the Divisional Director for Family Planning (DDFP), where the Dhaka-based government officials – Dr. Romen Raihan from Institute of Public Health and Nutrition (IPHN), Ms. Zakia Akhter from the IEM unit of Directorate General of Family Planning (DGFP) and Mr. Abu Hanifa from Bureau of Health Education (BHE) under the DGHS – accompanied the BKMI and Eminence team. In Chittagong, the meeting between central GoB officials and district GoB officials took place on the third day, where Mr. Dipak Kanti Mazumder from IEM unit of DGFP and Mr. Mukhlesur Rahman from BHE under DGHS were present.



The participants of the FGDs, KIs and the meetings were selected following specific criteria. More about the selection criteria can be found in the monthly monitoring report.

Experience in using the netbook: In both the districts and across all upazilas, the situation was much better than the month of June. FWs seemed more comfortable using the netbooks and looking for information. However, the small screens on the netbooks posed some challenges for doing group counseling. In these upazilas some FWs, especially HAs, opted to leave the netbook at home, especially on days scheduled for EPI sessions. This is because during EPI sessions, they need to carry EPI materials and supplies. In addition, since it is the rainy season, a number of FWs said they felt reluctant to take the netbook with them when it's raining for fear of damaging the netbook.

Experience of using the eToolkit: According to the FWs the eToolkit is helping them to a great extent in terms of counseling. The FWs said that that the netbooks reduce their workload. However, they need to stay in the field longer because having a netbook generates more questions from clients. The FWs also reported that their knowledge on HPN topics is being greatly supplemented by the materials in the netbook. According to the FWs, videos and PSAs on ORS, adolescent health, anemia, permanent family planning methods, details on complementary feeding after 6 months of age were popular among the clients. In terms of asking questions, the FWs reported that the clients mostly asked questions about child feeding and different types of family planning methods. Moreover some suggestions came up to improve the eToolkit by adding information on the following topics:



- EPI or vaccination related video clips
- Information regarding NCDs
- Drama on permanent FP methods for males
- Detailed video on NSV and ligation
- Short drama on the mental problems of adolescents

Experience of using the eLearning courses: Unlike the previous months FWs, the FWs interviewed during the July visit clearly perceived that the eLearning courses are for their own knowledge and skill development. However, many said that these videos have also been beneficial for counseling clients. All the interviewed FWs said that they took and passed all of the courses with a percentage of 100. They think every course is useful. However, they also requested courses on side effects of EPI, long-acting permanent methods – for both men and women – and maybe something on Early Childhood Development (ECD). Some more suggestions were as follows:

- Include videos on general diseases like cold, fever, cough and skin diseases
- Include courses on sexually transmitted diseases
- Include celebrities in videos
- Include detailed information on Non Scalpel Vasectomy (NSV), cancer, harmful effects of tobacco, asthma

Findings from clients: Mothers from Sylhet and Chittagong said that they like having information via digital resources.

One mother from Sylhet said that showing the complementary feeding video (in the eLearning course) to her mother-in-law helped her to practice proper IYCF with her child. The intention to change behavior among the mothers was higher than the month of June. The clients preferred materials with more photos and less text. According to the mothers the eLearning courses would be even more resourceful if there was some information on immunization, vaccination, cooking methods for nutritious food, and how to get rid of formalin. All of the mothers reemphasized their preference for receiving counseling using digital materials instead of the paper-based ones.

Observation of FWs: During the visits the monitoring team observed the counseling skills of few FWs. The findings of those observations are as follows. However a word of caution to the readers of this report is that these observations were conducted with a limited number of FWs and followed a very specific checklist that was filled out subjectively by the BKMI and Eminence team. Therefore these findings may not portray the overall field situation.

In the month of July the monitoring team did two (2) extra observations in each of the districts with one high- and one low-performing FW. In case of the low performers there was not much variations among the cadres of FWs and no district-level distinction was observed. However, in the case of high performers, the FWAs were doing better than the HAs. Also the high performing FWs from Chittagong were doing better than in Sylhet.

Along with the special observation with high and low performers there were four (4) routine observations from both the districts – two with HAs and two with FWAs. This observation shows that in the case of general FWs in both the districts the quality of counseling is better among the FWAs compared to the HAs. However, if we look into the districts, then the FWs from Sylhet were doing better than the FWs from Chittagong. In terms of integrating messages during counseling, a similar pattern was observed with FWAs doing better than the HAs. Here as well the FWs from Sylhet were doing better than the FWs from Chittagong.

However, based on the limited observations, the monitoring team thinks that the netbook has increased the FWs status and trustworthiness in the community, which in turn may increase their performance if it is used properly. Since the use

of the netbook is a new addition to the FWs' responsibilities, close monitoring and mentoring needs to be ensured. The observations also show that FWs are still using the eLearning course videos as BCC counseling tools, though this tendency has decreased from the month of June.

Key Challenges

The key challenges faced during this month include:

- The increased number of netbooks being used for other personal purposes, which is hampering the intended use of the netbooks. This has been mainly observed among HAs.
- The strained relationship between HAs and FWAs forced the pilot team to arrange separate meetings in separate rooms.
- The small screen size on the netbooks creates difficulties during group counseling.

Next Steps

The next steps of this pilot include the following:

- Monthly field visit rotations
- August monitoring plan for the Dhaka based team

Meet the Supervisor

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It's assisting to fulfill the projection . . .

Every month from the Upazila Health Complex, we give a monthly projection to the Family Welfare Assistants (FWAs) for reaching clients with long acting and permanent methods (LAPM). Sometimes some of the FWAs meet the projections, and sometimes they don't. I can say that there is one FWA who has been working with us for the last 18 months and had yet to achieve the monthly projection – until last month. In June, this FWA was given a monthly projection of 38; at the end of the month she had come with 53 clients. This is a huge accomplishment from a very young and inexperienced FWA. In the monthly meeting when she was asked about the reason behind this achievement, she said that having the netbook and the resources in it helped her enormously to fulfill her monthly projection.

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