



## University of Hawaii at Manoa

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QUARTERLY REPORT #20  
(April - June 1983)  
MEDEX PHASE III, Primary Health Care Systems  
Contract No. AID/DSPE-C-0006

2.(a)(1-2) Exploratory briefings in LDCs; informational briefings with AID Missions and host officials; exploratory briefings in LDCs; seminars for Ministry of Health officials, health planners, and other leaders within the medical community:

No action this quarter.

2.(b) The Contractor shall draft, develop and produce 200 sets of training modules and related teaching materials for the following four specific categories of training:

On June 12, The MEDEX Primary Health Care Series was officially introduced, in Washington, D.C., to more than a hundred people representing a variety of public and private organizations involved in the provision of health care. Dr. Richard Smith discussed the concept of primary health care. Dr. Rodney Powell reviewed the three major components of the Series. Dr. Walter Chin discussed the use of the Series materials in Guyana. Ms. Pamela Prescott discussed the adaptation procedures used in Lesotho to make the Series materials appropriate for that country. See the Addendum for copies of Dr. Smith's and Dr. Powell's speeches. To date, HMDS has received requests for more than 500 sets of the Series from 76 countries.

As part of "Practical Considerations for Planning, Management, Training, and Communications in Primary Health Care," Ms. June Mehra prepared an issues paper on Primary Health Care at the Community Level with an emphasis on 1) the history of PHC in developing countries, 2) problems in implementation of PHC in development countries, 3) special problems of implementation at the community level, and 4) suggested pathways to solution of problems.

Mr. Frank White met in Reno with the staff warehousing The MEDEX Primary Health Care Series, to discuss distribution, packaging, and warehousing problems.

Dr. Smith, Dr. Powell, and Mr. White met in Washington, D.C., with Dr. Rosalyn King, HMDS's project manager, to discuss module production, dissemination and utilization of the MEDEX Primary Health Care Series to regional bureaus and non-government bureaus. They also met with Dr. John Austin to brief him on current activities of HMDS.

2.(b)(1) MEDEX Training Modules:

The MEDEX Primary Health Care Series: An Overview (revised) was typeset, pasted up, printed, and delivered to AID.

The Training Process Manual was typeset, illustrated, pasted up, printed, and delivered to AID.

Training Evaluation was typeset and pasted up and is being printed.

The Student Text and the Instructor's Manual of Identifying the Preventive Health Needs of the Community; Meeting the Preventive Health Needs of the Community; Training and Supporting Community Health Workers were printed and delivered to AID.

Three basic clinical modules were printed and delivered to AID:  
1) Anatomy and Physiology; Medical History (Student Text); 2) Physical Examination (Student Text); 3) Anatomy and Physiology; Medical History; Physical Examination (Instructor's Manual).

The Student Text and the Instructor's Manual for Prenatal Care; Labor and Delivery; Postnatal Care were printed and delivered to AID.

Two reference guides were typeset, illustrated, pasted up, printed, and delivered to AID: 1) Formulary; Diagnostic and Patient Care Guides; 2) Community Health.

Patient Care Procedures was typeset, illustrated, pasted up, and is being printed.

2.(b)(2) Management Training Modules:

Three systems development materials volumes were typeset and pasted up and are being printed: 1) Management Analysis Training Module (Student Text and Instructor's Manual); 2) Drugs and Medical Supplies System Workbook; General Supplies System Workbook; Facilities and Equipment Maintenance Workbook; Transportation System Workbook; 3) Communication System Workbook; Personnel System Workbook; Finance System Workbook; Health Information System Workbook.

The District and National Planning and Management Workshops Manual was pasted up, printed, and delivered to AID.

Supervising and Supporting Mid-Level Health Workers (Student Text and Instructor's Manual) was pasted up, printed, and delivered to AID.

2.(b)(3) Community Health Worker (CHW) Training Modules:

Healthy Pregnancy; Feeding and Caring for Children was printed and delivered to AID.

Some Common Health Problems; Tuberculosis and Leprosy; First Aid was typeset, illustrated, pasted up, printed, and delivered to AID.

Health Problems in the Community was written, approved, typeset, illustrated, pasted up, printed, and delivered to AID.

Caring for Your Child was printed and delivered to AID.

Caring for Your Sick Child, and Clean Home and Clean Community were written, approved, typeset, illustrated, and pasted up. They are being printed.

Illustrations for Training CHWs was written, illustrated, and approved. It is being printed.

2.(b)(4) Continuing Education Materials:

The Continuing Education Manual was typeset and pasted up and is being printed.

2.(c) Technical assistance and leadership in conducting training programs and project planning in LDCs:

No action this quarter.

2.(d) Network strengthening and strategizing:

No action this quarter.

II. Contract amendment for the services of a development communications specialist, to bring the expertise and findings of development communications to bear on the planning, design, and eventual implementation of MEDEX projects in developing countries.

Mr. Sunil Mehra was one of the authors of "Practical Considerations for Planning, Management, Training, and Communications in Primary Health Care." Mr. Mehra completed the final drafts and visualizations for four community learning materials:

- 1) Health Problems in the Community, 2) Caring for Your Sick Child,
- 3) Clean Home and Clean Community, 4) Illustrations for Training CHWs.

### III. Other Information:

#### A. Travel by HMDS personnel:

Mr. Frank R. White, Jr., April 25 - May 4, to Reno and Washington, D.C. See Section 2.(b). While in Washington, D.C., Mr. White met with Dr. Rosalyn King, HMDS's project manager, regarding a possible contract extension, and with the AID contract officer to discuss problems on consultant fees.

Dr. Richard Smith, April 26 - May 23, to Washington, D.C. See Section 2.(b). While in Washington, D.C., Dr. Smith discussed a presentation at the 1983 National Council for International Health (NCIH) Conference.

Dr. Rodney Powell, April 26-30, to Washington, D.C. See Section 2.(b).

Ms. Thomas G. Coles, Jr., and Mr. Gregory Miles, May 13 - June 17, to Georgetown, Guyana (see Section D) and to Washington, D.C. to participate in the NCIH Conference. The Guyana portion of the travel was funded by the MEDEX/Guyana contract.

The following HMDS personnel traveled to Washington, D.C., to participate in the 1983 NCIH Conference, to participate in the presentation of the MEDEX Primary Health Care Series on June 12, and to meet with appropriate AID officials to discuss aspects of the MEDEX Series:

- Mr. Albert Neill, June 10-19
- Dr. Richard Smith, June 7-18
- Dr. Rodney Powell, June 10-17
- Mr. Patrick Dougherty, June 8-18
- Mr. Frank White, June 8-19
- Mr. Sunil Mehra, June 10-19
- Ms. Pamela Prescott, June 9-19
- Ms. Marian de Walt Morgan, June 8-19

Ms. Mildred Macugay, June 8-20, and Ms. Linda Oshiro, June 8-19, staffed a booth at the 1983 NCIH Conference in Washington, and assisted with the presentation of the MEDEX Series on June 12.

#### B. Consultants:

Ms. June Mehra, in London, April 18 - May 19 (24 working days). See Section 2.(b).

C. Visitors to HMDS:

Dr. Walter Chin of Guyana met with HMDS in Honolulu to discuss the application of the Guyana Primary Health Care Program to the Caribbean Region, Inc., including the possibility of technical assistance to or inviting observers from the region. Dr. Chin and HMDS discussed Guyana project directions in view of the evaluation recommendations and priorities established by the Ministry of Health and AID.

D. Significant Core Staff Time Devoted to Country Project Activities:

In Georgetown, Mx. Tom Coles and Mr. Greg Miles wrote a physician orientation manual for Primary Health Care supervision, and assisted the MEDEX/Guyana staff to plan and conduct a weekend workshop on PHC supervision.

E. Personnel:

Ms. Carol Ramelb was hired April 6 as a part-time Typesetter.

Mr. Richard McNeil, Writer/Editor, resigned April 18.

Ms. Sharon Shimazu, part-time Paste-Up Artist, resigned April 15.

Ms. Rebecca Kesler was hired as a part-time Paste-Up Artist May 2 - June 9.

Mr. Chris Peterson, part-time Typesetter, terminated May 4.

Ms. Patti Choy, part-time Proofreader/Copy Editor, terminated June 21.

Ms. Allison Greenspan, Writer/Editor, terminated June 30.

Dr. Robert Mack, Director of Evaluation Development, terminated June 30.

Mr. Kenneth Miyamoto, Development Education Design Specialist, terminated June 30.

Ms. Barbara Jean Miyano, part-time Past-Up Artist, terminated June 30.

Mr. David Nelson, Writer/Editor, terminated June 30.

Ms. Linda Oshiro, Executive Assistant, terminated June 30.

Ms. Eve Perlberg, part-time Typesetter, terminated June 30.

Ms. Sonya Steele, part-time Typesetter, terminated June 30.

Ms. Cynthia Stephens, Travel Assistant, terminated June 30.

IV. FISCAL STATUS, April - June 1983

| <u>Budget Category</u>               | <u>Total<br/>Awarded<br/>Yrs. 01-05</u> | <u>Previous<br/>Expenditures/<br/>Encumbrances</u> | <u>20th Quarter<br/>E &amp; E</u> | <u>Total E&amp;E<br/>to Date</u> | <u>Balance</u> |
|--------------------------------------|---|--|-----------------------------------|----------------------------------|----------------|
| Salaries                             | \$2,601,695                             | \$2,345,999  | \$153,333                         | 2,499,332                        | 102,363        |
| Consultant Fees                      | 114,562                                 | 113,807  | 4,998                             | 118,805                          | (4,243)        |
| Fringe Benefits                      | 415,934                                 | 356,191  | 27,122                            | 383,313                          | 32,621         |
| Overhead                             | 663,766                                 | 581,928  | 50,184                            | 632,112                          | 31,654         |
| Office Rental                        | 291,068                                 | 256,409  | 23,695                            | 280,104                          | 10,964         |
| Travel & Transportation              | 246,316                                 | 220,996  | 4,508                             | 225,504                          | 20,812         |
| Allowances                           | 118,522                                 | 87,803   | 5,669                             | 93,472                           | 25,050         |
| Other Direct Costs                   | 380,271                                 | 298,865  | 93,226                            | 392,091                          | (11,820)       |
| Equipment, Materials<br>and Supplies | 146,535                                 | 145,176  | 1,103                             | 146,279                          | 256            |
| Sub-Contracts                        | <u>525,731</u>                          | <u>516,214</u>                                     | <u>0</u>                          | <u>516,214</u>                   | <u>9,517</u>   |
| TOTAL                                | \$5,504,400                             | \$4,923,388  | \$363,838                         | \$5,287,226                      | \$217,174      |

V. MEDEX PHASE III PROJECT STATUS  
 Summary of activities for Quarter #20

| <u>Services</u>   | <u>Provided<br/>This Quarter</u> | <u>Cumulative<br/>Total</u> |
|---|----------------------------------|-----------------------------|
| Exploratory/Informational Briefings   | 0                                | 21                          |
| PHC Seminars Conducted  | 0                                | 17                          |
| Module Development  |                                  |                             |
| Volumes Active this Quarter   | 22                               | N/A                         |
| Volumes Typeset (#1, 2, 3, 4, 6, 7, 8,<br>28, 29, 31, 34, 35a, 35c, 35d, 35e)                   | 15                               | 48                          |
| Volumes Printed and Delivered to AID<br>(#1, 5, 9, 10, 11, 12, 13, 21, 22,<br>27, 33, 35a, 35b) | 13                               | 31                          |
| Technical Assistance (Number of Visits)   |                                  |                             |
| AID/Regional Bureau   | 0                                | 5                           |
| USAID Mission   | 0                                | 14                          |
| LDC Government  | 0                                | 14                          |
| Elsewhere   | 0                                | 2                           |
| Workshops:  |                                  |                             |
| PHC Initiation  | 0                                | 1                           |
| Curriculum Adaptation   | 0                                | 3                           |
| Teacher Training  | 0                                | 3                           |
| Management/Logistics  | 0                                | 3                           |
| Preceptor/Deployment  | 0                                | 1                           |
| Continuing Education  | 0                                | 4                           |
| Evaluation  | 0                                | 2                           |
| Network Strengthening (Number of Activities)  |                                  |                             |
| Domestic Network Meetings   | 0                                | 5                           |
| Other Domestic Network Activities   | 0                                | 77                          |
| International Meetings  | 0                                | 1                           |

VI. STATUS OF MODULE DEVELOPMENT  
 Summary of module activities for Quarter #20, April - June 1983

| <u>Volume Number</u>                    | <u>Volume Title</u>   | <u>Scheduled AID Delivery</u> | <u>Active This Quarter?</u> | <u>Current Status</u>   |
|---|---|-------------------------------|-----------------------------|---|
| 1.                                      | The MEDEX Primary Health Care Series: An Overview (revised)   | Jun 1983                      | Yes                         | Typeset, pasted up, printed. Delivered to AID, June 1983. (Original "Overview" delivered to AID, March 1982.) |
| <b>I. SYSTEMS DEVELOPMENT MATERIALS</b> |   |                               |                             |   |
| 2.                                      | Management Analysis Training Module (Student Text and Instructor's Manual)  | Jun 1983                      | Yes                         | Typeset and pasted up. Being printed.   |
| 3.                                      | Drugs and Medical Supplies System Workbook; General Supplies System Workbook; Facilities and Equipment Maintenance Workbook; Transportation System Workbook | Jun 1983                      | Yes                         | Typeset and pasted up. Being printed.   |
| 4.                                      | Communication System Workbook; Personnel System Workbook; Finance System Workbook; Health Information System Workbook                                       | Jun 1983                      | Yes                         | Typeset and pasted up. Being printed.   |
| 5.                                      | District and National Planning and Management Workshops Manual  | Jun 1983                      | Yes                         | Pasted up and printed. Delivered to AID, June 1983.   |

II. MID-LEVEL HEALTH WORKER  
TRAINING MATERIALS

A. Training Program  
Development Manuals

- |    |                             |          |     |   |
|----|-----------------------------|----------|-----|---|
| 6. | Training Process Manual     | Jun 1983 | Yes | Typeset, illustrated, pasted up, printed. |
| 7. | Continuing Education Manual | Jun 1983 | Yes | Typeset and pasted up. Being printed.     |
| 8. | Training Evaluation         | Jun 1983 | Yes | Typeset and pasted up. Being printed.     |

B. Community Health Needs

- |     |  |          |     |                                       |
|-----|--|----------|-----|---------------------------------------|
| 9.  | Identifying the Preventive Health Needs of the Community; Meeting the Preventive Health Needs of the Community; Training and Supporting Community Health Workers (Student Text)        | May 1983 | Yes | Printed. Delivered to AID, June 1983. |
| 10. | Identifying the Preventive Health Needs of the Community; Meeting the Preventive Health Needs of the Community; Training and Supporting Community Health Workers (Instructor's Manual) | May 1983 | Yes | Printed. Delivered to AID, June 1983. |

C. Basic Clinical Modules

- |     |   |          |     |  |
|-----|---|----------|-----|--|
| 11. | Anatomy and Physiology; Medical History (Student Text)                              | Apr 1983 | Yes | Printed. Delivered to AID, April 1983. |
| 12. | Physical Examination (Student Text)   | Apr 1983 | Yes | Printed. Delivered to AID, April 1983. |
| 13. | Anatomy and Physiology; Medical History; Physical Examination (Instructor's Manual) | Apr 1983 | Yes | Printed. Delivered to AID, April 1983. |

**D. General Clinical Modules**

- |     |  |    |                                  |
|-----|--|----|----------------------------------|
| 14. | Respiratory and Heart; Jul 1982<br>Gastrointestinal;<br>Gastrourinary (Student<br>Text)                  | -- | Delivered to AID, July 1982.     |
| 15. | Respiratory and Heart; Jul 1982<br>Gastrointestinal;<br>Gastrourinary<br>(Instructor's Manual)           | -- | Delivered to AID, July 1982.     |
| 16. | Skin; Dental, Eyes, Apr 1982<br>Ears, Nose and Throat<br>(Student Text)                                  | -- | Delivered to AID, March 1982.    |
| 17. | Skin; Dental, Eyes, Apr 1982<br>Ears, Nose and Throat<br>(Instructor's Manual)                           | -- | Delivered to AID, March 1982.    |
| 18. | Infectious Diseases; Nov 1982<br>Other Common Problems<br>(Student Text)                                 | -- | Delivered to AID, December 1982. |
| 19. | Trauma and Emergency Nov 1982<br>(Student Text)  | -- | Delivered to AID, December 1982. |
| 20. | Infectious Diseases; Nov 1982<br>Trauma and Emergency;<br>Other Common Problems<br>(Instructor's Manual) | -- | Delivered to AID, December 1982. |

**E. Maternal and Child  
Health Modules**

- |     |   |     |   |
|-----|---|-----|---|
| 21. | Prenatal Care; May 1983<br>Labor and Delivery;<br>Postnatal Care<br>(Student Text)                  | Yes | Printed and delivered to AID, May 1983. |
| 22. | Prenatal Care; May 1983<br>Labor and Delivery;<br>Postnatal Care<br>(Instructor's Manual)           | Yes | Printed and delivered to AID, May 1983. |
| 23. | Problems of Women; Aug 1982<br>Diseases of Infants<br>and Children; Child<br>Spacing (Student Text) | --  | Delivered to AID, August 1982.          |

24. Problems of Women; Aug 1982 -- Delivered to AID, August 1982.  
Diseases of Infants  
and Children; Child  
Spacing (Instructor's  
Manual)

F. Health Center Management Modules

25. Working with the Oct 1982 -- Delivered to AID, November 1982.  
Health Team; Working  
with Support Systems  
(Student Text)
26. Working with the Oct 1982 -- Delivered to AID, November 1982.  
Health Team; Working  
with Support Systems  
(Instructor's Manual)
27. Supervising and Jun 1983 Yes Pasted up and printed.  
Supporting Mid-Level Delivered to AID, June 1983.  
Health Workers (Student  
Text and Instructor's  
Manual)

G. Reference Guides

28. Formulary; Diagnostic Jun 1983 Yes Typeset, illustrated, pasted up, printed.  
and Patient Care  
Guides
29. Patient Care Jun 1983 Yes Typeset, illustrated, and pasted up.  
Procedures Being printed.
30. Health Center Oct 1982 -- Delivered to AID, December 1982.  
Operations
31. Community Health Jun 1983 Yes Typeset, illustrated, pasted up, printed.

III. COMMUNITY HEALTH WORKER  
TRAINING MATERIALS

32. Introduction to Jan 1983 -- Delivered to AID, December 1982.  
Training; Clean Water  
and Clean Community;  
Prevention and Care of  
Diarrhea

- |     |   |           |     |  |
|-----|---|-----------|-----|--|
| 33. | Healthy Pregnancy;<br>Feeding and Caring for<br>Children                  | May 1983  | Yes | Printed and delivered to AID, May 1983.  |
| 34. | Some Common Health<br>Problems;<br>Tuberculosis and<br>Leprosy; First Aid | May 1983  | Yes | Typeset, illustrated, pasted up, printed.  |
| 35. | Community Learning<br>Materials:  | June 1983 | Yes |  |
|     | a. Health Problems in<br>the Community                                    |           |     | Written and approved. Typeset,<br>illustrated, pasted up, and printed.<br>Delivered to AID, June 1983. |
|     | b. Caring for Your<br>Child   |           |     | Printed. Delivered to AID, June 1983.  |
|     | c. Caring for Your Sick<br>Child  |           |     | Written and approved. Typeset,<br>illustrated, and pasted up. Being<br>printed.                        |
|     | d. Clean Home and Clean<br>Community                                      |           |     | Written and approved. Typeset,<br>illustrated, and pasted up. Being<br>printed.                        |
|     | e. Illustrations for<br>Training CHWs                                     |           |     | Introduction written and illustrations<br>drawn. Approved and typeset and<br>pasted up.                |

**A D D E N D U M**

**Text of Speeches by Dr. Smith and Dr. Powell**

**The MEDEX Primary Health Care Series**

**Washington, D.C.**

**June 12, 1983**

June 12, 1983

BACKGROUND  
THE MEDEX PRIMARY HEALTH CARE SERIES  
Richard A. Smith, M.D., M.P.H.

The concept of Primary Health Care developed from a complex sequence of events during the past twenty-five years.

Knowledge that categorical health services such as oral rehydration, family planning, nutrition, safe water and immunizations could be delivered for a longer time and sustained more effectively in an integrated, institutionalized delivery system, became, for some of us, the driving force to develop ways to integrate the delivery of essential health services. In the sixties and seventies there emerged an important and far-reaching awareness that adequately trained non-doctors could provide such essential services. Also, there was growing concern that the community should be the locus as well as the focus of such services. These were among the stimuli in the seventies to move the World Health Assembly and its member states through and beyond the stage of "basic health services" which saw the rural health center as the focal point for services, instead of the community.

The culmination of action by WHO and UNICEF and related phenomena was the meeting on PHC that was held in Alma Ata, USSR in 1978. The representatives of 134 governments and 67 international agencies who attended that conference endorsed the principles of PHC. That meeting may prove to be the single most important contribution that has been made to PHC.

Aware of these occurrences (frequently as a participant), the MEDEX group concerned itself with developing and testing technology that ultimately would support the concepts and provide tools to implement the health services component of the PHC strategy. The MEDEX approaches and materials have been shaped by many of these events. They are a product of the global PHC movement and, as such, represent contributions by many countries and health workers who pursue this opportunity to improve quality of life.

The MEDEX PRIMARY HEALTH CARE SERIES has been used in small projects as well as national programs to (1) strengthen management support related to PHC, (2) to train mid-level health workers, and (3) to train community health workers.

Of interest to governments and international organizations (especially PVOs, mission groups, etc.), people who have seen the earliest printed books in the Series have told us that the SERIES represents a technology to instantly plug whole organizations, including their most far-flung outposts, into the present state-of-the-art in PHC.

The technology we are discussing today is the result of field trials in five developing countries plus a review and analysis of PHC programs in seventeen other nations. It has been created for use by governments and

NGOs as a template upon which each of their individual PHC efforts may be built or strengthened. It is not the only way to approach PHC; nor does it contain all the answers. But we believe that these prototype materials will assist such groups to better understand the experiences of others in the field, to help them explore possible options for future training and management, and ultimately, to improve their own PHC programs.

The WHO is distributing the SERIES for use in thirteen countries. Governments and other groups in a total of seventy-six countries have asked us to make the technology available to them. Based on successes we have seen in PHC, we see the availability of the SERIES as an opportunity for many PVOs and governments to develop successful and comprehensive PHC programs. We see it as an opportunity to coordinate implementation and operations within organizations, within governments. This is a feat often discussed, but historically difficult to accomplish. This kind of coordination is needed and we think it is now possible. We feel it gives us a good shot at providing PHC for many more, if not all, by the year 2000.

#### THE MEDEX EXPERIENCE

Since 1974, the Health Manpower Development Staff (The MEDEX Group) has collaborated on a significant scale in PHC development in five developing countries. These countries differ in their geography, climate, language, culture, and health services organization and traditions. What they have in common, however, is a commitment to develop comprehensive and well-supported PHC services. We've also collaborated with PHC workers in other countries, as well as with international health agencies. Through these experiences, as you can see depicted on this chart relating the DEV. Hx found in your folder, the MEDEX approaches and materials evolved changed and improved. Each successive collaboration sharpened the prototype materials as they were revised and made increasingly adaptable.

#### Lights out

The first health program in a developing setting with which the MEDEX group worked, in Micronesia, provided two important concepts. First, it showed that mid-level health workers could train and supervise community health workers and that the CHWs could serve as a vital link between the health system and local communities. Second, the continuous revisions of training materials within the Micronesian context led to the concept of developing prototype materials for adaptation and use elsewhere.

In Thailand, where the MEDEX group provided technical assistance for the MLHW training component of the Lampang Health Development Project, prototype training materials based on experiences in Micronesia were adapted, translated into Thai, and used successfully. Prototype materials were adapted for use in the module or skill development phase as well as for use in the community phase of training. The experience in Thailand once again demonstrated the critical importance of ongoing supervision and logistical support for MLHWs as well as CHWs in a PHC

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system. [It also dictated improved feedback loops to assess training and performance.]

In Guyana, South America, in a PHC program funded initially by the International Development Research Center in Ottawa, and then by AID, MEDEX prototype training materials, revised on the basis of experiences in Micronesia and Thailand, were once again adapted, this time to suit the needs of Guyana. In addition to developing clinical skills and training skills such as those for training CHWs in oral rehydration, immunization, nutrition, etc., the MLHWs were trained in basic management to help them obtain and make more effective use of the support available from the Ministry of Health and to help them better manage their own health center work.

At an early stage of Pakistan's development of its PHC services, the University of Hawaii advisory staff was joined by Thai and Guyanese consultants experienced in MEDEX-type PHC programs. MEDEX management advisors subsequently worked with Pakistani professionals and other PHC personnel to analyze and strengthen support systems for the Pakistan PHC program. Once again further refined prototype training materials were adapted this time by Pakistanis and used in twenty MLHW training centers throughout the country. The CHW training materials were also further developed, adapted and used.

In 1979, the Lesotho Ministry of Health identified improvement of planning and management support as its first priority in strengthening PHC. The resulting rural health development program designed to meet the needs of that country, was able to use the experiences of the countries with which the Hawaii group had already worked, as well as the experiences of many other countries. The nurse-clinician training component of Lesotho's PHC program adapted MEDEX prototype materials in collaboration with Hawaiian and Guyanese advisors. They placed great emphasis on gardening and its contribution to improved nutrition. The project has also developed management training materials and a contemporary health information system based on analysis of the management support systems in the country. Lesotho has contributed significantly to the development of prototype CHW training materials which can be discussed by Sunil Mehra later if time permits.

How these five collaborative experiences contributed to the revisions, improvement and ultimate refinement of the prototype materials is depicted in this summary slide (from the Dev. Hx sheet in your packet). The end product of these efforts is a technology that can be used to help strengthen PHC in a country, after it has been specifically adapted to that specific setting.

#### THE TECHNOLOGY

THE MEDEX materials initially focus on the training of health personnel at the middle of the PHC manpower pyramid (trainers, supervisors, health service providers; can be nurse clinicians, medical assistants, wechakorn). The materials then place appropriate importance on training community health workers and on strengthening the associated management

systems needed to support the effective delivery of PHC services at the local level.

The MEDEX approach to PHC development emphasizes strengthening the infrastructure in which health workers will work upon completion of their training either in a small/local/focused project, or in a scaled-up, regional or national program. A significant characteristic of this approach is the use of mid-level health workers as the trainers and supervisors of community health workers. [After the adaptation we have found that the need for physician input rapidly diminishes.]

This training/supervisory interlock between MLHW and CHW reduces the number of problems that occur when CHWs attempt to provide services in the absence of a clearly designated and easily accessible source of support and guidance. This structure also contributes to longevity and support of the system.

#### DEVELOPMENT HISTORY

As the clinical, preventive, and promotive materials were evolving, field experiences from the PHC programs in Micronesia, Thailand, Guyana, Pakistan, and Lesotho continually fed useful information back into the ongoing development of the prototypes. The greatest influence on prototype evolution has been this feedback on their usefulness and adaptability in developing countries, as well as knowledge about the performance of training program graduates in the field. Each of the programs saw improvement in the adaptation process and in the prototypes, themselves. Thus, these materials are the end product of years of field trials and subsequent revisions and refinement. They have all been aimed at honing down large amounts of information about specific, commonly occurring health problems and their resolutions, into an easily adapted, easily taught, format.

To describe the materials contained in the MEDEX PHC Series, I'd like to present to you, Dr. Rodney Powell, Deputy Director of The MEDEX Group.

THE MEDEX APPROACH AND MATERIALS FOR PRIMARY HEALTH CARE DEVELOPMENT ARE CONTAINED IN THIRTY-FIVE VOLUMES WHICH INCLUDE MODULES, MANUALS, AND WORKBOOKS.

SLIDE

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THE SERIES STRESSES THE TRAINING OF MIDDLE LEVEL PERSONNEL AS TRAINERS AND SUPERVISORS AS WELL AS PROVIDERS OF HEALTH SERVICES. THE SERIES ALSO PLACES IMPORTANCE ON COMMUNITY HEALTH WORKERS AND ON STRENGTHENING THE ASSOCIATED MANAGEMENT SYSTEMS NEEDED TO SUPPORT THE EFFECTIVE DELIVERY OF PRIMARY HEALTH CARE SERVICES AT THE LOCAL LEVEL.

THE MEDEX PRIMARY HEALTH CARE SERIES USES A COMPETENCY-BASED APPROACH TO TRAINING AS OPPOSED TO A THEORY-BASED APPROACH. THE COMPETENCY-BASED TRAINING CURRICULUM IS PROBLEM-ORIENTED AND THEREFORE INCLUDES ONLY THAT INFORMATION ESSENTIAL TO TRAINING THE WORKER TO DO HIS JOB. COMPETENCY-BASED TRAINING USES LOCALLY APPROPRIATE TRAINING MATERIALS AND ACTIVE LEARNING METHODS SUCH AS DEMONSTRATIONS AND PRACTICAL FIELD WORK TO TEACH SKILLS. SKILLS DEVELOPMENT IS THE PRIMARY FOCUS OF COMPETENCY-BASED TRAINING. BY FOCUSING LEARNING ACTIVITIES ON TASKS WHICH ARE MOST IMPORTANT IN HELPING PEOPLE IMPROVE AND SAFEGUARD THEIR HEALTH, TRAINING TIME IS REDUCED AND THE TRAINING EFFORT IS MADE MORE EFFICIENT.

THE MEDEX APPROACHES AND MATERIALS ARE DESIGNED TO BE APPLIED TOGETHER AS A SYSTEM OR IN COMPONENT PARTS FOR DEVELOPING OR STRENGTHENING PRIMARY HEALTH CARE PROGRAMS. MAJOR EMPHASIS IS PLACED ON THE INTERRELATEDNESS AND INTERDEPENDENCY OF EACH OPERATIONAL AND MANPOWER LEVEL OF THE PRIMARY HEALTH CARE SYSTEM.

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THE MEDEX PRIMARY HEALTH CARE SERIES HAS THREE MAJOR COMPONENTS. THESE ARE SYSTEMS DEVELOPMENT MATERIALS, MID-LEVEL HEALTH WORKER TRAINING MATERIALS, AND COMMUNITY HEALTH WORKER TRAINING MATERIALS.

## SYSTEMS DEVELOPMENT MATERIALS

THE SYSTEMS DEVELOPMENT MATERIALS TRAIN PROGRAM PARTICIPANTS TO ANALYZE THEIR PRIMARY HEALTH CARE MANAGEMENT SUPPORT SYSTEMS AND TO RECOMMEND WAYS TO IMPROVE THEM. PROTOTYPE MATERIALS ARE PROVIDED TO HELP MANAGERS ORGANIZE AND CONDUCT DISTRICT AND NATIONAL WORKSHOPS TO STRENGTHEN PLANNING, ORGANIZATION, EVALUATION, AND MANAGEMENT SUPPORT FOR PRIMARY HEALTH CARE.

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AND

## MANAGEMENT ANALYSIS TRAINING MODULE

THE MANAGEMENT ANALYSIS TRAINING MODULE HELPS THE MANAGEMENT ANALYST TRAINEE DEVELOP THE NECESSARY SKILLS, KNOWLEDGE, AND ATTITUDES TO STRENGTHEN MANAGEMENT SUPPORT SYSTEMS FOR PRIMARY HEALTH CARE. THE MODULE GUIDES THE TRAINEE THROUGH A COMPLETE STUDY OF ONE OR MORE MANAGEMENT SUPPORT SYSTEMS USING A SET OF MANAGEMENT SYSTEM WORKBOOKS.

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## MANAGEMENT SYSTEM WORKBOOKS

THE MANAGEMENT SYSTEM WORKBOOKS HELP THE MANAGEMENT ANALYST TO GATHER INFORMATION FOR A STUDY OF A MANAGEMENT SUPPORT SYSTEM, TO DEVELOP AND ANALYZE STUDY FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS, AND TO PREPARE WRITTEN AND ORAL REPORTS OF THE STUDY. A WORKBOOK IS AVAILABLE FOR EACH OF THESE MANAGEMENT SUPPORT SYSTEMS: DRUGS AND MEDICAL SUPPLIES, GENERAL SUPPLIES, FACILITIES AND EQUIPMENT MAINTENANCE, TRANSPORTATION, <sup>H</sup>COMMUNICATION, PERSONNEL, FINANCE, AND HEALTH INFORMATION. EACH WORKBOOK GIVES THE BEGINNING MANAGEMENT ANALYST A STRUCTURED APPROACH TO INFORMATION GATHERING AND ANALYSIS IN THAT SYSTEM. THE WORKBOOKS HELP ENSURE THAT THE MANAGEMENT ANALYSIS STUDIES WILL BE OF SUFFICIENT QUALITY TO PROVIDE AN INFORMATION BASE FOR SUBSEQUENT SYSTEMS IMPROVEMENTS.

## DISTRICT AND NATIONAL PLANNING AND MANAGEMENT WORKSHOPS MANUAL

THE DISTRICT AND NATIONAL PLANNING AND MANAGEMENT WORKSHOPS MANUAL SERVES AS A BASIC RESOURCE FOR PLANNING AND CONDUCTING WORKSHOPS IN HEALTH PLANNING AND MANAGEMENT AT THE DISTRICT AND NATIONAL LEVELS OF THE HEALTH SYSTEM. THE WORKSHOPS ARE PART OF A CONTINUING PROCESS FOR IMPROVING THE MANAGEMENT

OF PRIMARY HEALTH CARE PROGRAMS. THIS PROCESS BRINGS TOGETHER POLICY LEVEL OFFICIALS AND FIELD PERSONNEL IN A WORKSHOP SETTING TO REVIEW ANALYTICAL STUDIES OF MANAGEMENT SUPPORT SYSTEMS, CONFIRM OR REVISE FINDINGS AND CONCLUSIONS, EXAMINE ALTERNATIVES, AND DEVELOP PLANS FOR IMPROVING THE SYSTEMS TO BETTER SUPPORT THE DELIVERY OF PRIMARY HEALTH CARE SERVICES.

THE MANUAL CONTAINS GUIDELINES FOR PLANNING AND CONDUCTING A WORKSHOP, INCLUDING PROTOTYPE WORKSHOP PROGRAMS, EXERCISES, EVALUATION QUESTIONNAIRES, AND FINAL REPORT OUTLINES.

## MID-LEVEL HEALTH WORKER TRAINING MATERIALS

THE MID-LEVEL HEALTH WORKER TRAINING MATERIALS WHICH CAN BE ADAPTED TO THE SPECIFIC NEEDS OF A COUNTRY INCLUDE PROCEDURES AND MATERIALS FOR PREPARATION OF INSTRUCTORS, EVALUATION OF TRAINEES, PREPARATION FOR THE COMMUNITY PHASE OF TRAINING, AND DEVELOPMENT OF A CONTINUING EDUCATION PROGRAM. INSTRUCTORS WILL ~~ALSO~~ USE THE MATERIALS TO TRAIN NURSES, MEDICAL ASSISTANTS, AND OTHER MIDDLE LEVEL PROVIDERS OF HEALTH SERVICES. THE MATERIALS ENSURE THAT STUDENTS ACQUIRE THE SKILLS AND KNOWLEDGE THEY WILL NEED TO PROVIDE PRIMARY HEALTH CARE SERVICES, TO MANAGE A SMALL HEALTH FACILITY, AND TO TRAIN COMMUNITY HEALTH WORKERS. THESE MATERIALS ALSO TRAIN INSTRUCTORS AND SUPERVISORS TO TEACH, SUPERVISE, AND SUPPORT MID-LEVEL HEALTH WORKERS. *p10 see next page*

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MID-LEVEL HEALTH WORKER TRAINING MATERIALS CONTAIN THREE TRAINING PROGRAM DEVELOPMENT MANUALS, THREE COMMUNITY HEALTH MODULES, THREE BASIC CLINICAL KNOWLEDGE AND SKILLS MODULES, EIGHT GENERAL CLINICAL MODULES, SIX MATERNAL AND CHILD HEALTH MODULES, THREE HEALTH CENTER MANAGEMENT MODULES, AND FIVE REFERENCE MANUALS.

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THE TRAINING PROGRAM DEVELOPMENT MANUALS CONTAIN MATERIAL FOR ADAPTING THE PROTOTYPE CURRICULUM AND PREPARING INSTRUCTORS TO USE COMPETENCY-BASED TEACHING METHODS, EVALUATING THE TRAINEES, AND DEVELOPING A CONTINUING EDUCATION SYSTEM.

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THE COMMUNITY HEALTH MODULES PREPARE STUDENTS TO ASSESS THE PREVENTIVE AND PROMOTIVE HEALTH NEEDS OF A COMMUNITY, TO WORK WITH THE COMMUNITY TO MEET ITS PRIORITY HEALTH NEEDS, AND TO WORK WITH COMMUNITY HEALTH WORKERS. STUDENTS SPEND THREE MONTHS OF THEIR TRAINING PROGRAM IN COMMUNITIES AT SITES SIMILAR TO THOSE TO WHICH THEY WILL BE ASSIGNED AFTER GRADUATION.

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THE BASIC CLINICAL KNOWLEDGE AND SKILLS MODULES GIVE STUDENTS THE BACKGROUND AND INFORMATION THEY WILL NEED TO INTERVIEW AND EXAMINE PATIENTS AND DIAGNOSE A PROBLEM OR CONDITION. STUDENTS WILL ALSO LEARN THE BASIC DISEASE PROCESSES DESCRIBED IN THE GENERAL CLINICAL MODULES.

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THE GENERAL CLINICAL MODULES TRAIN THE STUDENTS TO DIAGNOSE, TREAT, AND PREVENT COMMON CLINICAL PROBLEMS. AFTER COMPLETING A GIVEN MODULE, THE MID-LEVEL HEALTH WORKER WILL BE ABLE TO:

OBTAIN RELEVANT MEDICAL HISTORY INFORMATION BY  
INTERVIEW

APPROPRIATELY EXAMINE THE PATIENT

USE THE MEDICAL HISTORY AND PHYSICAL EXAMINATION  
FINDINGS TO ASSIST IN DIAGNOSING A PATIENT'S PROBLEM

PROVIDE TREATMENT AND CARE FOR A PATIENT WHO HAS ANY ONE OF THE PROBLEMS OR CONDITIONS IN THAT MODULE

DETERMINE WHETHER OR NOT A PROBLEM OR CONDITION DIAGNOSED REQUIRES CARE WHICH HE CANNOT PROVIDE AND TRANSFER OR REFER THE PATIENT TO A HOSPITAL

INFORM THE PATIENT ABOUT WHAT HE CAN DO TO ELIMINATE, REDUCE, OR PREVENT THE PROBLEM

THE MID-LEVEL HEALTH WORKER WILL ALSO BE ABLE TO USE THE INFORMATION IN THE GENERAL CLINICAL MODULES WHEN ADVISING FAMILY, COMMUNITY, AND HEALTH TEAM MEMBERS ABOUT HOW TO PROTECT AND IMPROVE THEIR HEALTH STATUS.

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THE MATERNAL AND CHILD HEALTH MODULES PROVIDE INSTRUCTION AND EXPERIENCE IN MANAGING PROBLEMS AND CONDITIONS OF WOMEN AND CHILDREN. STUDENTS LEARN TO EXAMINE PREGNANT WOMEN, TO MONITOR PREGNANCIES, TO ASSIST IN LABORS AND DELIVERIES, TO EXAMINE NEWBORNS, AND TO TREAT THE COMMON PROBLEMS AND CONDITIONS OF WOMEN AND CHILDREN. IN ADDITION, STUDENTS LEARN TO ASSIST COUPLES IN PLANNING THEIR FAMILIES.

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THE THREE HEALTH CENTER MANAGEMENT MODULES EXPLAIN HOW A MINISTRY OF HEALTH, HEALTH WORKERS, AND COMMUNITIES COOPERATE IN A WORKING PRIMARY HEALTH CARE SYSTEM. THE MODULES EXPLAIN MID-LEVEL HEALTH WORKERS' MANAGEMENT DUTIES AND RESPONSIBILITIES AS WELL AS FUNDAMENTAL TECHNIQUES

FOR MANAGING A HEALTH TEAM AND USING SUPPORT SYSTEMS. MID-LEVEL HEALTH WORKERS ALSO LEARN HOW TO SUPERVISE AND SUPPORT OTHER MID-LEVEL HEALTH WORKERS, AS PART OF THEIR CONTINUING EDUCATION.

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THE FIVE REFERENCE MANUALS ARE REGULARLY USED BY THE STUDENTS DURING THE COURSE OF THEIR TRAINING. THEY MUST BE USED TO CORRECTLY ANSWER REVIEW QUESTIONS AND EXERCISES. BY THE END OF THEIR TRAINING, THE STUDENTS ARE FAMILIAR WITH THE CONTENTS OF EACH MANUAL AND ARE ABLE TO USE IT EFFECTIVELY WHEN THEY ARE AT WORK IN A HEALTH CENTER. THE REFERENCES FACILITATE THE RAPID AND ACCURATE DIAGNOSIS AND TREATMENT OF HEALTH PROBLEMS AS WELL AS THE EFFICIENT MANAGEMENT OF HEALTH CENTER OPERATIONS. LIKE THE TRAINING MODULES, THE REFERENCE MANUALS MUST BE ADAPTED TO FIT THE CONDITIONS OF SPECIFIC COUNTRY PROGRAMS.

→ EACH PROTOTYPE MID-LEVEL HEALTH WORKER TRAINING MODULE HAS A STUDENT TEXT AND AN INSTRUCTOR'S MANUAL. EACH STUDENT TEXT CONTAINS A TASK ANALY. TABLE SHOWING THE MAJOR TASKS RELATED TO THAT MODULE AND THE KNOWLEDGE AND SKILLS REQUIRED TO CARRY OUT THOSE TASKS. EACH STUDENT TEXT ALSO HAS A STUDENT GUIDE WHICH LISTS THE LEARNING OBJECTIVES AND LEARNING ACTIVITIES FOR THE MODULE. SCHEDULES SHOW HOW THE TRAINING TIME IS ALLOTTED FOR EACH ACTIVITY. IN ADDITION, EACH MODULE CONTAINS REVIEW QUESTIONS AND REVIEW EXERCISES. SKILL CHECKLISTS ARE INCLUDED WHEN APPROPRIATE SO THE STUDENTS CAN RATE

EACH OTHER ON THE SKILLS THEY ARE LEARNING. THESE CHECKLISTS ARE THE SAME CHECKLISTS THE INSTRUCTOR USE TO EVALUATE THE STUDENTS.

THE INSTRUCTOR'S MANUALS CONTAIN TEACHING PLANS RELATED TO THE UNITS IN THE STUDENT TEXT. INSTRUCTOR'S MANUALS ALSO CONTAIN ANSWERS TO THE REVIEW QUESTIONS AND REVIEW EXERCISES.

## TRAINING PROGRAM DEVELOPMENT MANUALS

### TRAINING PROCESS MANUAL: CURRICULUM ADAPTATION, INSTRUCTOR PREPARATION, PROGRAM MANAGEMENT

THE TRAINING PROCESS MANUAL WILL HELP TRAINING PROGRAM MANAGERS ESTABLISH, PREPARE FOR, AND CONDUCT A COMPETENCY-BASED TRAINING PROGRAM THAT IS SPECIFIC TO A COUNTRY'S NEEDS, USING THE MEDEX PRIMARY HEALTH CARE SERIES. THE MANUAL PROVIDES STEP-BY-STEP GUIDELINES TO PREPARE PROGRAM MANAGERS TO:

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MAKE POLICY DECISIONS AND ESTABLISH GUIDELINES FOR THE TRAINING PROGRAM, INCLUDING RECOMMENDATIONS FOR NECESSARY POLICY DECISIONS

PLAN AND GUIDE THE ADAPTATION PROCESS FOR THE PROTOTYPE MID-LEVEL HEALTH WORKER AND COMMUNITY HEALTH WORKER CURRICULUM

PREPARE INSTRUCTORS USING TEACHING METHODS AND TECHNIQUES RECOMMENDED FOR COMPETENCY-BASED TRAINING

ESTABLISH A SYSTEM FOR MANAGING THE TRAINING PROGRAM

THE MANUAL INCLUDES INFORMATION, ACTIVITIES, AND SUPPORTING MATERIALS TO ACCOMPLISH THESE TASKS. AMONG THE MATERIALS IS THE COMMUNITY PHASE ORIENTATION PROGRAM WHICH PREPARES MID-LEVEL HEALTH WORKERS AND SUPERVISORS FOR THE THREE-MONTH COMMUNITY PHASE OF TRAINING. IT PROVIDES DEFINITIONS OF AND AN ORIENTATION TOWARD:

THE COMMUNITY PHASE SUPERVISOR'S SCOPE OF WORK

THE LOGISTICAL ARRANGEMENTS FOR SUPERVISION

THE CRITERIA AND METHODS FOR EVALUATING MID-LEVEL HEALTH WORKER PERFORMANCE REGARDING MANAGEMENT OF HEALTH OPERATIONS; COMMUNITY HEALTH ACTIVITIES; AND COMMUNITY HEALTH WORKER SELECTION, TRAINING, AND SUPPORT ACTIVITIES

#### CONTINUING EDUCATION MANUAL

THE CONTINUING EDUCATION MANUAL MAKES CONTINUING EDUCATION PART OF THE MID-LEVEL HEALTH WORKER SUPERVISOR SYSTEM. DESIGNED FOR USE IN A WORKSHOP, IT PREPARES THE PROGRAM MANAGER AND HIS STAFF TO TRAIN SUPERVISORS WHO WILL MAKE CONTINUING EDUCATION OF MID-LEVEL HEALTH WORKERS A REGULAR PART OF THEIR RESPONSIBILITIES. THE MANUAL ADDRESSES THESE COMPONENTS OF THE SYSTEMATIC APPROACH TO CONTINUING EDUCATION:

DETERMINING WHETHER MID-LEVEL HEALTH WORKERS  
ARE MEETING PREVIOUSLY IDENTIFIED COMMUNITY  
HEALTH NEEDS

EVALUATING THE JOB PERFORMANCE OF THE MID-  
LEVEL HEALTH WORKER, IDENTIFYING HIS CONTINUING  
EDUCATION NEEDS, AND STATING LEARNING OBJECTIVES

EVALUATING MANPOWER, FACILITIES, AND MATERIAL  
RESOURCES AVAILABLE FOR CONTINUING EDUCATION

DEVELOPING PLANS FOR IMPLEMENTING CONTINUING  
EDUCATION FOR MID-LEVEL HEALTH WORKERS

EVALUATING THE EFFECTIVENESS OF CONTINUING  
EDUCATION PROGRAMS

THE COMPONENTS OF A COMPETENCY-BASED TRAINING PROGRAM  
INTRODUCED IN THE TRAINING PROCESS MANUAL ARE APPLIED  
IN THE CONTINUING EDUCATION PROGRAM FOR MID-LEVEL  
HEALTH WORKERS.

#### TRAINING EVALUATION MANUAL

THE TRAINING EVALUATION MANUAL IS A TOOL FOR CARRYING  
OUT SYSTEMATIC EVALUATION OF STUDENTS DURING THE  
TRAINING PROGRAM. THE MANUAL INCLUDES LOGS FOR  
RECORDING RESULTS OF TEST SCORES AND PERFORMANCE

EVALUATIONS. IT PROVIDES PROTOTYPE EVALUATION MATERIALS, INCLUDING PRETESTS AND POSTTESTS FOR EACH MODULE, AND A CERTIFICATION LOG WHICH IS A COMPOSITE RECORD OF STUDENTS' KNOWLEDGE AND SKILLS. THE MANUAL ALSO INCLUDES PROTOTYPE SCHEDULES FOR CONDUCTING STUDENT EVALUATIONS.

## COMMUNITY HEALTH MODULES

### IDENTIFYING THE PREVENTIVE HEALTH NEEDS OF THE COMMUNITY

IDENTIFYING THE PREVENTIVE HEALTH NEEDS OF THE COMMUNITY WILL PREPARE THE MID-LEVEL HEALTH WORKER TO ASSESS THE NEEDS OF A COMMUNITY RELATED TO ENVIRONMENTAL HEALTH, NUTRITION, AND MATERNAL AND CHILD HEALTH. AFTER COMPLETING THE MODULE, THE MID-LEVEL HEALTH WORKER WILL BE ABLE TO ASSESS HEALTHY AND UNHEALTHY PRACTICES AND CONDITIONS IN A COMMUNITY IN A MANNER WHICH IS SENSITIVE TO THE CULTURAL AND SOCIAL BACKGROUND OF THE PEOPLE. THE MID-LEVEL HEALTH WORKER WILL ALSO BE ABLE TO USE BASIC PRINCIPLES OF PREVENTIVE AND PROMOTIVE HEALTH TEACHING TO ASSIST PEOPLE IN CHANGING HEALTH PRACTICES.

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### MEETING THE PREVENTIVE HEALTH NEEDS OF THE COMMUNITY

THE MODULE MEETING THE PREVENTIVE HEALTH NEEDS OF THE COMMUNITY PREPARES THE MID-LEVEL HEALTH WORKER TO ASSIST A COMMUNITY IN DEVELOPING AND IMPLEMENTING A PLAN TO MEET THE PRIORITY HEALTH NEEDS IDENTIFIED BY THE COMMUNITY. IT ALSO PREPARES THE MID-LEVEL HEALTH WORKER TO EVALUATE HEALTH PROMOTING ACTIVITIES WITH PEOPLE FROM THE COMMUNITY WHO HAVE CARRIED OUT THESE ACTIVITIES.

## TRAINING AND SUPPORTING COMMUNITY HEALTH WORKERS

THE TRAINING AND SUPPORTING COMMUNITY HEALTH WORKERS MODULE PREPARES MID-LEVEL HEALTH WORKERS TO TRAIN, GUIDE, AND SUPPORT COMMUNITY HEALTH WORKERS. THE MID-LEVEL HEALTH WORKERS ARE ALSO ORIENTED TO THE ROLE OF THE COMMUNITY IN THE SELECTION AND SUPPORT OF COMMUNITY HEALTH WORKERS.

## BASIC CLINICAL KNOWLEDGE AND SKILLS MODULES

### ANATOMY AND PHYSIOLOGY

ANATOMY AND PHYSIOLOGY PROVIDES THE ELEMENTARY INFORMATION ON ANATOMY AND PHYSIOLOGY A STUDENT WILL NEED TO COMPLETE A BASIC MEDICAL HISTORY AND PHYSICAL EXAMINATION OF A PATIENT AND TO UNDERSTAND THE BASIC DISEASE PROCESSES DESCRIBED IN THE CLINICAL MODULES. AFTER COMPLETING THIS MODULE, THE STUDENT WILL BE ABLE TO DESCRIBE THE STRUCTURAL COMPONENTS OF THE HUMAN BODY, EXPLAIN THE BASIC PHYSIOLOGIC FUNCTIONS OF THE BODY, AND IDENTIFY AND LOCATE THE GENERAL ANATOMICAL REGIONS OF THE HUMAN BODY AND THE ORGAN SYSTEMS CONTAINED IN EACH.

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### MEDICAL HISTORY

AFTER COMPLETING THE MEDICAL HISTORY MODULE, THE STUDENT WILL BE ABLE TO INTERVIEW PATIENTS TO OBTAIN APPROPRIATE INFORMATION REGARDING EACH PATIENT'S CURRENT STATE OF HEALTH, WHICH INCLUDES HIS PRESENTING COMPLAINT, HISTORY OF THE PRESENT PROBLEM, REVIEW OF SYSTEMS, AND PAST MEDICAL HISTORY. HE WILL ALSO BE ABLE TO RECORD THAT INFORMATION.

## PHYSICAL EXAMINATION

AFTER COMPLETING THE PHYSICAL EXAMINATION MODULE,  
THE STUDENT WILL BE ABLE TO PHYSICALLY EXAMINE  
PATIENTS AND IDENTIFY AND RECORD THE RELEVANT PHYSICAL  
EXAMINATION FINDINGS.

## GENERAL CLINICAL MODULES

### COMMON PROBLEMS--RESPIRATORY AND HEART

STUDENTS LEARN TO MANAGE THESE COMMON RESPIRATORY  
AND HEART PROBLEMS:

|                                     |                          |
|-------------------------------------|--------------------------|
| PNEUMONIA                           | TUBERCULOSIS             |
| ACUTE BRONCHITIS                    | CONGESTIVE HEART FAILURE |
| CHRONIC BRONCHITIS AND<br>EMPHYSEMA | RHEUMATIC HEART DISEASE  |
| BRONCHIAL ASTHMA                    | ANGINA PECTORIS          |
| PLEURAL EFFUSION                    | MYOCARDIAL INFARCTION    |
|                                     | HYPERTENSION             |

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### COMMON PROBLEMS--GASTROINTESTINAL

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STUDENTS LEARN TO MANAGE THESE COMMON GASTROINTESTINAL  
PROBLEMS:

|                 |                 |                    |
|-----------------|-----------------|--------------------|
| AMEBIASIS       | PINWORMS        | ACUTE ABDOMEN      |
| GIARDIASIS      | TAPEWORMS       | ACUTE APPENDICITIS |
| PEPTIC ULCER    | HOOKWORMS       | INTESTINAL BLOCK   |
| GASTROENTERITIS | VIRAL HEPATITIS | HEMORRHOIDS        |
| ROUNDWORMS      | CIRRHOSIS       | ANAL FISSURES      |

**COMMON PROBLEMS--GENITOURINARY**

**STUDENTS LEARN TO MANAGE THESE COMMON GENITOURINARY PROBLEMS:**

|                                    |                                |
|------------------------------------|--------------------------------|
| <b>URINARY TRACT INFECTION</b>     | <b>ENLARGED PROSTATE GLAND</b> |
| <b>STONES IN THE URINARY TRACT</b> | <b>PROSTATITIS</b>             |
| <b>NEPHRITIS</b>                   | <b>SCROTAL SWELLING</b>        |
| <b>NEPHROTIC SYNDROME</b>          | <b>GONORRHEA</b>               |
|                                    | <b>SYPHILIS</b>                |

**COMMON PROBLEMS--SKIN**

**STUDENTS LEARN TO MANAGE THESE COMMON SKIN PROBLEMS:**

|                             |                                |
|-----------------------------|--------------------------------|
| <b>IMPETIGO</b>             | <b>TROPICAL ULCERS</b>         |
| <b>SCABIES</b>              | <b>HERPES SIMPLEX</b>          |
| <b>LICE</b>                 | <b>ECZEMA</b>                  |
| <b>RINGWORM</b>             | <b>ONCHOCERCIASIS</b>          |
| <b>TINEA VERSICOLOR</b>     | <b>CONTACT DERMATITIS</b>      |
| <b>CELLULITIS</b>           | <b>SKIN REACTIONS TO DRUGS</b> |
| <b>BOILS AND ABSCESSSES</b> |                                |

## COMMON PROBLEMS--DENTAL, EYES, EARS, NOSE, AND THROAT

STUDENTS LEARN TO MANAGE THESE COMMON DENTAL, EYE, EAR,  
NOSE, AND THROAT

|                         |                             |
|-------------------------|-----------------------------|
| STY                     | DENTAL ABSCESS              |
| CONJUNCTIVITIS          | ACUTE UPPER RESPIRATORY     |
| TRACHOMA                | INFECTION                   |
| CATARACTS               | ACUTE OTITIS MEDIA          |
| VITAMIN A DEFICIENCY    | CHRONIC OTITIS MEDIA        |
| FOREIGN BODY IN THE EYE | MASTOIDITIS                 |
| CUTS AND ULCERS IN THE  | EXTERNAL OTITIS             |
| CORNEA                  | WAX IN THE EARS             |
| EYE EMERGENCIES         | ACUTE SINUSITIS             |
| CANKER SORES            | ACUTE BACTERIAL TONSILLITIS |
| GINGIVITIS              | FOREIGN BODY IN THE EARS,   |
| ACUTE ULCERATIVE        | NOSE, AND THROAT            |
| GINGIVITIS              | NOSE BLEEDS                 |
| TOOTH DECAY             |                             |

## COMMON PROBLEMS--INFECTIOUS DISEASES

STUDENTS LEARN TO MANAGE THESE COMMON INFECTIOUS DISEASES:

|                     |                    |
|---------------------|--------------------|
| TYPHOID FEVER       | LOUSE-BORNE TYPHUS |
| TETANUS IN CHILDREN | MENINGITIS         |
| AND ADULTS          | DIPHTHERIA         |
| RABIES              | LEPROSY            |
| MALARIA             |                    |

## OTHER COMMON PROBLEMS

STUDENTS LEARN TO MANAGE THESE OTHER COMMON PROBLEMS:

|                      |                            |
|----------------------|----------------------------|
| LOW BACK PAIN CAUSED | STROKE                     |
| BY MUSCLE STRAIN OR  | GRAND MAL EPILEPSY         |
| SPRAIN OF THE        | PETIT MAL EPILEPSY         |
| SACROILIAC JOINT     | ANEMIA                     |
| LOW BACK PAIN CAUSED | CANCER                     |
| BY DISK DISEASE      | DIABETES MELLITUS          |
| OSTEOARTHRITIS       | ACUTE CONFUSION            |
| RHEUMATOID ARTHRITIS | ANXIETY                    |
| SEPTIC ARTHRITIS     | DEPRESSION                 |
| SIMPLE GOITER        | ACUTE ALCOHOL INTOXICATION |
| HYPOTHYROIDISM       | CHRONIC ALCOHOLISM         |
| HYPERTHYROIDISM      |                            |
| HEADACHE             |                            |

## TRAUMA AND EMERGENCY

STUDENTS LEARN TO MANAGE THESE PROBLEMS OF TRAUMA AND LIFE-THREATENING EMERGENCIES:

|                   |                     |
|-------------------|---------------------|
| SHOCK             | DISLOCATIONS        |
| UNCONSCIOUSNESS   | FIRST DEGREE BURNS  |
| BLOCKED AIRWAY    | SECOND DEGREE BURNS |
| ACUTE RESPIRATORY | THIRD DEGREE BURNS  |
| FAILURE           | TRAUMA TO THE EYE   |
| SNAKE BITE        | TRAUMA TO THE HEAD  |

POISONING

BLEEDING

LACERATIONS

FRACTURES

SPRAINS

TRAUMA TO THE SPINAL COLUMN

TRAUMA TO THE CHEST

TRAUMA TO THE ABDOMEN

## MATERNAL AND CHILD HEALTH MODULES

### PRENATAL CARE

PRENATAL CARE PREPARES STUDENTS FOR THE TREATMENT AND CARE OF THE WOMAN WHO IS EXPERIENCING THE COMMON CONDITIONS THAT OCCUR DURING PREGNANCY. STUDENTS LEARN TO RECOGNIZE RISK FACTORS IN A PREGNANT WOMAN AND TO PROVIDE TREATMENT OR REFER HER, AS APPROPRIATE.

PROBLEMS CONSIDERED ARE:

|                   |                  |                  |
|-------------------|------------------|------------------|
| SEVERE ANEMIA     | PREECLAMPSIA AND | BLEEDING LATE IN |
| DIABETES          | ECLAMPSIA        | PREGNANCY        |
| HEART DISEASE     | FETAL DEATH      | MALARIA          |
| ECTOPIC PREGNANCY | BLEEDING EARLY   | SICKLE CELL      |
| SEPTIC ABORTION   | IN PREGNANCY     | DISEASE          |

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### LABOR AND DELIVERY

LABOR AND DELIVERY PREPARES STUDENTS TO ASSIST IN THE NORMAL DELIVERY OF AN INFANT AND TO CARE FOR OR REFER MOTHERS EXPERIENCING ANY OF THESE COMPLICATIONS:

|                      |                         |
|----------------------|-------------------------|
| FETAL DISTRESS       | FACE-UP PRESENTATION    |
| MATERNAL DISTRESS    | FACE PRESENTATION       |
| URINE IN THE BLADDER | BREECH PRESENTATION     |
| PREMATURE LABOR      | TRANSVERSE PRESENTATION |
| INCOMPLETE FETAL     | MULTIPLE PREGNANCY      |
| ROTATION             | PROLAPSE OF THE CORD    |

|                                       |                           |
|---------------------------------------|---------------------------|
| SMALL OR ABNORMALLY<br>SHAPED PELVIS  | RUPTURE OF THE UTERUS     |
| EARLY RUPTURE OF THE<br>BAG OF WATERS | PREECLAMPSIA OR ECLAMPSIA |
| RETAINED PLACENTA                     | BLEEDING                  |
| PROLONGED LABOR                       | POSTPARTUM BLEEDING       |
| BREATHING PROBLEMS OF A<br>NEWBORN    | EMERGENCIES IN A NEWBORN  |

### POSTNATAL CARE

POSTNATAL CARE PREPARES STUDENTS TO PROVIDE CARE FOR POSTNATAL MOTHERS AND THEIR INFANTS AND TO TREAT OR REFER PATIENTS WITH THESE COMMON POSTNATAL PROBLEMS:

|                              |                              |
|------------------------------|------------------------------|
| SWOLLEN BREASTS              | COLDS                        |
| LACK OF BREAST MILK          | SIMPLE JAUNDICE              |
| HEMORRHOIDS                  | SIMPLE SWELLING OF THE SCALP |
| CRACKS ON NIPPLES            | BLEEDING INTO THE SCALP      |
| BREAST ABSCESS               | FRACTURES                    |
| PUERPERAL SEPSIS             | DIARRHEA                     |
| UNREPAIRED PERINEAL<br>TEARS | FEVER                        |
| MOTHER WITH A DEAD BABY      | LOW BIRTH WEIGHT             |
| CRADLE CAP                   | JAUNDICE                     |
| DIAPER RASH                  | A NEWBORN WITHOUT A MOTHER   |

## PROBLEMS OF WOMEN

STUDENTS LEARN TO MANAGE THESE REPRODUCTIVE SYSTEM

PROBLEMS OF WOMEN:

|                                   |  |
|-----------------------------------|--|
| PELVIC INFLAMMATORY<br>DISEASE    | TUMOR OF THE OVARY<br>BREAST LUMPS                   |
| NON-SPECIFIC VAGINITIS            | MENSTRUAL CRAMPS                                     |
| TRICHOMONAL VAGINITIS             | SIDE EFFECTS OF CONTRACEPTIVES                       |
| MONILIAL VAGINITIS                | MENOPAUSE  |
| CANCER OF THE UTERUS<br>OR CERVIX | ATROPHIC VAGINITIS<br>FIBROID TUMOR IN THE<br>UTERUS |

## DISEASES OF INFANTS AND CHILDREN

STUDENTS LEARN TO MANAGE THESE COMMON PROBLEMS OF  
INFANTS AND CHILDREN:

|  |                                       |
|--|---------------------------------------|
| MALNUTRITION                                   | WHOOPING COUGH                        |
| DIARRHEA AND DEHYDRATION                       | MEASLES                               |
| TETANUS OF THE NEWBORN                         | MUMPS                                 |
| SEPTICEMIA IN THE<br>NEWBORN                   | CHICKEN POX<br>POLIOMYELITIS          |
| GONOCOCCAL<br>CONJUNCTIVITIS OF THE<br>NEWBORN | RHEUMATIC FEVER<br>SICKLE CELL ANEMIA |
| THRUSH IN THE NEWBORN                          | OSTEOMYELITIS<br>CROUP                |

## CHILD SPACING

THE CHILD SPACING MODULE PREPARES STUDENTS TO COUNSEL INDIVIDUALS OR COUPLES ABOUT CHILD SPACING METHODS, THE ADVANTAGES AND DISADVANTAGES OF THOSE METHODS, AND THE COMMON SIDE EFFECTS AND COMPLICATIONS ASSOCIATED WITH THEM. IN ADDITION, THE STUDENTS LEARN THE CLINICAL SKILLS THEY WILL NEED TO ASSIST INDIVIDUALS OR COUPLES SEEKING CHILD SPACING METHODS. THE MODULE ALSO PREPARES STUDENTS TO COUNSEL INDIVIDUALS AND COUPLES WHO WANT TO HAVE CHILDREN BUT CANNOT.

## HEALTH CENTER MANAGEMENT MODULES

### WORKING WITH THE HEALTH TEAM

IN WORKING WITH THE HEALTH TEAM, THE HEALTH TEAM REFERS TO THE MID-LEVEL HEALTH WORKER, THOSE WITH WHOM HE WORKS IN THE HEALTH CENTER, AND THE COMMUNITY HEALTH WORKERS. STUDENTS STUDY THESE TOPICS: WORKING WITH A HEALTH TEAM, HEALTH TEAM FUNCTIONS WITHIN THE NATIONAL PRIMARY HEALTH CARE SYSTEM, MANAGING A HEALTH CENTER, SUPERVISING A HEALTH CENTER, TEAM PROBLEM SOLVING, TEAM WORK PLANS AND SCHEDULES, AND EVALUATING PROGRAM AND TEAM PERFORMANCE.

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### WORKING WITH SUPPORT SYSTEMS

WORKING WITH SUPPORT SYSTEMS IS THE MAIN MANAGEMENT MODULE OF THE MID-LEVEL HEALTH WORKER TRAINING PROGRAM. THE MODULE IS DESIGNED TO TEACH MID-LEVEL HEALTH WORKERS HOW TO MANAGE THE RESOURCES NORMALLY AVAILABLE AT A HEALTH CENTER. THESE RESOURCES ARE DIVIDED INTO EIGHT SUPPORT SYSTEMS: DRUGS AND MEDICAL SUPPLIES, GENERAL SUPPLIES, FACILITIES AND EQUIPMENT MAINTENANCE, TRANSPORTATION, COMMUNICATION, PERSONNEL, FINANCE, AND HEALTH INFORMATION. THESE ARE THE SAME SUPPORT SYSTEMS FOR WHICH THE MANAGEMENT SYSTEM WORKBOOKS ARE DESIGNED.

## SUPERVISING AND SUPPORTING MID-LEVEL HEALTH WORKERS

SUPERVISING AND SUPPORTING MID-LEVEL HEALTH WORKERS PREPARES EXPERIENCED MID-LEVEL HEALTH WORKERS TO SUPERVISE OTHER MID-LEVEL HEALTH WORKERS. IT IS A CONTINUING EDUCATION MODULE AND ASSUMES MASTERY OF THE KNOWLEDGE AND SKILLS PROVIDED BY THE BASIC MID-LEVEL HEALTH WORKER TRAINING COURSE. IT MAY ALSO BE USED TO TRAIN OTHER HEALTH PROFESSIONALS TO SUPERVISE MID-LEVEL HEALTH WORKERS, IF THESE PROFESSIONALS ALREADY HAVE A MID-LEVEL HEALTH WORKER'S KNOWLEDGE AND SKILLS. USING COMPETENCY-BASED TRAINING PRINCIPLES, THE MODULE BUILDS UPON BASIC MID-LEVEL HEALTH WORKER TRAINING, AND COVERS THE SUPERVISORY AND SUPPORT FUNCTIONS REQUIRED OF A SUPERVISOR. TOPICS INCLUDE LEADERSHIP AND TEAM BUILDING, COMMUNICATION SKILLS, HANDLING GRIEVANCES AND DISCIPLINARY PROBLEMS, DECISION MAKING, PLANNING AND EVALUATION FOR SUPERVISORS, EVALUATING MID-LEVEL HEALTH WORKERS' PERFORMANCE, AND PROVIDING CONTINUING EDUCATION.

THIS MODULE INCLUDES TEXT MATERIAL FOLLOWED BY PRACTICAL EXERCISES. SOME EXERCISES TAKE ONLY AN HOUR; OTHERS TAKE SEVERAL MONTHS OF FIELD WORK TO COMPLETE. THE MODULE IS DESIGNED FOR A TRAINING PERIOD OF THREE TO FOUR MONTHS, OF WHICH ABOUT THREE WEEKS ARE SPENT IN THE CLASSROOM.

## REFERENCE MANUALS

### FORMULARY

THE FORMULARY IS FOR USE WITH THE DIAGNOSTIC AND PATIENT CARE GUIDES AND THE PATIENT CARE PROCEDURES. IT CONTAINS INFORMATION THAT MID-LEVEL HEALTH WORKERS WILL NEED TO USE AND DISPENSE DRUGS SAFELY AND EFFECTIVELY.

THE FORMULARY IS DIVIDED INTO TWO SECTIONS. THE FIRST SECTION INCLUDES INFORMATION ABOUT HOW TO TAKE A DRUG HISTORY, HOW TO CALCULATE DRUG DOSES, THE IMPORTANCE OF GIVING INSTRUCTIONS TO THE PATIENT, AND HOW TO LABEL CONTAINERS OF DRUGS BEFORE DISPENSING THEM. THE END OF THE FIRST SECTION INCLUDES A DISCUSSION OF COMMON DRUG INTERACTIONS.

THE SECOND SECTION INCLUDES INFORMATION ABOUT SPECIFIC DRUGS. THE DRUGS ARE LISTED ACCORDING TO CATEGORIES OF USE. EACH DRUG ENTRY INCLUDES A DESCRIPTION OF:

THE FORM IN WHICH THE DRUG IS SUPPLIED AND WHAT DOSAGES ARE AVAILABLE

THE CONDITIONS FOR WHICH THE DRUG CAN BE USED

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THE USUAL ADULT AND CHILD DOSAGES

THE MOST COMMON SIDE EFFECTS OF THE DRUG

PRECAUTIONS TO TAKE WHEN USING AND DISPENSING  
THE DRUG

PROPER STORAGE TO MAINTAIN THE EFFECTIVENESS  
OF EACH DRUG

INFORMATION TO TELL THE PATIENT ABOUT THE DRUG

## DIAGNOSTIC AND PATIENT CARE GUIDES

THE DIAGNOSTIC AND PATIENT CARE GUIDES ARE BASED ON THE DISEASES AND CONDITIONS THAT ARE DESCRIBED IN THE GENERAL CLINICAL MODULES AND THE MATERNAL AND CHILD HEALTH MODULES. THE SYMPTOMS AND SIGNS OF EACH CONDITION DESCRIBED IN THE TRAINING MODULES ARE ALSO LISTED UNDER EACH DISEASE OR CONDITION IN THE DIAGNOSTIC AND PATIENT CARE GUIDES.

PATIENT CARE, WHICH FOLLOWS THE SYMPTOMS AND SIGNS, PROVIDES A SUMMARY OF THE CARE THAT IS RECOMMENDED IN THE TRAINING MODULES. BECAUSE ANTIBIOTIC DOSAGES ARE REQUIRED SO FREQUENTLY, THEY ARE SUMMARIZED SEPARATELY IN A GUIDE FOR CALCULATING ANTIBIOTIC DOSAGES.

## **PATIENT CARE PROCEDURES**

**PATIENT CARE PROCEDURES PROVIDES DETAILED INSTRUCTIONS FOR PERFORMING ALL OF THE PROCEDURES PRESENTED IN THE TRAINING MODULES. EACH PROCEDURE CONTAINS:**

**A LIST OF ALL THE SUPPLIES NECESSARY TO PERFORM THE PROCEDURE**

**A REASON FOR PERFORMING THE PROCEDURE**

**A DESCRIPTION OR AN EXPLANATION OF POSSIBLE DIFFICULTIES A STUDENT MAY ENCOUNTER**

**THE STEPS FOR PERFORMING THE PROCEDURE, IN THE ORDER THEY SHOULD BE PERFORMED**

**POSSIBLE PATIENT RESPONSES TO THE PROCEDURE**

**PATIENT ADVICE TO GIVE WHILE PERFORMING THE PROCEDURE AND AFTER**

## **HEALTH CENTER OPERATIONS**

**THE HEALTH CENTER OPERATIONS MANUAL CONTAINS THE OFFICIAL POLICIES, PROCEDURES, AND FORMS USED AT THE HEALTH CENTER LEVEL OF A PRIMARY HEALTH CARE SYSTEM. IT CONTAINS SECTIONS ON THE EIGHT MANAGEMENT SUPPORT SYSTEMS AND ON HOW TO ORGANIZE AND MANAGE**

A HEALTH CENTER. OTHER SECTIONS DISCUSS HOW A NATIONAL PRIMARY HEALTH CARE SYSTEM IS ORGANIZED AND HOW IT FUNCTIONS, AND GUIDELINES FOR THE MID-LEVEL HEALTH WORKER ON HOW TO PLAN, CARRY OUT, AND EVALUATE WORK AT A HEALTH CENTER.

## COMMUNITY HEALTH

THE COMMUNITY HEALTH MANUAL PROVIDES PRACTICAL INFORMATION TO HELP STUDENTS, COMMUNITY MEMBERS, AND LEADERS CARRY OUT COMMUNITY HEALTH ACTIVITIES. IT IS DIVIDED INTO FIVE SECTIONS, EACH OF WHICH DEALS WITH A DIFFERENT AREA OF COMMUNITY HEALTH AND COMMUNITY WORK. EACH SECTION INCLUDES AIDS OR TOOLS THAT WILL HELP STUDENTS WITH THEIR WORK IN THE COMMUNITY. THESE AIDS AND TOOLS INCLUDE CHARTS, CHECKLISTS, SCHEDULES, GUIDES, STEP-BY-STEP INSTRUCTIONS, AND SIMPLE LISTS. THEY ARE DESIGNED TO SUPPLEMENT WHAT STUDENTS HAVE ALREADY LEARNED ABOUT THE PROCESS OF PLANNING AND CARRYING OUT COMMUNITY HEALTH ACTIVITIES.

## COMMUNITY HEALTH WORKER TRAINING MATERIALS

THE COMMUNITY HEALTH WORKER TRAINING MATERIALS ARE DESIGNED FOR TRAINING LITERATE AND NON-LITERATE COMMUNITY HEALTH WORKERS TO CARRY OUT SPECIFIC TASKS. THE TEACHING APPROACH EMPHASIZES DIALOGUE BETWEEN TRAINER AND TRAINEE. OTHER METHODS EMPLOYED INCLUDE ROLE-PLAY, DEMONSTRATIONS, STORIES, AND EXTENSIVE USE OF VISUAL AIDS. THE COMMUNITY HEALTH WORKER TRAINING MATERIALS INCLUDE WORKBOOKS AND COMMUNITY LEARNING MATERIALS TO TRAIN COMMUNITY HEALTH WORKERS.

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THE COMMUNITY HEALTH WORKER MATERIALS ARE GEARED TOWARD PRACTICAL SKILL DEVELOPMENT THROUGH MAXIMUM INTERACTION WITH THE TRAINER. THE APPROACH ALLOWS APPROPRIATE AND USEFUL TRAINING THAT COMMUNITY HEALTH WORKERS CAN APPLY TO LOCAL NEEDS. THE WORKBOOKS EMPHASIZE PREVENTIVE AND PROMOTIVE SKILLS, BUT INCLUDE SELECTED BASIC CURATIVE SKILLS AS WELL.

THE WORKBOOKS CAN BE USED TO TRAIN NEW COMMUNITY HEALTH WORKERS OR TO PROVIDE CONTINUING EDUCATION FOR COMMUNITY HEALTH WORKERS. THE COMMUNITY HEALTH WORKER WORKBOOKS ARE USED ALONG WITH THE COMMUNITY HEALTH MODULES, IN PARTICULAR TRAINING AND SUPPORTING COMMUNITY HEALTH WORKERS, TO PREPARE MID-LEVEL HEALTH WORKERS TO TRAIN COMMUNITY HEALTH WORKERS.

## COMMUNITY HEALTH WORKER WORKBOOKS

### INTRODUCTION TO TRAINING

THE FIRST WORKBOOK EXPLAINS THE COMMUNITY HEALTH WORKER'S ROLE, THE TRAINING PROCESS, AND THE TRAINING MATERIALS.

### CLEAN WATER AND CLEAN COMMUNITY

DISCUSSES THE USE OF WATER IN THE COMMUNITY. IT DESCRIBES HOW WATER GETS DIRTY, HOW TO MAKE SURE THAT WATER IS CLEAN, AND HOW TO PROTECT WATER. THE WORKBOOK EXPLAINS WHY PEOPLE NEED LATRINES. IT SHOWS HOW TO KEEP THE COMMUNITY CLEAN BY BUILDING LATRINES, RUBBISH PITS, AND COMPOST PITS.

PREVENTION AND CARE OF DIARRHEA DISCUSSES WHY CHILDREN IN THE COMMUNITY GET DIARRHEA. IT EXPLAINS HOW COMMUNITY HEALTH WORKERS CAN HELP PEOPLE PREVENT DIARRHEA IN CHILDREN. THE WORKBOOK ALSO TELLS HOW CHILDREN CAN GET SERIOUSLY ILL WITH DIARRHEA AND WHAT COMMUNITY HEALTH WORKERS CAN DO TO PREVENT CHILDREN FROM BECOMING SERIOUSLY ILL WITH DIARRHEA, INCLUDING THE PREPARATION AND USE OF ORAL REHYDRATION SOLUTIONS.

HEALTHY PREGNANCY DISCUSSES HOW A WOMAN CAN HAVE  
A HEALTHY PREGNANCY AND DELIVERY. IT INCLUDES  
INFORMATION ON PRENATAL CARE AND ALSO DISCUSSES  
CHILD SPACING.

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FEEDING AND CARING FOR CHILDREN DISCUSSES HOW A MOTHER CAN TAKE CARE OF HER BABY. THE WORKBOOK INCLUDES INFORMATION ON BREAST-FEEDING AND ON THE KIND AND AMOUNTS OF FOOD A CHILD NEEDS TO GROW UP HEALTHY. THE WORKBOOK SHOWS HOW TO PREPARE FOOD FOR A YOUNG CHILD AND EXPLAINS WHEN CHILDREN NEED IMMUNIZATIONS.

SOME COMMON HEALTH PROBLEMS EXPLAINS HOW A COMMUNITY HEALTH WORKER CAN TAKE CARE OF SOME COMMON HEALTH PROBLEMS IN THE COMMUNITY, SUCH AS SCABIES, RED EYE, AND FEVER. THE WORKBOOK ALSO DISCUSSES PERSONAL HABITS THAT HELP PEOPLE STAY HEALTHY.

TUBERCULOSIS AND LEPROSY INCLUDES INFORMATION ON HOW THESE TWO COMMON HEALTH PROBLEMS SPREAD. IT TELLS HOW A COMMUNITY HEALTH WORKER CAN HELP PREVENT THESE PROBLEMS AND CARE FOR PEOPLE WITH TUBERCULOSIS AND LEPROSY.

FIRST AID DESCRIBES HOW A COMMUNITY HEALTH WORKER  
CAN PROVIDE FIRST AID FOR PEOPLE WHO HAVE MINOR  
ACCIDENTS IN THE COMMUNITY

## COMMUNITY LEARNING MATERIALS

### HEALTH PROBLEMS IN THE COMMUNITY

THIS BOOKLET WITH PICTURES SHOWS SOME COMMON HEALTH PROBLEMS IN THE COMMUNITY. COMMUNITY HEALTH WORKERS CAN USE THIS BOOKLET TO LEARN ABOUT AND DISCUSS HEALTH PROBLEMS IN THE COMMUNITY.

### CARING FOR YOUR CHILD

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THIS BOOKLET HAS PICTURES THAT SHOW PARENTS HOW TO TAKE GOOD CARE OF THEIR YOUNG CHILDREN. THIS BOOKLET RELATES TO THE FEEDING AND CARING FOR CHILDREN AND THE HEALTH PREGNANCY WORKBOOKS. COMMUNITY HEALTH WORKERS CAN USE THIS BOOKLET TO DISCUSS THESE SUBJECTS. PARENTS CAN ALSO USE THIS BOOKLET TO LEARN HOW TO HAVE A HEALTHY PREGNANCY AND HOW TO CARE FOR YOUNG CHILDREN.

### CARING FOR YOUR SICK CHILD

THIS BOOKLET WITH PICTURES DESCRIBES WHAT PARENTS CAN DO AT HOME TO CARE FOR CHILDREN WITH SOME COMMON HEALTH PROBLEMS.

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## CLEAN HOME AND CLEAN COMMUNITY

THIS BOOKLET WITH PICTURES WILL HELP COMMUNITY HEALTH WORKERS DISCUSS WHAT PEOPLE CAN DO BY THEMSELVES AND WITH OTHERS TO MAKE THEIR COMMUNITY CLEAN AND HEALTHY.

## ILLUSTRATIONS FOR TRAINING COMMUNITY HEALTH WORKERS

THIS VOLUME IS A COMPILATION OF IMPORTANT ILLUSTRATIONS FROM THE WORKBOOKS IN A LARGE-SIZE FORMAT. THESE ILLUSTRATIONS CAN BE USED IN THE TRAINING OF COMMUNITY HEALTH WORKERS AND ALSO AS COMMUNITY LEARNING MATERIALS.