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Trip Report

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Travelers: Mr. Maurice Apted, IHP Consultant
Ms. Mary Kroeger, IHP Consultant

Country Visited: NIGERIA

Date of Trip: March 4-29, 1985

Purpose: To conduct a Training of Trainers
and Community Health Education Workshop for
Kwara State Training Team

Program for International Training in Health
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** Appendix E is on file with INTRAH Data Management Service.

EXECUTIVE SUMMARY

Mr. Maurice James Apted and Ms. Mary Kroeger were contracted by IHP to provide a Training of Trainers and Community Health Education Workshop in Family Planning and Oral Rehydration Therapy as part of the Accelerated Delivery of Family Planning and Oral Rehydration Services Project in Nigeria.

The workshop took place from March 4 - 29 for the purposes of developing a team of trainers capable of training various cadres of health personnel in FP/ORT service provision. This team would also be able to plan and conduct FP/ORT community health education (CHE) programs as a result of the workshop. Participants developed and presented a series of five FP/ORT CHE training activities that will be resource materials for the next curriculum development activity.

The workshop used a variety of participative adult education techniques designed to permit team-building and encourage the development of a productive and assertive State team. The team exhibited a high level of commitment and motivation towards the project goals.

Some serious concerns exist about the ability of the Ministry of Health to implement the project as a whole. Widespread staff lay-offs (up to 60%) appear to have had a serious demoralising effect on the Ministry in general. It appears that workloads of some crucial project personnel have increased to the point where these individuals seem very minimally involved in the FP/ORT project. Major recommendations focus around these concerns. It is recommended that a reappraisal of the Ministry's commitment and capability to assist and support the project be made. Also, in view of the Ministry's situation, it is recommended that more direct ways be devised to support the state team during this crucial launching stage. Five state team members worthy of special consideration for management, supervisory or coordination roles in the project's future were identified by the consultants.

SCHEDULE DURING VISIT

February 28

Arrived San Francisco Airport. PAN AM strike. Trainers unable to fly to New York and then Lagos as scheduled. Departed Western Airlines to Salt Lake City. Western from Salt Lake to New York. Overnight in New York (unscheduled stay).

March 1

AM: Attempted to transfer PAN AM ticket to alternative carrier.

PM: Obtained seats on TWA to Boston for a transfer to London, Heathrow.

March 2

AM: Arrived Heathrow-London. Road transport to Gatwick. Noon departure via British Caledonia to Lagos.

PM: Arrived Lagos. Missed briefing with AAO Keys MacManus due to misunderstanding of driver's message. Overnight Kuramo Inn, Lagos. Met Mr. Jose Rimon, Project Officer, John Hopkins, Population Communication Services.

March 3

AM: Departed Lagos by road transport with Mr. Rimon for Ilorin. Arrived Ilorin 4 hours later. Booked into Kwara Hotel.

March 4

AM: Went to Ministry of Health, met with Project personnel, including Director Dr. David Olubaniyi, Project Coordinator Ms. Florence Tolushe and Training Coordinator Mr. Gabriel Adeseke. Established workshop timetable, visited and confirmed training site, reviewed workshop plan.

March 5

Workshop began (10 participants)

| | |
|---------|--------------------------|
| March 8 | All participants present |
| 19 | TOT component ended |
| 20 | CHE component began |

March 29

Workshop ended. Graduation. Met Permanent Secretary for Health Dr. D.A.O. Abegunde.

March 30

Traveled to Lagos by road.
Debriefed with AAO Lagos-Keys MacManus
Arrived Lagos International Airport. British Caledonian flight postponed 22 hours (apparently this is a regular event). Managed to obtain seats on another delayed British Caledonian flight to London.

March 31

Arrived Gatwick, London. Rail to London. Hotel overbooked. Waited six hours in lobby.

April 1

Departed from London for New York. New York to Raleigh-Durham.

April 2

Chapel Hill debriefing. No record of one trainer's flight bookings via Delta--Raleigh/Durham/Atlanta/San Francisco. Mislaid booking found. Trainers arrived San Francisco 9:00 PM.

I. PURPOSE

The purpose of the trip was to conduct a four-week Training of Trainers and Community Health Education Workshop for 16 members of the Kwara State Training Team under the terms of Article II Work Plan, Activity #2, subcontract between MOH, Kwara State and UNC/CH for the Accelerated Delivery of Family Planning and Oral Rehydration Services in Nigeria.

The purposes of the workshop were to:

1. develop a team of trainers capable of training various cadres of health personnel in FP/ORT service delivery skills; and
2. increase the skills of a group of senior health personnel in conducting FP/ORT education activities in Kwara State communities.

By the end of the workshop, participants were to be able to:

1. perform a task analysis for various cadres of FP/ORT service providers;
2. plan and conduct FP/ORT training sessions;
3. conduct a survey of community attitudes and knowledge regarding FP/ORT;
4. design an FP/ORT program appropriate to a specific community; and
5. train other cadres of health personnel to conduct community health education activities.

II. ACCOMPLISHMENTS

1. A State Training Team has been created. A strong team spirit exists, motivation is very high and the team is looking forward to the curriculum development workshop. They are fully appraised of the overall project goals and objectives and the 1985-86 workplan. No project information had been communicated to participants prior to the workshop.
2. Participants are able to design and carry out training sessions for various health personnel in FP/ORT delivery skills. They prepared three separate sets of FP/ORT training goals and objectives for consideration in the forthcoming curriculum development activity.
3. Participants received updated information on the status of family planning in Kwara State from Dr. R. Fakeye of the University of Ilorin Teaching Hospital.
4. Participants are able to perform task analyses for various cadres of FP/ORT service providers. They developed task analyses for FP/ORT service providers.
5. The State Training Team developed and field-tested 5 separate FP/ORT CHE activities suitable for both literate and non-literate Kwara communities. These CHE materials will be used as curriculum resource materials in the forthcoming curriculum development workshop.

Participants developed three original FP/ORT training modules using role play, story-telling/drama and game techniques. These were: 1) a role play entitled "The Nasty Family Planning Worker" which focuses on the skills and attitudes required by clinic workers to provide effective and reassuring initial FP counselling; 2) a Story-telling/Drama Module which includes an original story called "The Wise Malaam Goro" emphasising the special Nigerian economic circumstances which make family planning a "wise" thing to do (the story can be used primarily with a male audience); and, 3) a Learning Game Module called "What am I?" based on a twenty questions strategy which is designed to help participants learn the symptoms of diarrhea, the components of oral rehydration therapy and the advantages of family planning.

6. Participants are now able to conduct a survey of community attitudes and knowledge regarding FP/ORT. With regard to family planning, the training team itself reflected the differences that exist in Kwara between men and women. The team addressed these issues and acknowledged that for family planning to succeed in the long run in Kwara, extraordinary efforts would have to be made to involve men in the FP process. The team identified the need to address issues such as male concern that wives using FP would become promiscuous and leave the home, parental concern that FP for adolescents would lead to adolescent sexual promiscuity and the potentially large numbers of women who purchase "the Pill" across the counter without prescriptions. During their field visits participants quickly identified the high interest shown in ORT as a cheap effective treatment and they were also able to correct some serious errors in practice in two Kwara clinics; e.g., clinic staff were advising mothers to boil the solution after mixing and were not advising mothers to discard remaining ORS after 24 hours.

7. In terms of improved group facilitation and participation skills, participants showed considerable change in their capacity to actively listen, lead group problem-solving, and consider all alternative points of view without needing to defend their own positions.

8. Participants who worked in medical education institutions indicated that they would no longer rely solely on the lecture method for teaching but would incorporate participatory methods.

III. BACKGROUND

The Training of Trainers and Community Health Education (TOT/CHE) Workshop is the second activity in a set of nine activities forming the workplan of the Kwara state component of the Accelerated Delivery of Family Planning and Oral Rehydration Services Project in Nigeria. The state goals for the project include: the provision of effective FP/ORT services at the 18 existing hospitals, and at the 11 rural health centers and 28 clinics as they are completed, and the continued development of a well-trained staff to provide high quality FP/ORT services through scheduled management, supervision, evaluation and health education training. For this activity, the specific goals included the development of a team capable of providing health personnel training in FP/ORT service delivery skills and an increase in the skills of a group of senior health personnel in conducting FP/ORT education activities in Kwara State communities. The Kwara State project developed out of a 3 state (Kwara, Imo, Bauchi) Updated Needs Assessment and Training Project Development activity conducted by INTRAH (Holman, de Malvinsky, Veney) in November/December 1984. In January 1985, a Kwara workplan and sub-contract were developed in-country and accepted for implementation. In February 1985 the MOH Kwara State training team was selected.

The next activity is an Family Planning/Oral Rehydration Therapy Curriculum Development workshop scheduled for May 6-24 which will include all state team members.

IV. DESCRIPTION OF ACTIVITY

A Training of Trainers and Community Health Education Workshop in Family Planning and Oral Rehydration Therapy took place for the Kwara State Ministry of Health FP/ORT Training Team at the Staff Development Centre, Ilorin, Kwara from March 4 to March 29.

Participants

In all, 15 participants took part in the workshop. Two IHP trainers conducted the workshop. Originally, 16 participants were scheduled to take part but recent staff reductions in the Ministry of Health reduced the total to 15 participants. Unfortunately, the previously appointed Kwara State Training Coordinator was "retrenched" a day before the workshop was scheduled to begin. One of the other participants was appointed as replacement on that same day. Participants included:

- 2 physicians
- 2 principle nurse tutors
- 2 midwife tutors
- 2 health education instructors
- 2 principle head sisters
- 2 community health officers
- 3 public health sisters

Process and Content

The first day of the workshop was spent finalizing arrangements with the Ministry of Health and Staff Development Centre officials. A combination of circumstances including uncertainty about the trainers' exact arrival time in Ilorin, the recent widespread "retrenchments" and the unfamiliarity of the recently-appointed Training Coordinator with this project caused some initial confusion. Some participants had already arrived and been sent back, some participants were in the process of being contacted, and some had still to be reached by the start of sessions on the second day. Consequently, the workshop began with 10 participants and by the fourth day, all 15 were present. This caused some disruption, but late arrivals provided the group with practice in dealing with the problem of quickly and efficiently integrating new members into the developing team. The trainers strongly encouraged participants to take the lead in providing the initial briefing and updating, of late arrivals, and the trainers were then available to provide further counselling and briefing. The underlying principle of the workshop process was that participants were required to assume as much responsibility as possible for the success of the workshop. Participants established

the workshop ground rules including workshop hours, circumstances under which absences might be considered; procedures for seeking the group's approval for unavoidable absences and the composition of various facilitating committees such as "the Printing Committee".

The four-week workshop used participative learning strategies and, while these were totally new to the team members, they quickly took hold of the process after a couple of bewildering days. In the workshop, the trainers placed emphasis on the practical application of the learning. Participants were required to constantly practice group participation and facilitation skills. They were required to generate their own appropriate definitions, and set and write a number of FP/ORT goals and objectives. They produced and presented a variety of training events, including original role plays, dramas and learning games, and they had to identify and justify perceptions of their own communities. They were also required to organise their own community health education visits and presentations. The majority of participants had not previously presented CHE activities in clinics and local communities, even though many of them had long years of health teaching experience. Two community excursions were scheduled during the CHE component of the workshop, and one Nigerian family planning specialist gave a presentation on the status of family planning in Kwara. Both the field excursions and the outside presentation were well received by the participants.

Family Planning and ORT content and examples were used throughout the workshop to provide content for the TOT/CHE activities. Although participant knowledge of both FP and ORT was skimpy, this did not seriously hamper progress. For ORT, the participants developed definite protocols based on the latest Nigerian research findings and an ONDO State Protocol for the Treatment of Diarrhea. The workshop provided participants with some exposure to family planning issues in Nigeria in general, and Kwara in particular. However, there appears to be a serious deficiency in knowledge about FP technology and methods amongst the majority of participants, and this needs to be addressed in the next workplan activity--the curriculum development workshop.

Two members of the Kwara MOH Project Coordinating Committee, Dr. David Olubaniyi and Ms. Florence Tolushe, visited the training on several occasions but were not involved directly in any training. The Training Coordinator, Mr. Gabriel Adeseke, assumed main responsibility for duplicating and printing, while the trainers provided all the required typing. No secretarial assistance was available.

V. FINDINGS

The Ministry of Health - Kwara

Upon arrival, the trainers found the Ministry of Health somewhat in a state of disarray. MOH staff understood that the trainers were to arrive on February 28, but said they had not been able to confirm actual arrival time. An airline strike had delayed the trainers' arrival in Lagos by a couple of days. The situation was further complicated by the fact that approximately 60% of Kwara State employees, including MOH employees, had been "retrenched" or laid-off as an austerity measure. The Project Training Coordinator, Mr. Joseph Soladeye, was included in the lay-offs. Mr. Soladeye had talked with INTRAH directly on the day of the trainers' U.S. departure concerning arrival times in Ilorin. He may not have been able to communicate this information to the Ministry before being "retrenched". Needless to say, the trainers' arrival created a flurry of activity to finalize arrangements and complete the notification of participants. The trainers briefly met the Project Director, Dr. David Olubaniyi and Project Coordinator, Ms. Florence Tolushe. The new Training Coordinator had just been appointed and had not had time to familiarize himself with what had gone on before, and what was required now. The trainers briefed him and reviewed the training plans for the workshop. Some participants had been sent home, some were present and some were yet to be reached. Participants were given no background information about the project or schedule of activities at the time of their selection. They had been given the title of the workshop, but no information about why it was being held. They were not aware that they were members of a State Training Team for FP/ORT.

The Training Coordinator (new), Mr. Gabriel Adeseke, had had no previous training or coordinating experience. Training funds had not arrived and did not arrive in Ilorin from Lagos until March 13. The Ministry of Health reported to the trainers that the funds were in Ilorin on March 22. The trainers, at the Ministry's request did send several urgent communications to the AAO U.S. Embassy/Lagos for help in

extraditing funds from the bank in Lagos. The trainers paid for all workshop supplies such as stationery, printing supplies and petrol, oil, brake fluid and for tire repairs on the transport vehicle provided by the Ministry of Health with personal funds they were carrying. No participant per diems had been paid by the time the workshop ended. Participants expressed some doubts about ever being paid. Salaries were already two months overdue, but were paid in part towards the end of the workshop.

The Project Director, Dr. David Olubaniyi, was heavily involved in the resolution of a nation-wide doctors' strike. All striking physicians had been summarily dismissed and were required to reapply for work. Before rehiring, each physician had to pass a security clearance. The Project Director was involved in this process. Nevertheless, Dr. Olubaniyi provided assistance when required.

The Project Coordinator, Ms. Florence Tolushe visited the training several times. She appeared to be unfamiliar with the future workshop activities and reported that she did not have copies of the appropriate project documents. The trainers undertook to provide her with the necessary documentation.

Ministry of Health morale appears to be very low. There is an air of extreme caution concerning any new activity. Overall, the trainers' impressions of the Ministry of Health situation are not good. While the Ministry didn't actively hinder the training in any way, a decided lack of enthusiasm was apparent. It appears that some shift in commitment may have taken place since the initial contact in November-January. There appears to be an absence of coordination or direction of the various FP efforts. It may well be that the trainers arrived at a time of great ebb in morale and large increase in workload. In our discussions with Dr. R. Fakeye, he emphasized that the Project Director was committed to FP but that he was, along with other MOH staff, deeply involved in a major restructuring of the Ministry.

The Participants

The selection of participants was excellent. They quickly adjusted to participative learning, which was for them a radical departure from the "lectures" they had given and received before. As the workshop progressed, they showed increasing commitment, motivation and responsibility towards the project goals. They developed five original FP/ORT CHE presentations that were effective in a clinic and local community setting. This personal learning appeared to be significant for all participants. The participant mix enriched the learning activities.

There is a dearth of even the most basic of learning supplies including paper and chalk and other writing implements. What supplies that are available are very expensive. For example, a ream of duplicating paper can vary in price from \$25 to \$28. The trainers are concerned about this. There is also an extreme shortage of reference or textbooks in training institutions. The participants welcomed very much the provision of appropriate FP/ORT texts. In particular, they found great favour with the text Helping Health Workers Learn by Werner and Bower, Hesperian Foundation, 1982.

There was a general lack of prior knowledge or skills in FP/ORT among the participants. Only two physicians and one public health sister were actually involved in administering FP services. However, given the low level of FP activity in Kwara, this is not to be unexpected.

Summary

Participant Reactions

Value of the Workshop

1. Expectations met? - Yes
 - Learned problem-solving in the community
 - Helped develop self-confidence
 - Relevant to CHE practice
 - Learned FP/ORT, broadened knowledge
 - Communication skills improved
 - More than expected

2. Major Benefits
 - Principles of Adult Education
 - Concept of CHE

- Identify personal shortcomings
- Writing goals and objectives
- Writing training plans
- Determining the scope of training
- Small group facilitation
- Developed self-reliance
- Teaching/Training methods

3. Content - Will content be useful in your work? - Yes

- More understanding of adults
- Improved communications skills using feedback rules
- Can set goals and objectives for what I teach
- Can apply training methods with my students
- Can impart FP/ORT knowledge and practice
- Can design visual aids for community health workers
- Can enlighten my staff to techniques of community problem-solving
- Can give better CHE in FP/ORT using Adult Ed techniques
- Can change men's ideas
- Persuade Government to establish FP clinics in my area
- Helps me deal with adults and children

4. What workshop topics will be most useful in your work?

- The training process: The Five Steps
- Community analysis
- Determining the scope of training
- Using adult education techniques
- Training methods, especially role play, games, story-telling
- Setting goals and objectives
- Assessing needs
- Evaluation
- Task analysis
- FP/ORT methods and practice
- Community dynamics

Why?

- Easily applied to daily work
- Useful for CHE
- Helpful in organising lectures
- Develops self-confidence and self-reliance

6. Was amount of material appropriate? - Yes

- Meticulously covered
- Very appropriate

7. What topics should have been added?

- More field trips
- Symposia
- More demonstrations on FP methods, e.g. insertion of I.U.C.D.

QUALITY OF TRAINING

8. Ratings on knowledge

- Excellent: 12
- Good: 3

9. Ratings on teaching skills

- Excellent: 13
- Good: 2

10. Will you be able to use methods and materials from the workshop?

- Visual aids
- Textbooks especially Helping Health Workers Learn - Werner & Bower
- Role plays, stories, discussion, games
- All teaching/training methods
- Puzzles
- Discussion techniques

11. Suggestions for improvement

- Extend training period to two months
- Provide more equipment for designing visual aids
- More textbooks and visual aids
- MOH should involve training team in all stages of workshop plan
- Use health training institution as a venue
- More CHE practice
- More regular health education in FP/ORT
- More ORT aids and manuals

12. Would you recommend this workshop to your colleagues? - Yes

- To improve their daily work
- To make working together more successful
- To emphasize importance of FP
- To promote efficiency

13. Additional training to help your work

- Insertion of I.U.C.D.
- Curriculum planning
- MCH training
- Advanced communications training
- Advanced FP/ORT
- Training in immunization

14. Other help from INTRAH

- Contraceptives, pelvic models
- Literature/periodicals
- Texts on CHE and FP/ORT
- Text: Where There is no Doctor - Werner & Bowers,
Hesperian Foundation

Kwara State - Economic and Social Factors Affecting FP

Kwara State is facing increasing austerity measures. The large scale government lay-offs have been combined with extensive increases in taxes and fees for a wide range of once-free services. For example, school fees at the primary school level have been implemented and it is reported also that "nominal" fees are being charged for some family planning services. Imposition of even "nominal" fees may place FP services out of reach of significant numbers of those who might most benefit.

According to Dr. R. Fakeye, Medical Director of the FP Clinic, University of Ilorin Teaching Hospital, and consultant on the MOH FP/ORT Project Coordinating Committee, the following situation exists in FP for Kwara:

- Only an estimated 10% of Ilorin child-bearing population are aware of or use FP.
- Contrary to popular opinion, approximately 80% of young women are sexually active by the time they begin to work (i.e. 14 years onward)
- There is significant incidence of early discontinuance of I.U.C.D. amongst Ilorin users. For example users scheduled for 3 years may discontinue as early as 1 to 6 months. This suggests poor initial counselling and the need for better education and information upon initial visit.
- Of the 400 deaths/year due to aseptic abortion (self-induced or otherwise) at the University hospital, 60% are teenage girls.
- Traditional family planning methods, such as breast-feeding and abstinence appears to be declining. The effectiveness of other traditional methods have not been ascertained. Some methods are physically dangerous and have been known to cause infection and resultant sterility.

Dr. Fakeye sees the extension of FP services provision to the rural areas as a major challenge in view of limited existing service delivery capacity. Also, he says the project needs a more developed implementation strategy and needs international assistance with FP commodities.

Dr. Fakeye is in the process of surveying more accurately FP practices in Ilorin in order to establish knowledge, attitudes and skills baselines for planning. Dr. Fakeye is also considering further studies. They would entail a survey of teachers in biology and home economics fields as well as school principles so as to assess the possibility of developing sex education programs in Ilorin secondary schools.

Social Factors

The religious makeup of Kwara is estimated at 60% Muslim with the proportion reaching 80% in the capital, Ilorin. Participants, many of them Muslim themselves, cited religious attitudes to be an obstacle to FP implementation. Attitudes of the male population in general and including male participants reflected a general acceptance of polygamy and male dominance. While the male participants recognise the need for FP, many expressed some personal reservation to using it themselves. FP is generally considered to be a woman's activity provided she has the appropriate male permission. It is fair to report that attitudes concerning FP differ markedly between men and women. The women are much more interested and open to the possibilities. Men regard it with some trepidation. These differences are reflected in the training team.

VI. CONCLUSIONS

The Ministry of Health appears to be in the throes of a major crisis. The widespread "retrenchments" coming later than had happened in other states apparently caught people unaware and has resulted in what appears to be a serious morale decline. The apparent lack of involvement in the TOT/CHE workshop, the non-briefing of state team members, the "retrenchment" of the training coordinator, the lack of project and workshop information amongst key project personnel, the inexperience of the newly-appointed training coordinator, the lethargy concerning the collection and disbursement of training funds and the absence of any team-building activities prior to the trainers' arrival pose questions about the implementation of the project. Issues surrounding lack of information and experience can be addressed directly during the course of the workplan. However, of more serious concern to the project is the apparent shift in attitude and commitment by the Ministry.

The State Training Team has an effective composition mix. There is a high level of commitment, motivation and enthusiasm but also a recognition that the team's success will require reliable Ministry support. Four team members stand out for their perceptions, capabilities and commitment in FP/ORT. They are: Mr. A. O. Babatunde, (Principle Nurse Tutor), Dr. Abiodun C. Oyeyipo (Medical Officer), Mrs. Victoria B. Abodunrin (Senior Midwife Tutor), and Mrs. Rachael M. Ajiboye (Principle Health Sister/Community Health Officer). On the whole, there is a general lack of FP knowledge and experience among the participants. This did not hamper the TOT/CHE workshop seriously but may pose some working problems for the forthcoming curriculum development workshop.

The trainers feel that the State Training Team has the ability to do more than "train". Their motivation, commitment and good project overview make them a valuable asset at a time when the Ministry of Health most needs motivated and enthusiastic staff. Some team members expressed a desire to become more involved in other related FP activities in the state such as the Johns Hopkins IEC project. Also, they expressed interest in a role in the University of Ilorin FP surveys.

The trainers also feel that it is positively beneficial that the attitudes of many of the male team members reflect many of the concerns and reservations that exist in the wider male community towards FP. The team is in a continuing dialogue about the differences between men and women and it

is only through the discussion of these concerns and reservations that the team can develop appropriate and effective strategies to deal with these matters in the community at large.

Kwara communities seem ready for FP/ORT services. On one hand, men, in general, seem strongly opposed to the idea of FP. On the other hand, women seem very open to the possibilities. However, the severe economic situation has in itself provided families with ample evidence of the need to control family size. Also, the growing perception amongst the general population that austerity measures are likely to continue for the foreseeable future makes family planning attractive. With regard to adolescent sexuality, FP can have a role in meeting what is reported to be a high, but indeterminant number of unwanted pregnancies among adolescent women. Also, many traditional FP methods are not well understood and those that are potentially effective are on decline in use. ORT is an ideal "ice-breaker" for FP as it can be tied to a reduction in infant mortality with resultant reduction in one of the reasons for large families. In addition, ORT with its emphasis on home-mixing and inexpensiveness is especially appropriate in these severe times.

Religious, cultural and social practices and ideas exist that pose additional serious consequences for the promotion of FP services in Kwara. Most significant of these are: 1.) the large Muslim and, therefore, polygamous population; and 2.) the attitude that men decide whether or not FP is appropriate for their wives. (In response to this second point, Dr. R. Fakeye reports that many non-literate women practice family planning without the knowledge of their husbands.) Also, the high rate of non-literacy poses particular challenges for any CHE or IEC FP/ORT activity in the state. The team recognizes these constraints.

VII. RECOMMENDATIONS

1. The Kwara State Ministry of Health needs help. Just what help is difficult to say. While the Project Director, Dr. David Olubaniyi, remains supportive of FP/ORT, he now appears to have many other pressing issues to address. A project and workplan reassessment by INTRAH/IHP may be in order. Redeployment of appropriate team members into more management oriented roles may be considered. One has to tread carefully. Feelings of job insecurity are high and even committed team members may balk at redeployment from "secure" positions to ones that are far from being solidly established. The Ministry may also object. It is recommended that INTRAH/IHP Nigeria project management personnel make a visit to Kwara to appraise the Ministry's present position.

2. Furthermore, it is recommended that the Kwara situation be monitored more closely in the coming months by either INTRAH/IHP and/or the AAO Lagos, Ms. Keys MacManus. Particular attention needs to be focused on the disbursement procedures for participant per diems and training supplies.

3. The State Training Team needs support from outside to keep it in motion in this early stage of the workplan. Regular contact, through materials mailings, should be made to maintain the team's sense of purpose. A recommended mailing is Issues 1 and 2 of Pathfinder's Planners Forum magazine, especially for the June service delivery workshop. Some consideration may be given to the possible appointment of a core committee consisting of team members who can maintain momentum between scheduled workplan activities and who can feed into the already-established project Co-ordination Group. Also, training and teaching institutions need more FP/ORT and CHE library materials.

4. The following team members need special attention:

Dr. Abiodun C. Oyeyipo - Young, intelligent, trained with a community health orientation. Recently graduated, but has a good grasp of the medical issues concerning FP/ORT. Has management potential, still impressionable, is probably good, long-term management prospect for the project.

Mr. A. O. Babatunde (Principle Nurse Tutor) - Articulate, highly energetic, ambitious and capable. Excellent communication skills. More traditional than Dr. Oyeyipo and more experienced. Excellent motivation and

leadership abilities. Has good standing within the Ministry. Excellent immediate management prospect. Mrs. Victoria B. Abodunrin (Senior Midwife Tutor) - Has great presence, very considered thinker and speaker, commands respect among men and women, has excellent grasp of FP issues in Kwara, well organized. Excellent training skills. Excellent immediate prospect for management or coordination functions.

Mrs. Rachael M. Ajiboye (P. H. Sister/CHE) - has excellent training and CHE skills. Very perceptive and has excellent understanding of communities and clinic settings. Strong thinker who works best "in the field." Excellent prospect for management or coordination functions for FP/ORT CHE activities.

Mrs. Janet Ibitoye (Principle Nurse Tutor) - Has trained in the U.S. and has strong clinic skills. Is a productive worker, intelligent and articulate. However, has strong tendency to be demonstrative and make use of confrontation.

5. Provision must be made for the collection and dissemination of appropriate Nigerian FP/ORT related protocols as they become available. As far as the trainers are aware, only one protocol for ORT has been recently developed (for Ondo State). Some standing orders exist for the delivery of FP services in Nigeria but they are not readily available.

6. It is recommended that as more and more information becomes available about FP and related activities in Nigeria as a result of PAC II, a basic set of orientation and familiarisation materials be compiled and be made available to consultants and those who require them. In the interests of topicality, it is recommended that the materials be updated regularly.

7. Logistics need to be reconsidered. It is recommended that arrival in Nigeria be scheduled to enable ample briefing, administrative and banking time with the U.S. Embassy in Lagos. In Ilorin, money exchange is excruciatingly slow and takes valuable training time away from the workshops. It is recommended that at least one full day be available in Ilorin before the workshops are scheduled to begin, to confirm workshop arrangements. The lack of many training materials and supplies requires that some provision be made for a central store (possibly AAO/Lagos office) of crucial bulk items like duplicating paper,

stencils, ink and chalk. Also, for Kwara in particular, it is recommended that INTRAH/IHP provide a portable typewriter that can be stored with the AAO's office in Lagos and taken out when required for various Kwara workplan activities. Regarding accommodation and training facilities, some long-term arrangements could be explored with the Agricultural and Rural Management Training Institute. They have an excellent and inexpensive guest house and more complete training facilities than the Government Staff Development Centre. Also they have a strong professional interest in training and would welcome contact with INTRAH/IHP trainers and consultants.

Internal communications from Ilorin by telephone and regular mail are next to impossible. A reliable efficient, albeit expensive, express worldwide courier service exists in the Kwara Hotel. It is recommended that DHL Worldwide Couriers be used for communication with Ilorin.

APPENDIX A

PERSONS CONTACTED

American Embassy

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Kwara State MOH

Dr. David Olubaniyi - Director, Family Planning Project
Chief Medical Officer, M.O.H.

Mrs. Florence Tolushe - Family Planning Project Coordinator

Mrs. Adebayo - Family Planning Project Supervisor

Mr. Z. B. Jeminiwa - Director, Kwara State Staff
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Dr. D.A.O. Abegunde - Permanent Secretary, Ministry of
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Dr. Fred Schindler - Director, Agricultural and Rural
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Dr. G. Ejiagu Nwagbara - Chief Management Development
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Other

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Dr. R. Fakeye - OB/GYN Department, University of
Ilorin, Teaching Hospital

APPENDIX B

LIST OF PARTICIPANTS

MINISTRY OF HEALTH, KWARA STATE
FIFTEEN MEMBER STATE TRAINING TEAM FOR
FAMILY PLANNING/ORT SERVICE DELIVERY

| | | |
|---|-------------------|----------------------------------|
| Dr. Abiodun C. Oyeyipo | Medical Officer | D.H. U. Ilorin |
| Dr. Z. Isiyaku | Medical Officer | Gen.Hos. Okene |
| Mr. A. O. Babatunde | Principle N/Tutor | Sch. of Nurs., Obangede |
| Mrs. J. O. Ibitoye | Principle N/Tutor | Sch. of Nurs., Ilorin |
| Mrs. Victoria Abodunin | Sr. Mid. Tutor | School of Midwifery |
| Mr. G. I. Osunaiye | Midwife Tutor | School of Midwifery |
| Mal. A. A. Mohammed | Sr. Mid Tutor | School of H./ Tech, Offa |
| Mall. Ganiyu Elelu | Com. Health Off. | School of H./ Tech, Offa |
| Mrs. C. E. Adeoye | Prin. H/Educator | Ministry of Health, Ilorin |
| Mrs. Rachael Ajiboye | P.H. Sister/CHO | D.H. U. Ilorin |
| Mrs. E. I. Owolabi | Prin. H/Educator | Ministry of H./ Ilorin |
| Mr. G. D. Adeseke (Training Coordinator) | P.N.O./C.H.O. | Health M/B, Ilorin |
| Mrs. F. D. Afolabi | P.H. Sister | D/Health Unit Lafiagi |
| Mrs. S. I. Omotoye | P.H. Sister | Basic H/Clinic Okelele |
| Mr. Omodamori | Com. Health Off. | Basic H/Clinic Obbo-Aiyegunle |

APPENDIX C

**TRAINING OF TRAINERS/
COMMUNITY HEALTH EDUCATION**

TRAINING DESIGN

KWARA STATE
March 4th - March 29
AGENDA

WEEK 1

TRAINING OF TRAINERS AND COMMUNITY HEALTH EDUCATION WORKSHOP

| MONDAY March 4th | TUESDAY March 5th | WEDNESDAY March 6th | THURSDAY March 7th | FRIDAY March 8th |
|---|---|---|---|---|
| <p>7:30 <u>OPENING & INTRODUCTIONS</u></p> <p>9:30 Needs assessment.</p> <ul style="list-style-type: none"> ● who we are ● what we do ● where we work ● what we need <p><u>TRAINING AS A CONCEPT</u></p> <ul style="list-style-type: none"> ● adult learning? ● learning contract? ● methods | <p>7:30 Where are We?</p> <p>8:00 Problem solving</p> <p>8:30 Training & planning</p> <ul style="list-style-type: none"> ● the process <p>10:30 Five Steps of Training</p> <ul style="list-style-type: none"> ● What are they | <p>7:30 Where are We?</p> <p>8:00 Problem solving</p> <p>8:30 Needs assessment</p> <p>Types:</p> <ul style="list-style-type: none"> ● competency model ● problem-based model <p>How to do</p> | <p>7:30 Where are We?</p> <p>8:00 Problem solving</p> <p>8:30 Writing training goals & objectives</p> | <p>7:30 Where are we?</p> <p>8:00 Problem solving</p> <p>8:30 Impromptu speaking</p> <p>9:00 Training Methods</p> <ul style="list-style-type: none"> ● how to teach Knowledge, Attitude, and Practice ● training strategies |
| 2:00 BREAK | BREAK | BREAK | BREAK | BREAK |
| <p>2:30 <u>WORKSHOP OVERVIEW</u></p> <ul style="list-style-type: none"> ● daily format & training methods ● problem solving ● journals ● learning issues <p>3:00 REFLECTIONS</p> <p>3:30 ADJOURN</p> | <p>12:30 Using the 5 steps of training effectively</p> <p>3:00 REFLECTIONS</p> <p>3:30 ADJOURN</p> | <p>12:30 GOALS AND OBJECTIVES</p> <ul style="list-style-type: none"> ● what are they? ● types- program - learning ● writing goals & objectives <p>3:00 REFLECTIONS</p> <p>3:30 ADJOURN</p> | <p>12:30 DEVELOPING A TRAINING PLAN</p> <p>3:00 REFLECTIONS</p> <p>3:30 ADJOURN</p> | <p>12:30 TRAINING METHODS PRACTICE</p> <ul style="list-style-type: none"> ● drama ● role play ● games ● demonstrations <p>3:00 REFLECTIONS</p> <p>3:30 ADJOURN</p> |

ATOT - WEEK 1

FE

KWARA STATE
March 4th - March 29
AGENDA

WEEK 2

TRAINING OF TRAINERS AND COMMUNITY HEALTH EDUCATION WORKSHOP

| MONDAY March 11 | TUESDAY March 12 | WEDNESDAY March 13 | THURSDAY March 14 | FRIDAY March 15 |
|--|---|---|--|--|
| 7:30 Where are we? 8:00 Problem Solving 8:30 Impromptu Speaking 9:00 WORKING WITH GROUPS • group communication • characteristics. | 7:30 Where are We? 8:00 Problem Solving 8:30 Impromptu Speaking 9:00 Appropriate Teaching Aids | 7:30 Where are We? 8:00 Problem Solving 8:30 Impromptu Speaking 9:00 <u>Evaluation</u> • what is it? • how to do it. | 7:30 Where are We? 8:00 Problem Solving 8:00 Impromptu Speaking 9:00 <u>Practicum</u> Presentations of Training Events | 7:30 Where are We? 8:00 Problem Solving 8:30 Impromptu Speaking 9:00 <u>TOI</u> mid-way evaluation |
| 12:00 BREAK | 12:00 BREAK | 12:00 BREAK | 12:00 BREAK | 12:00 BREAK |
| 12:30 • qualities of a group • improving group effectiveness 3:00 REFLECTION 3:30 ADJOURN | 12:30 Writing Training Designs 3:00 REFLECTION 3:30 ADJOURN | 12:30 <u>Practicum</u> Preparing a Training Event 3:00 REFLECTION 3:30 ADJOURN | 12:30 Presentations (cont.) 2:00 <u>Practicum</u> Evaluation 3:00 REFLECTION 3:30 ADJOURN | 12:30 Community Health Education Panel Discussion 3:00 REFLECTION 3:30 ADJOURN |

ATOT- WEEK
2

KWARA STATE

March 4th - March 29

CHE
WEEK 3

AGENDA

TRAINING OF TRAINERS AND COMMUNITY HEALTH EDUCATION WORKSHOP

| MONDAY March 18 | TUESDAY March 19 | WEDNESDAY March 20 | THURSDAY March 21 | FRIDAY March 22 |
|--|---|-------------------------|--|--|
| 7:30 Where are We? | 7:30 Where are We? | 7:30 Where are we? | 7:30 Where are We? | 7:30 Where are We? |
| 8:00 Problem Solving | 8:00 Problem Solving | 8:00 Problem Solving | 8:00 Problem Solving | 8:00 Problem Solving |
| 8:30 Impromptu Speaking | 8:30 Impromptu Speaking | 8:30 Impromptu Speaking | 8:30 Impromptu Speaking | 8:30 Impromptu Speaking |
| 9:00 CHE <u>NEEDS ASSESS- MENTS</u> | 9:00 Preparation - Community Visit | 9:00 Community Visits | 9:00 What is Communica- tion? | 9:00 <u>Practicum</u> |
| 10:00 Steps for <u>EFFECTIVE HEALTH EDUC.</u> | Collecting Infor- mation. ● effective strate- gies | ↓ | ● elements | Preparing a CHE Presentation in FP/ORT |
| ● understand- ing local community | 11:00 Preparing Effective Questionnaires | | | ● planning ● designing ● preparing |
| 12:00 BREAK | BREAK | BREAK | BREAK | BREAK |
| 12:30 a) learning about your community | 12:30 Cont. | ↓ | 12:30 <u>Communications Planning</u> | 12:30 |
| b) community networks & leadership | | | ● steps | ↓ |
| c) community dynamics | 2:00 How to interview | | ● writing plans FP/ORT | |
| 3:00 REFLECTION | 3:00 REFLECTION | 3:00 REFLECTION | 3:00 REFLECTION | 3:00 REFLECTION |
| 3:30 ADJOURN | 3:30 ADJOURN | 3:30 ADJOURN | 3:30 ADJOURN | 3:30 ADJOURN |

ACHE- WEEK 3

KWARA STATE

March 4th - March 29

AGENDA

CHE
WEEK 4

TRAINING OF TRAINERS AND COMMUNITY HEALTH EDUCATION WORKSHOP

| MONDAY March 25 | TUESDAY March 26 | WEDNESDAY March 27 | THURSDAY March 28 | FRIDAY March 29 |
|--|---|---|---|--|
| 7:30 Where are We? 8:00 Problem Solving 8:30 Visit CHE Sites Deliver CHE Presentations in FP/ORT ↓ | 7:30 Where are We? 8:00 Problem Solving 8:30 Impromptu Speaking 9:00 What have we found out? Data Review Data Analysis | 7:30 Where are We? 8:00 Problem Solving 8:30 Impromptu Speaking 9:00 <u>Practicum</u> Prepare CHE FP/ORT Presentation | 7:30 Where are We? 8:00 Problem Solving 8:30 Impromptu Speaking 9:00 Designing an IEC plan | 7:30 Where are We? 8:00 Problem Solving 8:30 Impromptu Speaking 9:00 IEC plan Presentations |
| 12:00 BREAK | BREAK | BREAK | BREAK | BREAK |
| 12:30 CHE Reports & Evaluation 3:00 REFLECTION 3:30 ADJOURN | 12:30 Incorporating new Information (Data) into CHE programs in FP/ORT 3:00 REFLECTION 3:30 ADJOURN | 12:30 <u>Practicum</u> Visit FP Clinic Ascertain Appropriateness of CHE FP/ORT presentations 3:00 REFLECTION 3:30 ADJOURN | 12:30 Preparing an IEC Program 3:00 REFLECTION 3:30 ADJOURN | 12:30 Evaluation 2:00 REFLECTION 3:00 GRADUATION CELEBRATION |

ACHE - WEEK 4

DAY 1

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Tell three new facts about each other.
- Identify personal training needs.
- Describe the workshop program and the daily workshop format.

ASSUMPTIONS

- To build a training team, members must know each other very well.
- Participants have personal improvement plans and expectations.
- Participants work well when they have a good idea of what they will be doing during the workshop.

TRAINING DESIGN

DATE 3/4/85

DAY One

ACTIVITY

OBJECTIVE:

Participants and Trainers will know each other, will have clarified their training needs and established a training program.

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|------------------|------------------------|---|---|---|
| 7:30 AM | OPENING Who are we? | Participants and trainers pair off with someone they don't know and interview each other. Make name tag for partner. After 15-20 minutes, large group reassembles and each person introduces his/her partner to the group. Fill out bio-data forms. | Raffle tickets with matching pairs. 8 pairs Note pads Bio-data forms | Each participant or trainer is able to give short introduction of his/her partner to group and tell three new things about the other participant. |
| 10:00 - 12:00 | What are we here for? | Participants form into groups of four. Group discusses and lists expectations of workshop and problem areas in their work which workshop will help solve. One member of each group writes list on board. Trainers and participants establish training priorities. | | Trainers ask participants to list two expectations and two problem areas that workshop will help solve. |

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OBJECTIVE:

TRAINING DESIGN

DATE 3/4/85

DAY One

ACTIVITY _____

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|------------------|-------------------------|---|--|--------------------|
| 12:00 - 12:30 | Lunch | | | |
| 2:00 | Overview of Workshop | <ul style="list-style-type: none"> - Compare list with draft agenda and discuss changes. - <u>Training Methods/Daily Format</u> <p>Where are we?</p> <ol style="list-style-type: none"> 1. Review workshop's goals/objectives/agenda. 2. Review daily activities - Reflections <p>Explain</p> <p>Learning Issues</p> <p>Use of daily objectives agenda</p> <p>Use of handouts</p> | <p>H.O. Draft Agenda (yellow sheets)</p> <p>General Daily Agenda format</p> <p>H/O: Training Activity Check List</p> | Direct Observation |
| 2:30 | | <ol style="list-style-type: none"> 3. Problem-solving exercise 4. Journal writing | | |
| 2:45 | Reflection | Reflection | | |
| 3:00 | Closure | | | |

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DAY 2

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Describe and take part in a "Where are we" as a training technique.
- Identify two personal problem-solving habits.
- Agree on appropriate workshop ground rules, and give two reasons why participant rule-making is an important training method.
- Describe the main components of Adult Education Theory and its relationship to training.

ASSUMPTIONS

- Participants solve problems by intuition rather than by following any particular structured pattern.
- Participants accept the need for ground rules in workshops.
- Participants are familiar with traditional educational pedagogy.

TRAINING DESIGN

OBJECTIVE: Participants will have identified main components of Adult Education Theory and its relationship to training.

DATE 3/6/85

DAY Two

ACTIVITY _____

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|------|-----------------|--|---|--|
| 3:00 | Where Are We? | Trainer leads group in giving a "Where are we" report. | H/O: Where are we? | Ask two participants if "Where are we" has had some value for them. |
| 1:45 | Problem Solving | Trainer asks participants if they have solved previous day's puzzle (Nine Dot Problem). Solution is presented.. Trainer introduces today's puzzle. (Give five minutes for solution.) Make point about not "limiting thinking" in finding solutions to problems. | HHWL - pages 1-11 "Who Caught the Fish" poster | Ask three participants to identify two other reasons why "Where are we" is useful in training. |
| 1:15 | Ground Rules | Group needs to establish rules covering absences, lateness, and group protocol. Participants list on board group suggestions as to appropriate rules, e.g. we will not be late or absent except in emergencies such as . . . Each participant is an equal member of the group; has rights and responsibilities, and each has the right to ask questions or seek help and the group has the responsibility to listen. | | Trainers observe interactions. |
| 1:45 | Short Break | | | |

1/2

DAY 3

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

At the end of today's session, participants will be able to:

- Draw and explain a diagram representing the scope of training.
- Create a list of detailed personal training needs.
- Prepare a simple training plan to meet one of these needs.

ASSUMPTIONS

- Participants have had practice in translating written ideas into diagrams.
- Participants have had some previous training experience.
- Participants have had previous experience identifying and analyzing personal job requirements.
- Participants have prepared training plans before.

TRAINING DESIGN

DATE 3/7/85

DAY Three

OBJECTIVE: Participants will be able to draw diagram representing the scope of learning, create a list of personal training needs, prepare a simple training plan to meet one of these needs.

ACTIVITY Training scope & process, needs assessment

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|---------|--------------------------|--|--|--|
| 8:00 AM | Where are we? | Trainer leads group in "Where are we?" | Sign-up list for participants to lead future "Where are we?" | Trainers ask participants to verify training scope target. |
| 8:30 | Problem-Solving | Participants solve the "Game of Squares", identify problem-solving strategy. | Poster: The Game of Squares. | |
| 9:00 | Scope of Training Report | Participants identify moral of training story and through group discussion identify consequences for the scope of training. Participants explain target diagram as it relates to story. Create definition about scope of training. | Board and chalk | |
| 11:30 | Lunch Break | | | |
| 12:00 | Needs Assessment | Participants will break into groups of 3 by "counting off" and develop a group list of their own expectations for the training course. Small group will then choose one need/expectation and prepare and present a simple training plan to the group. | Trainers will circulate and assist as needed. | Trainers check group progress during small group activity. |
| 1:30 PM | Reflections | | | |
| 2:00 | Adjourn | | | |

h6

DAY 4

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, the participants will be able to:

- Identify and use adult education principles in their "Where are we" participation.
- Identify an aspect of problem-solving such as the capacity to look beyond the obvious.
- Identify, describe and order the Five Steps of Training.

ASSUMPTIONS

- Participants can relate theories and ideas to practical situations.
- Participants can generalize from individual experiences or situations.
- Participants have some familiarity with training terms.

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TRAINING DESIGN

DATE 3/8/85

DAY Four

ACTIVITY Five Steps of Training

OBJECTIVE:

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|---------|------------------------|---|--|---|
| 8:00 AM | Where are we? | Participant leads group. | | Direct observation, participants give feedback. |
| 9:00 | Problem-Solving | Participants solve kobo coin problem. | Board, Chalk | |
| 10:00 | Break | | | |
| 10:25 | Five Steps of Training | Using "Spin the Bottle" to select three working groups participants Arrange Five Steps of Training cards on board in justified order. Devise working definition of each step. Make group report. Participants discuss findings. | 3 sets of cards 5 Steps of Training Board, Chalk, Tape | Trainers observe |
| 12:30 | | Trainers summarize group consensus and then whole group compares their five steps of training with trainers H.O. | H.O. Five Steps of Training | Trainers ask participants to justify H.O. sequence. |
| 12:45 | Reflection | Led by trainer. | | |
| 1:00 PM | Adjourn | | | |

DAY 5

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Identify a range of sources from which community health information can be obtained in Kwara State.
- Undertake a task analysis on a simple community health need such as purifying water by boiling.
- Describe the relationship between skills training and community health needs.
- Tell the difference between an educational goal and objective.

ASSUMPTIONS

- Participants have good community knowledge.
- Participants have used task analyses in their work.
- Participants have seen written goals and objectives before.

OBJECTIVE:

TRAINING DESIGN

DATE 3/11/85

DAY Five

ACTIVITY Needs Assessment/Goals & Objectives

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|---------|--------------------|--|---|---|
| 8:00 AM | Where are we? | Participant leads group in WHERE ARE WE report. | Feedback Rules | |
| 9:00 | Problem-Solving | Mini-case study | H.O. Case Study | |
| 10:15 | Needs Assessment | Group reviews Five Steps of Training poster and hand-out. Trainer introduces two types of needs assessment: problem-based skills model and emphasises the need to relate health skills training to community health problems. | Poster: 5 Steps of Training H.O. " " " | Trainer asks 2 or 3 participants to describe the five steps of training. |
| 11:00 | Community Analysis | Participants brainstorm all methods of finding out about a community and its health needs. Make list on board. | Blackboard, Chalk | Participants can identify 6 sources for obtaining information on comm. health needs. |
| 11:30 | Lunch | | | |
| 12:00 | Skills Analysis | Large group-guided discussion with hand-out on task analysis. Practice task analysis using example of "How to Purify Drinking Water by Boiling". | Blackboard, Chalk H.O. Task Analysis on dispensing condoms | Participants can do a simple task analysis on a community health need e.g. purifying water by boiling. |
| 1:30 PM | Reflection | Introduce difference between goals and objectives--one general and one specific. Participants reflect on day's activities. | Board, Chalk | Participants can describe difference between skills training and community health needs. Participants can tell difference between G&O. |

27

DAY 6

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of this session, participants will be able to:

- Identify the goals and objectives of the TOT/CHE Workshop.
- Write good goals and objectives for a draft training plan for a FP/ORT activity.
- Write good goals in the knowledge, attitude and skills (practice) categories for an FP/ORT activity.
- Demonstrate improved group facilitation and communication skills.

ASSUMPTIONS

- Participants will see the value of well-written goals and objectives in training.
- Participants will have sufficient family planning knowledge to begin to establish some training goals and objectives.
- Participants will feel more competent in group working sessions.

TRAINING DESIGN

DATE 3/12/85

DAY Six

ACTIVITY _____

OBJECTIVE:

| ME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|--------|------------------------------|---|--|-----------------------|
| :00 AM | Where are we? | Participant leads group | | Peer Assessment |
| :00 | Problem-Solving | Participant leads group problem-solving. Brainstorms list on board. | Mini-case Study | |
| :30 | Goals and Objectives | Trainers present Kwara State FP/ORT Goals and Objectives as examples of well-written goals and objectives. Review and discuss | H.O. Goals and Objectives of Kwara State Accelerated FP/ORT Program | Questions and Answers |
| 1:30 | Break | | | |
| 1:45 | Writing Goals and Objectives | In small groups, participants brainstorm qualities of good objective. Make definition and describe qualities. Groups present and discuss. Final list devised. | Board and Chalk | Direct Observation |
| 2:30 | Lunch | | | |
| :00 PM | Goals and Objectives | Characteristics of Goals and Objectives. Directed discussion. Writing of Goals and Objectives. Small groups will develop goals and objectives for specific topic. | Trainers Trainers will circulate. | |
| :45 | Reflection | | | |
| :00 | Adjourn | | | |

DAY 7

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the training session participants will be able to:

- Write good objectives for a draft training plan for an FP/ORT activity, using the agreed upon criteria.
- Write objectives in the knowledge, attitude and skills (practice) categories for an FP/ORT activity.
- Identify specific areas of objective setting and writing that they need more practice in.
- Use the rules of feedback and show improved group facilitation and communication skills.

ASSUMPTIONS

Participants

- Have written or used goals and objectives in their work before.
- Know enough about FP to be able to identify some of the knowledge, attitudes and skills required by MCH workers.
- Are showing increased self-awareness.
- Accept that group communication and facilitation skills are valuable adult education techniques.

TRAINING DESIGN

DATE 3/13/85

DAY 7

OBJECTIVE:

ACTIVITY GOALS/OBJECTIVES (Cont.)

K.A.P (Knowledge, Attitude, Practice)

| ME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|------|---------------------|---|--|--|
| 3:00 | Where are we? | Participant leads group in W.A.W. Role of firm leadership is stressed since allotted time is halved. | Participants and Trainees | Observation |
| 3:30 | Problem Solving | Mini-case Study (Grab-Bag) led by participant. | Mini-case study prepared on cards. | |
| 4:00 | How to teach K.A.P | Participants in 3 small groups will brainstorm appropriate methods for teaching K.A.P. (Knowledge, attitude, Group Reports practice) | H/O on K.A.P Introduced 3/12 (graphic) Board/Chalk | |
| 4:30 | BREAK | | | |
| 4:45 | Con'd | Large group discussion on K.A.P. Handout: "How to teach K.A.P" | H/O | |
| 5:30 | LUNCH | | | |
| 6:00 | How to Teach K.A.P. | Using "Summary of Training Methods" H/O participants generate examples of Community Health needs/topics appropriate to each teaching method. | Board/Chalk H/O | |
| 6:00 | K.A.P. Objectives | In small groups, participants write list of K.A. & P objectives and explain why K.A. or P. | | |
| 6:00 | Reflection | | | |
| 6:30 | Adjourn | | | |
| | | Homework: Werner HHWL, Part II pp 1-2 TFBL, 7.8.9 | | Participants can write one clear objective in each of the K.A.P. categories. |

AP

DAY 8

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the training session, participants will be able to:

- Make a report or presentation on a reading assignment
- Describe at least three teaching methods other than lecture or role-play.
- Begin to use effectively, at least one of the above three methods.
- Display improved interpersonal skills using the rules of feedback and improved group participation skills.

ASSUMPTIONS

Participants have:

- Heard about role plays but had little experience using them.
- Given reports and lectures before.
- Used lectures frequently.
- A desire to develop new teaching and learning methods.

EXERCISE IN WRITING OBJECTIVES

You are training MCH staff members in content areas of FP/ORT. You want to develop clear, relevant, feasible, observable and measurable objectives for the overall training goal of effective usage of each FP method dispensed by the clinic. This includes "fitting" when applicable (e.g., IUCD, diaphragm) and instruction in correct use.

Choose one method and write a set of objectives that you think will achieve the goal of correct usage.

- HINTS:
- set up a training target first
 - think in terms of KAP model
 - refer to Concepts and Issues in Family Planning (Blue) pp.57-61 and Family Planning Methods and Practice: Africa, Section III.

By the end of the training session, MCH staff member will be able to...

TRAINING DESIGN

DATE 3/14/85

DAY 8

OBJECTIVE:

ACTIVITY LEARNING METHODS

| ME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|-------|----------------------------------|---|---------------------|---|
| 8:00 | Where are we? | Participant leads group | | |
| 9:00 | Problem-Solving | Participants lead group in mini-case study. | Mini-Case Study H/O | Peer Assessment |
| 9:30 | <u>Making Learning Effective</u> | Role-Play : The Great Presenter Participants and trainer do role-play highlighting the disadvantages of lecturing. Group conclusions include disadvantages: - passive - empty vessel approach - one-way communication - no interaction between lectures | Cue cards | Direct Observation |
| 10:30 | BREAK | | | |
| 10:45 | Presentation Practicum | Participants in groups of 3 read a section of Chapter 6 - Abbatt and prepare and make presentations. "Introduction to Teaching" | TFBL Chapter 6 | |
| 11:30 | LUNCH | | | |
| 1:45 | Other Learning Methods | PRESENTATIONS ↓ Using learning three participants identify other learning methods apart from Role-Play and lecture. Each participant chooses a learning leaf attaches it to Learning Tree and reads description on leaf. | | Direct Observation |
| 2:15 | Reflection | | | |
| 2:30 | ADJOURN | | | Trainer asks participants to list topics for each method. |

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DAY 9

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Name and describe three training methods other than role play.
- Describe and give examples of ways to teach knowledge, skills and attitudes.
- Use effectively one of the following three methods of training: role play, story-telling/drama, and games.
- Display improved interpersonal skills using the rules and improved group participation skills.

ASSUMPTIONS

Participants:

- Want to be able to use training methods other than role play or lecture.
- Can identify many of the skills, knowledge and attitudes required for FP/ORT.
- Want practical exercises in training methods.
- Believe in the value of improved interpersonal and group participation skills for training.

TRAINING DESIGN

DATE 3/15/85

DAY Nine

ACTIVITY Training Methods, Practicum

OBJECTIVE:

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|---------|---------------------|---|----------------------------------|--|
| 8:00 AM | Where are We? | Participant leads group session. | | |
| 8:30 | Problem-solving | Problem: "No electricity" Lead by participant. | Board, Chalk | |
| 8:45 | Morale-boost | Self-esteem stretch. | | |
| 8:50 | How to Teach K.A.P. | Group brainstorms ways to teach knowledge attitude, and practice. List on board. Using handout, group expands list and review methods. | H.O. "How to Teach K.A.P." | Ask group to recall methods and give an example without referring to notes or board. |
| 9:50 | Break | | | |
| 10:00 | Training Methods | <u>PRACTICUM</u> 1. Participants report on H.W. List topics selected for each method. Review H.O. "Summary of Training Methods". | B. Board/Chalk HHWL Werner | Direct Observation |
| 10:30 | | 2. By lottery, groups choose one of the following for demonstration. Groups prepare and present: Story Telling/Drama Role Play Games | Paper, Marker, pens as required. | |
| 12:20 | Wrap-up | | | |
| 12:40 | Reflection | | | |
| 1:00 PM | Adjourn | <u>Homework:</u> Make an ORT visual aid such as a poster, spoon or chart and prepare to demonstrate mixing ORT solution. | | |

DAY 10

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Describe three reasons why evaluation is useful.
- Identify ways of evaluating knowledge, attitudes and skills learning.
- identify four requirements for appropriate teaching aids.
- Explain and use one teaching aid they have developed for an FP/ORT setting.
- Show increasing skill in group participation and in using the rules of feedback.

TRAINING DESIGN

DATE 3/18/85

DAY Ten

OBJECTIVE:

ACTIVITY Evaluation - TA

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|---------|------------------------|---|---|--|
| 8:00 AM | Where are we? | Participant leads group. | | |
| 8:30 | Impromptu Speaking | Grab Bag: Three participants speak on various topics with one minute to prepare and three minutes to speak. | Cards | |
| 9:00 | Evaluation | Brainstorm: Group defines evaluation and then in small groups identify all reasons for evaluation in training in CHE projects. List on board. | | Direct Observation Peer Assessment |
| 10:00 | Break | | | |
| 10:15 | How to Evaluate K.A.P. | In small groups, participants identify all the ways they might evaluate the learning objectives generated in the objective-setting exercise on 12/3/84. Group leader makes report to participants. Circulate lists | H.O. "Setting and Writing Good Objectives Group Reports" Reading reference HHWL Pg. 9-11/9-22 | Ask two or three students how they might evaluate a particular learning objective. |
| 11:30 | Lunch | | | |
| 12:00 | Teaching aids | Participants present Teaching Aid developed over the weekend. Explain why useful in a particular FP/ORT setting. Group discussion on reading Brainstorm - Teaching Aids we could make and use | HHWL Pg 11-1/11/2 | Show Teaching Aid from TLVA. Ask participant how to use. |
| 2:00 PM | Reflection | Participant leads group | | |
| 2:30 | Adjourn | | Reading: Begin ORT pamphlet | |

DAY 11

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will:

- Be able to determine "Must Learn" information for an ORT training plan.
- Be able to set clear, realistic, measurable objectives for an ORT training plan.
- Be able to select appropriate teaching methods and teaching aids for an ORT training plan.
- Demonstrate a beginning skill in impromptu speaking.
- Demonstrate an increasing skill in group dynamics and in use of rules of feedback.

TRAINING DESIGN

DATE 3/19/85

DAY Eleven

OBJECTIVE:

ACTIVITY Designing a Training Plan

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|---------|-----------------------|--|---|--|
| 8:00 AM | Where are we? | Participant leads group | | |
| 8:30 | Impromptu Speaking | Using Grab Bag technique, three participants speak on "surprise" topics; one minute to prepare, three minutes to speak. | Participants volunteer | Group gives feedback to impromptu speaker. |
| 9:00 | Group Practicum | With trainers as facilitators, participants will prepare a short training plan on "What to teach a mother about ORT". 1. Needs Assessment: What is "MUST LEARN?" 2. Setting Goals and Objectives for plan using K.A.P. model. | Prereading: HHWL pp 15-10 to 15-18 also pp 15-4 <u>Population Reports</u> pamphlet on ORT Pamphlet p. L51 spec. info on Nigeria + Weiner 15-4 | |
| 10:00 | Break | | | |
| 10:15 | Practicum (continued) | 3. In small groups, task analysis and appropriate teach methods/aids developed for each area (K.A.P.). | Trainers will circulate | |
| 11:00 | | Group Reports - Draft Training Plan developed | Blackboard and H.O. Training Design | |
| 11:30 | Lunch | | | |
| 12:00 | Mid-Way Evaluation | Trainers will distribute Evaluation Form | H.O. Participant reaction form | |
| 2:00 PM | Reflection | | | |

DAY 12

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Identify several major community health issues in their work.
- Define community health.
- Devise a plan for a CHE FP/ORT activity.

ASSUMPTIONS

- Participants have had prior exposure to known community health issues in their work.
- Participants can work together to create a definition of CE from their identification and understanding of Kwara CH issues.
- Participants can apply planning and problem-solving skills covered during TOT workshop.

TRAINING DESIGN

DATE 3/20/85

DAY Twelve

ACTIVITY CHE/Planning

OBJECTIVE:

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|---------|------------------------------------|--|---------------------|--|
| 8:00 AM | Where are we? | Participant leads group. | | |
| 8:30 | Impromptu Speaking | Grab Bag | Grab Bag Cards | Direct Observation |
| 9:00 | What is Community Health Education | "What am I?" game. Each participant selects a Community Health issue - What am I in pairs. Identify most important CH Issue. | Paper/Pens | Trainers ask participants to justify selections. |
| 10:00 | Break | | | |
| 10:15 | | Define Community Health In groups of three, participants generate definition. Use pyramiding to obtain group definition. | | |
| 11:30 | Lunch | | | |
| 12:00 | Who's Going Where for What | Planning of First Field Visit | | Direct Observation and Participation |
| 2:00 PM | Reflection | | | |
| 2:30 | Adjourn | | | |

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DAY 13

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Explain why community health workers need to be aware of "conflicts of interest" in implementing FP/ORT in Kwara.
- Complete arrangements for a CHE presentation at a local clinic in an FP/ORT area to include:
 1. gathering of appropriate clinic profile information,
 2. confirmation of CHE topic,
 3. completion of a DRAFT CHE training plan.

ASSUMPTIONS

- Participants can identify Kwara community "conflicts of interest"
- Participants have adequate confidence and knowledge to initiate a CHE activity in a clinic with which they are familiar.

TRAINING DESIGN

DATE 3/21/85

DAY Thirteen

ACTIVITY Practicum/Field Visit

OBJECTIVE:

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|--------------------|---------------------------|---|---------------------|--|
| 8:00 AM | Where are we? | Lead by participant. | | Direct Observation |
| 8:30 | Impromptu Speaking | Grab Bag | Cards | |
| 9:00 | Community Dynamics | Guided discussion and reading of HHWC "What conflicts of interest have to be considered in Kwara for FP/ORT" | HHWC: pp 6-6, 6-11 | Trainers ask participants to identify possible implications for CH work given Kwara community conflicts of interest. |
| 10:30 ↓ 2:30 | Field Visit/ Practicum | In 5 working groups of 3 each; 5 community clinics visited for needs assessment, arranging for training presentation. | CHE Plan Outline | |

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DAY 14

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Identify appropriate needs, social factors and resources for their planned CHE presentation in a Kwara Clinic.

ASSUMPTION

- Participants gathered pertinent information during visit to clinics.



OBJECTIVE:

TRAINING DESIGN

DATE 3/22/85

DAY Fourteen

ACTIVITY CHE Reports

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|---------|--|---|-------------------------|--------------------|
| 8:00 AM | Where are we? | Participant leads group | | |
| 8:30 | Impromptu Speaking | Grab Bag | Cards | |
| 9:00 | Community Health: Needs, Social Factors, Resources | In working groups, participants evaluate their particular clinic site as to: Needs Social factors Resources | MMWL pp 6-6 Trainers | Direct Observation |
| 10:00 | Break | | | |
| 10:30 | (continued) | Group Reports: Description and layout of clinic Types of services available P & profile Proposed topic for T.P. | Participants | |
| 12:30 | Reflection | | | Direct Observation |
| 1:00 | Adjourn | | | |

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TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, the participants will be able to:

- Identify and apply steps required to solve problems using the "How to Get Results" outline.
- Describe the status of Family Planning in Kwara State.

ASSUMPTIONS

Participants:

- Already appreciate the need for a structured approach to problem-solving.
- Need more background information about FP situation in Kwara State.
- Have additional training needs.

OBJECTIVE:

TRAINING DESIGN

DATE 25/3/85

DAY 15

ACTIVITY FP in KWARA STATE

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|-------|---|---|--|--|
| 8:00 | WHERE ARE WE? | Participant leads group. | | Self-Assessment Peer-Assessment |
| 8:30 | PROBLEM SOLVING | Mini-Case study using Problem Solving outline : "How to get results" Large group brainstorms how to apply 8 steps of problem-solving to this problem. Participant leads group. | H/O "How to get Results" Mini-case study Poster | Trainers observe participant and give report. |
| 9:45 | BREAK | | Participants/Trainers | Direct observation |
| 10:00 | GUEST LECTURE ON CURRENT STATUS OF F.P. IN KWARA. | Dr. Fakeye - Medical Director of FP Clinic at University Teaching Hospital | | |
| 11:00 | QUESTIONS & ANSWERS | Questions and Answers | | Participants are asked to recall main presentation points. |
| 11:30 | LUNCH | | | |
| 12:00 | TRADITIONAL & MODERN FP METHODS IN KWARA K.A.P. | Follow-on discussion from Dr. Fakeye talk. Compile group report on talk | Board/Chalk | |
| 12:45 | | Participants present a display of traditional & FP charms & methods. | Poster displaying Traditional FP methods. | |
| 1:45 | PLENARY for remainder of week | Trainer will ask participants to identify remaining unmet training needs in order to plan remainder of week. | | |
| 2:00 | REFLECTION | | | |
| 2:30 | ADJOURN | | | |

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DAY 16

3/25

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the sessions, participants will be able to:

- Use the "8 Steps- How to get Results" model in solving problems in their work.
- Identify community leaders and interest groups who can affect their work.
- Explain and justify a completed CHE training plan for implementation in a Kwara Clinic.

ASSUMPTIONS

Participants:

- Need practice to improve problem-solving skills
- Already have extensive knowledge about their community leadership structures and how these affect community health activities.
- Can prepare appropriate training plans.

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TRAINING DESIGN

DATE 26/3/85

DAY 16

ACTIVITY WORKING IN THE COMMUNITY

OBJECTIVE:

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|-------|---------------------------------------|---|--|--|
| 8:00 | WHERE ARE WE? | Participant leads the group | | Direct observation |
| 8:30 | PROBLEM-SOLVING VILLAGE CASE STUDY | Continue with Day 16 Case study using: " 8 Steps of Problem-Solving" | H/O: "8 Steps of Problem-Solving" | Trainer makes comments on leader participation. |
| 10:00 | BREAK | Trainer uses case study to bring out issues of community leadership and how they might affect CHE activities in FP/ORT. | Werner HHWL Pp 6-15 Looking at Community Leadership | |
| 11:30 | LUNCH | | | |
| 12:00 | CHE PREPARATION | Participants carry-out supervised preparation and rehearsal for Day 18 CHE presentations. | Pens, paper, markers tape. H/O: What Makes Training Effective? | |
| 2:00 | REFLECTION | Distribute and discuss evaluation forms | Adults: Effective Workshops | Trainers review Training Designs before final plan drawn up. |
| 2:30 | ADJOURN | | H/O: Evaluation Criteria | |

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TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Successfully present a CHE activity using methods appropriate to the particular learning audience in FP/ORT.
- Identify strengths and changes required to improve particular CHE presentations.

ASSUMPTIONS

Participants:

- Have appropriate theoretical background for FP/ORT Training/CHE presentations.
- Can conduct self-evaluations, accept suggestions for improvement of their Training/CHE presentations.

By the end of the session, participants will be able to:

OBJECTIVE: 1. Carry out a training session using methods appropriate to a training group and to the set learning objectives.
 2. Identify strengths and changes required to improve CHE presentations

TRAINING DESIGN

DATE 27/3/85
 DAY 17
 ACTIVITY CHE PRESENTATION AND EVALUATION

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|--------------------|---------------------------|--|-------------------------------|--|
| 8:00 ↓ 12:00 | CHE PRESENTATIONS | Participants in 5 groups of 3 deliver FP/ORT presentations in designated clinic/health centers. | As determined by participant. | Self-Evaluation using Evaluation Forms Trainers visit |
| | CHE REPORTS & EVALUATIONS | Participants report on CHE presentations using evaluation outline as a guide. Rewrite training plan incorporating lessons learnt from the presentation. Prepare training plans for distribution. | | |
| 2:00 | REFLECTION | | | |
| 2:30 | ADJOURN | | | |

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TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of this session, participants will have:

- Developed a strategy to survey attitudes in their communities towards FP/ORT.
- Identified a FP/ORT problem that may benefit from I.E.C. outreach effort.
- Used the "Steps of Planning for I.E.C." model to meet outreach/I.E.C. needs identified above.

ASSUMPTIONS

Participants:

- Already have extensive knowledge about community attitudes.
- Recognize the value of structured approaches to achieving work goals.

TRAINING DESIGN

DATE 28/3/85

DAY 18

OBJECTIVE:

ACTIVITY REACHING OUT TO THE COMMUNITY

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|-------|---|---|--|--------------------|
| 8:00 | WHERE ARE WE? | Participant leads group | | |
| 8:30 | IMPROMPTU SPEAKING | Grab Bag | Grab Bag Cards | |
| 9:00 | REACHING OUT TO THE COMMUNITY 1) Finding out Community Attitudes | Using lists Community resources and leadership, groups developed in Day 5 & Day 17, participants develop a strategy to survey community attitudes to FP/ORT. | List from Day 5-Day 17 Werner HHWL Suggestions for Gathering Community Information | |
| 10:00 | BREAK | | | |
| 10:15 | 2) How to plan simple outreach/IEC activities. | Participants identify a FP/ORT problem that may benefit from an IEC/Outreach effort. In 3 groups participants use the "Steps of Planning for IEC" model to meet outreach/IEC needs identified above and make reports. | HAND OUT "Steps of Planning for IEC" | |
| 11:30 | LUNCH | | | |
| 12:00 | | | | |
| 1:30 | GROUP REPORTS | Group leaders report | | Direct Observation |
| 2:15 | REFLECTIONS | | | |
| 2:30 | ADJOURN | | | |

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DAY 19

3/85

TOT/CHE WORKSHOP

KWARA

OBJECTIVES

By the end of the session, participants will be able to:

- Identify possible follow-on team activities for April,
- Complete participant reaction forms.

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TRAINING DESIGN

DATE 29/3/85

DAY 19

ACTIVITY WHERE DO WE GO FROM THERE?

OBJECTIVE:

| TIME | CONTENT/TOPIC | METHOD/INSTRUCTIONS | MATERIALS/RESOURCES | EVALUATION |
|-------|-----------------------------|---|---------------------|---------------------------------------|
| 8:00 | WHERE ARE WE? | Participant leads group | | |
| 9:00 | IMPROMPTU SPEAKING | Grab Bag | Cards | Direct Observation Peer Assessment |
| 10:00 | WHAT'S NEXT? | Participants meet without trainers to identify possible activities before Curriculum Development Workshop in May. | | |
| 11:30 | WRAP-UP & REFLECTIONS | Trainers and participants review group meeting decisions and make final reflection. | | |
| 12:30 | FINAL EVALUATION | Participants complete Reaction Form | | |
| 1:30 | WORKSHOP ENDS | | | |
| 6:30 | CELEBRATION | | | |

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