

PD-AMR-501

IN-40803



Intrah

Trip Report

#0-119

Travelers:

Mr. Maurice Apted, IHP Consultant

Ms. Helen Sirica, IHP Consultant

Country Visited: Kwara State, NIGERIA

Date of Trip: May 6-24, 1985

Purpose: To conduct FP/ORT Curriculum Development Workshop for 15-Member MOH State Training Team

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EXECUTIVE SUMMARY

Mr. Maurice Apted and Ms. Helen Sirica were contracted by IHP to conduct a three-week Curriculum Development workshop in Family Planning and Oral Rehydration Therapy as part of the INTRAH/Kwara State Ministry of Health project for the Accelerated Delivery of Family Planning and Oral Rehydration Services.

The workshop for 15 participants took place from May 6th to May 24th, 1985 for the purposes of developing a curriculum for the training of senior nursing sisters in FP/ORT and for developing a training plan for a workshop in June for FP/ORT service delivery skills. Furthermore, the Kwara State training team and the consultants produced a basic clinical reference manual in FP/ORT for distribution in Kwara State.

The first week of the workshop was devoted to a medical review of family planning methods and oral rehydration therapy. The review served as the basis for the content and structure of the curriculum developed by the group. The training team, after having divided into clinical and community health education working groups, spent the second and third weeks of the workshop writing and producing the curriculum. This work was supervised by the IHP team.

SCHEDULE DURING VISIT

Monday, April 29	Departed San Francisco for London
Tuesday, April 30	Overnight in London
Wednesday, May 1	Departed London for afternoon arrival in Lagos, Nigeria
Thursday, May 2	Briefing with AAO Lagos, Ms. Keys MacManus.
Friday, May 3	AM: Met with MOH Project Director, Dr. David Olubaniyi and Training Coordinator, Mr. Gabriel Adeseko to confirm workshop arrangements. PM: Visited University of Ilorin Teaching Hospital to meet with selected staff, Dr. O. Ogunbode, Head of Department of OB/GYN and Dr. R. Fakeye about workshop activities; made arrangements with Dr. Fakeye for participation during medical review.
Saturday, May 4 and Sunday, May 5	Prepared materials and handouts for medical review.
Monday, May 6	Workshop began; medical review and update; May 13th curriculum writing began; May 20th curriculum rewriting and production began.
Friday, May 24	Curriculum finished. Workshop ended.
Saturday, May 25	Traveled to Lagos
Sunday, May 26	Traveled to Frankfurt from Lagos
Monday, May 28 to Friday, May 31	Completed workshop report. Briefed June service delivery workshop consultants.
Monday, June 3	Debriefed IHP/UCSF in Santa Cruz, CA

I. PURPOSE

The purpose of the trip was to conduct a three-week workshop in curriculum development with 15 members of the Kwara State training team under the terms of Article II Work Plan Activity # 3, Subcontract between MOH, Kwara State and UNC/CH for the Accelerated Delivery of Family Planning and Oral Rehydration Services, Nigeria.

The purposes of the workshop were as follows:

1. to develop a curriculum for training senior nursing sisters in FP/ORT; and
2. to develop a training plan for a workshop in June for FP/ORT service delivery skills.

Furthermore, the team and the consultants drafted a Basic Clinical Reference Manual in FP/ORT for distribution in Kwara State.

II. ACCOMPLISHMENTS

1. A curriculum for the training of nursing sisters in FP/ORT service delivery was developed. It consists of 16 learning units -- 11 clinical and 5 Community Health Education. Each unit has the following parts:
 - a. Introduction
 - b. Goals and Objectives
 - c. Training Design
 - d. Readings/Exercises
 - e. Evaluation
2. A five-week training schedule for the curriculum was developed, consisting of: a two-week classroom-based component, a two-week "in the field" practicum component, and a one-week review and follow-up component. The practicum component will take place at six clinical sites with approximately three to four participants per location.
3. Three team members, Dr. Abiodun C. Oyeyipo, Mrs. Victoria Abodunrin, and Mrs. Rachael Ajiboye were selected as core trainers. They closely supervised the units prepared by their fellow team members. They are thoroughly familiar with the curriculum and will serve as

co-trainers for the first service delivery skills workshop in June 1985. It is anticipated that these core trainers will conduct further service delivery workshops as required for Work Plan Activities # 7 and 8.

4. An assistant training coordinator, Alhj. A.O. Babatunde, was appointed to assist the present training coordinator with administrative responsibilities of the project.

5. The state training team achieved a renewed sense of commitment to the project and strengthened its responsibility to the establishment of FP/ORT services in Kwara State.

6. The consultants and the Kwara State Training Team drafted a basic clinical reference manual in FP/ORT for distribution in Kwara State.

III. BACKGROUND

The Curriculum Development workshop is the third activity in a set of nine activities forming the work plan of the Kwara State component of the Project for Accelerated Delivery of Family Planning and Oral Rehydration Services in Nigeria. Participants for the Curriculum Development workshop were 15 members of the state training team who in March 1985 completed Activity # 2, a four-week TOT/CHE workshop. The stated goals for the project include the provision of effective FP/ORT services at all existing (18) hospitals, 11 rural health centers and 28 clinics as they are completed, along with the continued development of a well-trained staff to provide high quality FP/ORT services.

For this activity, the particular goals included the development of a curriculum for FP/ORT service delivery skills and the creation of a training plan for service delivery skills workshops scheduled as work plan activities # 4, 7 and 8. The Kwara State project developed out of a three-state (Kwara, Imo, Bauchi) Training Project Development and Updated Needs Assessment Activity conducted by INTRAH (Holman, de Malvinsky, Veney) in November/December 1984. In January 1985, a Kwara Work Plan and Contract were

developed in-country, accepted for implementation, and, in February 1985, the MOH Kwara State training team was selected.

The next activity scheduled for June 1985 is a service delivery skills training workshop in FP/ORT. The curriculum developed in Activity # 3 will be used in Work Plan Activity # 4.

IV. DESCRIPTION OF ACTIVITIES

A workshop for curriculum development for FP/ORT service delivery skills took place for 15 members of the Kwara State Ministry of Health state training team at the Staff Development Center, Ilorin, Kwara State, from May 6th to May 24th.

Participants:

There were 15 participants in all. They had previously participated in Work Plan Activity # 1, a TOT/CHE workshop in March 1985. Two IHP trainers conducted the workshop.

Participants were:

- 2 physicians
- 2 principal nurse tutors
- 2 midwife tutors
- 2 health education instructors
- 2 principal health sisters
- 2 community health sisters
- 3 public health sisters

Process and Content:

The first day of the workshop was spent dealing with administrative issues concerning per diem payments and accommodation arrangements. Per diems still had not been paid for the March 1985 TOT/CHF workshop (Work Plan Activity # 2); participants were concerned that a similar situation would prevail during this activity. Morale was not high and there was outspoken resentment about the continued delay. The delay was caused by the Ministry of Health. There had been some disagreement and confusion about the level of per diem payments; also, it was reported that the project as a whole had not had formal approval from the Kwara State Governor's office. This omission had come to light once disbursement of funds was attempted.

It was apparent that the issue of per diem had to be resolved if it were not to seriously interfere with the curriculum development workshop. A delegation from the state training team was selected by the participants. This group set about obtaining the necessary approval from the Governor's Office and seeing the payment process completed through the regular channels of the Ministry of Health. The success of this group in overcoming this obstacle considerably improved morale and confidence and demonstrated

the team's increasing competence to solve problems in a constructive and effective manner. In particular the team showed that it was more than capable of forming a steering committee which could effectively deal with the administrative responsibilities of a state-wide training program.

The workshop was organized into three components. Component # 1 was an FP/ORT Medical Review and Update. It had been noted during the TOT/CHE workshop (Work Plan Activity # 2) that the level of knowledge among the participants in clinical family planning was less than had been anticipated. Therefore, it was decided by the trainers that the activities of the first week of the workshop should comprise a review and update of clinical skills and information (see Appendix D).

The trainers used the review/update segment to select FP/ORT content, familiarize participants with the material and allow participants some opportunity to practice teaching and presenting FP/ORT information that they would use in the final curriculum. Outlines for topics to be covered were developed by the trainers. Participants were then required to present the topics using the outlines developed along with any other materials or ideas that participants believed

reflected the particular situation in Kwara State. The presentations served many purposes, one of which was to provide those who already had some familiarity with FP in Nigeria and Kwara State the opportunity to review and update medical FP/ORT information. In making the actual presentations to the team as a whole, individual members obtained a good sense of what an FP/ORT training presentation might involve. Team members were able to learn new information from colleagues, clarify FP/ORT medical issues, and provide feedback about presentation techniques. The group's interaction during the review/update required the use of skills and ideas developed during the TOT/CHE workshop in March (Work Plan Activity # 2). The week-long review also served as a very effective way to gather and order curriculum content. A standard of practice for competent clinical delivery of FP/ORT was developed by the team and trainers. By the end of the segment the entire group felt greater confidence in their FP/ORT knowledge and skills. CHE workers felt better equipped to counsel clients and communities on FP/ORT issues in Kwara State. One invited presenter, Dr. R. Fakeye, provided a review and update on breastfeeding and postpartum contraception.

At the end of the first week, two curriculum groups were organized: a clinical group and a CHE group. A working

brief was established which contained a working goal, some possible assumptions, and likely outcomes for each curriculum group (see Appendix C). Each group did the following:

- a. made final selection of FP/ORT content;
- b. established the unit sequence;
- c. wrote goals and objectives;
- d. prepared training designs; and
- e. prepared content outlines, handouts and readings.

One or two members within each group were allocated a unit and set about the writing tasks. At the end of each writing session, each group made a progress report to all participants. For the clinical component, the following topics and order were determined:

INTRODUCTION: A BRIEF HISTORY OF FAMILY PLANNING
 IN NIGERIA AND KWARA STATE

Unit

- ONE: THE ANATOMY AND PHYSIOLOGY OF THE
 FEMALE AND MALE REPRODUCTIVE SYSTEMS
- TWO: REVIEW OF COUNSELLING / HISTORY-TAKING /
 PHYSICAL EXAMINATION
- THREE: BREASTFEEDING AND POSTPARTUM CONTRACEPTION
- FOUR: THE ORAL CONTRACEPTIVE PILL AND INJECTABLE
- FIVE: THE INTRAUTERINE CONTRACEPTIVE DEVICE (IUCD)
- SIX: BARRIER METHODS OF FAMILY PLANNING

- SEVEN: NATURAL FAMILY PLANNING /
FERTILITY AWARENESS
- EIGHT: SEXUALLY TRANSMITTED DISEASES (STDs)
- NINE: INFERTILITY
- TEN: PERMANENT METHODS OF FAMILY PLANNING
- ELEVEN: ORAL REHYDRATION THERAPY (ORT)

For the CHE component, the following topics and order were established:

Unit

- ONE: ENTERING AND KNOWING A COMMUNITY
- TWO: COMMUNICATION FOR HEALTH
- THREE: OBSTACLES AND FACILITATING
FACTORS FOR FP/ORT
- FOUR: CASE FINDING AND COUNSELLING FOR FP/ORT
- FIVE: TRAINING IN CHE FOR FP/ORT

It was also decided by the group that the curriculum would be such as to enable the eventual development of a clinical guidebook of medical information for FP/ORT.

Component #3 involved the trainers and participants in editing, rewriting, printing and assembling the final product. There were no accurate or reliable secretarial services available through the Ministry of Health. For some of the typing and printing, team members made appropriate arrangements with other institutions. Nominal payments for these outside services were made. The bulk of typing was

undertaken by the two IHP trainers, who feel that three weeks was insufficient time for the tasks required given the lack of production facilities.

Participants responded very well to all the workshop components. They benefited very much from the review and update segment. They were able to work effectively both in their writing groups and as individuals. In all, the team produced 17 curriculum units: an introduction, 11 medical units, and 5 CHE units. The process of actually typing, printing and assembling the curriculum was very difficult. It was fortunate that the trainers had brought a typewriter with them.

Specifications for visual aids were developed by each group and the trainers. Then a series of 17 poster-sized visual aids were developed by two local young artists. Arrangements will be required for their mass reproduction should they prove effective in teaching situations.

A total of 50 copies of each unit was produced. Each team member received a copy, copies were given to the Kwara State Ministry of Health and 23 copies are now available for participants in the June 1985 service delivery skills workshop (Work Plan Activity #4).

During the writing and production segments of the workshop, the team held discussions with Kwara State Ministry of Health officials and Johns Hopkins Population Communication Services consultants concerning the relationship between the training team goals and the FP/ORT IEC program. Team members expressed satisfaction at the complementary nature of the two activities.

V. FINDINGS

The Ministry of Health - Kwara State

Morale in the Ministry of Health appears to have improved since completion of the TOT/CHE workshop in March (Work Plan Activity # 2). The Ministry's staffing situation seems to have stabilized and no further retrenchments are likely in the foreseeable few months. The Project Director, Dr. David Olubaniyi, expressed renewed enthusiasm for the training team's potential. However, upon arrival it was reported by Dr. Olubaniyi that the question of per diem payments for participants had still to be resolved. There was some delay obtaining approval for disbursement from the Kwara State Governor's office. Unofficially, the trainers heard that the delays in per diem payments are a result of some internal differences between the offices of the Project Director, the Accountant and the Permanent Secretary. The differences are over how much per diem should be paid to each participant. The maximum rate established in the project contract is reportedly approximately double the highest present Ministry of Health per diem rate. The trainers were not able to verify this information. However, per diems are currently being paid at two different rates depending on seniority within the Ministry. The rates are N15 and N20 per night. Those who travel to the training site away from their work station and who require hotel

accommodation have their accommodations paid for up to the maximum contract rate of N40. The issue of the per diem payments had not been raised with the Ministry of Health, Kwara State, by the AAO - Lagos. The trainers delivered a letter from AAO - Lagos outlining the required disbursement procedures. The trainers did not involve themselves in these financial matters. While it was recognized that the per diem issue could undermine the success of the curriculum development workshop, the trainers encouraged the training team itself to resolve the matter. This they accomplished to everyone's satisfaction.

The per diem issue also brought into focus the serious shortcomings of the present training coordinator. The combination of his marked inexperience and the heavy demands required for successful training arrangements has placed the training coordinator well beyond his level of competence. There is noticeable tension increasing between the training coordinator and other team members. The team is becoming frustrated at the lack of progress being made in arrangements routinely required for the successful implementation of training activities.

The trainers attempted to alleviate some of the pressures on the training coordinator. They have obtained the Ministry of Health's agreement to the informal appointment of an

assistant coordinator to assist in completing arrangements for each of the Work Plan activities. Also, the trainers developed a model work plan for the coordination of service delivery skills workshops beginning in June 1985 (Work Plan Activities # 4, 7, and 8, see Appendix F). Given the present situation, the need for the establishment of an Ilorin-based training team steering committee has become crucial. The team is capable and ready to assume more direct responsibility for the implementation of the Work Plan activities as outlined in the project contract.

The Participants

Team morale was high despite the initial problems over per diem payments and the frustrations of producing a curriculum in a short time frame under difficult conditions. The team has set a goal to produce from the curriculum, a pocket clinical guide book. Family planning knowledge, as anticipated, was low, and participants responded enthusiastically to the medical review and update. They reiterated that family planning services and training could not be provided adequately without more equipment. Requests were made for blood pressure kits and stethoscopes as basic materials for all participants. The participants expressed

concern and interest in integrating the FP/ORT curriculum into the schools. How this might be done was briefly discussed. Practical issues involving service delivery; e.g., supplies and commodities and specific problems in various sites, were addressed. The trainers recommended to the team that these issues be raised during the Management, Supervision and Evaluation workshop in August 1985 (Work Plan Activity # 5). The team as a whole recognizes more clearly its responsibility to develop appropriate FP/ORT services through participation in and provision of effective training activities.

Three participants were selected to serve as co-trainers for the Service Delivery Skills workshop in June 1985. They are: Dr. Abiodun C. Oyeyipo, Medical Officer; Mrs. Victoria Abodunrin, Principal Midwife Tutor; and, Mrs. Rachael Agiboye, Principal Health Sister/Community Health Officer.

Curriculum Development and Standards of Practice

One of the major issues involved in the development of a curriculum for service delivery skills training is the question of establishing appropriate standards of medical practice given the local situation and conditions. For Kwara State, the team received the following recommendations made by a Kwara State FP specialist, Dr. R. Fakeye, OB/GYN

Department, Univeristy of Ilorin Teaching Hospital, Kwara State: a concerted effort should be made to foster full breastfeeding as the most important aspect of Kwara service delivery. He estimates that if full breastfeeding is used at the standards established by the World Health Organization then the contraceptive effect is likely to match the total contraceptive benefits to Kwara State of all other methods currently being used. Secondly, IUCDs are the most overall appropriate FP method for Kwara. The injectable contraceptive is also seen as a method to be favored. Condom use must be extensively and vigorously encouraged as a family planning method and especially to reduce the rising incidence of sexually transmitted diseases. As the curriculum devised by the team is extensive and incorporates some family planning methods which are unlikely to be methods of choice in Kwara State, the above points are pertinent when training Kwara service delivery personnel for FP/ORT.

Family Planning Developments in Nigeria and Kwara

Team members reported a number of interesting developments. These include a May Day/Labor Day address by the Nigerian President Buhari, urging Nigerians to adopt a 3-children family size. It was widely reported in the daily press. In

Kwara State, Muslim leaders have spoken out on television against family planning. A recent nationally televised STD conference provided some new information on the incidence of STD in Nigeria. For instance, gonorrhoea has reportedly become the fourth most common communicable disease in Nigeria. Also, due to incorrect or inadequate antibiotic therapy, strains of gonorrhoea are now present that cannot be cured with penicillin. Also, it is estimated that in the adult population, 30% of men and 70% of women carry some sexually transmitted disease and are not aware of it. The team feels that STD is a major concern for the effective delivery of FP/ORT services.

VI. CONCLUSIONS

The crisis in the Ministry of Health as a result of extensive retrenchments in February and March 1985 and as reported in the TOT/CHE Workshop report (Work Plan Activity # 2) has passed. The Ministry seems to be in a more positive, and therefore more active stance. For example, participants for the Service Delivery Skills workshop for June 1985 (Work Plan Activity # 4) were being selected before the end of the Curriculum Development workshop (Work Plan Activity # 3). This was indeed a change in orientation. There is an improvement in the Ministry's active commitment to the project, but there still does not seem to be any one person actively involved with the project with the exception of the training coordinator. Unfortunately he is well outside his competence and is in danger of being a serious obstacle to the smooth implementation of the project. However, he is the Ministry's appointment even if he is unable to provide the kind of support, involvement and motivation at the Ministry level by which the project could greatly benefit.

Members of the state training team continue to grow in competence and commitment in the area of FP/ORT. They have demonstrated great facility with the workshop tasks and have

also shown a capacity to handle constructively some of the difficult administrative issues concerning the project as whole. They are eagerly awaiting their next training in August--the Management, Supervision, and Evaluation workshop.

They consider the curriculum produced this time as a draft to be tried during the forthcoming Service Delivery Skills workshop (Work Plan Activity #4). Printing and production facilities were so obviously inadequate that the team feels more time and better facilities are required to refine the finished curriculum in anticipation of its introduction into the Kwara State medical education system.

Dr. R. Fakeye continues to be supportive of the project and the activities of the state training team. He is a major resource for the team.

VII. RECOMMENDATIONS

1. Four weeks is a more realistic time frame for a curriculum development exercise under the conditions that exist in Kwara State and which may also exist for the more traditional and lesser developed states of Nigeria. Group processes and logistical arrangement cannot be fulfilled in a three-week time frame.

2. Many administrative issues regarding the FP/ORT project require follow-up. Upon beginning training activity #3, participants had still not been paid for the first workshop. Per diems were finally paid at an official MOH rate and not at the rate determined in the INTRAH/MOH contract.

It is recommended that a series of interpretative guidelines be established for the Kwara State Ministry of Health Project personnel to facilitate the use of funds for per diems, transport, supplies and communications requirements. It is likely that assistance will also have to be provided for budget reporting.

3. Although the Kwara State MOH is supportive of the FP/ORT project, no one actively and capably manages

activities for the project. The training coordinator, appointed for such tasks, did not demonstrate competency in fulfilling his responsibilities. Lack of effective coordination in the Ministry could, over time, frustrate the efforts of the Kwara State training team and impede progress. The creation of a state training team steering committee is appropriate at this point and can also be useful in overcoming some of the difficulties posed by the present training coordinator.

4. The state training team needs to reassemble after the curriculum trial during the June 1985 service delivery skills workshop (Work Plan Activity # 4) to consider curriculum revisions.
5. As a precursor to developing a plan for the implementation of the curriculum in the Kwara State medical education system, the state training team needs to participate as 'trainees' in an intensive workshop on FP/ORT service delivery using the revised curriculum.
6. The curriculum is extensive and requires that some priority be placed on the methods of family planning that are likely to be of most benefit and effectiveness

to the people of Kwara State. Emphasis needs to be placed on breastfeeding, IUCDs, and according to the Nigerians, injectables. The need to encourage use of condoms and to treat STD should also be given priority.

7. Curriculum revisions should include the production of a Kwara State training manual and a clinical pocket guide for service delivery personnel. The pocket guide could establish guidelines for practice throughout the state.
8. It is unlikely that the Kwara State training team will be ready or willing to take over sole responsibility for service delivery skills workshops scheduled for the last quarter of 1985. It is recommended that one IHP clinical trainer supervise and support the core trainers during the last quarter 1985 workshops.
9. It is strongly recommended that the project continue to use the services of the two young Ilorin-based artists who assisted in this curriculum development workshop. They have shown a noticeable ability to take FP/ORT ideas and turn them into effective visuals for teaching in class or for CHE activities in the community at large. They are recommended for the Work Plan Activity # 6 - Pan-Nigeria Visual Communications workshop.

10. Basic equipment is lacking. It is recommended that each training team member and each service delivery skills workshop participant be provided with a blood pressure kit and stethoscope.
11. Skills competency at the end of the Service Delivery Skills workshop needs to be known. It is recommended that an assessment device be created during the June 1985 service delivery skills workshop for evaluation of clinical skills.
12. It is recommended that the participants in the June 1985 skills workshop be assessed for levels of clinical competence three months after having completed the skills workshop.

APPENDIX A

PERSONS CONTACTED IN-COUNTRY

MOH

Dr. David Olubaniyi - Project Director
Mrs. Florence Tolushe - Project Coordinator
Mrs. Adebye - Project Supervisor

AGRICULTURAL AND RURAL MANAGEMENT TRAINING INSTITUTE

Dr. Fred Schindeler - Director
Mr. Segun Openiyi - Chief Management Development Officer

OTHERS

Dr. O. Ogunbode - Head of department OB/GYN University of Ilorin
Teaching Hospital

Dr. O. Fakeye - Lecturer/Pathfinder Project Coordinator

Mr. Jose Rimon II - Regional Program Coordinator,
Population Communication Services
The Johns Hopkins University
Baltimore, Maryland, U.S.A.

Mr. Neal Heath - Academy for Educational Development
International Affairs division
Washington, U.S.A.

Mr. Murray Glow - ARA Consultants,
151 Bloor Street West, Suite 701
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(Management Consultants to the Agricultural &
Rural and Management and Training Institute.
ARMTI)

APPENDIX B

List of Participants

APPENDIX B
List of Participants
KWARA STATE FP/ORT TRAINING TEAM

Dr. Abiodun C. Oyeyipo	Medical Officer
A.A. Elelu	Senior Rural Health Superintendent/ Community Health Officer
Elizabeth I. Owolabi	Principal Health Sister/Health Educator
A.A. Mohammed	Senior Health Educator
Grace I. Osunaiye	Senior Midwife Tutor
Victoria B. Abodunrin	Principal Midwife Tutor
Dr. Zakari Isiyaku	Medical Officer
Janet O. Ibitoye	Assistant Chief Nursing Tutor
Alj. Oba Babatunde	Assistant Chief Nursing Tutor
Comfort E. Adeoye	Principal Health Sister
Sarah I. Omotoye	Principal Health Sister/Community Health Officer
Florence Afolabi	Principal Health Sister
H.O. Omodamuri	Senior Nursing Officer/Community Health Officer
G.D. Adeseke	Senior Nursing Officer/Community Health Officer and Training Coordinator
Mrs. Rachael Ajiboye	Principal Health Sister/Community Health Officer

APPENDIX C

FP/ORT Curriculum Development Workshop Objectives

and

Schedule of Activities

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OBJECTIVESTRAINING ACTIVITY THREEFP/ORT Curriculum Development WorkshopParticipants: State Training TeamOverall Objectives:

- By the end of the Workshop participants will have completed
1. An FP/ORT Curriculum for; Clinical Practice and CHE Practice
 2. A plan for the training of 20 Senior Nursing Sisters and Senior Health Sisters (Training Activity 4,7 & 8.)

TRAINING ACTIVITY FOUR, (Seven & Eight)FP/ORT Service Delivery Skills WorkshopParticipants: 20 Senior Nursing Sisters and Senior Health SistersOverall Objectives: By the end of the Workshop participants will be able to :

1. Deliver Clinical FP/ORT services at the criterion level established in the course
2. Deliver FP/ORT educational services at the criterion level established in the course.
3. Manage, supervise and evaluate FP/ORT Service Delivery at their work places.

Anticipated Outcomes

1. FP/ORT service delivery personnel capable of providing clinical and educational services at the criterion level established in the course.
2. 20 FP/ORT service delivery personnel capable of managing, supervising and evaluating FP/ORT service at their work places.

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WORKING BRIEF

CHE/W Curriculum Working Group Goal

The CHE/W Curriculum Working Group will prepare a course(s) that will enable nurses and CHE/Workers to use Community Health Education activities to effectively promote FP/ORT in the community.

Some Possible Assumptions

1. Nurses already have the required medical FP/ORT knowledge but do not necessarily know how to educate and promote their FP/ORT services in the communities they work in.
2. CHE/Workers already know how to help communities adopt new health practices but will not have the necessary FP/ORT knowledge.

Needs Assessment for Nurses and CHE/Workers

What do nurses need to know about how a community works in order to promote CHE activities in FP/ORT?

What do CHE/Workers need to know about FP/ORT in order to effectively promote these services in their communities?

Goals and Objectives

After participants have taken part in a training using the curriculum you provide what will they be able to do?

How do their capabilities relate to the overall project goals and objectives?

Training Plan or Design

What content will you need to select and what methods will you choose?

Evaluation

What will you do to make sure your curriculum is appropriate to the FP/ORT project needs?

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CURRICULUM DEVELOPMENT
WORKSHOP

WORKING BRIEF

CLINICAL WORKING GROUP GOAL

The Clinical Working Group will prepare a course that will enable nurses to provide the appropriate level of FP/ORT services in Kwara clinics, health centres and hospitals.

Some Possible Assumptions

Nurses do not have any FP/ORT knowledge
Nurses need FP/ORT clinical skills
Nurses need to be able to integrate FP/ORT services in current and future health clinic operations.

Needs Assessment

Identify FP/ORT knowledge required to effectively deliver service.
Identify FP/ORT clinical skills required.

Goals and Objectives

After participants have taken part in a training using the curriculum you design what will they be able to do?
How do these capabilities relate to the overall project goals and objectives?

Training Plan or Design

What content will you need to select and what methods will you choose?
What materials particular to Kwara State will you have to develop?

Evaluation

What will you do to make sure the curriculum you develop is appropriate to the FP/ORT project goals? How will you find out?

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CURRICULUM WORKING
GROUPS

Curriculum Component	Working Group	Outcomes
CLINICAL PRACTICE	THOSE WITH EXPERIENCE AND MEDICAL KNOWLEDGE ABOUT FP/ORT	FP/ORT CURRICULUM FOR CLINICAL PRACTICE
CHE PRACTICE	THOSE WITH HEALTH EDUCATION EXPERIENCE AND COMMUNITY HEALTH KNOWLEDGE & EXPERIENCE	FP/ORT CURRICULUM FOR CHE PRACTICE
PLAN FOR TRAINING OF SENIOR HEALTH SISTERS IN FP/ORT SERVICE DELIVERY ACTIVITIES # 4,7 & 8	(Members of above groups)	FP/ORT TRAINING PLAN FOR A FOUR WEEK WORKSHOP FOR SERVICE DELIVERY PERSONAL

F P / O R T
CURRICULUM DEVELOPMENT WORKSHOP

DAILY AGENDA

- 8.00 PLENARY SESSION
- Where are we?
 - Establish Working Plan for the day
- 9.00 GROUP SESSIONS
- Curriculum Writing Activities
 - needs assessments
 - goal and objective setting
 - selecting content and learning methods
 - preparing training plans
- II.00 L U N C H
- II.30
- Curriculum Writing Activities (continued)
 - producing original learning resource material
 - testing curriculum
- I.00 PROGRESS REPORTS AND FEEDBACK SESSIONS
- 2.00 REFLECTION
- 2.30 ADJOURN

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AGENDA May 6 - May 10
 KWARA STATE FP/ORT CURRICULUM DEVELOPMENT WORKSHOP

MONDAY DAY 1 May 6	TUESDAY DAY 2 May 7	WEDNESDAY DAY 3 May 8	THURSDAY DAY 4 May 9	FRIDAY Day 5 May 10
<p>8:00 Plenary</p> <p>Opening & introductions</p> <p>Goals & Objectives</p> <p>Expectations</p> <p>Workshop Plan</p> <p>11:30 LUNCH</p>	<p>3:00 Where Are We?</p> <p>8:30 FP/ORT Medical Review & Update</p> <p>History of F.P.</p> <p>B.C. Methods</p> <p>Use</p> <p>Contraindications</p> <p>Complications</p> <p>11:30 LUNCH</p>	<p>8:00 Where Are We?</p> <p>8:30 FP/ORT Medical Review & Update</p> <p>B.C. Methods (continued)</p> <p>11:30 LUNCH</p>	<p>8:00 Where Are We?</p> <p>8:30 FP/ORT Medical Review & Update</p> <p>Anatomy & Physiology</p> <p>Pelvic Exams</p> <p>11:30 LUNCH</p>	<p>8:00 Where Are We?</p> <p>8:30 Daily Working Plan</p> <p>9:30 Site Visits</p> <p>Observe Service deliver</p>
<p>12:00 Resume</p> <p>TOT/CHE Review</p> <ul style="list-style-type: none"> - Adult Ed Principles - Group Dynamics - Scope of Training - 5 Steps of Training - Training Plans - Community Issues - CHE <p>2:00 Reflection</p> <p>2:30 Adjourn</p>	<p>12:00 History and Physical Management</p> <p>2:00 Reflection</p> <p>2:30 Adjourn</p>	<p>12:00 S T D</p> <p>Infertility</p> <p>Counselling</p> <p>Kwara Update</p> <p>2:00 Reflection</p> <p>2:30 Adjourn</p>	<p>12:00 O R T</p> <p>2:00 Reflection</p> <p>2:30 Adjourn</p>	<p style="text-align: center;">↓</p> <p>1:00 Reflection</p> <p>1:30 Adjourn</p> <p>(CDW Wk 1)</p>

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AGENDA May 13 - May 17
 KWARA STATE FP/ORT CURRICULUM DEVELOPMENT WORKSHOP

MONDAY May 13 DAY 6	TUESDAY May 14 DAY 7	WEDNESDAY May 15 DAY 8	THURSDAY May 16 DAY 9	FRIDAY May 17 DAY 10
<p>8:00 Where Are We?</p> <p>8:30 Daily Work Plan</p> <p>9:00 Group Work Two Groups - Clinical Work Group - CHE Work Group Needs Identification FP/ORT - Knowledge - Attitudes - Skills</p> <p>11:30 LUNCH</p>	<p>8:00 Where Are We?</p> <p>8:30 Daily Work Plan</p> <p>9:00 Group Goals & Objectives Setting/Writing</p> <p>11:30 LUNCH</p>	<p>8:00 Where Are We?</p> <p>8:30 Daily Work Plan</p> <p>9:00 Group Work Curriculum Content and Methods Selection</p> <p>11:30 LUNCH</p>	<p>8:00 Where Are We?</p> <p>8:30 Daily Work Plan</p> <p>9:00 Group Work Curriculum Content and Methods Selection</p> <p>11:30 LUNCH</p>	<p>8:00 Where Are We?</p> <p>8:30 Daily Work Plan</p> <p>9:00 Group Work Prepare Training Plans, Produce Learning Resource Material</p> <p>10:00 Break 10:15 Resume</p>
<p>12:00 Resume</p> <p>1:00 Plenary</p> <p>1:00 Progress Reports & Feedback</p> <p>2:00 Reflection</p> <p>2:30 Adjourn</p>	<p>12:00 Resume</p> <p>Plenary</p> <p>1:00 Progress Reports & Feedback</p> <p>2:00 Reflection</p> <p>2:30 Adjourn</p>	<p>12:00 Resume</p> <p>Plenary</p> <p>1:00 Progress Reports & Feedback</p> <p>2:00 Reflection</p> <p>2:30 Adjourn</p>	<p>12:00 Resume</p> <p>Plenary</p> <p>1:00 Progress Reports & Feedback</p> <p>2:00 Reflection</p> <p>2:30 Adjourn</p>	<p>Plenary</p> <p>12:00 Progress Reports & Feedback</p> <p>1:00 Reflection</p> <p>1:30 Adjourn (CDW Wk 2)</p>

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AGENDA May 20 - May 24
 KWARA STATE FP/ORT CURRICULUM DEVELOPMENT WORKSHOP

MONDAY May 20 DAY 11	TUESDAY May 21 DAY 12	WEDNESDAY May 22 DAY 13	THURSDAY May 23 DAY 14	FRIDAY May 24 DAY 15
8:00 Where Are We? 8:30 Daily Work Plan 9:00 Group Work Prepare Training Plans Produce Resource Materials 11:30 LUNCH	8:00 Where Are We? 8:30 Daily Work Plan 9:00 Group Work Prepare Training Plans Produce Resource Materials 11:30 LUNCH	8:00 Where Are We? 8:30 Daily Work Plan 9:00 Group Work Prepare Training Plans Produce Resource Materials 11:30 LUNCH	8:00 Where Are We? 8:30 Daily Work Plan 9:00 Group Work Complete Training Plans Produce Resource Materials 11:30 LUNCH	8:00 Where Are We? 8:30 Daily Work Plan 9:00 Plenary Workshop Review and Evaluation 10:00 Break 10:25 Resume Curriculum Implementa tion Strategy
12:00 Resume Plenary 1:00 Progress Reports & Feedback 2:00 Reflection 2:30 Adjourn	12:00 Resume 1:00 Reflection and Closing 1:30 End (CDW Wk 3)			

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May 7, 1985

APPENDIX D

FP/ORT

CURRICULUM DEVELOPMENT WORKSHOP

KWARA/Nigeria 5/85

MEDICAL REVIEW: FAMILY PLANNING AND ORAL REHYDRATION THERAPY

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MEDICAL REVIEW: FAMILY PLANNING AND ORAL REHYDRATION THERAPY

I. A History of Family Planning

II. Anatomy and Physiology of the Reproductive System

A. Male anatomy and physiology

1. penis
2. prostate
3. seminal vesicles
4. Cowper's glands
5. vas deferens
6. epididymus
7. testes
8. scrotum

B. Female anatomy and physiology

1. ovaries
2. fallopian tubes
3. uterus
4. vagina
5. Bartholins and Skenes glands
6. breasts

C. The menstrual cycle.

1. menstrual phase
2. proliferative phase (follicular phase)
3. secretory phase (luteal phase)

III. Traditional Methods of Family Planning

A. Breastfeeding

B. Abstinence

C. Polygamy

D. Herbs

E. Withdrawal

IV. Oral Contraceptive Pills (OCPs)

A. Combined estrogen-progesterone pills

1. Advantages/Disadvantages
2. Indications
3. ABSOLUTE contra-indications
4. Strong contra-indications
5. Relative contra-indications
6. Instructions for use
7. Complications
8. Follow-up

B. Progesterone-only pill

1. Advantages/Disadvantages
2. Indications
3. ABSOLUTE contra-indications
4. Strong contra-indications
5. Relative contra-indications
6. Instructions for use
7. Complications
8. Follow-up

V. Barrier Methods of Family Planning

A. Foam and Condoms

1. Advantages/disadvantages
2. Indications/contraindications
3. Instructions for use
4. Complications
5. Follow-up

B. Diaphragm

1. Advantages and disadvantages
2. Indications and contra-indications
3. Instructions for use
4. How to fit the diaphragm
5. Complications
6. Follow-up

C. Contraceptive Sponge

1. Advantages and disadvantages
2. Indications and contra-indications
3. Instructions for use
4. Complications

VI. Intrauterine Contraceptive Devices (IUCD)

A. Types

1. Inert
2. Metal
3. Hormonal

B. Advantages/Disadvantages

C. Indications

D. ABSOLUTE contra-indications

E. Relative contra-indications

F. How to Insert

G. Timing of Insert

H. Instructions to User

1. Prior to Insertion
2. After insertion

I. Complications

J. Follow-up

K. Removal

1. Indications
2. Procedure

VII. Natural Methods of Family Planning

A. Billings Method (Mucous Method)

1. Cervical mucous
2. Change in BBT
3. Advantages/Disadvantages

B. Rhythm (Calendar method)

VIII. Depo-Provera

A. Advantages/Disadvantages

B. Risks/Benefits

C. Complications

D. Follow-up

IX. Assessment of the Family Planning Client

A. Obtaining Patient history/physical examination

1. Atmosphere/physical setting
2. Content of Initial Visit
 - a. psycho-social history
 - b. family hx.
 - c. medical hx.
 - d. obstetrical/gynecological/menstrual/family planning hx.
 - e. nutrition hx.
 - f. other
3. Physical Exam
 - a. general appearance
 - b. thyroid
 - c. heart/lungs
 - d. breasts
 - e. abdomen
 - f. pelvic exam
 1. speculum exam
 2. bimanual exam
 3. gonorrhea culture
 4. Pap smear
 - g. vital signs
4. Lab tests
 - a. urinalysis
 - b. hematocrit
 - c. other
5. Record-keeping
6. Follow-up visits
 - a. content

X. Importance of Good Counselling for Choosing/Using Family Planning Method

XI. Delivery and Management of Family Planning Services

XII. Oral Rehydration Therapy Update

STERILIZATION/INFERTILITY/SEXUALLY TRANSMITTED DISEASESI. SterilizationA. Male: Vasectomy

1. Risks/Benefits
2. Procedure
3. Counselling
4. Follow-up

B. Female: Bilateral tubal ligation

1. Risks/Benefits
2. Procedure
3. Counselling
4. Follow-up

II. InfertilityA. DefinitionB. Causes

1. Male
2. Female
3. Couples

C. CounsellingD. Clinical InvestigationE. Follow-upIII. Sexually Transmitted DiseasesA. Pelvic Inflammatory Disease (PID)

1. Symptoms
2. Diagnosis
3. Treatment
4. Patient instruction
5. Follow-up
6. Who may be at risk?

B. Gonorrhoea

1. Symptoms
2. Diagnosis
3. Treatment
4. Patient Instruction
5. Follow-up
6. Who may be at risk?

C. Chancroid

1. Symptoms
2. Diagnosis
3. Treatment
4. Patient instruction
5. Follow-up
6. Who may be at risk?

D. Chlamydia

1. Symptoms
2. Diagnosis
3. Treatment
4. Patient instruction
5. Who may be at risk?

- E. Syphilis
 - 1. Symptoms
 - 2. Diagnosis
 - 3. Treatment
 - 4. Patient instruction
 - 5. Follow-up
 - 6. Who may be at risk?
- F. Trichomonas
 - 1. Symptoms
 - 2. Diagnosis
 - 3. Treatment
 - 4. Patient instruction
 - 5. Follow-up
 - 6. Who may be at risk?
- G. Gardnerella
 - 1. Symptoms
 - 2. Diagnosis
 - 3. Treatment
 - 4. Patient instruction
 - 5. Follow-up
 - 6. Who may be at risk?
- H. Monilia (?STD)
 - 1. Symptoms
 - 2. Diagnosis
 - 3. Treatment
 - 4. Patient instruction
 - 5. Follow-up
 - 6. Who may be at risk?
- I. Herpes Genitalis
 - 1. Symptoms
 - a. primary
 - b. secondary
 - 2. Diagnosis
 - 3. Treatment
 - 4. Patient instruction
 - 5. Follow-up
 - 6. Who may be at risk?
- J. Condylomata Accuminata
 - 1. Symptoms
 - 2. Diagnosis
 - 3. Treatment
 - 4. Patient instruction
 - 5. Follow-up
 - 6. Who may be at risk?
- K. Pubic Lice
 - 1. Symptoms
 - 2. Diagnosis/Treatment
- L. Cystitis
 - 1. Symptoms
 - 2. Diagnosis/Treatment
 - 3. Follow-up
 - 4. Who may be at risk?