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# Intrah

## Trip Report

#0-174

**Travelers:** Ms. Teresa Mirabito, Program Officer  
Mrs. Grace Mtawali, E/SA Training Officer

**Country Visited:** NIGERIA

**Date of Trip:** October 13 - November 3, 1985

**Purpose:** To implement 2 Five-Day Family Planning and Oral Rehydration Therapy Update workshops in Anambra State for a total of 60 nurse/midwives.

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\* On file with INTRAH Program Office  
\*\* On file with INTRAH Evaluation Service

## EXECUTIVE SUMMARY

Two Five-Day Family Planning/Oral Rehydration Therapy (FP/ORT) Update workshops were implemented in Enugu, Anambra State, Nigeria, October 21-25, 1985 and October 28-November 1, 1985. A total of 59 nurse/midwives and public health nurses participated in the two workshops. The workshops were conducted by INTRAH staff members, Mrs. Grace Mtawali, E/SA Training Officer, INTRAH/Nairobi, and Ms. Teresa Mirabito, Program Officer, INTRAH/Chapel Hill and two co-trainers from Anambra State - Mrs. Imelda Orji, Ministry of Health Service; Mrs. Rose Njoku, University of Nigeria Teaching Hospital (UNTH). Dr. G.O. Ude, Project Coordinator, coordinated the activities. Mrs. Veronica O. Tabansi, Senior Matron, UNTH, assisted with logistics.

Objectives of the workshops were achieved. Methods of evaluation included administration of pre- and post-tests, role play, demonstrations by trainees, administration of participant reaction forms and discussions with participants.

Participants were most enthusiastic and eager to acquire new knowledge in family planning and oral rehydration therapy. A vast majority expressed the need for the workshops to be of longer duration and to include development of clinical skills for IUD insertion. The present curriculum is extensive for five days of training and, for most of the participants, it was new material rather than a review. The course should be extended to allow expansion of necessary topics and processing of content covered in the workshops.

It is recommended that follow-up include direct on-the-job supervision that will enable participants to reinforce knowledge and develop clinical skills in FP/ORT service delivery.

Co-trainers were eager to participate in the training activities. Their limited knowledge of contraceptive

technology content and lack of skill in adult teaching methodology altered the process of the workshop. It is recommended that prior to future workshops, selected co-trainers receive training in clinical FP skills delivery and training in adult learning methodology.

Prior to continuation of the Five-Day FP/ORT Update workshops it is recommended that a percentage of trainees be followed up to determine the impact of the training on service delivery and to identify other issues which may affect service delivery.

SCHEDULE DURING VISIT

**Sunday**  
**October 13**                   Arrival in Lagos from Nairobi at  
6:00 PM.

**Monday**  
**October 14**                   U.S. Embassy closed due to Columbus Day  
holiday. Meetings with Assistant Chief  
Nursing Officer, Federal Ministry of  
Health, Mrs. Tunde Kuteyi; UNICEF Oral  
Rehydration Promotion Officer, Dr. Alan  
Brody; and Coopers and Lybrand represen-  
tatives Mr. Fadojutimi and Mr. N.O.  
Kukoyi.

**Tuesday**  
**October 15**                   Meeting at U.S. Embassy with Ms. Paula  
Pedro, secretary to Ms. Keys MacManus  
(Ms. MacManus, AID Affairs Officer and  
Mr. Larry Eicher, Health Development  
Officer were now in Lagos).

Mrs. Grace Ogbonna, SRN, SCM, PHN,  
Health Sister, Ministry of Health,  
Owerri, Imo State, was met at U.S.  
Embassy.

**Wednesday**  
**October 16**                   Visited Anambra State Liaison Office.

Departed for Enugu, Anambra State by  
air.

**Thursday**  
**October 17**                   Worksite: Paramount Hotel.

Meeting with Dr. G. O. Ude, Project  
Coordinator and Mrs. Imelda Orji, co-  
trainer.

Courtesy visit to Ministry of Health:  
met with Permanent Secretary of Health,  
Mr. G.A. Mgwuezedede; Chief Medical  
Officer, Dr. P. I. Okolo; Chief Health  
Officer, Dr. C.N. Obionu; and Hospital  
Administrator, Dr. Okpala.

-CONTINUED-

Friday-Sunday  
October 18-20

Worksite: Paramount Hotel.

Meeting with Dr. G.O. Ude; Mrs. I. Orji; Mrs. Veronica Takansi, Senior Matron, University of Nigeria Teaching Hospital (UNTH); Mrs. Ekwegh, State Chairman, Planned Parenthood Federation of Nigeria (PPFN); Mr. F. Mba, Secretary, PPFN; and Mr. Okpala, Demographer/Statistician, MOH.

Saturday-Sunday  
October 19-20

Meeting with Dr. G.O. Ude, Mrs. I. Orji and Mrs. V. Tabansi.

Monday-Friday  
October 21-25

Worksite: Paramount Hotel.

Implementation of first Five-Day FP/ORT Update Workshop.

Tuesday  
October 22

Meeting with Mrs. B. Muoneme, Chief Nursing Officer, MOH.

Saturday-Sunday  
October 26-27

Worksite: Paramount Hotel.

Preparation for second workshop.

Monday-Friday  
October 28-  
November 1

Worksite: Paramount Hotel.

Opening of second Five-Day FP/ORT Update workshop.

Saturday  
November 2

Departed Enugu for Lagos by air.

Arrived Eko Lodge 1 PM.

Wrote trip report.

**Sunday**  
**November 3**

Worksite: Eko Lodge.

Collaborated on trip report.

Met unofficially with Dr. Moyo Freymann of the School of Public Health, University of North Carolina and Mr. David Radel and Mr. Ed Brown of Population, Health and Nutrition Department, World Bank.

**Monday**  
**November 4**

Ms. Mtawali departed for Kenya.  
Ms. Mirabito departed for USA-11:45 PM.

**Tuesday**  
**November 5**

Mrs. Mtawali debriefed at Regional Office/Nairobi.

**Friday**  
**November 8**

Ms. Mirabito debriefed at INTRAH/Chapel Hill.

## I. PURPOSES OF THE TRIP

The primary purpose of the trip was to implement two Five-Day Family Planning and Oral Rehydration Therapy (FP/ORT) Update workshops in Anambra State, Nigeria for 30 nurse/midwives and public health nurses per workshop (60 total). A second purpose was to orient the Nigerian co-trainers to adult education participatory training methodology applied to technical family planning.

## II. ACCOMPLISHMENTS

### A. Lagos

- In a meeting with Dr. Alan Brody, Oral Rehydration Promotion Officer at UNICEF, the INTRAH team was briefed regarding UNICEF's standards for preparation of oral rehydration solution (ORS) and instructions for consumer use of oral rehydration therapy (ORT). These standards were incorporated into the curriculum design for ORT. The team was informed of UNICEF's strategy for implementing ORT programs throughout Nigeria, including Anambra State. Plastic spoons and ORT posters were given to the team and were subsequently distributed to the workshops' 59 participants. Dr. Brody explained that UNICEF ORT manuals are currently being revised and will be distributed following a UNICEF training program which is planned for each state.
- A meeting was held at Coopers and Lybrand with Mr. M.O. Kukoyi, Senior Manager and Mr. A.O. Fadojutimi, Partner. It was learned during the meeting that the venue for the workshops was the Paramount Hotel, not the Dannic Hotel as the team had been informed in Chapel Hill. A Coopers and Lybrand representative had visited Enugu to provide advance funds for purchase of materials for the workshop. Arrangements were made for a Coopers and Lybrand representative to come to Enugu at mutually convenient times to carry out the financial arrangements.

- A visit was made to the U.S. Embassy to obtain the reference books and materials that were to be distributed to workshop participants. All of the materials which had been forwarded in advance by INTRAH were found in 21 boxes. The INTRAH team found it necessary to arrange for transport of the boxes to Enugu. In order to accomplish this, the team visited the Anambra State Liaison Office in Lagos. A radio message was sent to the Ministry of Health in Enugu. The MOH responded by sending a vehicle to collect the boxes which arrived in Anambra at the eleventh hour, in time for the first workshop.

#### B. Enugu, Anambra State

- INTRAH trainers, one co-trainer and the project coordinator met for four days prior to the first workshop to review and modify the curriculum and to develop a schedule of activities for the workshops.
- During the workshops, reference books were distributed to all 59 participants. Throughout the workshops participants referred to the materials, particularly Contraceptive Technology and Family Planning Methods and Practices: Africa (see Appendix E for complete list) and were strongly encouraged to use the books as resources as they implemented FP/ORT services.
- The training process utilized in the workshop, including teaching/learning methods and techniques, was a new experience for the participants. By the end of each workshop the participants accepted the process and acknowledged that the methods used were very valuable and facilitated their achievement of the workshop objectives. Participants voiced the belief that the methods also created a relaxed atmosphere which was conducive to learning.
- INTRAH's presence created an awareness of the organization, its purpose, strategies and programs. Participants were very interested in (and in several cases requested) further training in family planning clinical skills and management of family planning services through INTRAH.
- The INTRAH trainers introduced two co-trainers, one from the state MOH and the second from University of Nigeria Teaching Hospital, to

participatory methods of training. The co-trainer from the state MOH, a tutor in midwifery, was highly motivated to learn the training process and operations involved in conducting a workshop.

- The project coordinator, appointed by the State MOH, assumed full responsibility for logistics including notification of participants. He concluded that this was a valuable learning experience for him. His perseverance and hard work contributed to the accomplishment of educational objectives.

### III. BACKGROUND

The Five-Day FP/ORT Update workshops were planned in response to the expressed need of Ms. Keys MacManus, AID Affairs Officer and with concurrence of State Ministry of Health, Health Management Board officials. In May /June 1985 an INTRAH team visited five states in Nigeria which had been targeted to implement workshops in order to further assess the need for these activities and the timeliness relative to each state. During the visit a draft curriculum was developed for the five-day FP/ORT workshops.

A total of ten FP/ORT workshops were planned for CY 1985. To date two workshops have been implemented in each of four states: Anambra, Renue, Ondo and Plateau. The remaining two workshops in Imo State will be implemented in January 1986.

### IV. DESCRIPTION OF ACTIVITIES

Two Five-Day FP/ORT Update workshops were implemented in Enugu, Anambra State, Nigeria from October 21 to November 1, 1985. The venue was the government-owned Paramount Hotel also known as the Anambra State Hotel, Ltd.

The training team was comprised of two INTRAH staff members, Ms. Teresa Mirabito, Program Officer for Anglophone Africa and Mrs. Grace Mtawali, Training Officer from INTRAH's E/SA Office in Nairobi; Dr. G.O. Ude, an obstetrician gynecologist, coordinator of the FP/ORT workshops in Anambra State; Mrs. Imelda Orji, a midwifery tutor from the state MOH service; and Mrs. Rose Njoku, Senior Nurse from the University of Nigeria Teaching Hospital (UNTH). Mrs. Veronica Tabansi, Senior Matron from UNTH provided guidance and logistical support. Additional co-trainers were engaged to conduct selected sessions (see Appendix B for a complete list of co-trainers).

A total of 59 participants attended the workshops - 28 the first workshop and 31 the second workshop. One participant, scheduled to attend the first workshop, received her notice to attend at a late date and, therefore, attended the second workshop.

### Process and Content of Activities

#### A. Planning

Detailed planning took place for four days prior to the opening of the first workshop with the project coordinator, one co-trainer and the INTRAH team.

The second co-trainer who had attended the Ondo State workshop in preparation of working with the Anambra State team was on holiday and joined the team the first day of the workshop. The team reviewed required logistics and operations of the workshops. The Five-Day FP/ORT Update draft workshop curriculum was reviewed in detail and appropriate modifications for Anambra State were made. A schedule of activities was developed. Roles and responsibilities were discussed and

assigned. Resource persons who participated as co-trainers for selected sessions participated in pre-planning meetings. Objectives were reviewed and training methods discussed were discussed with all co-trainers.

A visit was made to the State Ministry of Health. There the INTRAH team was introduced to the Permanent Secretary, Chief Medical Officer, Chief Public Health Officer and Hospital Administrator. The Permanent Secretary had been in office for less than one week and therefore was totally unfamiliar with the project. The other officials present had assumed office on July 1, 1985, after the May 1985 visit by the INTRAH planning team. The INTRAH team necessarily briefed Ministry officials on the background and objectives of the workshop. Dr. Okolo, CMO, briefed the visitors on the status of family planning and oral rehydration therapy programs in Anambra State. The state's goal is to establish an ORT clinic similar to the ORT clinic at UNTH which operates 24 hours per day, seven days per week. The CMO stated that empirical evidence demonstrates a sharp reduction in childhood morbidity and mortality due to dehydration associated with diarrheal disease. The improvement is believed to be the result of wide acceptance and use of ORS. The MOH officials voiced their support for family planning for all ages regardless of marital status. At the same time it was recognized that family planning is a sensitive issue in Anambra State. Ministry officials decided not to publicize the opening of the workshops.

## B. Implementation

The first workshop commenced October 21 and ended October 25 and the second workshop commenced October 28 and ended November 1.

The goal of the workshop was to update knowledge and skills of public health nurses/nurse midwives to increase acceptance and use of family planning and oral rehydration therapy.

### Day One

On Day One of each workshop participants registered and completed an INTRAH Biodata Form. Reference books and writing materials were distributed to each participant (see Appendix E for complete list). Introductions of trainers and trainees followed.

The first workshop was formally opened by Dr. P.I. Okolo, Chief Medical Officer, who represented the State Commissioner of Health's Office. Guests included Mr. G.A. Ugwuegede, Permanent Secretary of Health; Mr. C.N. Obionu, Chief Public Health Officer; and Dr. Okpala, Hospital Administrator.

Following the opening ceremony the entry-level knowledge of FP/ORT of participants was assessed through the administration of a pre-test (see Appendix G for pre- and post-test scores). Trainers and trainees shared expectations of the workshop. The trainers expectations were within the realm of the content of the curriculum with one exception - several trainers anticipated that they would learn to insert IUDs during the workshop.

An overview of the workshop included an introduction to adult teaching/learning methods which were unfamiliar to most of the participants.

A two-hour session on demography and statistics for Nigeria and Anambra State formed a basis for the family planning curriculum. Following a lecture/discussion by Dr. Okpala, an MOH statistician and demographer, participants worked in groups to identify the impact of rapid population growth in several sectors: agriculture, education, health, urban and housing. Through this method participants were encouraged

to consider the impact of rapid population growth and to summarize the government's ability to respond to the needs of its people. This exercise clearly illustrated a need for family planning and also illustrated constraints faced by the government in providing services. Participants were encouraged not to depend on the government for all resources but rather to look toward the community as a source of support for appropriate activities. This concept was repeated throughout the workshop and was reinforced by the CNO in the panel discussion on the final day.

The first day ended with a discussion on the impact of FP/ORT on the health of mothers, children and the family. The method was group work in which participants shared wishes which they would like to see fulfilled in ten years' time for themselves, their children, clients and community, and examined how FP/ORT could influence these wishes. Each group presented its work in a plenary session.

## Day 2

Presentations were continued from Day One. Child survival strategies were identified and discussed. Current health programs designed to include child survival strategies in Anambra State were also identified.

A pediatrician from Park Lane Hospital introduced the oral rehydration therapy module. He presented a thorough review of the etiologies of diarrhea, physiologic changes which occur in infants and children with diarrhea and dehydration, and client management. A demonstration by the co-trainer from UNTH on the preparation of oral rehydration solution followed the lecture/discussion.

A visit to the University of Nigeria Teaching Hospital ORT clinic reinforced the learning that had occurred in the classroom. Participants' reactions were very positive. Several expressed surprise that such a clinic could exist as a separate entity and there was considerable discussion as to how the trainees could initiate ORT services in their communities.

Role plays were used to assess each participant's ability to accurately counsel a mother or a child-

care provider regarding the use of ORS. Each trainee conducted a brief counseling session which included demonstration of the mixing and administration of ORS to a 'mother' (a second trainee). The 'mother', in turn, returned the demonstration in order to ensure that she understood the procedure. Each participant mixed the ORS accurately and gave appropriate instructions regarding use of ORT. Plastic spoons, standardized for use in mixing ORS and posters supplied by UNICEF were distributed to trainees for use in their clinics.

Anatomy and physiology of the male and female reproductive systems were reviewed through group activity. Each group drew the male or female internal and external reproductive organs. Presentations in a plenary session included identification of the organs and a review of the physiology of each. The lead trainer made appropriate clarifications.

The physiology of the menstrual cycle was portrayed in a drama by the participants and directed by a co-trainer. Trainees who were observers requested repeat performances in order to clarify their understanding of the menstrual physiology. Presentation of the physiology of the menstrual cycle via dramatization was a unique experience for the participants.

Using the brainstorming technique trainees drew from their knowledge and experience to identify major contraceptive methods. An overview of the methods prepared trainees for a more comprehensive discussion of oral and injectable methods which followed the next day.

### Day 3

Participants met in small groups the previous evening to discuss local cultural and physical barriers to acceptance of FP/ORT. The outcome of their discussions was presented in a plenary session. A discussion followed on how to overcome these barriers.

Hormonal contraceptives, oral combination and mini pills, and injectables, were thoroughly reviewed. Content of this session included the various types, mechanism of action, theoretical and user

effectiveness rate, side effects, client instruction and management of new acceptors, and follow-up. This was new information for a majority of the participants. Physical assessment appropriate for family planning clients was demonstrated using a model. Pelvic examination was illustrated in a film which included IUD insertion.

Through role play each participant was able to demonstrate counseling skills and impart newly-acquired knowledge regarding the use of various contraceptive methods to an FP client. Trainers clarified misconceptions when necessary.

#### Day 4

Sexually transmitted diseases (STD) were reviewed in small group discussions. An outline was designed in order to facilitate discussion and to ensure that the main points of STD relative to FP were emphasized. Each group discussed at least one of the following STDs in a plenary session: gonorrhoea, syphilis, chlamydia, trichomonas, monilia and pelvic inflammatory disease. Main points included etiology, transmission, signs and symptoms, management, complications and implications in use of various contraceptive methods. For many participants this information was new. Several misconceptions of the trainees were revealed and then clarified by the facilitators.

Infertility was reviewed by the coordinator, Dr. Ude, according to types, etiology and management.

Through a role play situation participants were able to demonstrate their skills in counseling a client with an STD and infertility managing psycho-social aspects associated a given situation.

In the afternoon small groups convened for the purpose of developing strategies for integrating FP/ORT into current practice, disseminating information on FP/ORT to clients and to the community and identifying solutions to service delivery problems in their local government area (LGA). Strategies were presented in a plenary session.

Participants were provided an opportunity to visit a family planning clinic and observe an education/information session in progress. The family planning clinic was sponsored by the Planned Parenthood Federation of Nigeria (PPFN) and provided service on Thursday evenings only.

#### Day 5

An overview of the record-keeping system was conducted by a co-trainer from PPFN. Samples of records from PPFN were distributed and discussed. Participants were given the opportunity to complete sample records for new acceptors and continuing clients on a daily and a monthly basis. This session was not offered to the second group as the PPFN co-trainer was unable to attend due to very last minute logistical problems.

A post-assessment test was administered to each trainee using the same pre-test that was administered on Day One. Results of pre- and post-tests are detailed in Appendix G. the average gain in the first workshop was 8 points and 10 points in the second workshop.

Following the post-test a panel assembled, and was comprised of officials from the state MOH who are responsible for policy, planning and implementation of public health/primary health care/family planning services and a representative from PPFN. This activity enabled panelists to learn how participants planned to implement FP/ORT services and what their expectations were regarding government support. In turn, participants learned the realities of their expectations of the government. Participants were strongly encouraged to adapt the concept of primary health care by turning to the community as a source of support and as a resource and to involve the community in FP/ORT activities. Mrs. Muoneme, CNO, shared her experience of organizing a community to obtain supplies for a health post during her career as a public health nurse. This illustration reinforced the need for the participants to look to the community vs. the government for support and also increased the awareness of the participants that results can be achieved.

Mrs. Muoneme addressed another important issue that had been widely debated throughout the workshop. This was the issue of distributing contraceptives to unmarried females, particularly during adolescence. Several participants were opposed to providing adolescents with information and/or family planning services. Mrs. Muoneme discussed the problem of teenage pregnancy. More importantly she urged participants to examine their role of nurse midwives/public health nurses. As service providers their responsibility was to meet the needs of their clients rather than allowing moral judgments of a client's behavior to influence their provision of service.

INTRAH Participant Reaction Forms were completed by a total of fifty-seven participants. Fifty-three stated that the workshop objectives were very clear or mostly clear; four claimed the objectives were somewhat clear. Workshop objectives seemed to be achieved entirely by seventeen trainees and mostly by thirty-seven.

Thirty-nine participants felt all materials used in the workshop were useful and sixteen perceived most of the materials as useful.

While nearly one hundred percent of the participants would recommend the workshop to others, trainees indicated that additional time was needed for the workshop and to practice skills and techniques. Areas for further training were identified:

- counseling and client education;
- provision of clinical methods (IUD's, pills, diaphragms, injections);
- in-service training in family planning;
- management and supervision of family planning services.

In summary adult teaching methods utilized during the workshop were unfamiliar to the trainees. By the end of each week, participants acknowledged the utility of such methods and in some cases surprise that group work is a productive means of learning.

Results of the post-test illustrated that all of the participants increased their knowledge of contraceptive technology including client management and counselling; STD and infertility and ORT. Development of skills in client management was achieved through role play by each participant.

For a great majority of the trainees the knowledge imparted throughout the workshop was new and not an update as was anticipated by the trainers.

The workshops definitely served to sensitize the participants to the need for family planning and ORT information and services and provided them with basic knowledge and skills required to initiate services.

Evaluation methods used included the pre- and post-assessment; grab bag questions; daily verbal feedback; dialogue between trainers and trainees; and Participant Reaction Forms.

## V. FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

### A. Trainers

#### 1. Finding

The identified trainers have potential for development in performance-oriented clinical FP/ORT and training methodology.

#### Conclusion

People with potential for particular skills learn more easily than when they have no such potential.

Recommendation

Ministry of Health and appropriate NGOs should pursue arrangements to train personnel in clinical family planning skills and participatory training methodology.

2. Finding

Of the eleven potential Anambra State trainers listed in INTRAH Report -0-59, five attended these workshops as participants and/or resource persons.

Conclusion

A large number of identified trainers permits the selection of a core training team who can work together effectively in small groups.

Recommendation

Potential trainers with previous family planning training should attend a contraceptive technology update workshop which has training methodology and curriculum development incorporated into it.

Depending on funds and opportunities available, potential trainers without previous clinical family planning skills training should attend a clinical FP skills course (followed by a training methodology course) offered by a regional, inter-regional or U.S.-based training organization.

B. Workshop: Content, Methods and Resources1. Finding

Although workshop objectives were achieved and met most of the participants' expectations, processing of the group work and discussions was hindered by the limited timeframe of the workshop.

More than half of the participants expressed the need for real life clinical sessions, and inclusion of IUD insertion in the training program.

### Conclusion

A workshop aimed at updating knowledge and developing clinical FP skills should consist of at least two weeks' didactic and simulated training, and be backed by a daily family planning clinical practicum. Each trainee should attain a specified number of clinical procedures. Time should also be allotted during clinical skills delivery workshop for development of guidelines and protocols for clinical practice.

### Recommendation

Future workshops for developing clinical FP skills should consist of a minimum of two weeks' didactic and simulated training, and development of guidelines for practice, followed by clinical practice which will ensure achievement of specific clinical procedures. The duration of the clinical preceptorship will depend on availability of daily FP clinics, and size of the trainee group and number of clients seeking services.

## 2. Finding

Participants appreciated the training materials and books. However, they expressed a need to have extra copies for their institutions' "libraries."

### Conclusion

Libraries have very few family planning books or pamphlets.

### Recommendation

INTRAH or AID and other organizations participating in promoting FP/ORT in Nigeria should make arrangements to send relevant books and pamphlets on family planning to training institutions or centres.

## 3. Finding

Giving out a minimum number of contraceptives, clinic cards and samples of clinic statistics forms for a family planning service was a strong motivation for

establishment or strengthening of existing services.

#### Conclusion

The gesture of giving out the supplies was appreciated. The few supplies provided could be used up within one to two months of training.

#### Recommendation

The MOH, with AID backing, should ensure a constant supply of contraceptives and other supplies.

### 4. Finding

The clinic cards issued to participants were very large, made of soft paper and had no logos identifying the organization which developed/issued them. The clinic statistics form given to participants was the one used by the PPFN.

#### Conclusion

There were no standardized family planning clinic cards or clinic statistics forms.

#### Recommendation

The MOH and relevant NGO representatives with family planning clinical program experience should meet to design a smaller standardized clinic card and clinic statistics form with a guide for using them.

A decision on how often and to whom family planning statistics should be sent is also required.

## C. Logistics

### 1. Finding

Despite many stumbling blocks, workshop support logistics were successful. The MOH project coordinator was supported by the UNTH coordinator when necessary.

### Conclusion/Recommendation

An MOH project coordinator should be supported by an administrative counterpart to ensure a smoothly-run workshop and enable the project coordinator to participate in the training process development.

#### D. Follow-up

##### 1. Finding

The MOH developed sound plans for following up the five-day FP/ORT workshops:

- Further training of identified nurse/midwives and public health nurses in clinical family planning through sponsorships offered by JHPIEGO and the University of Nigeria Teaching Hospital, and use of the Ibadan Family Planning Training Program.
- Establishment of an FP training program for Anambra and other eastern Nigerian states.
- Continuous supply of contraceptives and equipment. The latter would require a baseline inventory.
- Support of those interested individuals who wish to further develop their family planning skills. Participants may choose to be assigned to work with a skilled family planning service provider for a defined period of time in order to develop skills on the job.

##### Conclusion

The MOH has useful plans for improving family planning but the plans are still in the making. It was not clear how all the newly-trained FP/ORT personnel will be followed up.

##### Recommendations

The MOH should assign selected zonal senior public health nurses with family planning training to follow up the participants of the

Five-Day FP/ORT workshops. These zonal staff should report regularly to the MOH FP project coordinator about the following:

- a. Number/percentage of the 59 participants who have established or strengthened FP/ORT services.
- b. Number of new FP acceptors and continuing acceptors by method of family planning.
- c. Identification of constraints to FP/ORT service delivery.
- d. Successful resolution of the constraints; e.g., through community involvement.
- e. Status of supplies, inventory and maintenance.
- f. Any comments about the clinic record forms issued after the five-day FP/ORT workshops.
- g. Notification of the ex-trainees about what policy-level decisions have been made about the record system and other issues.

## 2. Finding

Participants identified a need to inform and educate policy makers and influential community leaders to the need for and importance of family planning in order to facilitate establishment of family planning services and enhance acceptance of family planning use by clients.

## Conclusion

In order for family planning services to be established by nurse midwives/public health nurses and accepted by the community, policy makers and influential community leaders must receive family planning education and information.

Recommendations

INTRAH should assess the feasibility of conducting a policy seminar for policy makers and community leaders in Anambra State or refer to an appropriate agency.

## APPENDIX A

### Persons Contacted

#### Lagos

Mrs. Tunde Kuteyi, Assistant Chief Nursing Officer, Federal Ministry of Health.

Dr. Alan Brody, UNICEF Oral Rehydration Promotion Officer.

Ms. Paula Pedro, Secretary to Ms. Keys MacManus, AID Affairs Officer, U.S. Embassy.

Mr. A.O. Fadojutimi, Partner, Coopers and Lybrand.

Mr. N. O. Kukoyi, Senior Manager, Coopers and Lybrand.

Mrs. Grace Ogbonna, State Family Health Programme Coordinator, MOH, Owerri, Imo State (at U.S. Embassy).

#### Enugu, Anambra State

Dr. G.O. Ude, Project Coordinator

Mr. G.A. Ugwuegede, Permanent Secretary, State Ministry of Health.

Dr. P.I. Okolo, Chief Medical Officer, State Ministry of Health.

Dr. C.N. Obionu, Chief Health Officer, State Ministry of Health.

Dr. Okpala, Hospital Administrator, Park Lane Hospital GRA.

Mr. P.E.G. Ekwegh, State Chairman of PPFN.

Mrs. B. Muoneme, Chief Nursing Officer, State Ministry of Health.

APPENDIX B

Trainers

Ms. Teresa Mirabito  
Program Officer  
INTRAH  
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at Chapel Hill  
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USA

Mrs. Grace Mtawali  
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Dr. G.O. Ude  
Project Coordinator  
Obstetrician/Gynaecologist  
Park Lane Hospital GRA  
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Mrs. Imelda N. Orji  
RN/NCM, Registered Midwife Tutor  
School of Midwifery, Awgu  
Awgu, Anambra State, NIGERIA

Mrs. Rose Njoku  
SRN/SOM, Senior Public Health Nurse  
University of Nigeria Teaching Hospital  
Health Visiting Department  
Enugu, Anambra State  
NIGERIA

Mr. S.O. Okpala  
Principal Statistics Officer  
State Ministry of Health  
Enugu, Anambra State  
NIGERIA

Dr. D.N. Onyia  
MB/BS/MRCP/DCH/DTCH  
Chief Consultant Paediatrician  
Park Lane Hospital GRA  
Enugu, Anambra State  
NIGERIA

Mr. Francis Mba  
Secretary  
Planned Parenthood Federation of Nigeria  
Enugu, Anambra State  
NIGERIA

APPENDIX C  
5 DAY FP/ORT WORKSHOP, ENUGU, ANAMBRA STATE NIGERIA  
PARTICIPANTS NAMES

October 21-25, 1985

S/NO.	NAMES	QUALIFICATION	DESIGNATION	FAMILY PLANNING		HOME ADDRESS	WORK ADDRESS
				TRAINING	TYPE OF EXPERIENCE		
1.	Caroline Nwanke	Nurse/Midwife, Public Health nurse, Community Health	Comm. Health Officer/Health Vistor	4 days 1 & N Training	3 years counselling	Community Primary School Agba Uwana, Ezeagu L.G.A.	Health Office, Onnaboyi Echeru Ikwo L.G.A.
2.	Ifeoma M. Onyia	Nurse Midwife Public Health nurse/Health Vistor	Health Vistor	-	9 years 2 months counselling	4 Ona Street, Uwani, Enugu.	Health Office Enugu L.G.A.
3.	Cecilia O. Okeye	Nurse Midwife Public Health Nurse	Assistant Chief Health Sister	-	3 years counselling	95 Nkisi Road, Housing Estate, Onitsha.	Health Office, Onitsha.
4.	Beatrice E. Ibekwe	Nurse Midwife Public Health Nurse/Health Vistor	Health Sister	-	20 yrs 9 months counselling	1 Dhamija Avenue, Trans-ekulu, Enugu	Nursing Division, State Hospital Management Board, Headquarters, Enugu
5.	Joy C. Okeke	N/Midwife Public Health Nurse	Health Vistor	-	-	St. Matthew Anglican Church, Nibo, Awka.	Health Office, Awka L.G.A.
6.	Beatrice C. Okeke	Nurse Midwife Public H.Nurse	Health Sister	-	-	Health Office, Uzo- Uwani, L.G.A, Umulekpa	Health Office, Uzo-Uwani LGA, Umulekpa.
7.	Grace E. Ntuh	N/Midwife, Public Health N. Nurse Adminis- trator	Health Sister	3 days during Public H. Training	-	St. Peter Claver's Church, Otolo Nnewi Anambra State.	Health Office, Nnewi.
8.	Dorothy C. Nwan	N/Midwife, Public Health Nurse	Health Vistor	-	36 months counselling	Okpo Village, Ekwulobia, Aguata L.G.A.	Health Office, Aguata L.G.A.

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S/NO.	NAMES	QUALIFICATION	DESIGNATION	FAMILY PLANNING		HOME ADDRESS	WORK ADDRESS
				TRAINING	TYPE OF EXPERIENCE		
9.	Christiana Obi	N/Midwife, Public Health Nurse, Comm. Health Officer	Senior Health Sister/Comm. H. Officer	6 weeks Clinic FP training	6 weeks coun- selling & ser- vice provision	36 Ibeka Street, Onitsha.	Health Office, Idemili L.G.A.
10.	Uchechukwu Nnaji	N/Midwife, Public Health Nurse	Health Visitor	5 days during P.Health Training	1 year 8 months NFP methods provision	No. 2 Obiagu Road, Enugu	Health Office, Awgu L.G.A.
11.	Anthony Achugan- onye	N/Midwife Public Health Nurse	Health Sister	-	6 years counselling	No. 138 Port Harcourt Rd. Fagge, Onitsha.	Health Office, Onitsha
12.	Veronica I. Okoye	N/Midwife, Public Health Nurse, Comm. H. Officer	Senior Health Sister	1 week NFP	3 years counselling & 1 year pro- viding N.F.P.	Unuokpu, Awka L.G.A.	Health Office, Abagana L.G.A.
13.	Agatha Nwakafor	N/Midwife, Public Health Nurse	Health Sister	-	5 years counselling	St. Joseph's Catholic Church, Otolo, Nnewi	Health Office, Nnewi
14.	Regina U. Okonkwo	N/Midwife, Public Health Nurse	Health Visitor	5 days during Public Health training	4 years providing N.F.P. methods	P.O. Box 72, Nsukka	Health Office, Igbo- Eti L.G.A.
15.	Cordelia Mamel	N/Midwife, Public Health Nurse	Community Health Officer	-	-	Aguobu Ezema, Ezeagu L. G. A.	Health Office, Ministry of Health, Enugu.

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S/NO.	NAMES	QUALIFICATION	DESIGNATION	FAMILY PLANNING		HOME ADDRESS	WORK ADDRESS
				TRAINING	TYPE OF EXPERIENCE		
16.	Veronica C. Nzeduba	N/Midwife, Public Health Nurse	Health Sister	-	5 years counsel- ling & providing non-clinical FP methods & NFP	St. Mary's Church Ukpo, Njikoka.	Health Office, Agbani
17.	Elizabeth Oramalu	N/Midwife, Public H. Nurse	Health Visitor	-	3 years counsel- ing	No. 21 Ama Street, Achala Layout, Enugu	Health Office, Udi
18.	Ann. N. Onyekweodiri	N/Midwife, Public H. Nurse	Health Visitor	5 days in Public H. Training	5 years counsel- ling	381 Marguerite Cart- wright Ave., Univer- sity of Nigeria Nsukka.	Health Office, Enugu- Ezike, Igbo-Ese LGA
19.	Udeaku T. Oguagha	N/Midwife, Public H. Nurse Comm. H. Officer	Principal Health Sister	5 days during Public H. Training	-	St. Vincent Catholic Church, Ilongodo Il. Iga, Ogidi Idemili L.G.A.	Health Office, Ikem, Isi-Uzo L. G. A.
20.	Peace Egbo	N/Midwife, Public Health Nurse	Health Sister	6 weeks	1½ years Clini- cal FP& I & E	Basic Health Centre Anechi, Awkunanaw, Enugu.	Health Office, Enugu.
21.	Ijeoma Ogbunude	N/Midwife, Public H. Nurse	Health Sister	-	6 years counseling	No. 3 Park Rd. G.R.A., Onitsha.	Health Office,
22.	Marcy N. Okoli	N/Midwife, Public H. Nurse/ Nurse Tutor	Principal of the School	6 months Clinical FP traing	4 years Clini- cal FP provi- sion	Quarter 38 Ministry of Health, Nsukka.	School of Health Technology, Ministry of Health, Nsukka.
23.	Eunice Nchekvube	N/Midwife Public Health Nurse	Health Sister	-	-	Comm. Primary School Ugwoba, Oji River Anambra State	Health Office, Oji River.

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S/NO.	NAME	QUALIFICATION	DESIGNATION	FAMILY PLANNING TRAINING	TYPE OF EXPERIENCE	HOME ADDRESS	WORK ADDRESS
24.	Cecilia G. Esomeju	N/Midwife, Public Health Nurse	Asst. Chief Health Sister	-	-	4 Odo River Street, Housing Estate, Abakpa Nike, Enugu.	Health Office, Ministry of Health, Enugu.
25.	Victoria Obioso	N/Midwife	Matron	-	-	6 Odo River Street, Abakpa Nike, Enugu	University of Nigeria Teaching Hospital, Enugu.
26.	Margaret Esefu	N/Midwife, Public Health Nurse	Senior Health Sister	1 week NFP Course	6 months counselling & provision	Ozalla - Abor	Health Office, Ishielu.
27.	Azaka A. Unaobukwu	N/Midwife, Public Health Nurse	Principal Health Sister	-	-	No. 1 Estate Avenue, Trans Ekulu, Enugu.	Health Office, Abakaliki.
28.	Ifeoma H. Ozor	N/Midwife, Community Health Officer	Community Nursing Sister/ Comm. Health Officer.	5 days dur- ing Comm. Health Training	-	Central School, Nkpologwu, Anambra State	Health Office, Enna L.G.A.

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FAMILY PLANNING/ORAL REHYDRATION THERAPY WORKSHOP 28TH OCT. - 1ST NOV. 1985  
PARTICIPANTS

S/NO.	NAME	DESIGNATION	QUALIFICATION	HOME ADDRESS	WORK STATION & ADDRESS
1.	Grace Nrialike	N/Sister/H.Visitor	NRM, SCM, HV.	Agukwu - Nri	Abakaliki - Health Office
2.	Monica Ezechukwu	H/Sister/CHO	SCM, COM, Nursing	Amesi	Awka - Health Office
3.	Francisca Eunwe	N/Sister/H.Visitor	NRM, NRM, H.Visitor	Agukwu - Nri	Anambra L.G.A. - Health Office
4.	Constance Oji	Health Visitor	RM, NCM, H. Visitor	Enugu-Ngwo	Oji River - Health Office
5.	Ifeanyi J. Emodi	Health Visitor	SRM, H. Visitor	19 Central School Rd. Onitsha	Nsukka - Health Office
6.	Fidelis Kanu	Health Visitor	SRM, SCM, H. V.	P.O. Box 251 Mnewi	Mnewi - Health Office
7.	Esther Ozugha	Nursing Sister	Com.N/Midwife	St. Thomas Church, Azuogbunike	Agubia H/C Hospital, Annex - Ikwo
8.	Sussana Ikwukeme	Health Visitor	NRM, NCM, H. V.	St. Mary's Cath. Church Ezira - Aguata	Isi-Uzo - Health Office
9.	Catherine Okoli	Snr. N/S/CHO	RM, NCM, CHO.	P.O. Box 1340, Enugu	Enugu - Health Office
10.	Benadette Orefo	Nurse Tutor	SRM, SCM, RMT.	11 Tasia Road, Onitsha	Onitsha - Family Health Centre
11.	Catherine Awuba (Mrs. C. Ikpeze)	Health Visitor	RM, NCM, HV.	c/o Dr. Inaemeka Ikpeze, Dept. of Economic, UNN	Nsukka - Health Office
12.	Eunice Iweka	Asst. Chief H/S	SRM, SCM, HV.	2 Concrete Ave. GRA, Enugu.	Enugu - Health Office
13.	Cecilia N. Okoye	Health Visitor	NRM, NCM, HV.	413 Elias UNN - Nsukka	Nsukka - Basic Health Office
14.	Elizabeth Ibeziako	Asst. Chief H/S	SRM, SCM, HV.	42 Osuma Road, Onitsha.	Onitsha - Health Office
15.	Elizabeth Nwankwo	Health Visitor	SRM, SCM, HV.	Iyi-Eru Hospital, Ogidi.	Iyi-Eru Onitsha - Box 67
16.	Maureen Umeadi	Health Visitor	RM, NCM, HV.	Health Office - Ishielu	Ishielu - Health Office
17.	Grace I. Onyekwe	Prin.H/Sister	SRM, SCM, HV, FPC	12A Obanye St., Onitsha	Ogidi - Health Office
18.	Vidah Ejoh	Health Sister	SRM, SCM, RM, FPC, HV.	9 Onyeachonam's Lane, Onitsha.	Onitsha - Health Office
19.	Dorothy Kenyuah	Health Sister	RM, RM, HV.	No. 1 Tasia Rd., Onitsha.	Onitsha - Health Office
20.	Theresa Onoh	Snr. N/Sister	NRM, NCM, HV.	St. Marys Ngwo	Udi - Health Office

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S/NO.	NAME	DESIGNATION	QUALIFICATION	HOME ADDRESS	WORK STATION & ADDRESS
21.	Rose A. Uwakwe	H/Sister, CHO	RM, RM, HV, CHO.	P. O. Box 361, Onitsha	Onitsha - Health Office
22.	Josephine Okechi	Snr. Com.Sister	RM, COM.Nurse, CHO.	Health Office, Aguobu- Owa.	Ezeagu - Basic Health Centre
23.	Angelina S. Ude	NRN, RM, Comm.N.	Comm.N/Sister	Nnewe - Awgu	Awgu - Health Office
24.	Violet B. Okoye	Snr. Matron	SRE, SCM, OND.	Abakpa Nike - Enugu	Enugu - U.N.T.H.
25.	Elizabeth Ojielo	Snr. N/Sister	NRN, NCM.	4A Abakaliki Lane, GRA, Enugu.	Enugu - S. H. M. B.
26.	Christiana O. Ozo- omena	Com. N/Sister	RCN, NRN.	St. Peter's Church, Ukehe, Igbo-Etiti L.G.A.	Ogbede - Health Office
27.	Beatrice Nwankwo	Health Visitor	RM, RM, HV.	Box 59 Adazi Nnukwu	Aguata - Health Office
28.	Keziah A. Ani	Health Visitor	RM, RM, HV.	St. Marys Church, Ngwo	Mkanu - Health Office
29.	Grace J.M. Onowu	Head of Nursing division	SRE, SCM, HV, ENAM.	Plot C Chime Avenue, Enugu	Enugu - S.H.M.B.
30.	Grace C. Chijioke	Principal Health Sister	NRN, RM, HV, CHO.	80 Owerri Road, Enugu	Nsukka Health Office
31.	Ethel Chukwudolue	Health Sister	RM, RM, HV, CHO	35 Hill view Independence Layout, Enugu.	Obodo Nike Enugu- Maternal & Child health.

APPENDIX D  
FIVE DAY  
TRAINING PROGRAM FOR PUBLIC HEALTH NURSES/NURSE-MIDWIVES  
IN FAMILY PLANNING AND ORAL REHYDRATION THERAPY  
Enugu, Anambra State, Nigeria  
October 1-25 and October 28-November 1, 1985

**GOAL:**

To update knowledge and skills of public health nurses/nurse-midwives to increase acceptance and use of family planning, including natural family planning, and oral rehydration therapy.

**OBJECTIVES:**

At the end of this training program the participant should:

1. Demonstrate increased knowledge and skills in transmitting information about family planning and oral rehydration therapy.

**SUB-OBJECTIVES AND CONTENT:**

At the end of this 5-day training program, participant should be able to:

1. Explain the socio-economic and health background and context for Maternal Child Health, Family Planning and Oral Rehydration Therapy in the nation and specific state.

**CONTENT:**

- Population dynamics of Nigeria and State
- Comparisons of selected population characteristics.
- Vital health indices for Nigeria and State.

- Current FP/ORT programs or efforts in Nigeria and the State.
  - Impact of FP/ORT on health of mother, children and family.
2. Demonstrate increased knowledge regarding selected FP and ORT methods.

CONTENT:

- Male and female reproductive systems in relation to FP.
  - Required physical assessment for FP
  - Barriers to acceptance and use of FP/ORT.
  - Overview of FP methods.
  - Family Planning methods - types, effectiveness, actions, disadvantages, inconveniences, side effects and contraindications for each method.
    - Pills and injectables
    - IUD - counselling, follow up
    - Chemical barriers - foaming tablets, creams and gels.
    - Mechanical barriers - condoms, diaphragms.
    - Natural family planning methods.
    - Sterilization.
  - Oral Rehydration Therapy:
    - Child Survival
    - Type of ORT solutions
  - Integration of FP and ORT into MCH services.
3. To demonstrate, through practice, FP and ORT skills.

## CONTENT:

- Family Planning.
  - Cultural and physical and provider related barriers to acceptance and use of FP.
  - How to deal with barriers.
  - Counselling principles and group education for all FP methods.
  - Problem solving in FP practice.
  - Psycho-social and sexuality issues related to counselling for utilizing above strategies in FP practice.
  - Guiding clients in selection of most suitable contraceptive method/alternatives.
  - Instructing clients on how to use the chosen method.
  - Counselling new and continuing acceptors.
  - Oral Rehydration Therapy:
    - Barriers to acceptance of ORT.
    - Dealing with such barriers.
    - Counselling and group education for ORT.
    - Problem solving in ORT practice.
    - Psycho-social and cultural issues related to acceptance and use of ORT.
    - Preparation and administration of ORT.
  
- 4. Demonstrate increased knowledge and skill in recognizing, prevention and management of sexually transmitted diseases.

## CONTENT:

### Types of sexually transmitted diseases

- Gonorrhoea
- Syphilis

- Trichomoniasis
- Moniliasis
- Chlamydia
- Herpes
- Pubic lice
- PID

Recognition:

- Main symptoms and signs of each.
- Relevant laboratory examinations.

Prevention of STD:

- Psycho-social, cultural and physical issues related to spread, early treatment and prevention.
- Counselling and group education regarding STDs.

Treatment of STD:

- Referral
- Counselling
- Major modes of treatment

Implications for prescribing an FP method, counselling in selection of most appropriate FP method in clients suffering or more prone to developing an STD.

5. Demonstrate through practice and role playing, skill in recognizing, counselling and referral for infertility.
  - Types of infertility
  - Causes of infertility
  - How clients present infertility problems
  - Essentials of fertility
  - Role of nurse/midwife in:
    - Investigation
    - Referral
    - Follow up treatment for infertility
  - Psycho-social and cultural issues related to infertility
  - How to overcome barriers

6. Compile, examine and outline psycho-social issues related to FP and ORT and develop strategies to overcome any client, community and provider related barriers to acceptance of FP and ORT.

CONTENT:

- Community's cultural beliefs and taboos regarding reproduction, Family Planning and diarrhoea/dehydration.
- Traditional methods of FP and treatment of diarrhoea/dehydration.
- Male and female roles in sexual behavior including adolescents.
- Local attitudes about infertility.
- Cultural beliefs regarding female/male sterilization.
- Socio-economic and educational factors.

7. To design strategies and recommendations for continuing education, and for service evaluation delivery and service delivery evaluation in FP and ORT.

CONTENT:

- Role of participants in FP/ORT education and provision of service.
- Looking at local resources for improved quality care in FP/ORT.
- Commodity and equipment procurement and storage.
- Integration of FP/ORT in MCH services.
- Supervisory and monitoring methods.
- Planning how and from where each participant would increase her practice in FP/ORT practice including IUD insertion.

### Method of Teaching/Learning:

The workshop will adopt mainly participatory and group activity type of teaching. The following is a list of some methods to be used:

- a. Small group discussion
- b. Brainstorming
- c. Role play
- d. Drama (skit)
- e. Panel discussion
- f. Lecture/discussion using teaching aids, e.g. overhead projector, slides, etc.
- g. Demonstration and return demonstration

### Evaluation Methods:

- Pre- and post-test
- Check lists
- Responses from group work
- On-going daily feedback responses
- Strategies designed

APPENDIX D

FIVE-DAY UPDATE TRAINING PROGRAM  
FOR PUBLIC HEALTH NURSES AND NURSE/MIDWIVES  
IN FAMILY PLANNING AND ORAL REHYDRATION THERAPY

Enugu, Anambra State, Nigeria

October 21-25 and October 28-November 1, 1985

Schedule of Activities

Monday

- |                    |  |
|--------------------|--|
| 8:00 - 9:00 a.m.   | - Registration.  |
|                    | - Introductions (trainers and trainees).                                       |
| 9:00 - 10:00 a.m.  | - Completion of biodata forms.   |
|                    | - Distribution of reference forms.   |
| 10:00 - 11:00 a.m. | - Opening Ceremony.  |
| 11:00 - 12:00 a.m. | - Pre-test.  |
| 12:00 - 12:30 p.m. | - Participants' expectations.  |
| 12:30 - 1:00 p.m.  | - Overview of workshop objectives, methods, trainees' expectations, logistics. |
| 1:00 - 2:00 p.m.   | - L U N C H  |
| 2:00 - 4:00 p.m.   | - People resources in Nigeria and Anambra State: An Overview.                  |
| 4:00 - 5:00 p.m.   | - FP/ORT as approaches to improve maternal, child and family health.           |
| 5:00 - 5:15 p.m.   | - Where are we? Reflections.   |
-

## Tuesday

- |                    |   |
|--------------------|---|
| 8:00 - 10:00 a.m.  | - Continuation of FP/ORT as approaches to improve maternal, child and family health. Child survival strategies. |
| 10:00 - 10:30 a.m. | - B R E A K   |
| 10:30 - 11:30 a.m. | - Concepts and rationale for use of ORT.<br><br>- Discussion of experiences in Anambra State.                   |
| 11:30 - 12:00 p.m. | - Preparing ORT solutions.  |
| 12:00 - 1:00 p.m.  | - Practice in counselling and group education in ORT.   |
| 1:00 - 2:00 p.m.   | - L U N C H   |
| 2:00 - 2:15 p.m.   | - Resume of FP/ORT as presented in the workshop.  |
| 2:15 - 4:15 p.m.   | - Male and female reproductive systems and process of reproduction.   |
| 4:15 - 4:45 p.m.   | - Overview of major contraceptive methods.  |
| 4:45 - 5:00 p.m.   | - Reflections.  |

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### Assignment:

"Local, Cultural and Physical Barriers to FP and ORT Acceptors."

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## Wednesday

- |                  |  |
|------------------|--|
| 8:00 - 8:30 a.m. | - Where are we?<br><br>- Grab bag - anatomy, physiology and contraceptive methods. |
| 8:30 - 9:30 a.m. | - Discussion of local, cultural barriers to FP/ORT acceptance.                     |

- 9:30 - 10:15 a.m. - Oral and injectable contraceptives and required physical assessment by the provider.
  - 10:15 - 10:45 a.m. - B R E A K
  - 10:45 - 1:00 p.m. - Continuation of above.
  - 1:00 - 2:00 p.m. - L U N C H
  - 2:00 - 3:00 p.m. - IUCD and barrier methods.
  - 3:00 - 4:30 p.m. - Natural family planning methods and required psychosocial assessment for appropriateness of NFP methods and user-effectiveness.
  - 4:30 - 5:00 p.m. - Reflections.
- 

Thursday

- 8:00 - 8:30 a.m. - Where are we?
- Grab bag - contraceptive methods.
- 8:30 - 10:30 a.m. - Role play: Counselling for contraceptive methods.
- 10:30 - 11:00 a.m. - B R E A K
- 11:00 - 12:00 p.m. - Sexually transmitted diseases and infertility.
- 12:00 - 1:00 p.m. - Role play: cultural, psychosocial factors affecting STD and infertility.
- 1:00 - 2:00 p.m. - L U N C H
- 2:00 - 3:00 p.m. - Role play: Client management of the side effects and complications of contraceptive methods.
- 3:00 - 4:00 p.m. - Suggested strategies for delivery of FP/ORT.
- 4:00 - 4:15 p.m. - Reflections.

4:15 p.m.

- Depart for family planning  
clinic visit.

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Friday

8:00 - 9:00 a.m. - Post-test.

9:00 - 10:00 a.m. - Record keeping system.

10:00 - 10:30 a.m. - B R E A K

10:30 - 12:00 p.m. - Panel discussion.

12:00 - 1:00 p.m. - Participant Reaction forms.

1:00 - 2:00 p.m. - L U N C H

2:00 - 3:00 p.m. - Educational wrap-up.  
- Closing.

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APPENDIX D  
 FIVE-DAY FAMILY PLANNING/ORAL REHYDRATION THERAPY UPDATE WORKSHOP  
 FOR NURSE/MIDWIVES AND PUBLIC HEALTH NURSES.

FIVE-DAY FP/ORT WORKSHOP OUTLINE

A Guide for Trainers

TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
Monday 8-9	- To list names and addresses of participants.	- Registration.			
	- To obtain essential workshop materials.	- Distribution of reference books and timetable.		- Reference books per list.	
	- To provide data on self.	- Completion of bio-data forms.	- Individual completion of biodata forms.	- INTRAH bio-data forms.	
9-10	- To relax and settle down and be able to cite information about neighbor.	- Introduction of each other including trainers and trainees.	- Ice breaker: Participants will introduce each other, include what the person being introduced would like the group to know about them.	- Name tags for participants and trainers.	
10-11	- To obtain relevant aspects of the importance of FP/ORT activities in Anambra State.	- Opening Ceremony.	- Opening Address by CMO.		

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TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
11-12	- To assess entry level strengths/weaknesses regarding FP/ORT knowledge and skills.	- Pre-test.	- Explain rationale for pre-test. Distribute pre-test, note corrections to be made and allow questions.	- Pre-test questions and answer sheets.	- Results of pre-test.
12-12:30	- To list expectations of participants for 5-day workshop.	- Participants expectations.	- In groups of 6, each group member to state what she expects to learn from the workshop including the format and content and time expectation; what she expects to do with the knowledge after the workshop. Rapporteur/trainer to summarize group comments.	- Felt pens, newsprint.	- List of expectations.
12:30-1	- To identify course objectives, methodology and principles of adult learning methods.	- Overview of workshop objectives, course usefulness, adult learning methods to be used. Expectations of trainers compared, with participants expectations.	- Trainer to explain rationale of adult learning methods. - Trainers to convene, state their expectations and share with participants.	- Course schedule of activities. - Handout: Educational Objectives. - Handout: - How Adults Learn.	
1-2	<b>L U N C H</b>				
2-4	- To discuss importance of specific indicators: total population, growth rate, TFR, IMR for Nigeria and Anambra State;	- People resources in Nigeria state: an overview of demographic indices.	- Presentation by demographic/statistician from Anambra State: Describe key demographic indicators for (continued on next page)	- Newsprint, felt pens. - Handout: Demographic Indicators - Nigeria, Anambra State.	- Completion of handout. Participants are to complete demographic indicators on handout for Nigeria and (continued on next page)

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TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
	Discuss relevance of the indicators to the need for family planning.		Nigeria and Anambra, In groups of six, using brainstorming method, discuss the impact of rapid population growth on urbanization, labor force, housing, land, agriculture, education, health. Group presentation of above. Trainer adds points and summarizes.		Anambra and LGA if known.
4-5	- To outline how FP/ORT can improve maternal, child and family health.	<ul style="list-style-type: none"> <li>- FP/ORT impact on mother, child and family:               <ul style="list-style-type: none"> <li>* Reducing infant mortality.</li> <li>* Supporting child survival.</li> <li>* How to avoid pregnancy at unfavorable maternal ages.</li> <li>* Spacing births.</li> <li>* Prolonging breast feeding.</li> <li>* Controlling family size.</li> <li>* Avoiding adolescent pregnancy.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>- Based on assignment entitled "Wishes which you would like to see fulfilled 10 years from now" for:               <ul style="list-style-type: none"> <li>* Your child</li> <li>* Yourself</li> <li>* Clients and members of the community whom you serve.</li> </ul> </li> <li>- Trainees (in group):               <ul style="list-style-type: none"> <li>* Share their wishes</li> <li>* Discuss in which ways FP and ORT can help fulfill their wishes.</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>- Chalk and board.</li> <li>- Handout: Impact of FP/ORT on Health of Children, Women and Family.</li> <li>- Guide for discussion.</li> </ul>	

TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
Tuesday 8-10		- Where are we? Continuation of FP/ ORT as approaches to improve maternal, child and family health.			
	To list 6 main strategies for child survival programme in Anambra State.	- ORT. - EPI. - Breast feeding. - Growth monitoring. - Family planning. - Prenatal, intra- natal and post- natal care.	Brainstorming: - Discuss main rationale of each strategy. - Participants to present in plenary session: * their wishes * how child survival strategies can influence their wishes.		
	To explain essential factors necessary to provide FP/ORT.	Include: - Client days, flow of clients. - Physical facilities. - Supplies. - Equipment.	Brainstorming: - Lead trainer and participants to list and discuss essentials of MCH/FP programme.  - Lead trainer to arrange for typing and distribution of group work.		
10:00- 10:30	B R E A K				
10:30- 11:30	To describe and discuss etiology, physiology and management of dehydration.	Include signs and symptoms and varying degrees of dehydration.	- Discussion by pediatrician.		

TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
11:30-12:00	To identify method of preparing ORS according to UNICEF standard.	- Preparation of ORS.	- Demonstration by co-trainer.	- Bowl - Salt - Sugar - Plastic spoon (UNICEF) - 1 beer bottle - 2 soda bottles - Posters from UNICEF	- Participants return demonstration.
12:00-1:00	- To observe an ORT clinic in progress. - Participants to identify their objective for site visit.		- Site visit to UNTH ORT clinic. Clinic is open 24hrs./day and 7days/week.	- Transportation.	Subjective comments from participants.
1:00-2:00	L U N C H				
2:00-3:00	- Participants will demonstrate technique of counseling clients in use of ORT.	- Counselling techniques, mixing ORT. - Communicating procedure simply and accurately to mothers.	- Role play. - One to one counseling: * Nurse instructing mother. * Mother to return the demonstration and instructions.  - Role play: one participant to instruct "mothers' club" in use of ORT.	- 5 beer bottles - 5 bowls of sugar - 5 containers with salt - 5 empty bowls for mixing  - Handout: The ORT Unit in Hospitals and Clinics.	When "mother" is able to return instructions and demonstration correctly.
3:00-4:15	To describe function of male and female reproductive system, including menstrual physiology.	Male and female reproductive systems: internal and external organs, structures.	- Group work: * Draw reproductive system and record functions of reproductive organs in the diagram.	- Newsprint - Felt pens - Handout - Cue cards	Diagrams of male and female reproductive systems by participants.

TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
		Pituitary and ovarian hormone changes during the menstrual cycle.	<ul style="list-style-type: none"> <li>* Draw external female genitalia and describe phases of menstruation.</li> <li>* Draw internal female reproductive organs.</li> <li>* Review through mini-drama the physiology of the menstrual cycle.</li> </ul>		
4:15 4:45	<p>To outline major contraceptive methods.</p> <p>To discuss concept of best method.</p>	<ul style="list-style-type: none"> <li>- Orals</li> <li>- Injectables</li> <li>- IUCD</li> <li>- Barriers</li> <li>- Natural family planning</li> <li>- Sterilization</li> </ul>	<ul style="list-style-type: none"> <li>- Brainstorm.</li> <li>- Participant will site various methods, discussion of safety effectiveness and best method.</li> </ul>	<ul style="list-style-type: none"> <li>- Newsprint</li> <li>- Samples of oral contraceptives and barrier methods</li> </ul>	
4:45- 5:00	To reflect on day's learning.	Reflection.	<ul style="list-style-type: none"> <li>- Participants to share learning experience.</li> <li>- Identify facilitators and hindrances to learning.</li> </ul>	<ul style="list-style-type: none"> <li>- Newsprint</li> <li>- Felt pens</li> </ul>	

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TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
Wednesday 8:00- 8:15		Where are we?	Plenary session.	- Chalk board - Chalk	
8:15- 9:30	To identify local cultural and physical barriers to acceptance of FP/ORT.	- Traditional and religious beliefs. - Psychosocial: * ignorance * lack of effective facilities * lack of access to facilities * attitudes of care providers	Home assignment (previous evening) Groups to present to plenary session.	- Newsprint - Felt pens	
9:30- 10:00	To identify types, content and mechanisms of action of hormonal contraceptives.	- Orals * combination * minipill - Injectable * depo-provera	Discussion led by trainer.	- Newsprint - Felt pens - Handout: Hormonal Contraceptives: Combination and mini pills and injectables.	
10:00- 10:30	B R E A K				
10:30- 12:30	To identify hormonal contraceptives in terms of user-effectiveness, indications, side effects, client instruction and management.	- Effectiveness rates * theoretical * user - Side effects. - Management of new acceptor and follow-up.	Discussion - plenary session with trainees' participation.		
12:30- 1:00	To outline required physical assessment and rationale before contraceptive use.	- Thyroid - Breast - Abdomen - Pelvic - Extremities	Discussion and demonstration by trainer.	- Model of torso - Film on pelvic exam - Movie projector	Repeat demonstration in role play.

TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
1:00-2:00	LUNCH				
3:00-5:00	To demonstrate counselling techniques in providing family planning services.	- Counselling techniques in providing: * orals * injectables * IUCD * NFP * barrier method	- Participants role play: nurse to client. - Trainers to correct misconceptions.	- Samples of all types of contraceptives.	Accuracy of information.
5:00-5:15	To reflect on day's learning.	- Reflections.	- Trainer to lead group in discussion.		

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TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
Thursday 8:00- 8:15		- Where are we?	- Discussion	- Newsprint	
8:15- 10:00	Continuation of role play: Counselling clients in use of family planning methods.	- Counselling techniques. - Information on various methods of family planning.	- Role play: one-to-one.	- Samples of all types of contraceptives.	Accuracy of information given.
10:00- 10:30	B R E A K				
10:30- 1:00	To describe specific STD's etiology, transmission, signs, symptoms, complications: relevance to family planning methods. To demonstrate use of resource material for preparation of presentation.	- STD's: * gonorrhoea * syphilis * chlamydia * pelvic inflammatory diseases * AIDS * trichomonias * monilia	- Group presentation. Each group to research 1 or 2 STDs and present in plenary session. - Trainer to clarify misconceptions.	- Slides on STD - Slide projector - Handout	Accuracy of information presented.
1:00- 2:00	L U N C H				
2:00- 4:00	To identify and plan strategies for integrating FP/ORT into current practice.  To plan strategies for disseminating information on FP/ORT to clients and community.	- Current services - Clinic schedule - Client flow - Human resources - Integration of FP/ORT services.  - Community education - School health	- Group activity. - Rapporteur to share groups' findings. - Summary by instructor. - Strategies discussed at panel session on Friday morning.	- Newsprint - Felt pens	Record of strategies.

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TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
	To identify solutions to service delivery problems in participants' LGAs.	<ul style="list-style-type: none"> <li>- Procurement of commodities, supplies and equipment.</li> <li>- Resources in community.</li> <li>- Government resources.</li> </ul>			
4:00-4:15	Reflections.				
4:15-5:00	To observe group instruction and individual client FP services.	- Observation of providers.	- Visit to PPFN (FP) Clinic in session.	Transportation	Discussion of visit.

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TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
Friday 8:00- 9:00	To demonstrate level of knowledge and skill gained during week.	- Post-test questions.		- 30 post-test questionnaires and answer sheets.	Results compared with pre-test scores.
9:00- 10:00	To identify rationale/purpose for maintaining accurate records on all family planning clients.	- Record keeping system. - What records to keep. - Presentation of records to be used in setting.	- Trainer from PPFN to review content with trainees. Each trainee will have a record to fill in.	- Record sample from PPFN.	
10:00- 10:30	B R E A K				
10:30- 12:00	To discuss planned strategies for providing service, developing further skills, obtaining supplies and monitoring output.	- Planned expectations and role changes for participants. - Establishment of new service delivery points. - Organization of a practical way to improve skills in contraceptive practice using locally available resources. - Which, how, where to obtain supplies and equipment for FP/ORT services.	- Panel discussion. - Panel to include: * Chief Public Health Officer * Chief Nursing Officer * State PPFN Director		Record strategies agreed upon.
12:00- 1:00	To examine and state in writing results of the 5-day workshop as a learning experience.	- Participant Reaction form.	- Individual completion of Participant Reaction form.	- 30 Participant Reaction forms	

TIME	OBJECTIVES	CONTENT	METHOD	MATERIALS	EVALUATION
1:00- 2:00	L U N C H				
2:00- 3:00	To examine verbally results of the 5-day workshop. To summarize next steps.	<ul style="list-style-type: none"> <li>- General feedback.</li> <li>- Learning obtained.</li> <li>- Discuss value of learning methods.</li> <li>- What next?</li> <li>- Closure.</li> </ul>	- Discussion with trainers and trainees.		

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## APPENDIX E

### Reference Books Distributed to Participants and Co-Trainers

#### A. Participants and Co-Trainers

1. Hatcher, A. Robert, et al, Contraceptive Technology, 1984-85, 12th Revised Edition, 1984.
2. Centres for Disease Control (CDS), Family Planning Methods and Practice: Africa, Center for Health Promotion and Education, Division of Reproductive Health, Atlanta, Georgia, 1983.
3. McCarthy, J.J. and Martin, M.C., Fertility Awareness: The Human Life and Natural Family Planning, The Natural Family Planning Foundation, Washington, D.C., 4th Printing.
4. IPPF, Periodic Abstinence for Family Planning: 'Safe - Unsafe', 1983.
5. IPPF, Female Sterilization.
6. IPPF, Vasectomy.

#### B. Co-Trainers Only

1. Edmands, E.M., Concepts and Issues in Family Planning, Program for International Training in Health, University of North Carolina, Chapel Hill, 2nd Printing, 1984.
2. Werner, D. and B. Bower, Helping Health Workers Learn, Hesperian Foundation, Palo Alto, California, 1977.
3. IPPF, Handbook in Infertility.
4. Mecks, Burt, Education for Sexuality, CBS Publishing, New York, New York.
5. WHO, Current Treatments in the Control of Sexually Transmitted Diseases, A Report of a Geneva WHO Consultative Group, 16-19 November, 1982.

6. Lanctot, A. Claude, et al, Natural Family Planning: Development of National Programs, IFFLP/FIDAF, Washington, D.C., 1984
7. Davis, N. Larry, Planning, Conducting and Evaluating Workshops, 7th Printing, 1979.

APPENDIX F  
Materials Developed and Distributed  
to Participants and Co-Trainers

Opening Address.

Demographic Indicators: Terms and Definitions.

Assignment - Impact of FP/ORT on Health of Children, Women and Family.

FP/ORT Rationale for Family Health and Development.

Family Planning and Family Health.

Participants' Expectations.

ORT Unit in Hospitals and Clinics.

Hormonal Contraceptives: Combination Pills, Mini Pill, Injectable.

Selection of Family Planning Methods.

Managing Complications in Family Planning.

Samples of Record Keeping Forms:

1. Family Planning Record Developed by CDC.
2. Detailed Clinic Report from PPFN.
3. Daily Clinic Return Forms, sample used by IPPF affiliates.

Role Play Situations:

1. Counselling.
2. Managing Clients Regarding Use of Contraceptives.
3. Sexually Transmitted Diseases.

Suggested Strategies for Family Planning Services (Developed by Participants).

Suggested Strategies for Oral Rehydration Therapy (Developed by Participants).

APPENDIX G

ANAMBRA: RESULTS OF PRE- AND POST-  
TEST FIVE DAY FP/ORT WORKSHOP  
October 21 - 25, 1985

	<u>PRE</u>	<u>POST</u>	<u>+/-</u>		<u>PRE</u>	<u>POST</u>	<u>+/-</u>
1.	10	16	6	16.	19	29	10
2.	8	21	13	17.	13	30	17
3.	38	30	-8	18.	30	36	6
4.	32	37	5	19.	27	35	7
5.	32	37	5	20.	18	32	14
6.	20	28	8	21.	26	28	2
7.	12	28	16	22.	18		
8.	14	23	9	23.	14	27	13
9.	12	24	12	24.	25	28	3
10.	21	28	7	25.	13	19	6
11.	12	26	14	26.	16	28	12
12.	29	30	1	27.	14	32	18
13.	22	33	11	28.	25	22	-3
14.	20	26	6				
15.	18	26	8				

SCORE: AVG.	<u>PRE</u>	<u>POST</u>
	19.9	28
RANGE	8-38	15-37
AVERAGE GAIN	8 POINTS	
RANGE OF GAIN	8-18 POINTS	

ANAMBRA: RESULTS OF PRE- AND POST-  
TEST FIVE DAY FP/ORT WORKSHOP  
 October 28 - November 1, 1985

	<u>PRE</u>	<u>POST</u>	<u>+/-</u>		<u>PRE</u>	<u>POST</u>	<u>+/-</u>
1.	29	28	-1	16.	14	28	14
2.	19	36	17	17.	14	34	20
3.	15	18	3	18.	7	16	9
4.	29	35	6	19.	19	28	9
5.	17	27	10	20.	24	29	3
6.	12	29	17	21.	18	36	18
7.	22	35	13	22.	19	37	18
8.	27	34	7	23.	16	30	14
9.	33	36	3	24.	10	26	16
10.	18	24	6	25.	20	31	11
11.	20	26	6	26.	11	18	7
12.	19	36	17	27.	24	34	10
13.	24	38	14	28.	19	27	8
14.	27	33	6	29.	21	22	1
15.	14	27	13	30.	32	40	8

SCORE:	AVG.	<u>PRE</u>	<u>POST</u>
		19.7	29.9
RANGE		7-33	16-40
AVERAGE GAIN		10 POINTS	
RANGE OF GAIN		1-10 POINTS	

APPENDIX H

DATA FROM PARTICIPANT REACTION FROM

Fifty-seven participants completed the INTRAH Participant Reaction Form. Fifty-three stated that the workshop objectives were very clear or mostly clear; four claimed the objectives were somewhat clear. Workshop objectives seemed to be achieved entirely by seventeen trainees and mostly by thirty-seven.

Thirty-nine participants felt all materials used in the workshop were useful and sixteen perceived most of the materials as useful.

While nearly one hundred percent of the participants would recommend the workshop to others, trainees indicated that additional time was needed for the workshop and to practice skills and techniques. Areas for further training were identified:

- counseling and client education;
- provision of clinical methods (IUD's, pills, diaphragms, injections);
- in-service training in family planning;
- management and supervision of family planning services.

Adult teaching methods utilized during the workshop were unfamiliar to the trainees. By the end of each week, participants acknowledged the utility of such methods and in some cases surprise that group work is a productive means of learning.

APPENDIX I  
Letter of Appreciation

Mrs. Victoria Kwame Obiase,  
Nursing Services Division,  
U. N. T. H.,  
Enugu.

29th October, 1985

The Chief Matron/HNS.,  
U. N. T. H.,  
Enugu.

Letter of Appreciation

I wish to report that I resumed work on 26th October, 1985 after five days leave of absence with which I attended a workshop on Family Planning and Oral Rehydration Therapy (ORT).

The workshop was organised and financed by INTRAH (Program for International Training in Health). I was among twenty eight participants selected from each of the twenty three local Govt. areas in Anambra State who took part in the workshop. All the participants were sponsored by INTRAH. The venue of the workshop was the Anambra Hotels Ltd. ~~Enugu~~ Enugu where most of the participants were quartered. The INTRAH trainers namely Terry Mirabite (Program Officer) and Mrs. Grace Mtwali (Regional Training Officer) conducted the lectures. They were assisted by co-trainers Mrs. Rose Njoku and Mrs. Inelda Orji. Mrs. Veronica Tabana (Senior Matron UNTH) played a major role of coordinating the activities of the workshop, and assisted in this by Dr. Ude (Consultant M.O.H.) Enugu.

The opening ceremony was chairmanned by Dr. P.I. Okolo (Chief Medical Officer Anambra State). Among others present were the Chief Health Officer, Enugu, Dr. Obienu the Chief Nursing Officer, Anambra State, Mrs. Moneme and Permanent Secretary, Ministry of Health Mr. Oseugwa.

The workshop afforded me a good opportunity of knowing more about Family Planning/ORT by learning.

- a. The meaning of family planning, methods, advantages, disadvantages Contra indications, complications and side effects of each method.
- b. The reason for family planning
- c. Method of preparing ORT and education of mother on the technique of preparation and how it works.
- d. To motivate the community on the need for family planning/ORT.
- e. To counsel clients to adopt family planning and those with infertility.
- f. To carry out family planning survey and evaluation.
- g. To impart knowledge to other health staff.

Unfortunately, the period for the workshop was too short to enable participants have practical knowledge of Insertion and Removal of I.U.C.D. (Intra ~~Uterine~~ Uterine Contraceptive Device). I hope we shall have the opportunity in the near future.

A. lecture on People, Resources in Nigeria and Anambra State emphasized and illustrated the need for family planning. It was observed that based on the Basic Demographic Data in Nigeria the mean growth rate of population in Nigeria is 3.0%. If this remained unchecked,

the population of Nigeria will rise to 163 million in the year 2000 AD. This will result in further deterioration of the social and economic state of the country. To check this growth, family planning must be widely practised and at no cost to the clients. When this control is achieved then we would have fulfilled our wishes and objectives which are viz

1. Meeting basic needs
2. Suitable Housing to promote health.
3. Availability of adequacy of nutritious food for under 5's, pregnant and nursing mother and elderly.
4. Health and Health facilities accessible to all including rural areas.
5. Good education for all
6. Employment/income generating activities for all.
7. Social support system when individuals or families are under stress.
8. Happy family or marital relations and adjustment.

The participants visited the ORT clinic at UNTH and also the family planning clinic at Uwani. These visits afforded us a lot of first hand knowledge of the working of both clinics. Participant should endeavour to educate the public on the advantage of ORT which are.

- (a) Helps to reduce infant mortality caused by diarrhoea.
- (b) Helps mothers/families contribute to the treatment of their own children.
- (c) Reduced number of infant deaths may encourage couples to adopt family planning.
- (d) ORT is cheap and easily available. Awareness of causes and prevention of diarrhoea by the public is most important, and this can be achieved through health education of the community and health education of mothers.

On the whole, the workshop was very educative and stimulating. Some aspects in learning namely Group work, Group discussion, Role play, Film, ORT Demonstration and clinic visits proved very important and helpful.

I seize this opportunity to thank the management of UNTH for giving me this opportunity to further my learning in FP/ORT, and I am grateful to INTRAH for their sponsorship. The experience gained will be a vast help in my work.

Thank you.

Yours sincerely,

Matron V. N. Obiero