

November 25, 1985

AFRICAN NFP DEMONSTRATION PROGRAM: IFFLP/AID

(Cooperative Agreement -DPE 0632-A-00-3049-00)
(August 1st, 1983 - July 31st, 1988)

THIRD FORMAL PROGRESS REPORT

January-June, 1985

Project Summaries: (with selected Annexes)

Johns Hopkins University Demonstration Evaluation Project

Mauritius Evaluation Project

Liberia Demonstration Project

Burkina Faso - Bobo Dioulasso

Burkina Faso - Ouagadougou

Burundi

Camerouns

Central African Republic

Congo

Ivory Coast

Mauritius

Zaire

**Other Countries: Ghana, Lesotho, Senegal, Madagascar,
Tunisie, and Rwanda.**



Johns Hopkins University

Demonstration Evaluation Project

January-June 1985

Data Processing

The data processing and analysis at JHU is running smoothly and produces the following as needed from the Zambia and Liberia data:

- range checks for each variable
- internal consistency data checks
- error checks
- sorting of new data by district
- comparison of ID members on new data with the transmittal sheet to note errors and duplication
- mistakes on report forms are sent back to the host country for correction
- new files are added to cumulative files on a timely basis
- frequencies are run on the new cumulative data file
- new cumulative data files are combined with the same ID number so that there is a complete record for each client
- the follow-up program flags clients who need follow-up. This information is sent to the host country.

Data Analysis

Analysis was delayed for 3 months due to the backlog resulting from recording data on to the revised forms. For the most part this was an unavoidable part of perfecting the client data forms while working in a mail (postal) turnaround time of six weeks.

Preliminary data analysis is attached in the report of researchers, Dr. Ron Gray, and Bob Kambic, [JHU-annex 1]. In it tabulation of frequencies are compared between Zambia and Liberia for the following client variables: (1) age, (2) marital status, (3) years married, (4) living male and female children, (5) religion, (6) literacy, (7) education median, (8) family planning intention, (9) time next pregnancy is desired, (10) family planning method used in past/and presently (11) how client was referred to NFP, (12) reason charting (13) signs charted, (14) interpretability of chart, (15) intercourse record, (16) difficulty with abstinence, (17) autonomy, (18) projected use of NFP in future, (19) reasons for discontinuation.

Teacher related variables, such as number of follow-ups, are also tabulated by frequency and compared cross-country.

Conclusion/Targets for next Reporting Period

So far the following areas have been noted to both IFFLP and the Zambia/Liberia Projects:

- 1) Zambia must improve its client follow-up. Unless follow-ups are done on all clients, conclusions reached will be based on "soft" data, and as such are worthless.
- 2) Zambia should use the teacher monthly summaries, which give an excellent idea of how the teacher is doing and how she is spending project and/or private time.
- 3) Liberia - some teachers should be monitored, as they are spending much time on initial contact/client recruitment, with little result.
- 4) Liberia should be monitored as to why so few discontinuations are due to pregnancies (compared to Zambia)
- 5) Both Zambia and Liberia must break through to the illiterate or semi-literate client populations. This is particularly crucial for Liberia, whose national literacy rate is only 20%. Zambia's national literacy rate is much higher at 70%

Projection for Next Reporting Period

Bob Kambic will make field trips to the three countries involved in the research project, Liberia, Zambia and Mauritius to give timely feedback, on data collected. He will correct collection and recording inadequacies and clarify the questions of project personnel.

Report to: Dr. Claude Lanctot

Dr. Ronald H. Gray

From: Bob Kambic

Subject: Update of activities since Richard St. Mart's visit to JHU

1. All data entry forms on the SOS data software have been extensively revised (Appendix A). This includes specifications for range checks for each variable and internal consistency data checks when they have been found to be useful. SOS data will now run the range and consistency checks in batch mode. The checks have been tested a number of times and found to be working and to be useful.
2. The output of the range and consistency checks is a file which is not interpretable by someone unfamiliar with computers (Appendix B, sample). It took me several weeks to write a basic program (Appendix C) which took the error file and interpreted it so that one can match files directly with the reporting forms (See error interpretation file, Appendix D).

Dr. Sol Su spent some time revising SOS so that it would run batch error checks.

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C1. The "NFP Menu" is executed

C2. The particular form is executed, e.g., Registration

C3. The file name for the data file is entered.

It is composed of the first 3 letters of the country name LIB, ZAM, etc., plus the transmittal number plus the first 3 letters of the form, REG, FOL, DIS.

Example: ZAM7FOL.DAT

is Zambian 7th transmittal followup data.

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E. The new data file is checked by batch processing on SOS for validity and internal consistency (2 above) and the error interpretation file is run.

F. Data forms are checked against the error report, mistakes are corrected and mistakes on the report forms are sent back to the host country for correction.

G. The new file is added to the cumulative data file.

H. Frequencies are run on the new cumulative data file.

I. The new cumulative data files for the 3 forms, registration, followup and discontinuation, are combined by the update program written by Dr. Sykes. This program combines files with the same ID number.

J. The followup program written by Dr. Su is run to see which clients need to have a followup. This report will be sent to the host country for their review.

3. Zambian Data

The three initial transmittals of data from Zambia were on old data forms. The data had to be recoded from these forms which took much time.

The current status of the Zambian data is as follows (all data is on computer except for pregnancy charts and monthly summary):

	<u>Number of Records</u>
Registration	346
Follow Up	93
Discontinuation	31
Pregnancy Charts	11
Monthly Summaries	0
Time Logs	92

4. Liberian Data

Susan Jones brought the first transmittal of data from Liberia in May of 1985. The current status of the Liberian data is as follows:

	<u>Number of Records</u>
Registration	109
Follow Up	118
Discontinuation	34
Pregnancy Charts	0
Monthly Summaries	14
Time Logs	96

We have just received a transmittal of forms by mail from Liberia.

This data has not been entered into the computer.

The following is a comparison of tabulation of the frequencies for selected variables in the Registration, Follow Up, and Discontinuation Forms for Zambia and Liberia. For the detailed analysis please see the printouts.

REGISTRATION FORM

<u>Variable</u>	Zambia (N = 346)	Liberia (N = 109)
1. Teacher	A high number of frequencies taught per teacher is probably not good. For example, in Zambia teach #10 with 62 clients will probably not be able to follow all of them. It is possible that there are 2 teachers #10 in different districts, but I do not think that is the case here.	
2. Age	Both programs have = 60% of clients in the 20-29 age group.	
	<u>Zambia</u>	<u>Liberia</u>
3. Marital Status %	= 80	= 80
4. Years Married Median	7	7
5. No. of Pregnancies	There are many missing values in both.	
6. Living Boys & Girls Median #	3	2
7. Religion - Catholic %	61	27
- Protestant %	33	65

<u>Variable</u>	<u>Zambia</u> (346)	<u>Liberia</u> (109)
8. Client Literacy %	96	89
9. Client Education Median	9-10	11-12
10. Family Planning Intention %		
- Plan	18	27
- Space	51	44
- Limit	14	17
- Awareness	16	11
11. Client Desires Next Pregnancy		
- No More	16	21
- Now	19	28
- Less than 1 year	5	8
- 1-3 years	40	25
- More than 3 years	4	13
12. Family Planning Used in Past %		
- Pill	53	64
- IUD	7	16
- Rhythm	7	9
- Other	33	11
13. Family Planning Used Now %		
- Nothing	35	80

<u>Variable</u>	<u>Zambia</u> (346)	<u>Liberia</u> (109)
14. Referral to NFP	Even distribution	NFP worker = 64%
Total Living Children Median	3	2

FOLLOW UP FORM

<u>Variable</u>	<u>Zambia</u> (N = 93)	<u>Liberia</u> (N = 118)
15. Teacher	Teacher #10 appeared to do very few followups	
16. Followup Form # number %		
- 1	88	66
- 2	10	24
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17. Followup site-Home %	46	69
18. Months Since Began Charting	Some people have been charting a long time but have not had followup	

<u>Variable</u>	<u>Zambia</u> (93)	<u>Liberia</u> (118)
19. Reason Charting %	For Zambia, disagrees markedly from the family planning intentions shown on the registration form (See 10 above). This may be because of the large number of unknowns.	
- Plan	10	33
- Space	18	38
- Limit	1	22
- Unknown	67	0
20. Signs Charted	Mucus and Temperature are the most popular	
21. Chart is Interpretable %	78	72
22. Intercourse Record		
First and Last %	32	32
23. Abstinence		
Client Difficult %	6	3
Spouse Difficult %	11	3
24. Autonomous	15	1

DISCONTINUATION FORM

<u>Variable</u>	<u>Zambia</u> (N = 31)	<u>Liberia</u> (N = 34)
25. Will Ever Use NFP		
in Future - NO %	51	52
26. Type of Discontinuation %		
- Lost to followup	13	29
- Health	6	0
- Personal	26	62
- Pregnant	55	9

Because of the similar nature of the other variables for the two countries, these differences in the types of discontinuation between the two countries make me suspect that a bias may have been introduced into the discontinuation classification.

MONTHLY SUMMARY

All copies of monthly summaries received from Liberia are included. These reports provide a very good quick review of how individual instructors are doing.

Notable is the effort some teachers spend on initial contact, with low numbers of registered as a result.

Case loads of instructors as they vary through the year are seen in the learning user column.

Autonomous and cumulative autonomous can be considered in some measure the success of a teacher.

No monthly summaries have been received from Zambia.

Program Problems as Found in the Data

The educational data and literacy level show the programs to be reaching the educated elite. The programs should strive to move beyond the educated to the village people. The programs cannot be judged adequate to meet the family planning needs of Zambia and Liberia until they show that the village people will accept NFP.

The followup in Zambia is not at all adequate. Of 346 registered, there are only 93 followups and some of these are second followups on the same client. Zambia shows 15 autonomous but does not provide followup form documentation for those classified as autonomous. Liberia appears to be doing better with followups. We must stress that without adequate followup data it will not be possible to evaluate these programs.

The types of discontinuation found in the two programs are quite different. Liberia shows only 9% pregnancies of 34 discontinuations, whereas Zambia shows 55% pregnancies of 31 discontinuations. Liberia may be underreporting pregnancies.

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Example: ZAM7FOL.DAT

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Registration	109
Follow Up	118
Discontinuation	34
Pregnancy Charts	0
Monthly Summaries	14
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The following is a comparison of tabulation of the frequencies for selected variables in the Registration, Follow Up, and Discontinuation Forms for Zambia and Liberia. For the detailed analysis please see the printouts.

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<u>Variable</u>	Zambia (N = 346)	Liberia (N = 109)
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2. Age Both programs have ≈ 60% of clients in the 20-29 age group.

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E. The new data file is checked by batch processing on SOS for validity and internal consistency (2 above) and the error interpretation file is run.

F. Data forms are checked against the error report, mistakes are corrected and mistakes on the report forms are sent back to the host country for correction.

G. The new file is added to the cumulative data file.

H. Frequencies are run on the new cumulative data file.

I. The new cumulative data files for the 3 forms, registration, followup and discontinuation, are combined by the update program written by Dr. Sykes. This program combines files with the same ID number.

J. The followup program written by Dr. Su is run to see which clients need to have a followup. This report will be sent to the host country for their review.

3. Zambian Data

The three initial transmittals of data from Zambia were on old data forms. The data had to be recoded from these forms which took much time.

The current status of the Zambian data is as follows (all data is on computer except for pregnancy charts and monthly summary):

	<u>Number of Records</u>
Registration	346
Follow Up	93
Discontinuation	31
Pregnancy Charts	11
Monthly Summaries	0
Time Logs	92

4. Liberian Data

Susan Jones brought the first transmittal of data from Liberia in May of 1985. The current status of the Liberian data is as follows:

	<u>Number of Records</u>
Registration	109
Follow Up	118
Discontinuation	34
Pregnancy Charts	0
Monthly Summaries	14
Time Logs	96

We have just received a transmittal of forms by mail from Liberia.

This data has not been entered into the computer.

The following is a comparison of tabulation of the frequencies for selected variables in the Registration, Follow Up, and Discontinuation Forms for Zambia and Liberia. For the detailed analysis please see the printouts.

REGISTRATION FORM

<u>Variable</u>	Zambia (N = 346)	Liberia (N = 109)
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1. Teacher A high number of frequencies taught per teacher is probably not good. For example, in Zambia teach #10 with 62 clients will probably not be able to follow all of them. It is possible that there are 2 teachers #10 in different districts, but I do not think that is the case here.

2. Age Both programs have ≈ 60% of clients in the 20-29 age group.

	<u>Zambia</u>	<u>Liberia</u>
3. Marital Status %	≈ 80	≈ 80
4. Years Married Median	7	7
5. No. of Pregnancies	There are many missing values in both.	
6. Living Boys & Girls Median #	3	2
7. Religion - Catholic %	61	27
- Protestant %	33	65

<u>Variable</u>	<u>Zambia (346)</u>	<u>Liberia (109)</u>
8. Client Literacy %	96	89
9. Client Education Median	9-10	11-12
10. Family Planning Intention %		
- Plan	18	27
- Space	51	44
- Limit	14	17
- Awareness	16	11
11. Client Desires Next Pregnancy		
- No More	16	21
- Now	19	28
- Less than 1 year	5	8
- 1-3 years	40	25
- More than 3 years	4	13
12. Family Planning Used in Past %		
- Pill	53	64
- IUD	7	16
- Rhythm	7	9
- Other	33	11
13. Family Planning Used Now %		
- Nothing	35	80

<u>Variable</u>	<u>Zambia</u> (346)	<u>Liberia</u> (109)
14. Referral to NFP	Even distribution	NFP worker = 64%
Total Living Children Median	3	2

FOLLOW UP FORM

<u>Variable</u>	<u>Zambia</u> (N = 93)	<u>Liberia</u> (N = 118)
15. Teacher	Teacher #10 appeared to do very few followups	
16. Followup Form # number %		
- 1	88	66
- 2	10	24
- 3	1	5
17. Followup site-Home %	46	69
18. Months Since Began Charting	Some people have been charting a long time but have not had followup	

<u>Variable</u>	<u>Zambia (93)</u>	<u>Liberia (118)</u>
19. Reason Charting %	For Zambia, disagrees markedly from the family planning intentions shown on the registration form (See 10 above). This may be because of the large number of unknowns.	
- Plan	10	33
- Space	18	38
- Limit	1	22
- Unknown	67	0
20. Signs Charted	Mucus and Temperature are the most popular	
21. Chart is Interpretable %	78	72
22. Intercourse Record		
First and Last %	32	32
23. Abstinence		
Client Difficult %	6	3
Spouse Difficult %	11	3
24. Autonomous	15	1

DISCONTINUATION FORM

<u>Variable</u>	<u>Zambia</u> (N = 31)	<u>Liberia</u> (N = 34)
25. Will Ever Use NFP		
in Future - NO %	51	52
26. Type of Discontinuation %		
- Lost to followup	13	29
- Health	6	0
- Personal	26	62
- Pregnant	55	9

Because of the similar nature of the other variables for the two countries, these differences in the types of discontinuation between the two countries make me suspect that a bias may have been introduced into the discontinuation classification.

MONTHLY SUMMARY

All copies of monthly summaries received from Liberia are included. These reports provide a very good quick review of how individual instructors are doing.

Notable is the effort some teachers spend on initial contact, with low numbers of registered as a result.

Case loads of instructors as they vary through the year are seen in the learning user column.

Autonomous and cumulative autonomous can be considered in some measure the success of a teacher.

No monthly summaries have been received from Zambia.

Program Problems as Found in the Data

The educational data and literary level show the programs to be reaching the educated elite. The programs should strive to move beyond the educated to the village people. The programs cannot be judged adequate to meet the family planning needs of Zambia and Liberia until they show that the village people will accept NFP.

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The types of discontinuation found in the two programs are quite different. Liberia shows only 9% pregnancies of 34 discontinuations, whereas Zambia shows 55% pregnancies of 31 discontinuations. Liberia may be underreporting pregnancies.

Report to: Dr. Claude Lanctot
Dr. Ronald H. Gray
From: Bob Kambic
Subject: Update of activities since Richard St. Mart's visit to JHU

1. All data entry forms on the SOS data software have been extensively revised (Appendix A). This includes specifications for range checks for each variable and internal consistency data checks when they have been found to be useful. SOS data will now run the range and consistency checks in batch mode. The checks have been tested a number of times and found to be working and to be useful.
2. The output of the range and consistency checks is a file which is not interpretable by someone unfamiliar with computers (Appendix B, sample). It took me several weeks to write a basic program (Appendix C) which took the error file and interpreted it so that one can match files directly with the reporting forms (See error interpretation file, Appendix D).

Dr. Sol Su spent some time revising SOS so that it would run batch error checks.

3. The present system for data handling is as follows:
 - A. Data is recieved on reporting forms
 - B. Date received is stamped on all reporting forms at top right

C. Data is entered into the computer using the SOS data package.

C1. The "NFP Menu" is executed

C2. The particular form is executed, e.g., Registration

C3. The file name for the data file is entered.

It is composed of the first 3 letters of the country name LIB, ZAM, etc., plus the transmittal number plus the first 3 letters of the form, REG, FOL, DIS.

Example: ZAM/FOL.DAT

is Zambian 7th transmittal followup data.

D. The new data file is sorted by district and a comparison of ID numbers is made with the transmittal sheet and any errors or duplications are corrected.

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MAURITIUS NFP EVALUATION PROJECT

(January-June 1985)

FIELD TESTING EVALUATION INSTRUMENT AND GUIDE

The field testing of the "Instrument" and "Guide" has also been completed. Interview forms for NFP educators, supervisors and training/service coordinators were developed. Ninety-four educators were observed giving 78 initial instructions and 79 follow up cycle reviews. Fourteen regional supervisors and four zonal supervisors were interviewed regarding their work functions. The administrators and several board members were also interviewed. In these interviews, emphasis was given to eliciting recommendations by personnel for improved job satisfaction.

From these interviews and site observations, a narrative summary of the actual program was written and compared to a description of a model program. Differences between the actual program summary versus model descriptions were noted. These differences were clustered into priority areas and detailed draft action plans to improve them were drawn up. These action plans will be the basis of a three to five year national development plan.

Areas given priority for improvement were:

1. The continuing development of NFP educators.
2. The strengthening of information/outreach sessions.
3. Revision of salary structures.
4. The strengthening of regional supervisors' roles.
5. The strengthening of job functions of educators, regional supervisors and zonal supervisors.
6. Developing NFP couple motivational groups.
7. Developing more group instruction.
8. In a three to five year pilot test develop and evaluate the WHO Learning Package.
9. Consider standardized press - through or duplicate charts forms to avoid recopying cycle charts.
10. Investigate the subcontracting of NFP research projects with international organizations.

Based on observation of 112 service personnel, job descriptions were written for NFP educators, and for the supervisors on the regional, zonal and national levels.

After the third draft of Mauritius operational program standards, and in conjunction with the Zambia and Liberia programs, and IFPLP Working Document, National NFP Program Standards was written in which twenty-one, program standards were formulated under three areas, Services, (see Annex 1) Administration and Resources.

A full report on the project is nearly complete and will be submitted before the project terminates, September 30, 1985.

TRAINING OF COMPUTER SPECIALIST FROM ACTION FAMILIALE

Covered by the Technical Assistance Project Budget (see Mauritius Technical Assistance Project section).

AFRICA SUPERVISOR TRAINERSHIPS AND CONSULTANT VISITS

Covered by the Technical Assistance Project Budget (see Mauritius Technical Assistance Project section).

CONSULTATION VISITS

Field trips made during this period were:

January 17, 1985 - March 2, 1985 - Dr. Mary C. Martin
June 1, 1985 - June 24, 1985 - Dr. Mary C. Martin

Reports were submitted to USAID within several weeks after the visits. Some of the recommendations given were to broaden the base of NFP services to a wider variety of families, establish an NFP Advisory Committee to the Board of Action Familiale, establish permanent/visible service sites, re-define the continuing education program for NFP teachers, institute a data collection system, which will give timely feedback on client needs and staff effort.

CONCLUSION

This evaluation project is on schedule and has produced practical program standards and improvement recommendations generated by the staff themselves. In the words of the founder of Action Familiale, "for the first time we engaged in serious long-range program planning. Job descriptions and service descriptions deriving from this exercise can be used to guide incipient programs on the African Continent in their development for addition, translation into French of the Evaluation Instrument and Guide has been done. This will be necessary for the replication of this evaluation process in the French-speaking African countries.

Finally, the field-testing of the Johns Hopkins University client data forms was accomplished to the benefit of both the Mauritius program which has decided to adopt them in their national NFP program, and for the fine-tuning of the forms themselves which are being used in two other Demonstration/programs in Africa, Zambia and Liberia, and which may be adopted/adapted in several other countries in 1986.

IFFLP WORKING DOCUMENT

NATIONAL NFP PROGRAM STANDARDS

SPRING 1985

LIMITED DISTRIBUTION

International Federation For Family Life Promotion
1511 K Street, N.W., Suite 700
Washington, D.C. 20005 (USA)

IFFLP/AID Working Agreement #DPE-0632-A-00-3049-00

EXPANDED STATEMENT OF NATIONAL PROGRAM STANDARDS
NATIONAL NFP PROGRAM STANDARDS
(LIMITED EDITION)

This is an initial set of national program standards, developed through systematic observation and interview of administrative personnel and job functions, Action Familiale, Mauritius.

IFFLP CONSULTATION

Expanded some of the initial draft of standard statements to enable a greater generalization for other national programs within the immediate Federation program interest areas.

PURPOSE OF INITIAL SET OF NATIONAL NFP PROGRAM STANDARDS:
IFFLP WORKING DOCUMENT

The primary objective of these standards is to serve as an internal document for the IFFLP/AID program development purposes and should not be interpreted as a final document but rather a working document for further dialogue and discussion with other national NFP programs and organizations.

LIST OF STANDARDS

PAGE

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2.	Provides planned, scheduled information/ education services.....	2
3.	Provides medical services as well as marriage and family life counseling services for NFP clientele.....	2
4.	Provides governing, executive and advisory groups to develop aims, objectives and policies of the organization.....	3
5.	Established funding plans and policies facilitating fiscal responsibility.....	3&4
6.	Provides policy and procedure manuals including job descriptions and conducts annual evaluations for all levels of personnel within the organization.....	5
7.	Publishes annual report including policies, services and fiscal state of organization.....	6
B.	<u>RESOURCES</u>	
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	<u>SUGGESTED JOB FUNCTIONS FOR SUPERVISORY NFP PERSONNEL</u>	8
	Provides requirements for competency-based training for educators/teachers with formal course content requirements, evaluation and supervised teaching experience for new teachers involving both individual and group learning educational opportunities for a six to eight month period of time.....	10-24
2.	Provides planned continuing education programs for educators/teachers already trained and providing NFP services within organizations in the country related to the field and interests of natural family planning.....	2-8

3. Provides training programs for regional-district, zonal, provincial and national training and supervisory personnel relative to the supervision, management and expansion of NFP services within their respective areas of job functions.....8
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5. Establishes and implements planned fund-raising activities and secures funding from a variety of national, international, private and government agencies.....8
6. Establishes salary levels and job incentives based on job performance competencies for both paid and volunteer, full and part-time personnel within the organization.....8
7. Provides fiscally responsible policies for ordering supplies, services and reporting requirements.....8
8. Provides supplementary professional, clerical, secretarial, accounting and statistical assistance, as needed, to provide sufficient support to the administration and services of the organization.....8
9. Provides permanent NFP instructional centers within regions, districts and provinces to facilitate individual and group instruction of clientele as well as convenience, privacy and confidentiality of instruction on a mobile basis to the client's home....8
10. Provides quality control procedures for continuing monitoring of client instruction, use of method, pregnancy analyses and assurance of autonomy status of clientele.....8
11. Provides standardized method of providing initial and follow-up instruction to women and couples and maintains monitoring and up-dating of these instructional approaches and information in keeping with current state of the art in NFP.....9
12. Provides instructional centers and small group approaches to facilitate instruction to couples as well as working women within each major area in which such working personnel and/or couples are recruited.....9

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C. RESULTS

1. Provides and implements systematic reporting process to record the services provided to the communities served including data collection to describe types of information/education services both long and short-ranged; the type of clientele served by the NFP program, the number and duration of actively learning clientele, number of autonomous clientele and continued use ratios of NFP.....9
2. Conducts annual program evaluation to revise national program aims and objectives to reflect a 10% growth in services, annually; and delete obsolete aims, objectives and correspondent functions.....9

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EXPANDED STATEMENT OF NATIONAL PROGRAM STANDARDS

The following statements are first drafts of national NFP program standards that have been systematically defined through empirical observation of program services and functions, using a systems analytic approach involving difference analysis.¹ There are three major areas in which the standards are defined: Program Services and Administration, Resources, and Results. These first initial empirically derived statements of standards and some criteria by which the standard can be observed are to be considered as critical, but only a first step toward the realization of systematic national programs and services in natural family planning.

A. Program Services and Administration

The National NFP Organization

1. Provides NFP services to engaged or married women or couples until the woman or couple reaches autonomy in the use of NFP. Autonomy is operationally defined as:

Couples who are able to:

- . identify the fertile and infertile days of the cycle, especially the beginning and end of the fertile days;
- . apply the appropriate periodic abstinence in harmony with their family planning or procreative intention;
- . are confident in the use of NFP.

Criteria and Some Dimensions of the NFP Services
include, but are not restricted to:

- a) women and couples from a variety of social, educational and economic backgrounds.
- b) women primarily in the reproductive age category between 20 and 29 years of age. NFP services would also be provided to women and couples younger and older than these ages, however the focus of the program would be within these age categories.
- c) NFP services both initial and follow-up instruction would be designed specifically for the clientele served with appropriate monitoring and evaluation processes to facilitate the development of autonomy.

¹ Claude A. Lanctot and Mary C. Martin. Natural Family Planning Services, Programme Evaluation Guide and Instrument, IFFLP, 1511 K St., N.W., Suite 700, Washington, D.C. 20005, USA. Used under contract IFFLP/AID, DPE-0632-A-00-3049-00. Program Evaluation Project, Action Familiale, Rose Hill, Mauritius, Indian Ocean.

2. Provides planned scheduled information and educational services which promote the services of the organization.

Criteria and some Dimensions of the Information Services include, but are not restricted to:

- a) utilizes prepared speakers including motivated users and couples speaking to groups with similar age and interest characteristics.
 - b) developed roles for a wide variety of referral sources including persons, media and publications in professional literature and publications available to the general public to be served.
 - c) uses long and short ranged information educational opportunities including specific talks to engaged and married groups, radio and television talk shows, family-life and health care professional orientation, significant community leadership groups including parent and family groups.
 - d) identification of the effect or immediate referral source or registration forms of clientele seeking NFP services.
 - e) revises information and educational efforts based on community response and clientele recruited.
3. Provides medical services, as well as marriage and family life counseling services for NFP clientele.

Criteria and Some Dimensions of the Medical and Counseling Services include, but are not restricted to:

- a) utilizes medical physicians competent in current NFP methodologies, to assist clientele with difficult cycle interpretations, women with apparent anovulatory cycles, continuous vaginal discharges including bleeding and unusual situations related to the reproductive monitoring provided in the use of NFP.
- b) utilizes medical physicians knowledgeable in reproductive endocrinology to assist couples who are experiencing difficulty in achieving pregnancy through the use of NFP.
- c) utilizes specially trained marriage and family life counselors who are knowledgeable of the dialogue, relational and religious motivations of couples using NFP.
- d) provides direct services through the agency or provides referral of NFP clientele to professional services with the competencies as related to in the above.

4. Provides governing, executive and advisory groups to develop and implement aims, objectives and policies of the organization.

Criteria and Some Dimensions of the Governing, Executive and Advisory Groups include but are not restricted to:

- a) utilizes a small number of leadership persons as the governing body whose primary interest and initiatives are concerned with the specific aims, goals and policies of the organization. Intrinsic to the governing process, these persons should be of similar nature regarding their philosophies, leadership and decision-making experience at a national level of policy consideration.
- b) utilizes an executive person with experience in NFP, family life, youth and education areas of professional interest. This individual would demonstrate managerial and administrative skills and would implement the policies of the organization; develop five year expansion plans and update these annually; interact with other national and international organizations to share and receive progress and process information useful to the national program; would demonstrate initiative and capability of expansion and articulation of the national program with appropriate professional NFP, educational, family life, health care and community groups or organizations.
- c) utilizes leadership persons reflecting the various community interest areas related to the work of the organization. These individuals should reflect the men and women of various family life, youth, health care disciplines and religious ministries as well as wives of significant community leaders. The advisory group would develop specific aims and objectives for their meetings and would suggest to the executive and the governing bodies those areas for program and policy consideration. The advisory group would also assist the governing body and executive in areas for funding potentials. Intrinsic to the selection of advisory membership would be persons with shared vision concerning the aims and goals of the organization.
- d) the NFP advisory group would meet at least quarterly and discuss process, outcomes and difficulties with the executive as indicated.
5. Establishes funding plans and policies facilitating fiscal responsibility for the organization.

Criteria and Some Dimensions of Fiscal Responsibilities include, but are not restricted to:

- a) written fund-raising plan reflecting identification of national, international, private and public organizations, as well, as individual entrepreneurs who are likely to fund the activities of the organization.
- b) proposal request formats and dates for submission for funding of the above identified sources when available.
- c) specific unsolicited proposal formats for both specific projects and secretariat funding for the national organization on file for reference and quick use as indicated.
- d) regularly implemented funding proposals to the above sources with follow-up visits and/or correspondence to either move ahead with a concept proposal or repeat request in another area of interest to the organization.
- e) membership to publications of respective potential donor sources to establish organizational awareness of funding realities and opportunities for the national organization.
- f) available sets of the usually requested national organizational appendices required for funding proposals, i.e., annual report, brochures describing the organizational work, professional resumes, updated annually, listing of previous completed contracts, projects and activities and institutional resources.
- g) statements of financial responsibilities including internal accounting personnel and external financial audit when indicated.
- h) current listing of all active membership and record of status regarding dues, renewal and new membership kits if indicated.
- i) staff accountability of personnel time, specifically to general administration and/or specific project activities.
- j) written acknowledgement of all funded proposals or funds received from the executive of the organization and governing board when indicated.
- k) written summary describing why a given proposal or fund-raising effort was not successful and contingency plan when indicated.

6. Provides policy and procedure manuals including job descriptions and conducts annual evaluation of all levels of program personnel.

Criteria and Some Dimensions of Policy Procedures and Evaluation include, but are not restricted to:

- a) written policy guidelines concerning the major operations and conduct of staff including descriptions of procedures essential for the orderly conduct of business of the organization. In this manual would be correct examples of usually performed procedures in the organizations, such as, time sheets, telex or long-distance telephoning procedures, samples of form letters for general request for review copies of books or journals, information kits or letters for persons seeking information about the organization.
 - b) written job descriptions for all personnel including administrative, supervisory, teaching, secretarial and clerical. In addition, task descriptions for staff persons concerned with housekeeping or car driving and maintenance should also be in the personnel manual.
 - c) written annual evaluations of all staff should be conducted and discussed with each employee by the appropriate administrative personnel. The employee should be counseled and commended for outstanding behavior or non-satisfactory during the year. The employee should indicate on the written evaluation, his/her signature and if there is an area of disagreement, the employee should have the opportunity to indicate this on the evaluation form.
- NOTE:** The majority of the personnel evaluation statements should be based on job performance capability which also includes statements on the person's ability to use initiative and get along with other persons on the job.
- d) employees should be given a copy of the evaluation form at the time of their employment to enable them to understand the full dimensions of their work situation.
 - e) written policies should be stated regarding the promotion capability, bonuses and other incentives for excellence available within the organization.
 - f) written policies regarding warnings, reasons for immediate dismissal and dismissal after warnings should also be stated.

7. Publishes an annual report including policies, services and fiscal state of the organization.

Criteria and Some Dimensions of the Annual Report include, but are not restricted to:

- a) published annually and in the language(s) and major dialects of the country and international agencies with whom the agency interacts.
 - b) written statement by the president or chairman of the board relative to the accomplishments of the past year and the forthcoming achievements for the present year.
 - c) report on the activities of the organization during the past year emphasizing the major new projects initiated, the status of the services of the organization, that is, family life, natural family planning, counseling and youth education programs.
 - d) report on district, regional, zonal and national meetings relevant to the work of the national organization.
 - e) report on specific activities of the national office staff as related to zonal, regional and district activities, as well as, capsuled report on international meetings attended by members of the organization.
 - f) report of any new publications by the organization, either project progress reports on development or studies being conducted by the organization or formal reports of consultants to the national organization, when indicated.
 - g) an auditor's report indicating the financial assets, liabilities and fund balances, sources of revenues, expenses and statement of explanation to specific financial areas of outstanding concern.
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B. RESOURCES

The National NFP Organization

1. Provides NFP service in supervised regions of the country providing supervisory and monitoring mechanisms for quality assurance at the client-educator/teacher areas of delivery, the educator/teacher and regional or district areas of supervision and the regional and zonal areas of supervision.

Criteria and Some Dimensions of Quality Assurance in the Delivery of NFP Services include, but are not restricted to:

- a) establishes job descriptions and personnel to provide supervisory and monitoring functions, including educators/instructors, regional or district supervisors, zonal or area supervisors and national training and service coordinator.
- b) provides supervision for new and experienced educators/teachers to insure delivery of competent and consistent NFP instruction until client reaches autonomy.
- c) insures that registration, follow-up instruction, interview of drop-out clientele, discontinuation of program forms are completed at the appropriate level of monitoring in the program.
- d) conducts pregnancy analyses for clientele who have become pregnant, although stating that they were using the method to space or limit pregnancies.
- e) reviews charts of clientele who have achieved autonomy and identifies these women or couples for annual survey procedures to monitor long term use effectiveness ratios.
- f) identifies and conducts analyses for couples using fertility awareness to achieve pregnancy separate from those couples using NFP as a means to space or limit pregnancy.
- g) conducts planned monthly group meetings at the appropriate supervisory levels of responsibilities to discuss planning management and supervision of NFP services within the respective areas. For example, the national training and service coordinator would meet with the regional or district supervisors, and the regional/district supervisors would meet with the educators or teachers in their respective areas of supervision.
- h) provides individual and group continuing education as needed for educators and supervisors.

NOTE: The Remaining NFP Program Standards of the IFFLP Working Document, Sections B. 2 through B. 12 and Section C. 1,2 are statements of NFP Standards in the areas of Resources and Results which are guides but at this time have not been completed with specific criteria as a means of observation.

2. Provides planned continuing education programs for educators/teachers already trained and providing NFP services within organizations in the country related to the field and interests of natural family planning.
3. Provides training programs for regional, district, zonal, provincial and national training and supervisory personnel relative to the supervision, management and expansion of NFP services within their respective areas of job functions
4. Provides training programs and planned regular opportunities for a variety of speakers addressing groups with similar professional and personal characteristics for the purposes of promoting NFP services and the national organization within the country.
5. Establishes and implements planned fund-raising activities and secures funding from a variety of national, international private and government agencies.
6. Establishes salary levels and job incentives based on job performance competencies for both paid and volunteer, full and part-time personnel within the organization.
7. Provides fiscally responsible policies for ordering supplies, services, and reporting requirements.
8. Provides supplementary professional, clerical, secretarial, accounting and statistical assistance, as needed, to provide sufficient support to the administration and services of the organization.
9. Provides permanent NFP instructional centers within regions, districts and provincers to facilitate individual and group instruction of clientele as well as convenience, privacy and confidentiality of instruction on a mobile basis to the client's home.
10. Provides quality control procedures for continuing monitoring of client instruction, use of method, pregnancy analyses and assurance of autonomy status of clientele.

11. Provides standardized method of providing initial and follow-up instruction to women and couples and maintains monitoring and up-dating of these instructional approaches and information in keeping with current state of the art in NFP.
12. Provides instructional centers and small group approaches to facilitate instruction to couples as well as working women within each major area in which such working personnel and/or couples are recruited.

C. RESULTS

1. Provides and implements systematic reporting process to record the services provided to the communities served including data collection to describe types of information and education services both long and short-ranged; the type of clientele served by the NFP program, the number and duration of actively learning clientele, number of autonomous clientele and continued use ratios of NFP.
2. Conducts annual program evaluation to revise national program aims and objectives to reflect a 10% growth in services, annually; and delete obsolete aims, objectives and correspondent functions.

SUGGESTED JOB FUNCTIONS FOR SUPERVISORY NFP PERSONNEL

To ensure appropriate quality assurance of NFP instructional services provided to women and couples, various levels of personnel skilled in NFP teaching and client supervision are needed. Defined areas of tasks related to monitoring and providing assurance of quality NFP instruction within the operational NFP service structure of the organization are provided. The following job functions and supervisory levels are recommended as a means to provide quality assurance in a national NFP service organization.

EDUCATOR/INSTRUCTOR: the individual who has the greatest responsibility for providing quality instruction and follow-up for women and couples learning and using NFP. The educator/instructor as the essential client supervisor would:

- a) present NFP to individual or small groups of women or couples, so that, the clientele learn:
 1. a brief overview of the concept of fertile and infertile days or phases of the cycle;
 2. understand that NFP includes periodic abstinence during the fertile days of the cycle if the couple does not wish pregnancy at this time;
 3. insures that each woman/couple knows how to chart cervical mucus signs and/or temperature at the completion of the initial instruction.
- b) advise abstinence from intercourse during the first cycle until postovulatory phase is verified by the educator/instructor. Exceptions to this policy would necessarily be limited to individual needs of couples and the ability of the woman to identify the presence of early dry, infertile days, as verified by the instructor.
- c) see new women and couples frequently during the first several cycles to provide clarification and additional instruction as needed by the client. Instructional need is illustrated by the client/s ability to observe and record fertility signs such as cervical mucus, temperature and other signs, identify fertile days and apply appropriate method.

- d) arrange for instruction of couples to facilitate the understanding of NFP emphasizing the combined fertility potential of both the man and woman, the need for abstinence from sexual intercourse during the fertile time if pregnancy is not desired at this time, and the need for the couple to be supportive of each other and their decision to use NFP including the need to express affection, care and intimacy in ways other than sexual intercourse during the fertile days of the cycle.
- e) if the educator/instructor primarily sees the woman, then arrangements for presenting relationship aspects of NFP to couples should be made. Couples who are enthusiastic and reflective of the NFP clientele served could present these topics in small groups of women and couples to facilitate this important dimension of natural family planning services.
- f) provide follow-up NFP instruction to women and couples at least once a month or more frequently as needed by the clientele for a period of six or more cycles until the couple reaches autonomy.
- g) insures that the woman and couple are able to:
- . chart and describe daily observations of mucus;
 - . chart, record and identify the peak day of mucus;
 - . chart, record and identify the first three full days after peak mucus and/or the first three days of temperature shift to the higher postovulatory level;
 - . draw coverline and identify the infertile phase after peak day and shift of temperature to higher level;
 - . identify beginning and end of fertile days of cycle depending on which sign or combination of fertility signs used;
 - . apply the appropriate periodic abstinence during the early infertile days and fertile days in harmony with their family planning intention.
 - . discuss and agree upon their family planning intention, that is, to have a child, delay having a child at the present time or not have a child at this time. Implicit in this couple dialogue is the understanding that these intentions may change in and during the practice and use of natural family planning;
 - . use natural family planning with confidence.

- h) provides copies of the client's chart to the regional supervisor and will identify areas of difficulties in learning or using NFP with the regional supervisor.
- i) completes the program forms for registration, follow-up, discontinuation, pregnancy analysis and drop-out as indicated by program policies and procedures.
- j) reflects and implements the policies and attitudes of the organization especially in the area of clientele services and confidences implied therein.
- k) attends group and individual meetings with the regional/district NFP supervisor as indicated.
- l) requests additional supervision and/or assistance when client difficulties are experienced in the areas of NFP, health concerns and/or marriage and family life concerns.
- m) participates in annual performance evaluation and discuss job-related training needs with regional/district supervisor.

NOTE: The Educator/Instructor personnel are generally not considered in the job descriptions as supervisory personnel. However, the position of this job description suggests that the educator/instructor has the most critical quality assurance task in the total NFP organization and therefore should be considered as an essential supervisory person at the service level.

2. REGIONAL OR DISTRICT SUPERVISOR

The regional or district supervisor is the supervisory person who is responsible for conducting the training of the new educators in concert with the policy of the national training coordinator. This person is the responsible administrative arm for education, training and service delivery. As such is responsible for providing quality assurance for the continuation of provision of NFP instruction of existing educators/instructors in the defined region or district.

NOTE: The exact training for new educators/instructors may be conducted at either the regional, zonal, province or national level, depending on the areas to be serviced. Other factors include availability of faculty and competency of the regional or district supervisor and the number and type of NFP educator/instructor to be

trained. It is recommended that the training and continued education for educators/instructors be conducted regionally to provide for the opportunity for local control and supervision of the new and existing educator/instructor staffs.

The regional or district supervisors may develop assistant supervisory roles for quality assurance activities within different types of service organizations. For example, supervisory assistance could develop within family life organizations, hospital and health areas and ministry of health clinics and services. If such a diversification of service sites existed within a region or district, the assistant supervisory personnel would be accountable to the regional or district supervisor and would meet at least every two weeks and as needed to assure quality NFP instruction. The regional district supervisor would:

1. Conduct monthly or more frequent group meetings with the certified educators or instructors assigned to the region for the purposes of:
 - a) review of client charts and in particular, identifying those client's who have cycles and special teaching needs.
 - b) present types of teaching problems and encourage the group of educators to present the chart(s) and teaching approaches that are successful and less successful. This would include demonstration and discussion of specialized teaching/learning approaches that various educators /instructors could use and would thereby extend the experience of both successful and less successful teaching efforts.
 - c) check randomly with clientele receiving instruction from the case load or clientele of each certified educator within the region. This activity should be discrete and within the expectation of educator/instructor. It is recommended that in such a visit, the regional supervisor would assume the follow-up instruction to the client. It is not recommended that this be an opportunity for direct supervision of experienced educators/instructors, but rather a quality control check of the type of educational service being provided. Therefore, it is a random check of the understanding of instruction of clientele. It is not meant to be conducted with the educator.
2. Conducts with zonal supervisor and other assistant regional or district supervisors, training for new educators/instructors the following guidelines and format for curricula training stated and implemented by national training and service coordinator.

BASIC CORE NFP EDUCATOR/INSTRUCTOR TRAINING

3. The basic core training for NFP educators/instructors should include, but is not restricted to:
- a) formal classroom presentation of a prepared program for training NFP teachers and preferably be conducted over a concentrated period of time of 40-50 hours combining lecture, small group cycle reviews, discussion groups concerned with attitudes for teachers and NFP, teaching techniques with the teaching materials demonstrated the new teacher will be using. Objective tests and/or systematic quizzes should be used.
 - b) the core NFP teacher training should present all current natural methods, typical and a typical or an-ovulatory cycle and method instruction for young, older women and women who are breastfeeding and in premenopausal situations. Special emphasis should be given regarding instruction for women and couples in states of subfertility and the use of fertility awareness to achieve pregnancy. Special teaching approaches should be emphasized for women and couples who are in states of either returning or declining fertility.
 - c) the core NFP teacher training should also include breastfeeding information, hydration and information on immunization when appropriate to the women and couples served. If the NFP faculty is not prepared to address these issues, special health care personnel and literature would be available from the ministry of health or the primary health care facility in the region of areas served.²
 - d) the core NFP teacher training should concentrate on knowledge of the hormonal controls and cycle implications, method applications, chart interpretation skills, sample demonstrations of how to teach and what records to complete for program needs, how to provide instructional support for couples and women learning to use NFP in the various stages of learning the client experiences.

¹Country adaptation, including evaluation criteria. Who/ Family Fertility Education Package. Blat, London England.

²In some countries there is a greater need for women and infants to learn nutrition, hydration and general primary health care concerns, than in those countries, who already have existing and available programs of primary health. In any case, emphasis on full or total breastfeeding is of special interest both to women and couples using natural methods and to the overall state of infant health.

- e) the core NFP teacher training should provide opportunity for discussion and presentation of the need for conjugal or partner dialogue, particularly, in the areas of family planning or procreative intention as a means of clarifying and integrating NFP, thereby using the method more consistently and over time.
4. Conduct with regional supervisor, supervised practical portion of the educator/instructor teacher training program. Assign new educator to an existing center and include the following training supervisory tasks over a six to eight month period of time.
- a) each teacher trainee will teach ten women/couples and provide follow-up instruction for a period of six months until an initial state of autonomy is realized by the learning couples/clientele.
 - b) the new trainee will teach women or couples either on an individualized or small group basis. The new trainee should not teach more than two/three, women/couples at the same time.
 - c) some recommendations for helping to develop confidence and competence of new educators/instructors include, but are not restricted to:
 - . receive demonstrations and teaching materials that illustrate the correct information and approaches for teaching women and couples. Materials for teaching individually, as well as, small groups of no more than two/three, women/couples for new educators/instructors should be available.
 - . receive the opportunity for direct supervision of initial instruction, when the trainee seems to indicate or explay a need for direct supervision. (some NFP educators/instructor trainees may already have experience in health or family life instruction techniques, but still need reassurance.)
 - . receive the opportunity for quick, positive feedback by the supervisor as related to the strengths of their presentations, accuracy and areas for improvement.
 - . continuing training as an NFP educator/instructor through the group meetings with their peers and supervisor to expand their chart interpretation experience and teaching approach awareness for clients with a variety of cycle and use expectations.

- seek opportunities to develop self-evaluations of their individual strengths in initial and follow-up instruction and to begin to identify those areas in which they need additional instruction. This procedure can be accomplished by means of a self-check list, concerned with presentation, accuracy of information given regarding method, use and relationship advice. Each student could keep their own check-list and develop from the beginning of teaching experience, the important quality of becoming accountable to themselves for providing accurate and good instruction to women/couples learning NFP.
- 5. Review all clientele records of couples who have reached autonomy status and enters appropriate program form(s) for periodic monitoring by program continued use effectiveness information.
- 6. Review all pregnancy analysis, either those couples who specifically entered the program to achieve or those who after learning and using NFP to delay pregnancy, became pregnant; that is, the category of unplanned pregnancies currently identified in the NFP literature as Informed Choice Pregnancy. Completes the appropriate form for such clientele and refers those couples to appropriate prenatal care facilities or their physician.
- 7. Refer couples who have been using NFP to achieve pregnancy, but have been unable to achieve after using fertile days for 6-10 cycles to a physician or infertility specialist and/or follows established program policies in the area of subfertility counseling.
- 8. Implement program guidelines for referral of couples and/or families with counseling situations to the appropriate trained personnel identified by the national program.
- 9. Suggest areas for expansion and deletion of NFP program activities within the region on the basis of needs and accomplishment of existing activities in terms of results anticipated or achieved.
- 10. Complete the appropriate records, logs and evaluations of program activities within the region and submit according to organizational guidelines.
- 11. Identify needs of education services including administrative supplies, teaching materials for the educators/instructors as well as teaching materials for teaching women and couples.

12. Assume responsibility for NFP activities and services within the region.
13. Participate in annual performance evaluation and discusses job-related training needs with zonal or province supervisors.
14. Supervise new educator/instructor trainees with the "air of watchful neglect." This recommendation is one which supports an attitude of supervision which means that once the demonstration of how to teach and assurance by the trainee to the supervisor that he/she knows how to teach, the supervisor's role is to observe. In no situation would the supervisor actually do client teaching, but would always be supportive to the teaching and decision of the trainee. If there was a matter of critical instruction that was essential to be learned at that time, the supervisor would advise the trainee privately. The trainee would then transmit that instruction to the woman or couple, either at that time or on the next visit.

In natural family planning there is usually not a matter of crisis for the new teacher trainee. The supervisor should respect the right of the trainee to make some minor mistakes or what may be more likely, is that the trainee forgets to provide all of the details that he/she should have provided. This can readily be corrected on the next teaching or follow-up to the client and the preservation of the developing professional teaching capability of the trainee respected.

15. Conducts monthly group meetings for new educator/instructor trainees.
 - a) Each teacher trainee is expected to attend a group meeting with other new trainees once a month or more frequently as needed by the trainees and/or the regional supervisor. At this meeting, the charts of all learning clientele will be examined by the group. Charts of clientele with typical ovulatory cycles will be used to discuss the beginning and end of fertile days and whether or not the client understood the method by the manner in which they have used the infertile days, both before and after the fertile time. Charts of women who demonstrate irregular cycling patterns including, breastfeeding mothers, women who have recently discontinued the contraceptive pill and premenopausal women will also be discussed. These cycles can be used to show the variety of method applications emphasizing the advantages of cervical mucus, temperature and/or cervical examination as appropriate.

- b) The monthly group meeting of new NFP educator/instructor trainees is critical in that the group review of cycles and charts of clientele of all the new instructor trainees becomes part of the learning experience of each new educator. This group meeting also offers the opportunity to learn of new or different teaching approaches for certain types of clientele, as well as, an opportunity to develop a "spirite' de corps" and maintain the learning and spirit of the initial training group.
 - c) The group meeting for new trainees is important to develop a sense of peer accountability and self-evaluation essential to the quality of development required in human service systems.
16. Provides the supervision of new educator/instructor trainees until certification of competency skills have been demonstrated as stated by the organization. Assures competency skills of each new educator/instructor with the zonal or province supervisor.

3. ZONAL OR PROVINCE SUPERVISOR

The zonal or province supervisor is the supervisory person who is responsible for supervisory activities of Regional or District Supervisors, responsibility for implementing quality assurance of NFP and related services within the regions identified within the zonal or province geographical areas.

The zonal province supervisor may recruit additional assistance when needed from the Regional or District Supervisors or from other Zonal Supervisors if indicated. In addition to supervising NFP activities and services, the Zonal or Province Supervisors would also be responsible for being the primary public relations officer for the organization within the province or zone.

The Zonal or Province Supervisor would:

- 1. conduct monthly meetings with the regional or district supervisors assigned within their respective zones for the purpose of:
 - a) review and discussion of NFP method interpretations and training approaches for assisting the educator/instructor in providing better instructional practices.
 - b) review criteria and regularly conduct random chart/cycle reviews of autonomous couples collected from regions through the reporting systems at the regional or district offices.

- c) review cycles, follow-up forms and pregnancy analyses for couples using NFP to space or limit the size of their family and identify teaching/learning problems if any. This information should provide areas for problem or identification of additional parameters in the NFP services or teaching and support groups that may facilitate better integration and use of NFP. This particular parameter is critical at all levels, but it becomes important at the zonal or province because it may help to group and quickly identify those areas of the zone or province that need strengthening at the recruitment, service and follow-up approaches utilized.
 - d) identify areas for continuing education at the regional or district supervisory level, as well as, educator/instructor service level that need to be addressed to improve the quality of service through the training and improvement of personnel or service monitoring.
 - e) maintain quality assurance procedures for improving regional/district supervision and educator/instructor standards to up-grade and maintain good services. These procedures for up-grading and continuation of training should be objectively assessed. Personnel who are unable to maintain the quality of NFP service delivery should be released from service to the organization. Implicit in this last statement is the understanding that the person has had the opportunity to improve his/her skills in a specified time period.
2. Assume primary administrative responsibilities for the organization within their respective areas of supervision, including implementation of new forms, recruitment approaches, innovative educational approaches or method instruction changes.
 3. Contact significant community leadership within the zone or province that would facilitate support and expansion of NFP services within the area. When indicated, would suggest interested leaders to the national office for promotion as national leadership and identification of potential speakers for the program.
 4. Participate in and when necessary, conduct the training program for training educators/teachers involving regional/district supervisors as indicated by geographic and direct supervision of new teachers practicum, group and individual experience.
 5. Plan and conduct regularly scheduled information/education programs for professional family life and health care personnel or business/administrative persons who expressed interest in learning of the NFP and other services of the organization.

6. Develop contacts with educators, physicians, family life and youth workers/professionals who may be of some assistance in the support of the work of NFP, as well as, contributory to the continuing education workshops for regional supervisors.
7. Seek opportunities for professional development through attendance at national and/or international meetings in areas related to NFP, when possible.
8. Assume responsibility for NFP activities and services within the zone or province.
9. Participate in annual performance evaluation and discusses job-related training needs with national training service coordinator.

4. NATIONAL NFP TRAINING AND SERVICE COORDINATOR

The national NFP training and service coordinator is the supervisory person who is responsible for all of the training programs and services provided in NFP for women and couples in the country. This person designs and implements training for both new and existing service personnel at the educator/instructor regional or district supervisory level and the zonal or province supervisory level of delivery. In addition, this person will assume responsibility for designing curricula and short courses for allied health and family care personnel including professionals in these respective fields. The national coordinator assumes responsibility of implementing and revising quality assurance procedures in conjunction with the executive to better realize effective monitoring and revision of program services in the delivery of natural family planning.

The specific levels of personnel supervised by the national NFP coordinator include the zonal supervisory personnel primarily. The national NFP coordinator may recruit additional assistance when needed from all supervisory levels, as well as, from other departments within the organization. The national NFP coordinator should seek assistance from other fields of related interest through the consultation with professional experts in those fields as needed to improve the delivery of NFP services. These consultations should be in keeping with the executive's policy implementation and in concert with the developmental needs of the national organization.

The National NFP Training and Service Coordinator would:

1. conduct monthly or less frequent meetings with zonal or province supervisors for the purposes of:
 - a) Monitoring general teaching-learning strengths and differences that are present within the zone, region and specific areas of the country.

NOTE: The frequency of national meetings would depend on the available travel and communication within the country, as well as, the distances and size of the province. If the country was difficult for frequent gatherings of zonal supervisors, the communication would necessarily have to occur through personal visits to each of the regions or bi-regions by the national coordinator and written communication to other zonal coordinators of guidelines discovered through the zone visits.

- b) identifying those zones, regions and/or areas that are presenting outstanding strengths and/or difficulties and discussing ways of sharing the strengths and/or eliminating the difficulties.
 - c) reviewing the process of new educator/instructor progress by means of objective reports of the training and follow-up process by the faculty/supervisory training team responsible. Progress would be monitored by the national coordinator primarily through insuring that:
 - . selection criteria were consistently utilized for selection of new teachers;
 - . competency-scores or comparable evaluation achievement was assured by faculty preferably through the use of objective based tests and;
 - . assurance of competence in teaching couples by means of individual regional educator supervision, samples of actual charts of clientele taught and progress reports submitted by zonal supervisors.
2. review all conception cycles of women and couples using NFP to either achieve or avoid pregnancy. Use accepted classification procedure to identify pregnancy rates for clientele using NFP to space or limit. Informed choice unintended pregnancies are classified as biological or method related, that is, the method was taught/learned and practiced correctly, but pregnancy occurred. Teaching/learning related, that is, the learner did not understand and misinterpreted the teaching; or a conscious departure by the couple or woman from wanting to space or limit family size to wanting to have a baby; or the woman or couple testing the fertile time or testing the system of fertility, itself.

3. randomly meet with regional supervisors, educators and clients when possible within the zone or province, either in small groups or individually to provide a cross validation check on quality assurance mechanisms to the on-going process of supervision and data collection.
4. develop NFP core curricula requirements both in task-based and competency or accomplishment related areas for zone, regional and educator levels. Implicit in this statement of development is the concept of the core faculty of the different levels of supervisory training personnel implementing similar or standard type of NFP and management training throughout the country. It may occur that the WHO learning package can provide a core of acceptable or workable concepts from which training packages can be designed and implemented with variations respecting both country and within country needs as well as meeting.
5. develop and conduct special core training for zonal supervisors including areas related to special NFP situations that require updating of educators/instructors, supervision and teaching approaches, management and evaluation skills, and personnel support skills.
6. coordinate and contribute to the design of information and education packages related to the general information provided to the community, special groups such as, health and family care persons, and school teachers related to the NFP services of the organization.
7. conduct annual evaluation of zonal supervisory personnel in the NFP service area.
8. prepares quarterly and annual reports for the executive related to the education, training and supervisory functions within the NFP service.
9. participates in annual performance evaluation and discusses job-related training needs with executive director of the organization.
10. assumes primary responsibilities for interacting with other NFP education, training and service coordinators to give and receive helpful development information related to NFP.

MONITORING INSTRUCTION OF NFP INSTRUCTOR TRAINEES

(By Trainer, Supervisor or New Trainee)

NAME OF TRAINER/TUTOR: _____

NAME OF INSTRUCTOR TRAINEE: _____

SITE: _____

DATE: _____

DIRECTIONS: Check the charts of each learning couple and indicate whether the instructor has succeeded in teaching the couple in each of the following areas.

GENERAL: The instructor trainee should be able to present the NFP method.

1. Using visuals appropriate to the method being taught.
2. Help the teaching/learning environment become comfortable so that the learning couple feels at ease.
3. Provide enough time for the learning couple to ask questions and be sure of what it is that they are suppose to do until the next instruction.

SPECIFIC AREAS TO BE CHECKED ON FOLLOW-UP

CHECK EACH CHART OF LEARNING COUPLES:

There are generally five major areas to be checked when following a learning couple's progress. Finally, it is the learning couple who become the major factor when evaluating a new instructor's ability to teach.

(CHECK-LIST)	AREAS	(NFP TEACHER TRAINEE)	YES	NO	COMMENT/NA
1. <u>NFP CHARTING</u>					
		. Is the mucus pattern charted and described in terms of fertile characteristics for at least 4-6 days prior to the peak day of mucus?.....			
		. Is the Peak Day of cervical mucus identified? Are the post peak days parked 1, 2, 3?.....			
		. Is there a biphasic temperature pattern? Are the first three temperatures after the thermal shift marked 1, 2, 3?.....			
		. Is there a correspondence between the cervical mucus pattern and the temperature rise to the higher level?.....			
		. Are secondary signs of fertility charted? (pain, bleeding, cervical signs, libido).....			
2. <u>PERIODIC ABSTINENCE METHODOLOGY</u>					
		. Can the couple identify the beginning and end of the fertile days?			
		. Do they abstain appropriately during the preovulatory infertile days?.....			
		. Do they abstain during the fertile time?.....			
3. <u>FAMILY PLANNING INTENTION</u>					
		. Does the couple wish to space or limit the size of their family or number of children?.....			
		. Does the couple wish to achieve or plan a pregnancy?.....			
4. <u>CONJUGAL BEHAVIOR AND PERIODIC ABSTINENCE</u>					
		. Does the intercourse pattern indicate a correspondence between the stated family planning intention and the appropriate methodology?.....			
		. Are they using any other family planning method during the fertile time?.....			
		. Are they cutting corners of the pre/postovulatory fertile time?			
5. <u>INTEGRATING OF PERIODIC ABSTINENCE</u>					
		. Is the couple happy with the method?.....			
		. Are they fully confident in using the infertile days of the cycle?			
		. What do they like most about the method so far?.....			
		. What do they like least about the method so far?.....			
		. Is the abstinence creating any extreme hardship for either spouse?.....			

From: Bob Kambic and Richard St. Marc
To: Dr. Ron Gray and Dr. Claude Lanctot
Date: March 11, 1985
cc: Dr. Sykes and Dr. Su

REPORT ON STAY OF RICHARD ST. MART, ACTION FAMILIALE MAURITIUS
VISIT TO JOHNS HOPKINS UNIVERSITY, JANUARY 17 - FEBRUARY 15, 1985

- A. Schedule: A schedule was planned for Mr. St. Mart by R. Kambic and Z. Sykes (Appendix A). Mr. St. Mart exceeded the tasks scheduled by his ability to quickly learn how to operate the computer and data entry systems.

In addition to learning SOS data entry and elementary SPSS analysis, Mr. St. Mart designed forms with SOS, completed the SPSS tutorial, learned DW2 word processing, learned elementary BASIC and wrote a BASIC program, and began to use the SYMPHONY SPREADSHEET for data base and financial management. He also assembled and disassembled the computer hardware.

- B. Dr. Gray, Mr. Kambic, Dr. Sykes, Dr. Su, and Mr. St. Mart discussed in detail a number of items relating to the Mauritius computerization. These items are contained in this report.
- C. Dr. Gray, Mr. Kambic and Mr. St. Mart also developed a protocol for study of autonomous users (copy attached).

PROCEDURES FOR QUALITY ASSURANCE OF DATA COLLECTION

1. Interviewers will be trained in the use of the reporting forms. The forms will be phased into use in Mauritius over a period of several months.
2. Procedures will be developed to see the follow-up forms are completed on time.

PROCEDURES FOR DATA ENTRY AND FILE MANAGEMENT

1. Raw data will be double entered using SOS verify mode. After validity checks, the data will be backed up on to a floppy disk.
2. Frequency checks will be run on all variables both for initial analysis and quality control. Frequency checks will be done by the data manager.
3. The data file will be reformatted and sorted, and duplicates will be removed by a program written by Dr. Sykes.
4. Every month the reformatted raw data will be combined into one monthly file (BIGFILE.DAT) and sorted. Frequencies will be run on all variables for quality checks.
5. Beginning with the first month, each month's BIGFILE.DAT will be added to a consolidated file. The consolidated file will include all records to that point. The consolidated file will be backed up monthly.
6. Edit checks will be run monthly on the consolidated file.
e.g., There should be only one registration form per record. If there is more than one registration form, the 2nd one has to be immediately preceded by a discontinuation form. There should not be more than 4 months between follow-up forms.
7. A summary file will be produced from the consolidated file. The summary file will enable administrative reports to be done. It will provide some quality checks such as timing of follow up and count numbers of clients seen during the observation period.

PROCEDURES FOR TRANSMISSION OF DATA TO JHU

The following will be the procedure for sending floppy disks with NFP data files back to the U.S. from Mauritius.

In the program SOS, NFP data entry formats are on the menu: NFP.MNU.

The data entry files are named as follow:

Registration Form	NFPREG.SCN
Follow Up Form	NFPFOL.SCN
Discontinuation Form	NFPDIS.SCN

The data entry programs put data into the following files:

Registration	MAUREG.DAT
Follow Up	MAUFOL.DAT
Discontinuation	MAUDIS.DAT

In each quarter of the year Action Familiale will prepare a floppy diskette with data for that quarter. This will be sent to JHU for concurrent analysis with Action Familiale.

The data file names will be as in Table 1:

TABLE 1: Data File Identification for Transmittal
of NFP Data from Mauritius to JHU

<u>Program Name</u>	<u>Data Type</u>		<u>Last Digit of Year</u>	<u>Month Data Collected</u>
Mauritius	Registration	REG	84	123456789ABC
	Follow Up	FOL	85	JFMAMJJASOND
	Discontinuation	DIS	86	

Example:

MAU	REG	5	4
-----	-----	---	---

So that Action Familiale Registration Data Collected in April of 1985 will be in file MAUREG54.DAT

The diskette with quarterly files on them will be identified as in Table 2:

TABLE 2: Diskette File Names for Transmittal of NFP Data from Mauritius to JHU

<u>Program Name</u>	<u>Last Digit of Year</u>	<u>Range of Months for which Data Collected</u>			
		1-3	4-6	7-9	10-12
Mauritius	5	1-3	4-6	7-9	10-12

STANDARD PROCEDURES FOR DATA ANALYSIS

These procedures will be routinely run on the quarterly data and on the cumulative data.

1. Frequencies and histograms of client age with the following categories:

0 - 20
21 - 25
26 - 30
31 - 35
36 - 40
> 40

2. Cross-tabulations of client parity and age
3. Frequencies and histograms of client religion
4. Frequencies and histograms of client education
5. Frequencies and histograms of where client received referral
6. Frequencies and histograms of client family planning interaction (avoid, space, etc.)
7. Frequencies and histograms of months charted
8. Frequencies and histograms of cycles charted
9. Frequencies and histograms of discontinuation

VARIABLE NAMES

The following initial variable names are to be used for SPSS:

Client Age	CLAGE
Spouse Age	SPACE
Client Gravidity	CLGRA
Client Parity	CLPAR
Client Religion	CLREL
Client Schooling	CLSCH
Client Referral	CLREF
Client Family Planning Intention	CLFPI
Client Months Charted	CLMON
Client Cycles Charted	CLCYC
Client Chart Shows	CHSHOW
Reason for Discontinuation	CLDIS

USE OF REPORTING FORMS

Mr. St. Mart felt that the registration form should contain better information on the reason a client chose NFP. He said that Question 22 on the registration form: "Why did you discontinue the previous method?", had answer codes that could also apply to the question: "Why have you chosen NFP?" We agreed that this question would be asked after Question 25, and the answer coded in Part IV: Optional code blanks 87-88 using the coding scheme for Question 22. This will add 2 characters to the length of the registration form.

On the follow-up form, Question 11: Intercourse Record, we agreed that if there was a conflict among answers, the answer that would be coded would be the one that signifies intercourse during the time of highest fertility.

We discussed how to fill in the question on the registration (#26) and follow-up (#20, #21) forms relating to time spent with the client. On the registration form, Question 26: Length of Interview, will refer to the total time for the length of the very first meeting with the client.

Questions 21 and 22: Total time spent with the client since the last form was completed for transmission to JHU, and Total number of visits with the client since the last form was completed for transmission to JHU will be used to obtain the average for the length of time spent on visits between the registration and the first follow-up.

We discussed the problem of possible change of family planning intention by a client leading to the "planned without prior notification" pregnancy. We agreed that Question 14 on the follow-up form: "Do you intend to avoid pregnancy for the next 3 months?", if answered YES will apply until the next follow-up form is received. therefore, a pregnancy in the 3-month interval will be considered unplanned.

Pregnancy classification will also be checked against Question 24 on the registration form: When do you want your next pregnancy to begin?

CLIENT I.D. & STATUS

Mr. St. Mart said that it would be difficult to keep one I.D. number for NFP clients through their history of NFP use. This is because clients will move to different districts and have more than one NFP instructor. It is important for the NFP service program to be able to update the identification number to track clients.

I explained the difficulties of changing I.D. numbers and keeping track of clients from the research perspective. I said that changing I.D. numbers could not be done.

We agreed that there was a need for 2 I.D. numbers, one that will not change for research purposes and one that the program can use internally for client service and to keep track of clients.

The two numbers will be: Program District Teacher Client
The Control Number.

The Action Familiale I.D. number.

25

When a client is first registered the 2 numbers will be the same. Action Familiale will be free to change their number as the client moves or is transferred. The control number will appear on all client records and will not change or be duplicated for another client.

The data Action Familiale sends to JHU will be formatted exactly as on the reporting forms and will not contain the Action Familiale I.D. number.

Action Familiale has a category of client called dropouts returning. These are clients who have discontinued and who re-enter the program. We agreed that these clients would be reregistered with new registration forms but that they would not get new control numbers.

To clarify the status of a client we agreed to add two codes to Question 15 Registration:

Have been you previously registered with this NFP program?

0 = No

1 = Yes, I was a dropout and am now returning

2 = Yes, I am now using NFP and have moved to a new district and/or teacher

3 = Both 1 & 2

PROBLEMS

One major problem was met. It was difficult to obtain a transformer that would reduce the 220 volts of Mauritius to 120 volts used as input to the IBM-XT. In addition, the computer required an uninterrupted power supply (UPS) for power conditioning in Mauritius. Mr. Kambic spent many hours attempting to solve this problem. We found a distributor in Baltimore that handled such transformers, and were assured by IBM that the arrangements we made for the transformer and UPS would enable the computer to operate properly.

APPENDIX A.

Daily Schedule for R. St. Mart at Johns Hopkins

WEEK 1: January 21 - 25, 1985

- Monday - Use "Exploring IBM" learn simple DOS commands format diskette, copy file, print screen, edlin, and keep computer log. Meet JHU faculty and staff.
- Tuesday - Learn to use SOS data entry package, get to SOS from root directory, use SOS menus, access data entry forms, establish data files, copy data from hard disk to backup. Enter some data, use validation and consistency checks. Introduce SPSS.
- Wednesday - Use SPSS tutorial and continue to enter data. Use SORT functions, and collapse data fields.
- Thursday - Learn how to design SOS data entry forms. Begin to develop French language data entry forms, learn how to use form design menus with validation and consistency checks.
- Friday - SPSS tutorial. Enter data. Continue to use DOS, SOS and SPSS. Meet with faculty and staff about 1st week's work.

WEEK 2: January 28 - February 1, 1985

- Monday - Use SPSS tutorial and enter data, use SPSS for analysis of data.
- Tuesday - Use SPSS tutorial. Meet with Dr. Sykes for review of basic statistics and use of SPSS.
- Wednesday - Use SPSS tutorial. Use File Merge and create record programs. Use the new records to run frequencies, histograms and crosstabs.
- Thursday - Continue to use DOS, SOS, and SPSS. Integrate the 3 systems and change files back and forth between the 3. Begin to manage data files.
- Friday - Do SPSS tutorial data manipulations and outputs. Meet with faculty and staff to access and plan final week.

APPENDIX A.

WEEK 3: February 4 - 8, 1985

- Monday - SPSS problems. DW2 word processing.
- Tuesday - Symphony and Basic demonstration.
- Wednesday - Work with DOS and SOS to manage files. Save files for return to Mauritius.
- Thursday - Disassemble and Reassemble computer - Install programs. Pack computer.
- Friday - Finish packing computer for delivery to Mauritius. Wrap up meeting. Assess past 3 weeks.

Faculty: Drs. Ronald Gray, Zenas Sykes and Sol Su

Staff: Mr. Robert Kambic

Zambia Report Jan-June 1985

Finances: Funds disbursed from IFFLP
to project this period: 8 January - \$ 36,815
Total Funds disbursed to date: 103,815

The audit of Phase I has been delayed due to an oversight in communications. Unbeknown to all, the Auditors were waiting for a letter of authorization by IFFLP/Washington.

Administration/Personnel

The first suboffice has been started in Kitwe, in the active and promising Copperbelt area, with the following personnel and titles:

Sr. Elizabeth Nienhaus, Supervisor/Administrator
Mrs. Irene Kabwe, Administrator
Mrs. Florence Chishimba, Teacher and Secretary
Sr. Rosemary N'gandu, Coordinator/Supervisor/National Trainer

At the Southern Province a full-time administrator/supervisor, Sr. Theresa Choma, was appointed in May.

In the central office in Lusaka, a full-time secretary was employed, freeing Mrs. Tafira to be an accounts clerk.

In June-December 1984 the Zambia program established a new section, "Family Life Education", to deal with adolescent education. During this reporting period, Mrs. Monica Shinkanga, a secondary schoolteacher, was released for two years from the Ministry of Education to head this section in Lusaka. It is not yet settled whether the NFP project or the MOE will pay her salary.

Negotiations with Existing National Service Infrastructures

A major accomplishment deriving from 9 months' effort was obtaining the approval of the Mines Hospitals, one of the largest medical networks in the country, to offer NFP to their employees. They also released one staff person each from Nchanga and Kabwe for NFP work.

Teacher Training

The IVth Training Workshop was held from 6-11 May in Kitwe, Copperbelt Province. It was very successful though relaxed candidate selection procedures were followed (some candidates were accepted from non-supervisors and it remains to be seen how well they persevere in the program.) Tutorials, small group work and the WIO-BIAT FFE package were employed. One day was devoted to practical teaching.

21 of the 34 candidates passed the objective tests, including 2 teacher-couples, and were admitted into the 6-month practicum.

21 of the 34 candidates passed the objective tests, including 2 teacher-couples, and were admitted into the 6-month practicum. For cultural, traditional reasons, non-medical men were accepted as motivators, not teachers.

The trainer team consisted of Sr. Charles Langa, Sr. Rosemary N'Gandu, Sr. Dympna, Sr. Xavier and Mr. P.Phiri who supervised his wife's training.

The training program is considered to be on target having produced 129 trained persons so far.

Supervisor Training

Three supervisor-trainees, Mrs. Chikoti, Sr. N'gandu and Sr. Xavier attended the supervisor preceptorship in Mauritius from 10-29 June and found it a "most useful experience." The time was divided between workshops (54½ hours), field work (31 hours) and evaluation (tests 4½ hours). Areas addressed were: chart analysis, visits, teacher meetings, recruitment sessions, on-site sharing, teaching, teaching techniques, follow-up by teachers, supervision, human formation, special client cases, setting objectives, planning, pedagogy and evaluation.

A report on this supervisor training is attached (Ann.) IFPLP plans to eventually train all African NFP supervisors either in Mauritius, or regionally by mobile supervisor training teams.

Supervision

Mrs. Maipawbe was appointed district supervisor for the Kabwe office and will liaise with the mines.

The Southern Province received a full-time supervisor/administrator, Sr. Theresa Chama, who will begin work in May.

Teachers

The problem of transfers out of the demonstration areas continues, and is being met with a feasibility study on employing people by the project.

Teachers are not continuing to recruit clients at an acceptable level after they teach their first 6-10 clients during training practicums. In addition they must be encouraged to attend monthly meetings with their supervisors.

Evaluation/Research

Two transmittals of data forms were received during this period by Johns Hopkins University:

<u>Transmittal</u>	<u>Time Period Included</u>	<u>Registration Forms</u>	<u>Follow-Ups Forms</u>	<u>Discontinuation Forms</u>
Transmittal 5	Up to 1 Feb.	269	69	32
Transmittal 6	Up to 4 March	38	6	20

Transmittal Time Logs

Transmittal 5	27
Transmittal 6	0

There is an outstanding need for more follow-up and to improve this a 20¢ (U.S.) incentive is going to be offered for each completed form with the realization that each form takes ½ hour to complete and that this time was not really budgeted when teachers were asked to give 4 hours/week for client instruction.

A draft report of preliminary analysis of data and comparison with Liberian data was made by Johns Hopkins University on June 15th. In addition to the need for more client follow-up, the report revealed the high education median (10 years) of Zambian NFP clients.

Materials

More WHO/BLAT Family Fertility Education packages are needed for the new District NFP Supervisors, Provincial Offices, and for lending to doctors.

Outreach

The project has been advertising NFP in both daily newspapers published in Lusaka, but so far with small response. Numerous approaches have been made in Churches and to secondary school staffs, and many visits have been made to heads of churches, dioceses, mines, clinics and hospitals. Some use has been made of radio and television.

Workshops and national meetings have been addressed, for example during this reporting period, the Planned Parenthood meeting which was attended by 40 Zambian nurses from all over the country. There is usually adequate interest shown by the listeners, but the next step, some sort of concrete follow-up like the selection of a person to be trained, is lacking.

Consultant Visits

10-17	January	Jacqueline LeBlanc, international NFP supervisor trainer.
19-29	January	Dr. Mary Martin, IPFLP, Coordinator of education and training.

Reports on these consultations were submitted to USAID/Washington after the visits were made.

Conclusion/Targets for Next Period

The major accomplishments of this period, in response to the improvement targets set in the June-December 1984 report, have been staffing up in the provinces to improve supervision of teachers, and local administration and at the head office in Lusaka to improve national administration and accounting. The recurrent problem of transfers of people trained in NFP out of the project demonstration areas is being addressed by undertaking a feasibility study of employing NFP personnel full-time in the project. Toward this end, the advice of a consultant is being sought by the Project Director from the Chief Personnel Officer of the Zambia Consolidated Copper Mines in the area of job descriptions, terms of employment, etc.

Targets for the next period are improving the client loads of teachers and following up the significant opening of full cooperation with the Mines Medical infrastructure.

Projection of Major Events for the Next Reporting Period

Progress reports and professional sharing on the Demonstration/Evaluation Projects in Liberia, Zambia and Mauritius will be held from 21-25 July in Mauritius. This will be followed by a two-day Africa zonal meeting and a week of workshops, the latter two being attended by representatives of NFP programs in more than twenty different African countries.

A data and research monitoring visit to Liberia by Bob Kambic is scheduled for mid-July.

Three Liberian-supervisors-trainees from the three project site areas will attend the NFP Supervisor preceptorship program in Mauritius in June.

IFFLP / ACTION FAMILIALE
African Zone *Mauritius*

R E P O R T
on the
S E C O N D I F F L P S P O N S O R E D T R A I N I N G S E S S I O N
for
S U P E R V I S O R S

FROM THE 10TH TO THE 19TH OF JUNE 1985
A C T I O N F A M I L I A L E
M A U R I T I U S

INTRODUCTION:

This second training session for supervisors, sponsored by IFFLP, was carried out under the co-ordination of Mrs. Jacqueline Le Blanc.

VENUE:

Action Familiale Headquarters
Rose-Hill
MAURITIUS.

DATE:

10th to 29th of June 1985.

COUNTRY REPRESENTED:

Zambia.

NAMES OF THE TRAINEES:

Sr. Theresa Xavier Byrne (nurse)
Mrs. Deborah Chikoti (nurse)
Sr. Rosemary Bwalya Ng'andu (nurse)

A. Session Objectives.

The general objective of the session was to introduce supervision and to help the participants acquire the techniques and competences required as NFP supervisor.

B. Methods Used.

1. Establishment, together with the participants, of a list of the functions of a supervisor, from which was developed a list of the educational objectives of the session.
2. Sharing on the pedagogical approaches to NFP in Zambia and Mauritius so that trainer and trainees could be familiar with both.
3. Active teaching:
 - a. Group works.
 - b. Field-work followed by sharing.
 - c. Chart analysis.
 - d. Task analysis.
 - e. No conference, the participation of the trainees being encouraged at each lesson.
 - f. Role play.
 - g. Individual presentation of a project.
4. A pre-test and a post-test.
5. Daily, weekly and final evaluations.

C. Time Aspect.

- . Length of the session: 3 weeks (14 full days and 3 half days).
- . Daily working hours : 8.30 - 11.30 (with tea break).
: 14.00 - 17.00 (with tea break).
- . Saturdays : Half time.

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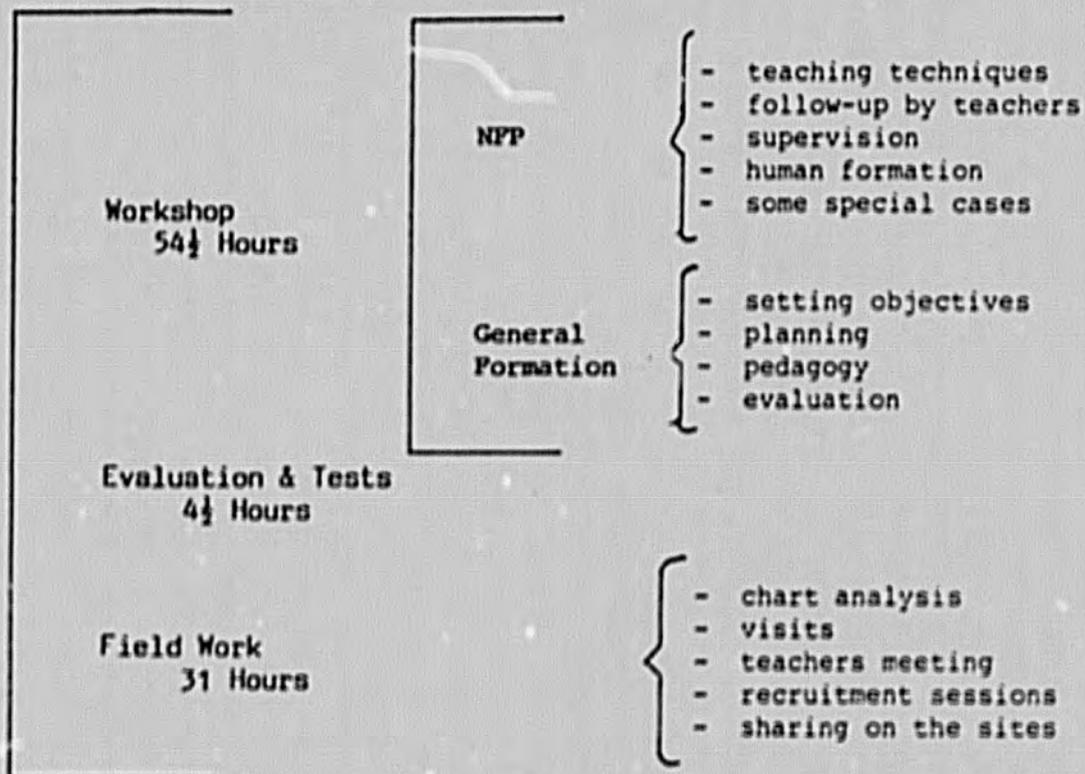
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Time Distribution:



- *Very little time was given to the topic of "evaluation" for two reasons: the trainees seemed to have already a fair notion of "evaluation" and there was a great demand for more on specific NFP supervisory tasks.*

D. Description of the Field-work.

- Follow-up and supervision.

. Twice the first week, each trainee accompanied an educator in her teaching work. Opportunity was given to see the educators in different circumstances: - doing the home visits to their clients,
- receiving clients in a centre,
- teaching working women on their work site during their lunch time.

. Twice each trainee went out with a regional supervisor during her work in supervising teachers:

Each time two teachers were supervised: one hour chart analysis followed by two or three visits with each.

. Twice again, each trainee spent a day with a Zonal Supervisor working with a Regional Supervisor or with the Regional Supervisor and a teacher.

. Care was taken that each trainee should see at work, different educators, different regional and zonal supervisors.

. After each of these six days of field work, the following day workshop would start with an enriching sharing and discussion on what had been seen.

N.B. The Mauritian system was shown as an example but not given as a model to be copied.

Meeting.

. The trainees attended the regional monthly meeting of the educators in one of the regions.

Recruitment

. The last week the trainees saw a regional supervisor giving an information talk to a group of mothers on consultation day at a Health Centre and at another centre, two teachers motivating mothers individually on vaccination day.

E. Individual Project.

Each trainee was asked to write a project on her future plans. There were individual presentations in plenary session followed by discussions.

F. Pre-Test and Post-Test.

The test consists mainly of multiple choice questions or "true or false" questions. They have been prepared from the models suggested in J.J. Guibert Educational Handbook.

The aim of the pre-test was to give the trainer an idea of the notions the trainees had already. This goal was achieved. It seems more difficult to evaluate the progress made during the session by the post-test.

Percentage (in disending order)	Pre-Test	Post-Test
	61 %	75 %
	58 %	64 %
	52.8%	64 %
Average Percentage	57.3%	67.7%

After the post-test, the good answers to the questions were clarified with the group.

G. Evaluation by the Trainees.

The daily and weekly evaluation forms are those used in the WHO regional Training Centre at Pamplemousses, Mauritius.

For the weekly evaluations two different forms were used for the first two weeks. It seems that a mixture of the two will be the best.

The final evaluation form is the one proposed by the IFFLP.

The daily and weekly evaluations, helping to know the trainees' appreciations and suggestions all along the session, proved useful.

The answers to the weekly and final evaluations have been compiled and are shown on the evaluation forms attached to the report. However it has seemed easier, since they were only three participants to make photocopies of the pages with so many different appreciations. (Page 10 of the 2nd. week evaluation, pages 2 and 4 of the final evaluation).

H. Problems Encountered.

The preparation of hand-outs summarising the group works were done after the workshop hours so that it often meant very long working days for the coordinator.

I. Areas for Improvements.

- . To give still more time to chart analysis.
- . To strengthen the audio-visual means of communication.
- . To plan the session so as to provide spare time for the co-ordinator to prepare hand-outs summarising the group works.
- . To investigate possible changes in the test (see comments).

J. Mrs. Le Blanc's Comments.

The trainees selected proved to have the qualifications needed to be competent supervisors.

They were eager to work and learn more and quick to pick up important aspects. They were also cheerful and friendly.

Some of them expressed the wish of a somewhat longer session rather than working on Saturdays. The C.R.A. group had also found the session too short. It is true that I found it difficult to satisfy all the trainees' expectations. Nevertheless it is too soon to say whether a few more days would be desirable, better experiment with few more sessions first.

The multiple choice questions of the test do not totally satisfy me. Even a student knowing the matter well could be easily trapped and could then feel frustrated.

On the whole, a very satisfactory session.

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TRAINING SESSION FOR SUPERVISORS

IFFLP / ACTION FAMILIALE

JUNE 10 TO JUNE 29, 1985.

FIRST WEEK

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DATE	No of Hours							
	Work Shop	Field work						
Monday 10	1				Opening	Charting FLMZ Charting AF		
Tuesday 11	3	3	Sympto-thermal FLMZ/AF	Method of teaching the client how to read and record the temperature		Fieldwork (with an educator)	Daily Evaluation	
Wednesday 12	5	1 1/2	Sharing special-ly on the previous day's fieldwork	Monthly regional meeting of the educators at Beau-Bassin	Analysis of Action Familiale's statistical data.	Educational objectives of this training session	Daily Evaluation	
Thursday 13	3	3	Revision Sharing Tasks	Continence Mrs. R. Dumée		Fieldwork (with an educator)	Daily Evaluation	
Friday 14	6		Sharing special-ly on the previous day's fieldwork	Objectives Teaching tecnic in sympto-thermal	Planning	Sharing on some charts	Daily Evaluation	Home work individual exercise on follow-up
Saturday 15	3		Sharing the educator's Planning	Follow-up Week Evaluation				
	20 1/2	7 1/2						

TRAINING SESSION FOR SUPERVISORS

(IFFLP / ACTION FAMILIALE)

JUNE 10 TO JUNE 29, 1985.

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SECOND WEEK

	No. of Hours							
	Work shop	Field work						
MONDAY 17	1	5	Sharing Revision	Field-work with a Regional Supervisor				
TUESDAY 18	6		Sharing on the previous day's field-work	Professional * organisation (R. St. Hart)	Communication * (R. St. Hart)	Leadership * (R. St. Hart)	training in chart analysis Day- Evalu- tion	
WEDNESDAY 19	1	5	The role played by the Human Relationship Team (Mrs. A. Du He)	Field-work with a Regional Supervisor			NFP programme evaluation & standards (P. Veerapilly & S. Chawla)	
THURSDAY 20	6		Sharing on the previous day's field-work	Pedagogy	Pedagogy	Individual Exercises on charts	Day- Evalu- tion	
FRIDAY 21	1	5	Sharing AF's training pro- gramme for teacher trainees (Mrs. D. Sauvage)	Field-work with a Zonal Supervisor			Small group discussion-technic (M. Martin)	
SATURDAY 22	3		Sharing on the previous day's field-work	Pedagogy	Week Evaluation			
	18	15	* These three topics could not be lectured, due to unavoidable circumstances.					

TRAINING SESSION FOR SUPERVISORS
(IFFLP / ACTION FAMILIALE)

JUNE 24 TO JUNE 28, 1985.

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	NO. OF HOURS		THIRD WEEK				
	WORK SHOP	FIELD WORK					
MONDAY 24	6		Sharing Task Analysis		Evaluation	Training in Chart Analysis	Daily Evaluation
TUESDAY 25	6		Evaluation	A regional supervisor's functions by a regional supervisor		Any desired subject	Daily Evaluation
WEDNESDAY 26	1	5	A zonal supervisor's functions by a zonal supervisor	Field-work with a zonal supervisor			
THURSDAY 27		3½	Field-work (recruiting) Sharing	Free Time for the Project			
FRIDAY 28	6		Individual presentation of projects	Post-test	Result of Post-test any desired subject		
SATURDAY 29	1½		Final Evaluation		Closing party (Rivière du Rempart hosting)		
	20½	8½					

TRAINING SESSION FOR SUPERVISORS
(IFFLP / ACTION FAMILIALE)

WEEK EVALUATION

This weekly evaluation is a feedback information, enabling us to make adjustments and improvements whenever and wherever necessary.

During the week beginning *10/6/85* and ending *15/6/85* the following subjects have been discussed:

Mauritian symbols / Zambian symbols

Mucus observation and temperature taking

Functions of a supervisor and educational objectives of the session

Continence

Setting objectives

Follow-up of clients by the educators

Teaching technique for the reading and charting of the temperature (role play)

Brief reference to autonomous clients

Planning (briefly - to be continued)

1. THE EDUCATIONAL OBJECTIVES

Tick only one box for each item.

1.1 The educational objectives have been achieved:

*SD	D	A	SA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

1.2 The topics treated during the week will contribute to improve the performance of my work:

SD	D	A	SA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

1.3 The approach in presenting the subjects has facilitated my training:

SD	D	A	SA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

1.4 What were the subjects which interested you most?

Temperature method

Mucus method

Educational objectives

Teaching a client how to take, read and chart her temperature.

Functions of a supervisor

Continence

Teaching techniques

*SD = Strongly disagree

A = Agree

D = Disagree

SA = Strongly agree

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2. CONTENT

Would you indicate the positive and negative points in the content:

POSITIVE

NEGATIVE

- I would say that all the teaching was positive.
- The teaching technique, educational objectives, functions of a supervisor.

3. PEDAGOGICAL METHODOLOGY (presentation, audio-visual material, group work, duration of session, etc.)

Would you indicate the positive and negative aspects used in the methodology:

POSITIVE

NEGATIVE

- | | |
|--|--|
| <ul style="list-style-type: none">- I liked especially the method of teaching the reading and charting temperature.- The symbols used.
Teaching to read the thermometer.- The dealing with individual clients in teaching.
The clarification of the objectives.
The way our lessons are conducted is good. | <ul style="list-style-type: none">- I would think that our term "peak day" and indicating it as the last day of (fertile type) mucus easier and clearer from the client's point of view. |
|--|--|

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4. SUGGESTIONS AND INDIVIDUAL NEEDS

Would you indicate your suggestions and your individual needs:

- *Criteria for selecting teacher trainees. What criteria for certifying teachers. Frequency of supervision of teachers. Investigation of client with long history of infertility. Collecting and compiling of statistics. A little more about the autonomous client. Any volunteers now?*

- *I would like to have more discussions on teaching techniques. If we could have more examples on management objectives. I would also like to go through the starting to chart technique.*

- *My individual need is that I would like to learn how to be a good supervisor.
How to choose educators - their qualities etc.*

TRAINING SESSION FOR SUPERVISORS

(IFFLP / ACTION FAMILIALE)

WEEK EVALUATION

During the week beginning *17/6/85* and ending *22/6/85*
the following subjects have been discussed:

1. *Planning*
2. *Division of supervision in Mauritius*
3. *The role of an educator*
4. *Human formation of teachers*
5. *Field work with regional supervisors*
6. *Field work with the zonal supervisor*
7. *Sharing following field-work*
8. *Recruiting and training new teachers*
9. *Training in chart analysis*

This weekly evaluation is a feedback information, enabling us to make adjustments and improvements whenever and wherever necessary. Tick only one box for each item.

1. CONTENT

(a) Do the topics treated during the week meet your needs and expectations?

YES

NO

PARTIALLY

DON'T KNOW

(b) Have they broadened your knowledge?

YES

NO

PARTIALLY

DON'T KNOW

(c) Do you think they will contribute to improve the performance in your work?

YES

NO

PARTIALLY

DON'T KNOW

(d) Were the subjects too complicated?

YES

NO

PARTIALLY

DON'T KNOW

(e) Are the contents of the modules/units discussed during the week relevant to your work situation?

YES

NO

PARTIALLY

DON'T KNOW

2. METHODOLOGY

(a) Has the approach in presenting the subjects, facilitated your training?

YES

NO

PARTIALLY

DON'T KNOW

(b) Were the facilitators helpful in elucidating all the points?

YES

NO

PARTIALLY

DON'T KNOW

(c) Were the supportive materials such as handouts, films, slides, etc. of assistance to you?

YES

NO

PARTIALLY

DON'T KNOW

3. TOPIC

	VERY USEFUL	USEFUL	NOT USEFUL	INADEQUATE
<i>Planning</i>				
Duration of Session	3			
Teaching Materials	3			
Relevance of Contents to your Work:	3			
Group Participation	✓ good			
Perfomance of Lecturers	✓ good			

3. TOPIC

<i>Human Formation of teachers</i>	VERY USEFUL	USEFUL	NOT USEFUL	INADEQUATE
Duration of Session	3			
Teaching Materials				
Relevance of Contents to your Work	✓ ✓ very important			
Group Participation	1			
Perfomance of Lecturers	✓ ✓ good			

3. TOPIC

Fieldwork with a supervisor	VERY USEFUL	USEFUL	NOT USEFUL	INADEQUATE
Duration of Session	3			
Teaching Materials				
Relevance of Contents to your Work:	3			
Group Participation	2			
Performance of Lecturers	<p>⇓</p> <p>The supervisors were good in helping the teachers in their teaching (to improve)</p> <p>...</p> <p>...</p>	<p>...</p> <p>...</p>	<p>good in helping</p> <p>teaching (to</p> <p>...</p> <p>...</p>	<p>...</p> <p>...</p> <p>...</p>

3. TOPIC

Sharing following field-work	VERY USEFUL	USEFUL	NOT USEFUL	INADEQUATE
Duration of Session	3			
Teaching Materials				
Relevance of Contents to your Work	3			
Group Participation	3			
Performance of Lecturers	<p>✓ ✓ Verbalising ones own experience, and the ensuing discussion and clarification is a great help. Listening to others' experiences is almost as good as personal experience.</p>			

3. TOPIC

<i>Recruiting and training new teachers</i>	VERY USEFUL	USEFUL	NOT USEFUL	INADEQUATE
Duration of Session	3			
Teaching Materials				
Relevance of Contents to your Work	3			
Group Participation	1			
Performance of Lecturers	3			

3. TOPIC

Training In chart analysis	VERY USEFUL	USEFUL	NOT USEFUL	INADEQUATE
Duration of Session	3			
Teaching Materials	2			
Relevance of Contents to your Work	3			
Group Participation	2			
Perfomance of Lecturers	3

4. ADMINISTRATION

have the administrative arrangements (transport, hotel, food, etc.)
been adequate?

The administrative arrangements were very
good and adequate.

5. COMMENTS AND SUGGESTIONS

(Be precise)

The course has been very good but some
times we worked until late in the
evenings maybe it would be better to make
it a longer course instead of finishing
everythingⁱⁿ three weeks make it
3 1/2 weeks!

4. ADMINISTRATION

have the administrative arrangements (transport, hotel, food, etc.)
been adequate? ✓ ✓ ✓

The whole course very well planned

5. COMMENTS AND SUGGESTIONS

(Be precise)

The items on the course which I think will
probably be most useful are as follows:

Chart analysis

Teacher training

Field-work in class

Planning

4. ADMINISTRATION

have the administrative arrangements (transport, hotel, food, etc.)
been adequate?

One the administrative arrangement
has been very good

The evening entertainment would have been
disirable since the T.V. programmes are in Fr.
e.g. may be if we could have cards

5. COMMENTS AND SUGGESTIONS

(Be precise)

The course has been very good but
going to class on Saturday was a bit
too much because we had not

enough time to relax at the weekend.

I think the course should last
for four weeks and work ^{from} Monday to
Friday.



INTERNATIONAL FEDERATION FOR FAMILY LIFE PROMOTION
FEDERATION INTERNATIONALE D'ACTION FAMILIALE
FEDERACION INTERNACIONAL DE ACCION FAMILIAR

IFFLP SPONSORED WORKSHOP

(Place: Mauritius Dates 10/6 to 27/6 1985)

PARTICIPANTS' EVALUATION FORM

The information shared by completing this form will contribute to insure that the training programme offered by IFFLP will be of great utility for you and your colleague. THANK YOU.

A. VALUE OF WORKSHOP

(Check appropriate response)	<u>Strongly agree</u>	<u>agree</u>	<u>have no opinion</u>	<u>don't agree</u>	<u>strongly disagree</u>
1. You will be able to use in your work the information acquired during the workshop.	(3)	()	()	()	()
2. The workshop met your expectation.	(3)	()	()	()	()
3. You would accept to participate in a supplementary workshop dealing with some topics or areas.	(3)	()	()	()	()
4. You would recommend this workshop to your colleagues.	(3)	()	()	()	()
5. You have acquired new knowledge, skills and techniques in this workshop.	(3)	()	()	()	()
6. The workshop strengthened your knowledge, competence, skill and techniques you already possessed.	(3)	()	()	()	()

Observations:



B. TOPICS OF THE WORKSHOP

1. The subject (or topics) which I considered most useful was _____
_____ because _____

2. The subject (or topics) which I considered least useful was _____
_____ because _____

3. Which topics dealt with during the workshop should be studied more in depth? _____

4. Which topics were not dealt with during the workshop and should be added in your opinion? _____

C. QUALITY OF THE TRAINING

(Check appropriate response)	<u>Strongly agree</u>	<u>agree</u>	<u>have no opinion</u>	<u>don't agree</u>	<u>Strongly disagree</u>
1. The workshop objectives were satisfied.	(3)	()	()	()	()
2. The workshop provided me with opportunities to exchange ideas and experiences with other trainers and participants.	(3)	()	()	()	()
3. The length of the sessions was acceptable.	(1)	(2)	()	()	()
4. The presentations of the workshop were well organized.	(3)	()	()	()	()

Observations:

- 2 -
(individual form)

B. TOPICS OF THE WORKSHOP

1. The subject (or topics) which I considered most useful was the Chem analysis
Training of Teachers because something
very important, being done all the time
2. The subject (or topics) which I considered least useful was _____
Difficult to say because _____
3. Which topics dealt with during the workshop should be studied more in depth? Supervision
4. Which topics were not dealt with during the workshop and should be added in your opinion? _____

C. QUALITY OF THE TRAINING

(Check appropriate response)	Strongly agree	agree	have no opinion	don't agree	Strongly disagree
1. The workshop objectives were satisfied.	(✓)	()	()	()	()
2. The workshop provided me with opportunities to exchange ideas and experiences with other trainers and participants.	(✓)	()	()	()	()
3. The length of the sessions was acceptable.	(✓)	()	()	()	()
4. The presentations of the workshop were well organized.	(✓)	()	()	()	()

Observations:

- 2 -
(individual form)

B. TOPICS OF THE WORKSHOP

1. The subject (or topics) which I considered most useful was Planning and teaching techniques because It evolved most of the work I will be expected to do at home
2. The subject (or topics) which I considered least useful was _____ because _____
3. Which topics dealt with during the workshop should be studied more in depth? Chart Analysis
4. Which topics were not dealt with during the workshop and should be added in your opinion? _____

C. QUALITY OF THE TRAINING

(Check appropriate response)	<u>Strongly agree</u>	<u>agree</u>	<u>have no opinion</u>	<u>don't agree</u>	<u>Strongly disagree</u>
1. The workshop objectives were satisfied.	(✓)	()	()	()	()
2. The workshop provided me with opportunities to exchange ideas and experiences with other trainers and participants.	(✓)	()	()	()	()
3. The length of the sessions was acceptable.	()	(✓)	()	()	()
4. The presentations of the workshop were well organized.	(✓)	()	()	()	()

Observations:

- 2 -
(individual form)

B. TOPICS OF THE WORKSHOP

1. The subject (or topics) which I considered most useful was Planning
And Training of Educators because because I will be
involve in carrying out plans for developing N.F.P. also to train Educators
2. The subject (or topics) which I considered least useful was All
the subjects were useful to me because _____
3. Which topics dealt with during the workshop should be studied more in depth? Supervision - Educating teachers and
Chart Analysis
4. Which topics were not dealt with during the workshop and should be added in your opinion? _____

C. QUALITY OF THE TRAINING

(Check appropriate response)	<u>Strongly agree</u>	<u>agree</u>	<u>have no opinion</u>	<u>don't agree</u>	<u>Strongly disagree</u>
1. The workshop objectives were satisfied.	(✓)	()	()	()	()
2. The workshop provided me with opportunities to exchange ideas and experiences with other trainers and participants.	(✓)	()	()	()	()
3. The length of the sessions was acceptable.	()	(✓)	()	()	()
4. The presentations of the workshop were well organized.	(✓)	()	()	()	()

Observations: Went into too much into too much details
with some of the subjects. Could you give more time
to Chart Analysis

D. MATERIAL AND TRAINING METHOD

(Check appropriate response)	<u>Strongly agree</u>	<u>agree</u>	<u>have no opinion</u>	<u>disagree</u>	<u>Strongly disagree</u>
1. The training material employed was useful.	(3)	()	()	()	()
2. The training methods used in the workshop could be used appropriately in my country.	(1)	(2)	()	()	()
3. In all workshops one uses some of the training methods listed below. Please indicate by the appropriate response the degree of effectiveness with which each method was employed during this workshop.					

<u>Method</u>	<u>used in the appropriate fashion</u>	<u>insufficiently used</u>	<u>too frequently used</u>	<u>not used in the workshop</u>
a. conference	(3)	()	()	()
b. discussions	(3)	()	()	()
c. individualized study	(1)	(1)	()	()
d. individual presentation	(3)	()	()	()
e. work in small groups	(3)	()	()	()
f. group presentation	(1)	()	()	()
g. case studies	(3)	()	()	()
h. role play	(3)	()	()	()
i. on site visiting experience	(3)	()	()	()
j. distribution of printed matter	(3)	()	()	()
k. audio-visual and means of communication	(1)	(2)	()	()
l. Other <u>sharing after field-work</u>	(2)	()	()	()

Observations: (mentioned by 2 participants)

- 4 -
(individual form)

E. FOLLOW-UP WORK

What kind of additional help would you like to receive from the trainers (organizers) of this workshop?

We thank you for completing this evaluation form: we invite you, if you desire, to write your name and to add observations on the workshop.

The Workshop was very well organized and carried out in a very friendly atmosphere. Participants were well facilitated.

Title of the workshop Angerion Workshop in U.K.

Name of the organization responsible for the training _____

Action Familiale. Rochill

Site of the workshop _____
city _____ country Manitowish

Dates of the workshop _____
10th to 29th June 1985
20 from 4 from

126

- 4 -
(individual form)

E. FOLLOW-UP WORK

What kind of additional help would you like to receive from the trainers (organizers) of this workshop?

We thank you for completing this evaluation form: we invite you, if you desire, to write your name and to add observations on the workshop.

Mrs N. CHIKOTI ~~The training~~ training was very good
as a whole.

Title of the workshop Supervisory workshop

Name of the organization responsible for the training Action
Familiale

Site of the workshop Rose Hill / Mauritius
city country

Dates of the workshop 10th / 6 / 1985 / 29 / 6 / 1985 198
to from TO

- 4 -
(individual form)

E. FOLLOW-UP WORK

What kind of additional help would you like to receive from the trainers (organizers) of this workshop?

We thank you for completing this evaluation form: we invite you, if you desire, to write your name and to add observations on the workshop.

Dr Rosemary Ngandu — In my opinion the workshop
was very well organized & lot of work & thought was given into planning

Title of the workshop Supervisory work shop in
N.F.P.

Name of the organization responsible for the training Action
Familiale

Site of the workshop Rosa Hill 1 Mauritius
city country

Dates of the workshop 10th of June 1 29th of June 1985
from from to

Mauritius
June 1985

TRAINING SESSION FOR SUPERVISORS
(IFFLP / ACTION FAMILIALE)

List of the handouts given to the trainees:

- Educational objectives of the session
- Division of a function into tasks
- Setting objectives
- Planification
- Pedagogy
- Three task analysis
- The advantages and disadvantages of close follow-up
- Chart analysis
- Evaluation
- Criteria for evaluating a teacher's competence
- How to teach to read the thermometer and to chart
- Some of ACTION FAMILIALE's forms

FROM: Copperbelt Regional Office,

DATE: 24/05/85

REPORT ON THE ACTIVITIES OF

KITWE/COPPERBELT TEAM FOR THE PERIOD MARCH TO MAY, 1985

CONTACT WITH THE MINE HEALTH AUTHORITIES:-

- (a) On the 4th of March we had an interview with Dr. Buchanan who is the Medical Adviser for the Mines. This was a follow up meeting to one held between Dr. Buchanan and Fr. Cremins earlier on. As a result all the Mine Medical Officers were sent Ministry of Health Circular 83 of 1984 through Dr. Buchanan's office. Dr. Buchanan showed willingness to work with the Movement to promote Scientific Natural Family Planning in the Mine Hospitals.
- (b) After the above meeting, we had meetings with all the Kitwe Chief Medical Officers in the Mines. The Chief Medical Officers were met individually. One particular Chief Medical Officer (acting assistant Medical Medical Officer for Wusakili Hospital) Dr. Katema, a Gynaecologist showed more interest than the others, in that he himself had heard of the methods before (unlike the others) and was convinced that they should be taught.
- (c) The Matrons of Nkana and Wusakili Hospitals arranged for their Sisters-in-Charge to meet with us. On the 27th March we had an opportunity to brief the Sisters on SNFP. A lot of interest was shown and one particular Sister had learnt NFP and charted during the course she had undertaken in Kenya previously. The general feeling among the sisters was that they themselves may not have enough time to teach during their working hours. They felt that a referral system would be preferred. However, they saw the need to know the methods themselves.

5-YEAR SCIENTIFIC NATURAL FAMILY PLANNING DEMONSTRATION PROGRAMME

REPORT OF THE DIRECTOR OF TRAINING

ON

4TH TEACHER TRAINING WORKSHOP,

MINDOLO ECUMENICAL FOUNDATION, KITWE,

(6TH-10TH MAY, 1985)

The Workshop was opened by the Copperbelt Provincial Political Secretary, who was accompanied by the Kitwe District Governor. Thirty-four participants (especially Health) the Mine Hospitals and the private sector. (See list of names). Most of the candidates were resident; the tutors boarded out.

The organisation which was carried out by FLMZ Kitwe office (Mrs. Kabwe, Mrs. Flora Chishimba) with the aid of Mrs. Vicki Falkenstein was excellent. The candidates showed great appreciation to these three for making things so easy for them and for the alacrity and efficiency with which they provided for their every need. The was tastily prepared and served to the group by a special waiter at one end of the dining room where we have a table provided for our group. This saved time on queuing.

In spite of great efforts on the part of Mrs. Kabwe and Mrs. Chishimba, the bedrooms were not cleaned throughout the week and the toilet facilities left much to be desired. This was something which was beyond the control of the organisers. It will be reported to the management of Mindolo Ecumenical Centre by the Director.

Lecture and classroom facilities were excellent.

Tutor Team: - Three of the faculty members were experiencing their first National Teacher Training Workshop. Many of our former tutors were unable to help for one reason or another. Some requested longer notification, in future, of the dates of the workshops.

Format of Workshop: The general format of the workshop was similar to that of the first three. Tutorials were held after each module, the large group being divided into five small groups for these sessions.

Throughout the Workshop the Tutors held regular meetings to evaluate the sessions and to prepare for oncoming ones. The Director of Training handed guidelines to each Tutor to facilitate the conduct of the tutorials and to

ensure a certain uniformity in the teaching. Topics for teaching practice were also distributed to the Tutors as well as suggestions on how to critique the performances. The WHO package was followed closely in the preparation of these guidelines.

Almost one whole day was given over to practical teaching. After consultation with the candidates this was done in the big group. Each candidate was given an assignment to prepare. Then he/she/they presented it to the full group who critiqued it before the Faculty made their comments. All found this a most helpful experience through which they had many points explained and clarified.

Multiple Choice Question Tests: - Most of the candidates found these tiring and confusing. They suggested a change in the wording of some of the questions and a reduction in number to 50 at most (see evaluations).

Results: From the group of 34 only 21 satisfied the criteria laid down for entrance to the teaching practicum.

Of these, two had husbands who qualified to form with them a "teaching couple". Non-Medical men are not graded as teachers, but only as motivators who ^{can} also be one of the Teacher Couple.

Three other couples became Motivating couples. They will repeat the tests in 2-3 months time when they may be admitted to the teaching practicum.

Two nurses became motivators and one couple who are newly married will repeat, completely, again at a later date.

These results showed some faulty selection of candidates which we hope to avoid in the next workshop.

The high-light of the week was the Couple Sharing Session which was found to be an encouragement and an inspiration to all.

The presence of a Gambian doctor and of several nurses from the Mine Hospitals was a cause of hope for the spread of the good news to more sectors of the population.

Certification and Distribution of Teachers Kits. As some of the candidates did not satisfy the criteria for entrance to the six months practicum the results were given in private by the Director of Training accompanied by some members of the Tutor Team. Each candidate/couple was interviewed privately and congratulated or advised about their future retraining

as the case necessitated. In this way there was no hurt felt by those less successful candidates.

The closing was simple with short words of appreciation and gratitude for both the faculty and the candidates. After the National Anthem and closing prayer all repaired to the end of the hall where Mrs. Kabwe, Mrs. Chishimba and Mrs. Falkenstein had a nice party prepared.

Most of the participants left by train or coach that evening for their respective destinations.

Dr. M.M. Tyndall, FRCOG ,
DIRECTOR OF TRAINING.

NAME	ADDRESS	PRETEST			POST TEST			SERIAL NO.	RESULT
		P.A.	CMM	ST	PK	CMM	ST		
Mr. Andrew Komora	Kitwe	85	79	91	95	95	89	98	M
Mrs. Dorothy Komora	Kitwe	-	-	-	86	90	93	99	TC
Mr. Michael Chanda	Kitwe	-	-	-	78	67	84	-	M
Mrs. T. Chanya	Kitwe	-	-	-	58	57	70	-	M
Mr. P. Machona	Kitwe	94	62	-	83	70	71	-	R
Mrs Petronella Machona	Kitwe	96	62	-	73	73	61	-	R
Dr. Chiuwya Achito	Kitwe	98	83	88	100	84	99	101	T
Mr. Edward Chishimba	Kitwe	94	83	-	84	91	87	100	TC/wif
Mrs. Rosie Kidwe	Kitwe	83	79	88	90	93	87	103	T
Mrs Therese C. Phiri	Kitwe	91	88	90	94	94	80	105	T
Mrs. Judith Mumbi	Kitwe	92	67	62	94	94	91	107	T
Mr. Godwin Mulundu	Chingola	91	-	-	86	86	80	108	M
Mr. Dominica C. Mubanga	Chingola	68	60	53	79	80	70	-	M
Mrs Regina S. Mubanga	Chingola	90	62	-	71	80	0	-	R
Mrs Christine Mulundu	Chingola	91	-	-	100	89	91	109	TC
Miss A. Kema	Chingola	-	56	-	90	90	81	111	T
Miss Beatrice Simakando	Chingola	85	82	85	94	94	95	113	T
Miss Esther Kayama	Chingola	94	73	61	88	95	95	115	T
Miss Martha Kidochi	Chingola	-	-	-	83	75	73	-	M
Mrs Vainess Mwanza	Chingola	90	88	94	90	84	85	117	T
Mrs Theresa S. Kunda	Kalulushi	92	83	88	83	90	87	119	T
Mr. John Chikusela	Ndola	-	-	-	80	82	70	-	M
Mrs Mary Chikusela	Ndola	-	-	-	89	72	51	-	R
Mrs Mary D. Nzima	Ndola	-	-	-	90	82	85	121	T
Mrs Juliet Chilapa	Lusaka	69	72	80	85	80	75	123	T
Mrs M.G. Shinkanga	Lusaka	-	-	-	82	89	97	125	T
Mrs Anita Katebe	Lusaka	81	84	92	85	91	85	127	T
Miss Anna S. Tembo	Lusaka	77	68	58	83	84	88	129	T
Sr. Hilda Krumpelmann	Lusaka	-	-	-	90	96	96	131	T
Mr Elias Mulenga	L/stone	60	84	85	90	81	87	-	M
Miss Annie T. Mwangelwa	Mwachi-sompola	-	-	-	80	80	81	-	M
Mrs Christine Manchishi	Kalomo	96	85	75	78	78	75	133	T
Mrs Energy Chuuka Chuba	Kalomo	91.8	66	72	81	87	85	135	T
Mrs Eva Sanderson	Kitwe	-	-	-	81	87	83	137	T

TC = Teaching Couple

M = Motivator

R = Repeat course

T = Teacher

FACILITATORS FOR TUTORIALS

(Supervised by Dr. Tynhall)

Mr. B.S. Phiri	Sr. Charles Iakana	Sr. Rosemary Ng'andu	Sr. Dyanra	Sr. T. Xavier
Mrs. C. Phiri Mrs Christine Nanchinshi Mrs Juliet Chilasa Mrs Mary D. Hazare Mrs Theresa S. Kunda	Mrs Judith Mumba Mrs Vainess Mwanza Miss Esther Moyo Miss Martha Mokozi Sr. Hilda Krumpelmann	Mr. Michael M. Chanda Mary Kansumba Eva Sanderson Gomora Yoane Andrew Rosie Kabwe Theresa Chanda Dorothy Gomora Theresa C. Phiri Anita Katebe	Mrs. S. M. Mankanga Miss A. Mwanza Mr. P. Mankanga Mr. S. Chikishi Mr. J. Chikusela Mrs. H. Chikusela Miss S. Mankanda Dr. Chikunya Nchito	Mr Gobwin Mulundu Christine Mulundu A. I. Mankelwa Energy Chaula Chuba Anna S. Tembo Elias Mwanza Regina B. Mwanza

WORKSHOP 4 EVALUATION.

	V. Good	Good	Fair	Poor	V. Poor	No Comment
LESSONS/ TEACHING	13	7	1			12
TESTS		2	18	2		11
ACCOMMODATION	3	3	3	4		20
MEALS	6	1	5	1		20
ORGANISATION	11					20
TIME-TABLE		3	7			23
GROUP INVOLVEMENT	16	2	1			14

LIBERIA NFP PROJECT REPORT

(January-June 1985)

Note: Annexes (Progress Report Jan. June, sent in advance with special report to AID, dated October 11, 1985).

FINANCE/BUDGET

- . Funds disbursed from IFFLP to Project during January-June 1985: \$55,000
- . January 1985: \$20,000
- . June 10, 1985: \$35,000
- . Total disbursed to project to date: \$133,000
- . Financial reports received during 1985 period:
 - January April
 - February May
 - March June

Following the budget review initiated by Dr. Lanctot's November 1984 visit, the budget for 1985 has been set at \$87,700. The 1986 budget projection is \$96,000.

NEGOTIATIONS/COOPERATION WITH EXISTING NATIONAL SERVICE INFRASTRUCTURES

Negotiations are proceeding with the Chief Nursing Officer for the full-time secondment from government of Ms. Juliette Grey and Ms. Delecia Clarke. Their full release appears imminent.

TEACHER TRAINING

Fifteen persons were trained during the III Teacher Training Workshop in February 4-10. Eight passed and six are required to resit the test. Four come from government, three from Church missions and six are volunteers, fulfilling IFFLP's recommendation that "appropriate mixers" of staff be experimented with. A listing is included on the following page.

MONTSERRADO COUNTY

1. Mrs. Dorothy Thomas
2. Mrs. Marie Seydou
3. Ms. Willette Payne
4. Mr. James Sesay
5. Mrs. Christina Wisseh
6. Theresa Quicoe
7. Ruby Koisee

AREA

Government
Mission
Government
Voluntary
Voluntary
Voluntary
Mission

GIBI TERRITORY

8. Ms. Delecia Clarke
9. Ms. Cecelia Gizzi

Government
Volunteer

NIABA COUNTY

10. Bertha Karmi
11. Alice Bamakpa
12. Mrs. Evelyn Moulton
13. Justina Zuku

Government
Mission
Volunteer
Volunteer

BOMI

14. Mr. Edward Goll
15. Mrs. Famata Goll

RESEARCH/EVALUATION

An unfinalized version of the data forms was sent to the printer and had to be re-printed several months later at a loss of \$1000. Also set back were the transmittals of forms to Johns Hopkins University.

This has been remedied and the first data transmittal was received in mid-May at JHU and found to be in good order.

Preliminary analysis of this data shows that:

- . more clients need to be reached;
- . more unlettered clients need to be reached; and
- . there is adequate follow-up of clients by the teachers.

SUPERVISION OF TEACHERS

In the last report a consultant recommended streamlining teacher supervision, coordination and evaluation, this was done by the project director

when she made an enlarged wall chart of the JHU monthly summary sheet. Teachers are listed by code number and their client load are followed under the headings monthly:

- . Initial contact
- . New registered
- . Transfers In/Out
- . Learning Users
- . Pregnant
- . Discontinued
- . Autonomous
- . Cumulative Autonomous

Collecting timely data from the far northern project site of Yekepa remains a problem for the national office.

PERSONNEL: ADMINISTRATIVE/SUPERVISORY/TEACHING

As Assistant Director Mrs. Michele Bieron, RN, volunteer, seconded to the project by the Catholic Diocese, fell-ill and had to return to the States. Her replacement, Mrs. Yah Guasi, RN, BSN, filled the post as of June 1985.

A list of the full-time paid project personnel include:

MONROVIA

Mrs. Roselind Wesley:	Project Director
Mrs. Yah Guasi:	Assistant Project Director
Mrs. Roberta Johnson:	Administrative Secretary
Mrs. Melody Uoke:	Supervisor

Paid half time by the project (\$122/month) for a minimum of 20 hours work with a minimum of 12-15 clients are:

MONROVIA

Mrs. Luvenia Harris:	NFP Teacher
Mrs. Agatha Bediako:	NFP Teacher
Ms. Busyonoh Bropleh:	NFP Teacher

YEKEPA

Mrs. Ayesha Sejberg:	Supervisor
Mrs. Dorcas Johnson:	NFP Teacher
Mr. Michael Johnson:	NFP teacher

Note: the latter two are not related

CLIENTS

As at June 1, 1985, client statistics are:

- 109 Registered of which 34 have discontinued.

It will be helpful for the project to establish the difference between interruption and definitive discontinuations of clients.

- 180 follow-up visits were reported in detail on the follow-up forms.

The learning users and autonomous users are far below the targets set out in the proposal. The project staff feels these proposal targets are unrealistic and did not allow sufficient "tooling up" time for a project of this nature. Nevertheless, the growth has been steady, albeit slow.

The next section will address remedies to low clientele the form of increased outreach.

OUTREACH

As mentioned in the section under "Teacher Training" in this report, teachers have expressed a need for more outreach support. This is also corroborated by the low number of clientele.

The NFP project Speakers Bureau will be fully activated in the outreach effort and the first targets are the following churches in Monrovia:

Catholic	Jehovah Witnesses
Episcopal	Mother Dukuly
Methodist	Muslim Community
Lutheran	Prayer Bands

The Core Team of the Monrovia NFP Evening Support Group will assist the Speakers' Bureau in this outreach effort. Evening get-togethers have been opened to non-users and are held in different homes so that different neighborhoods can be exposed.

Supplementary outreach assistance for print materials has been granted by the Population Communication Services of John Hopkins University, and a visit to Monrovia by their collaborator, Carol Kazi of PCS/PIACT, has been organized for early October 1985. Ms. Kazi will at that time draw up a work plan with the project staff for the development, field testing and printing of the outreach materials.

CONSULTATION VISITS

February 4-11, 1985: Dr. Mary C. Martin, IFFLP/Washington, D.C.
May 8-15, 1985: Susan Jones, IFFLP/Washington, D.C.

Recommendations given were to increase client outreach and to streamline client instruction (NFP teachers estimated they need 30-60 hours to bring a client to autonomy. A good portion of this time represents travel to clients' homes). It was recommended that service sites be strengthened by the stationing of NFP teachers there at regular times.

CONCLUSION/FOCUS FOR NEXT SIX MONTHS

The project continues to be well administered, the teachers are well supervised, and the clients adequately followed-up.

It has evidenced significant progress in this reporting period of transmittal of client data to Johns Hopkins University on the forms devised for this purpose. However, the project is far below its client targets.

Therefore, focus for project improvement is still client outreach, and planning and budgeting for an extra effort in this area has already been undertaken as mentioned above in the section on "Outreach."

PROJECTION OF MAJOR EVENTS FOR NEXT REPORTING PERIOD

Progress reports and professional sharing on the Demonstration/Evaluation Projects in Liberia, Zambia and Mauritius will be held from July 21-25 in Mauritius. This will be followed by a two-day Africa zonal meeting and a week of workshops, the latter two being attended by representatives of NFP programs in more than twenty different African countries.

A data and research monitoring visit to Liberia by Robert Kambic is scheduled for mid-July.

Three Liberian supervisor-trainees from the three project site areas will attend the NFP supervisor preceptorship program in October in Mauritius.

Burkina FASO-Bobo Dioulasso
January-June 1985

Reports received 1) Jan. 1984-Jan. 1985 Financial

Attendance at two workshops was planned for this reporting period and financed under the AID/IFFLP project.

- . 1 delegate was to attend the Brazzaville sensitization session in January 1985.
- . 2 delegates were to attend the Mauritius workshops and zonal meeting in July 1985.

Two delegates from Bobo-Dioulasso did attend the Mauritius meetings, but due to insufficient time for travel arrangements, no delegate represented Bobo-Dioulasso at the Brazzaville Conference in January 1985.

During the next reporting period information and training sessions are planned in the following places and with the following groups:

- . continuing education of NFP teachers
- . training of phase 1 group
- . information/training
 - . in Bourgouriba Province
 - . in Nouhoun Province
 - . of diocesan catechists
 - . of teachers of Home Economics/Ouagadougou
 - . of the midwives of the local development programs.

Burkina Faso-Ouagadougou
January-June 1985

- Reports received: 1) Financial January 1985-May 1985
2) Financial Oct-Dec 1984
3) Report of Training of NFP Promoters
31 Oct-4 Nov 1984
4) Activity Report I Quarter 1985
(a copy of which follows this report)

INFORMATION/EDUCATION

As the following activity report for the first quarter 1985 indicates, information and training sessions were held at these R.C. parish centres for a total of 900 adults and 727 youth:

Toece	29-30 Dec '84	2 days	21 couples	NFP Information
Dassouri	26 Jan '85	1 day	30 women catechists	NFP training
Koloy-Naaba	27 Jan '85	1 day	15 couples	Marriage enrichment OM method- introduction
Ouagadougou	2-3 Feb '85	2 days	14 couples	Teacher Training by Dr. Guy in SIM
Koubri	23 Feb '85	1 day	27 couples 5 men 15 women	Information
Guilougou	28 Feb '85	1 day	22 couples	Pre-marriage training
Sapone	7 March '85		45 people mostly couples, some catechists	NFP Sensitization
Dapoya	3 March '85	1 day	25 persons	NFP/family planning sensitization
Donse	11-12 March '85	2 days	137 persons 20 couples 97 youth	NFP/conjugal harmony Youth Fam. Life Educ.
Tennaore	11-12 April '85	1 day	25 couples	NFP sensitization OM introduction
Ouagadougou	24-26 April '85	1 morning	33 midwives	Introduction NFP
Ouagadougou	27 April '85	1 day	10 midwives from "Pilot Zone"	Introduction NFP

Ouahigouya	6-10 May	3 days	183 student 35 workers	Fertility Awareness
Ouagadougou	11-12 May	2 days	Group I teachers	Continuing education with Dr. Ecochard
Koubri Moines	15 May	1 day	13 student religious	Introd. NFP/Fertility Awareness
Ouagadougou	20 May 24 May 30 May	3 days	youth of 3 parishes (300-400)	Family Life Education

In addition to this sizeable outreach effort, the following service statistics were rendered by the two service centers:

SERVICE CENTRES STATISTICS:

St. Camille Parish

New Registrants

	<u>Couples</u>	<u>Spacing</u>	<u>Infertility</u>	<u>Consultations</u>			<u>Spacing</u>	<u>Infertility</u>
				<u>Couples</u>	<u>Women</u>	<u>Men</u>		
Dec '84	4	2	2					
Jan '85	11	9	2					
Feb '85	16	8	8					
Mar '85	27	14	13					
April '85	19	12	7					
May '85	<u>35</u>	<u>21</u>	<u>14</u>	---	---	---	---	---
TOTAL	112	66	46	18	353	3	129	122

Cathedral Parish

New Registrants

	<u>Couples</u>	<u>Spacing</u>	<u>Infertility</u>	<u>Consultations</u>			<u>Spacing</u>	<u>Infertility</u>
				<u>Couples</u>	<u>Women</u>	<u>Men</u>		
Jan '85	3		3					
Feb '85	1		1					
Mar '85	1		1					

	<u>Couples</u>	<u>Spacing</u>	<u>Infertility</u>	<u>Consultations</u>			<u>Spacing</u>	<u>Infertility</u>
				<u>Couples</u>	<u>Women</u>	<u>Men</u>		
Apr '85	12	6	6					
May '85	<u>5</u>	<u>1</u>	<u>4</u>					
TOTAL	22	7	15	30	123	4	20	82

In addition, 38 engaged couples were given NFP instruction

NFP training in Burkina Faso must of necessity be largely oral as the country has an extremely low literacy rate (5%). In addition, it is one of the poorest African countries with an infant mortality of 182/1000. Burkina Faso is also located in the recognized belt of subfertility and infertility in Africa extending from Senegal, B. Faso, Mali, Niger, Northern Nigeria, Cameroon Congo, CAR, Zaire, Uganda, southwest Kenya and Tanzania. This may help to account for the high proportion of clients trying to achieve pregnancy in the Ouagadougou project.

The administration of the project in Ouagadougou appears energetic and competent. IFFLP would like to see increased supervision of teachers who now number over 100. However, the project director is under pressure to train NFP users in all parishes of the diocese. So far, he has done so in seven of the eleven (total) parishes in the diocese. He would like to employ a supervisor of NFP teachers but does not have the funds to do so. Budget restructuring and complementary funding may possibly be undertaken to meet this need.

The IFFLP/AID project had a budget for one scholarship to the Mauritius Meetings in July 1985 and for two scholarships to the Brazzaville Conference in January 1985. Unfortunately the Brazzaville scholarships were not utilized due to insufficient time to obtain travel clearance.

Reports received during Jan-June 1985: 1) Financial Report covering Jan-May 1985

1985 was spent gathering the official approval for the launching of the NFP pilot projects and the NFP national association. Demography being an extremely sensitive issue in Burundi, the approval-getting had to be painstakingly planned and executed. It is proceeding on schedule with no major set-backs.

The program of action for the next reporting period is:

- Sept. '85 : national training sessions of NFP teachers
- Oct-Nov '85 : regional sensitization sessions
- Dec '85 : national sensitization session
- March '85 : service centers open in pilot sites

Under the IFPLP/AID Technical Assistance Project, Sr. Therese Miburo attended the Mauritius Workshops and Zonal Meeting in Mauritius (July-Aug '85) and she and Mr. Deo Hakizimana, assistant NFP coordinator, attended the Brazzaville Conference for MOH sensitization. Complementary funding by other international organizations enabled key MOH representatives, Dr. Cassien Ndikumana and Dr. Seruzingo to also attend these meetings.

Dr. Cassien Ndikumana, Director General of the Dept. of Public Health, published an information article on NFP in preparation for the sensitization talks with health personnel.

CAMEROON
January-June 1985

Reports received during this period: 1) Financial Dec '84-July '85
2) Activity Dec '84-May '85
(copy attached in CIO's set)

During this period the AID/IPFLP project financed one scholarship to the Brazzaville Conference for African Government officials. Three representatives from Cameroon did attend the Conference one of which was funded by the subcontract.

The AID/IPFLP project is also funding the operation of two service centres at existing maternity centres for which the client statistics are recorded below for this period.

NKONDONGO

103 clients of which 80 are user-couples
10 are users/assistant teachers
10 couples had premarriage training

There have been two unplanned pregnancies, both to women in the process of divorce. There have been three planned pregnancies.

ETOU DI

40 clients of which most are pregnant women learning NPP for future use. Follow-up files on all these women have been instituted, as they return regularly to the centre for pre-natal check-ups. Etou di is the newer NPP centre and needs to identify animatrices.

In addition, a large user workshop for 80 people was held in MBALMAYO.

This project is designed largely according to the recommendations of IPFLP. The major components are national sensitization through a month-long Conference in Nov. 1984 to which representatives of all 16 dioceses in Cameroon attended and the establishment of several service pilot centres where the effectiveness of NPP can be demonstrated.

Central African Republic
January-June 1985

Reports from field received for this period:

- 1) Activity January-April 1985 (copy attached for USAID CIO)
- 2) Financial: -July 1984-Jan 31, 1985
-Feb-April 1985

This particular project is in the full swing of service rendering. The strategy is mass fertility awareness education. In a country with infant mortality of 190/1000 and where 20-50% of the population suffers from sterility, much of which is induced by sexually transmitted disease, the emphasis is on reproductive/sexual health and the message is: "the human reproductive system is delicate." Service statistics are impressive: During January-April 1985 1728 persons were enrolled in the education program and broken down as follows:

- 1) Bangui: 483 married women enrolled
88 single women enrolled
112 men enrolled
80 couples enrolled

Attendance at the four classes of the short course on reproductive health were as follows: *

<u>1st class</u>	<u>2nd class</u>	<u>3er class</u>	<u>4th class</u>
644	475	413	401

Women charting their cycles numbered:

<u>1st cycle</u>	<u>2nd</u>	<u>3rd</u>	<u>4th</u>	<u>5th</u>	<u>6th</u>	<u>7th+</u>
224	93	42	31	14	10	21

Total number of women examined: 872 of which 72% were having difficulty conceiving and 25% wished to space their children.

- 2) Provinces: 346 women enrolled in education course
326 men enrolled in education course
68 couples enrolled in education course
- 3) Kassai Comp: 75 women

- * Content of classes: 1st- reproductive anatomy, female cycle, conception, healthy pregnancy
(1 1/2 hours per class)
2nd- self observation (MAO), cervical mucus, child spacing, achieving pregnancy
3rd- postpartum, breastfeeding, resumption of ovulation
4th- sexual disease, abortion, sterility, marital harmony

The project director and her team supervise 161 teachers and teacher assistants in the Bangui area and 52 teachers in the provinces. To upgrade their supervisory and chart analysis skills, five supervisors were sent to the Mauritius supervisor training course, 13-31 May 1985:

from the project: M^{rs}. Angele Gombet
M^{rs}. Jacqueline Balle-Bonza
Mr. Jean Valespi Sang Kiule

From the Ministry of Health:

Dr. Gisele Franck
M^{rs}. Madeleine Ouiamon

A copy of two reports of these training sessions are attached.

The USAID/IFPLP project has also greatly aided the education effort by providing funds for the purchase of one car and four motorcycles for the supervisors, trainers and teachers.

Finally, another subcomponent of the project was accomplished during this reporting period in the sending of two representatives to the Brazzaville Pan African NFP Information Session for Min. of Health officials.

Reports received from field during this period:

- 1) Brazzaville Conference and expenses (attached in USAID-CIO's report).

Since IFPLP received no reports from the Congo on its NFP activities other than the hosting of the large PanAfrican Conference in Brazzaville from 21-25 January 1985, this summary report will have to confine itself to that. However, a plan of action for NFP activities for 1985 is included to give an idea what activities are being undertaken in conjunction with MOH/Congo institutions, the CARE-CONGO nutrition project and MCH centres. (attached for USAID-CIO).

The Brazzaville Conference for African government representatives was one of the most important in the area of NFP sensitization as the report to USAID by Dr. Lanctot/IFPLP (March 1985) indicated. Seventy-five representatives from 15 African countries (Burundi, Cameroon, Cote d'Ivoire, Burkina Faso, Congo, Mauritius, Rwanda, Central African Republic, Senegal, Morocco, Tunisia, Zaire, Zambia, Kenya and Chad) participated.

The Congo used the Conference to inform and instruct in NFP 37 Congolese from all parts of the country: Pointe-Noire, Loubomo, Mossendjo, Plateaux, Cuvette, Madingou, Aubeville. A large delegation of 10 from the Congo Military Health Sector also attended.

The meeting occasioned important talks and discussions on NFP: its effectiveness, sociology, biological bases, NFP and subfertility, NFP and postpartum/breastfeeding, NFP development programs, integration with government health structures, family life education.

The NFP data collection systems formulated by Johns Hopkins University in conjunction with the NFP projects in Zambia, Liberia and Mauritius, were disseminated in French, copies of which are attached in the AID-CIO's report.

IVORY COAST
January-June 1985

Reports received during this period: I and II Quarter Activity Reports
I Quarter Financial Report

The AID/IFFLP subagreement financed three scholarships to attend the Brazzaville Sensitization Conference for government officials. Three representatives from Ivory Coast did attend the meetings on 21-25 January 1985. Professor Samba Diarra, Min. of Health, Mrs. Te Flan, Min. of Education and Mr. Etienne Koukoua, Vice-President PROVIFA (the subgrantee agency).

In addition, service development proceeded with the following accomplishments/statistics:

Abidjan 24-28 Jan 85	Teacher Training W/shop.	35 attended 25 passed 7 remediated 3 failed
Boua 12-20 Jan 85	Information Sessions	77 workers 11 identified as potential teachers
Techini 12-20 Jan 85	Information Sessions	68 illiterates attended 103 hospital workers " 45 church officials " returned to second meeting; 27 illiterates
Abidjan 13-14 April 85	Monitor Training	29 monitors received diplomas in youth pedagogy
Abidjan 29 May-22 June	NFP User W/shops at churches	21 attended. Client follow-up planned for one month later.

MAURITIUS TECHNICAL ASSISTANCE PROJECT

(January-June 1985)

BACKGROUND FOR THIS SECOND USAID PROJECT TO MAURITIUS

In addition to the \$87,800 for the Mauritius Evaluation Project, a budget of \$20,000 was awarded to the Mauritius NFP program when it was realized that:

1. The Mauritius program was using its own strained resources to train NFP supervisors from other African countries.
2. The potential for researching a successful and demographically large, 20-year old NFP program was enormous and that Mauritian personnel should be trained and equipped to undertake these research studies.

RESEARCH ASSISTANT TRAINING

The \$20,000 budget therefore addressed need number two by assigning funds for the training of Richard St.-Mart, Assistant to the Administrator of Action Familiale, Mauritius, at Johns Hopkins University. A report of his training, which was thoroughly successful, is attached. (Mauritius-Tech. Asst. - Annex 1) Negotiations are now underway to obtain his assistance in conducting the retrospective and prospective studies of autonomous NFP clients in Mauritius. Mr. St.-Mart will also coordinate the collection of client data from the JHU record system which was pilot tested in Mauritius and has now been accepted and nationalized there.

AFRICAN NFP SUPERVISOR PRECEPTORSHIP; COUNTRY PRE-VISITS

The \$20,000 technical assistance project for Mauritius addressed need number one by funding the travel of veteran Mauritius Supervisor (of NFP teachers), Mrs. Jacqueline LeBlanc, to the Central African Republic and to Zambia. Mrs. LeBlanc got an idea of conditions particular to those countries so that she could better understand the needs of the supervisor trainees who would be sent to Mauritius for training several months later.

Reports of Mrs. LeBlanc's visits were sent to USAID within the stipulated time, but are attached here again for the following reasons:

1. They are the first consultant visits of a Mauritius Supervisor - Trainer where Mauritius has been identified as the training centre for NFP supervisors in Africa.
2. The idea of using African NFP expertise, particularly Mrs. LeBlanc with her ten years experience as a national NFP Supervisor, is an important idea and a cost-effective strategy.

Highlights of recommendations in both countries by Mrs. LeBlanc were: (Mauritius Technical Asst. - Annex 2)

1. Central African Republic:

- . increase supervision of the teachers of fertility awareness; and
- . establish client follow-up so that the impact of the education awareness program will be known.

2. Zambia:

- . closer supervision of teachers;
- . early and energetic start to the teachers' practicums; and
- . use of post-ovulatory phase for intercourse to shorten the length of abstinence in the first cycle. This is more easily done with the sympto-thermal method, but also requires close client supervision.

SUPERVISOR TRAINING PROGRAMS

Two training programs for the supervisor teams of Central African Republic and for Zambia were held in Mauritius in this reporting period.

The bulk of this training was covered by the country program budgets and is therefore reported in full under their country reports. (Refer: Zambia and Central African Republic). However, Mrs. LeBlanc's salary as chief supervisor trainer was covered under this project. (Mauritius Technical Assistance).

CONCLUSION

This Mauritius Technical Assistance project is going well and is on schedule, except for a small delay in the installation of the computer. (Note: Computer costs are covered under the Mauritius Evaluation Project, Richard St.-Mart's partial salary is covered under the Technical Assistance Budget).

The IFPLP feels this project is important in the zonal development of NFP in Africa and is grateful that the Mauritius program has accepted to take on the role of regional research and training center, if given adequate financial support.

Adequate supervision is essential for quality control in NFP, and ultimately for client satisfaction in the use of the method. Training and consultation with supervisors by Mrs. LeBlanc is one way to help achieve that goal.

PROJECTIONS FOR THE NEXT REPORT PERIOD

Mrs. LeBlanc plans two pre-training trips to Rwanda and Burundi.

The Mauritius NFP program will host a series of meetings (seminars, zonal assembly, and workshops) to which NFP delegations from 25 African countries will attend. At this time, field visits will be made by the African delegates to see the Mauritius program in action.

From: Bob Kambic and Richard St. Mart
To: Dr. Ron Gray and Dr. Claude Lanctot
Date: March 11, 1985
cc: Dr. Sykes and Dr. Su

REPORT ON STAY OF RICHARD ST. MART, ACTION FAMILIALE MAURITIUS
VISIT TO JOHNS HOPKINS UNIVERSITY, JANUARY 17 - FEBRUARY 15, 1985

- A. Schedule: A schedule was planned for Mr. St. Mart by R. Kambic and Z. Sykes (Appendix A). Mr. St. Mart exceeded the tasks scheduled by his ability to quickly learn how to operate the computer and data entry systems.

In addition to learning SOS data entry and elementary SPSS analysis, Mr. St. Mart designed forms with SOS, completed the SPSS tutorial, learned DW2 word processing, learned elementary BASIC and wrote a BASIC program, and began to use the SYMPHONY SPREADSHEET for data base and financial management. He also assembled and disassembled the computer hardware.

- B. Dr. Gray, Mr. Kambic, Dr. Sykes, Dr. Su, and Mr. St. Mart discussed in detail a number of items relating to the Mauritius computerization. These items are contained in this report.
- C. Dr. Gray, Mr. Kambic and Mr. St. Mart also developed a protocol for study of autonomous users (copy attached).

PROCEDURES FOR QUALITY ASSURANCE OF DATA COLLECTION

1. Interviewers will be trained in the use of the reporting forms. The forms will be phased into use in Mauritius over a period of several months.
2. Procedures will be developed to see the follow-up forms are completed on time.

PROCEDURES FOR DATA ENTRY AND FILE MANAGEMENT

1. Raw data will be double entered using SOS verify mode. After validity checks, the data will be backed up on to a floppy disk.
 2. Frequency checks will be run on all variables both for initial analysis and quality control. Frequency checks will be done by the data manager.
 3. The data file will be reformatted and sorted, and duplicates will be removed by a program written by Dr. Sykes.
 4. Every month the reformatted raw data will be combined into one monthly file (BIGFILE.DAT) and sorted. Frequencies will be run on all variables for quality checks.
 5. Beginning with the first month, each month's BIGFILE.DAT will be added to a consolidated file. The consolidated file will include all records to that point. The consolidated file will be backed up monthly.
 6. Edit checks will be run monthly on the consolidated file.
e.g., There should be only one registration form per record. If there is more than one registration form, the 2nd one has to be immediately preceded by a discontinuation form. There should not be more than 4 months between follow-up forms.
 7. A summary file will be produced from the consolidated file. The summary file will enable administrative reports to be done. It will provide some quality checks such as timing of follow up and count numbers of clients seen during the observation period.
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PROCEDURES FOR TRANSMISSION OF DATA TO JHU

The following will be the procedure for sending floppy disks with NFP data files back to the U.S. from Mauritius.

In the program SOS, NFP data entry formats are on the menu: NFP.MNU.

The data entry files are named as follow:

Registration Form	NFPREG.SCN
Follow Up Form	NFPFOL.SCN
Discontinuation Form	NFPDIS.SCN

The data entry programs put data into the following files:

Registration	MAUREG.DAT
Follow Up	MAUFOL.DAT
Discontinuation	MAUDIS.DAT

In each quarter of the year Action Familiale will prepare a floppy diskette with data for that quarter. This will be sent to JHU for concurrent analysis with Action Familiale.

The data file names will be as in Table 1:

TABLE 1: Data File Identification for Transmittal
of NFP Data from Mauritius to JHU

<u>Program Name</u>	<u>Data Type</u>		<u>Last Digit of Year</u>	<u>Month Data Collected</u>
Mauritius	Registration	REG	84	123456789ABC
	Follow Up	FOL	85	JFMAMJJASOND
	Discontinuation	DIS	86	

Example:

MAU	REG	5	4
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So that Action Familiale Registration Data Collected in April of 1985 will be in file MAUREG54.DAT

The diskette with quarterly files on them will be identified as in Table 2:

TABLE 2: Diskette File Names for Transmittal of NFP Data from Mauritius to JHU

<u>Program Name</u>	<u>Last Digit of Year</u>	<u>Range of Months for which Data Collected</u>			
		1-3	4-6	7-9	10-12
Mauritius	5	1-3	4-6	7-9	10-12

STANDARD PROCEDURES FOR DATA ANALYSIS

These procedures will be routinely run on the quarterly data and on the cumulative data.

1. Frequencies and histograms of client age with the following categories:
 - 0 - 20
 - 21 - 25
 - 26 - 30
 - 31 - 35
 - 36 - 40
 - > 40
2. Cross-tabulations of client parity and age
3. Frequencies and histograms of client religion
4. Frequencies and histograms of client education
5. Frequencies and histograms of where client received referral
6. Frequencies and histograms of client family planning interaction (avoid, space, etc.)
7. Frequencies and histograms of months charted
8. Frequencies and histograms of cycles charted
9. Frequencies and histograms of discontinuation

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VARIABLE NAMES

The following initial variable names are to be used for SPSS:

Client Age	CLAGE
Spouse Age	SPACE
Client Gravity	CLGRA
Client Parity	CLPAR
Client Religion	CLREL
Client Schooling	CLSCH
Client Referral	CLREF
Client Family Planning Intention	CLFPI
Client Months Charted	CLMON
Client Cycles Charted	CLCYC
Client Chart Shows	CHSHOW
Reason for Discontinuation	CLDIS

USE OF REPORTING FORMS

Mr. St. Mart felt that the registration form should contain better information on the reason a client chose NFP. He said that Question 22 on the registration form: "Why did you discontinue the previous method?", had answer codes that could also apply to the question: "Why have you chosen NFP?" We agreed that this question would be asked after Question 25, and the answer coded in Part IV: Optional code blanks 87-88 using the coding scheme for Question 22. This will add 2 characters to the length of the registration form.

On the follow-up form, Question 11: Intercourse Record, we agreed that if there was a conflict among answers, the answer that would be coded would be the one that signifies intercourse during the time of highest fertility.

We discussed how to fill in the question on the registration (#26) and follow-up (#20, #21) forms relating to time spent with the client. On the registration form, Question 26: Length of Interview, will refer to the total time for the length of the very first meeting with the client.

Questions 21 and 22: Total time spent with the client since the last form was completed for transmission to JHU, and Total number of visits with the client since the last form was completed for transmission to JHU will be used to obtain the average for the length of time spent on visits between the registration and the first follow-up.

We discussed the problem of possible change of family planning intention by a client leading to the "planned without prior notification" pregnancy. We agreed that Question 14 on the follow-up form: "Do you intend to avoid pregnancy for the next 3 months?", if answered YES will apply until the next follow-up form is received. therefore, a pregnancy in the 3-month interval will be considered unplanned.

Pregnancy classification will also be checked against Question 24 on the registration form: When do you want your next pregnancy to begin?

CLIENT I.D. & STATUS

Mr. St. Mart said that it would be difficult to keep one I.D. number for NFP clients through their history of NFP use. This is because clients will move to different districts and have more than one NFP instructor. It is important for the NFP service program to be able to update the identification number to track clients.

I explained the difficulties of changing I.D. numbers and keeping track of clients from the research perspective. I said that changing I.D. numbers could not be done.

We agreed that there was a need for 2 I.D. numbers, one that will not change for research purposes and one that the program can use internally for client service and to keep track of clients.

The two numbers will be: Program District Teacher Client
The Control Number.

The Action Familiale I.D. number.

When a client is first registered the 2 numbers will be the same. Action Familiale will be free to change their number as the client moves or is transferred. The control number will appear on all client records and will not change or be duplicated for another client.

The data Action Familiale sends to JHU will be formatted exactly as on the reporting forms and will not contain the Action Familiale I.D. number.

Action Familiale has a category of client called dropouts returning. These are clients who have discontinued and who re-enter the program. We agreed that these clients would be reregistered with new registration forms but that they would not get new control numbers.

To clarify the status of a client we agreed to add two codes to Question 15 Registration:

Have been you previously registered with this NFP program?

0 = No

1 = Yes, I was a dropout and am now returning

2 = Yes, I am now using NFP and have moved to a new district and/or teacher

3 = Both 1 & 2

PROBLEMS

One major problem was met. It was difficult to obtain a transformer that would reduce the 220 volts of Mauritius to 120 volts used as input to the IBM-XT. In addition, the computer required an uninterrupted power supply (UPS) for power conditioning in Mauritius. Mr. Kambic spent many hours attempting to solve this problem. We found a distributor in Baltimore that handled such transformers, and were assured by IBM that the arrangements we made for the transformer and UPS would enable the computer to operate properly.

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APPENDIX A.

Daily Schedule for R. St. Mart at Johns Hopkins

WEEK 1: January 21 - 25, 1985

- Monday - Use "Exploring IBM" learn simple DOS commands format diskette, copy file, print screen, edlin, and keep computer log. Meet JHU faculty and staff.
- Tuesday - Learn to use SOS data entry package, get to SOS from root directory, use SOS menus, access data entry forms, establish data files, copy data from hard disk to backup. Enter some data, use validation and consistency checks. Introduce SPSS.
- Wednesday - Use SPSS tutorial and continue to enter data. Use SORT functions, and collapse data fields.
- Thursday - Learn how to design SOS data entry forms. Begin to develop French language data entry forms, learn how to use form design menus with validation and consistency checks.
- Friday - SPSS tutorial. Enter data. Continue to use DOS, SOS and SPSS. Meet with faculty and staff about 1st week's work.

WEEK 2: January 28 - February 1, 1985

- Monday - Use SPSS tutorial and enter data, use SPSS for analysis of data.
- Tuesday - Use SPSS tutorial. Meet with Dr. Sykes for review of basic statistics and use of SPSS.
- Wednesday - Use SPSS tutorial. Use File Merge and create record programs. Use the new records to run frequencies, histograms and crosstabs.
- Thursday - Continue to use DOS, SOS, and SPSS. Integrate the 3 systems and change files back and forth between the 3. Begin to manage data files.
- Friday - Do SPSS tutorial data manipulations and outputs. Meet with faculty and staff to access and plan final week.

APPENDIX A.

WEEK 3: February 4 - 8, 1985

- Monday - SPSS problems. DW2 word processing.
- Tuesday - Symphony and Basic demonstration.
- Wednesday - Work with DOS and SOS to manage files. Save files for return to Mauritius.
- Thursday - Disassemble and Reassemble computer - Install programs. Pack computer.
- Friday - Finish packing computer for delivery to Mauritius. Wrap up meeting. Assess past 3 weeks.

Faculty: Drs. Ronald Gray, Zenas Sykes and Sol Su

Staff: Mr. Robert Kambic

**Rapport de Tournée en République Centre Africaine
et Zambie**

(janvier 26 - février 1 et février 10 - février 19, 1985)

I INTRODUCTION

1. Cette tournée a été entreprise par Mme Jacqueline Le Blanc, consultante de la Fédération Internationale d'Action Familiale, dans les deux pays mentionnés ci-dessus.

2. Durée de séjour dans chaque pays:

- a) République Centre Africaine (1/26 - 1/31)
- b) République Populaire du Congo, Brazzaville (en transit)
(1/31 - 2/1)
- c) Zambie (2/10 - 2/17)
- d) République de l'Afrique du Sud, Johannesburg
(en transit) (2/17 - 2/19)

3. Objectif Général

Etudier la structure locale pour la prestation des services d'enseignement, de suivi et de supervision de la PFN dans les pays et proposer un programme de formation pour les superviseurs qui répondrait aux besoins de chaque programme.

II Visite à Bangui en République Centre Africaine
(1/26 - 1/31, 1985)

1. Hôte Local:
Mlle Micheline Quetier
Foyer de Charité
B P 335, Bangui
R C A

Mlle Quetier est la directrice de l'association dénommée "Education à la Maîtrise de la Fécondité" (EMF) qui offre des services de PFN en R C A. Durant son séjour à Bangui, Mme Le Blanc logea au Foyer de Charité.

2. Les objectifs:

1. Rencontrer l'équipe locale engagée dans l'enseignement de la PFN
2. Etudier les méthodes de travail de l'équipe locale pour la prestation des services PFN
3. Etudier l'environnement
4. Etudier les possibilités de suivi et de supervision
5. Rencontrer les fonctionnaires et militaires qui enseignent la PFN
6. Rencontrer les officiels du gouvernement concernant la participation de deux fonctionnaires au stage de formation de superviseurs à Maurice

3. Visites et contacts

3.1 Visites et contact pour répondre aux objectifs 2.1 à 2.4.

3.1.1 Au cours de son séjour à Bangui, Mme Le Blanc eut des échanges fructueux avec Mlle Quetier:

- a) les villes ou grands villages où Mlle Quetier a donné des sessions furent localisées
- b) les coutumes sexuelles des habitants ainsi que les différents aspects du programme furent expliqués. Les séances d'enseignement se passent en petits ou grands groupes mais très peu de suivi est fait. Aussi Mlle Quetier souhaiterait établir un système de suivi au plus vite.
- c) Il est ressorti des échanges de vues entre Mlle Quetier et Mme Le Blanc qu'il serait souhaitable de connaître l'impact des séances d'information et d'éducation de la EMF tant sur le plan de la conscientisation de la population que celui de l'application de la MAO. Une enquête évaluative est tout à fait possible puisque de nombreux jeunes pro-PFN sont désireux d'aider la EMF. Il fut décidé après consultation avec le bureau de la EMF que cette enquête serait entreprise dans un des quartiers. Mlle Quetier et Mme Le Blanc préparèrent ensemble les grandes lignes du questionnaire pour cette évaluation.

d) Mme Le Blanc et Mlle Quetier établirent les sujets devant figurer au programme de formation des superviseurs à Maurice.

- 3.1.2 Une réunion spéciale a été tenue le dimanche 27 janvier afin de permettre un échange entre les membres de la EMP et Mme Le Blanc.
- 3.1.3 Lundi 28, Mme Le Blanc se rendit au dispensaire du Foyer de Charité où est dispensé, de 7h30 - 12h00, les services de PFN par Mlle Quetier et M Jean Sang-Houlé, infirmier du dispensaire. Ce dernier a donné une séance d'enseignement sur la MAO à une soixantaine de femmes. Exposé très vivant en Sango. Les femmes étaient attentives et participaient. Quatre séances types sont données par semaine, les mêmes sujets étant repris semaine après semaine.
- 3.1.4 Lundi après-midi, Mme Le Blanc et Mlle Quétier visitèrent un village avoisinant. Evidance est faite de la grande popularité de Mlle Quétier. Par contre peu d'évidence concrète concernant l'emploi de la méthode, l'éducatrice travaillant dans ce quartier n'ayant pu présenter ses cas à cause d'une confusion de rendez-vous.
- 3.1.5 Mardi après-midi, Mme Le Blanc assista à une réunion du bureau de la EMP, qui compte sept membres, dont Mlle Quetier présidente et deux autres missionnaires du Foyer de Charité respectivement trésorier et conseillère médicale. Ces deux derniers étaient absents.

Au cours de la réunion les trois "superviseurs" qui participeront au stage d'entraînement de trois semaines à Maurice furent désignés. Ils sont:

Mme Angèle Comblet, assistante sociale au service de santé scolaire, vice-présidente de la EMP
 M Jean Valespi Sang-Houlé, infirmier au dispensaire du Foyer, secrétaire de la EMP.
 Mme Jacqueline Ballé-Bonza, institutrice à l'école normale (puériculture et enseignement ménager)

Les candidats souhaitent un certificat officiel de participation au stage, émanant de la FIDAF. De plus, il est demandé une invitation officielle de la fédération afin qu'ils puissent obtenir congé.

- 3.1.6 Mercredi après-midi, Mme Le Blanc assista à une séance d'enseignement donnée par une éducatrice, lycéenne en terminale. Cela se passa en plein air. Une douzaine de femmes étaient présentes. L'éducatrice est motivée et pourrait devenir compétente dès que la supervision l'aidera à acquérir plus de technique pédagogique. Elle donne une séance chaque semaine mais il n'y a pas de suivi d'utilisatrices.

3.2 Visites et contacts avec les officiels et autres personnalités:

3.2.1 Mme Le Blanc eut deux occasions informelles de rencontrer des personnalités:

- Le 27 janvier à une cérémonie de remise de décoration à Mme (Dr) Falaha (UNICEF/UNFPA), consultante qui doit bientôt quitter Bangui pour Abijan. Mme Le Blanc lui fut présentée ainsi qu'au ministre de la santé. Elle rencontra aussi Dr Pierrette Sogambi, directrice du département SMI/PF, qu'elle avait déjà rencontrée à l'Action Familiale de l'Ile Maurice.
- Le 27 janvier, chez Dr Sogambi, à un dîner en l'honneur de Dr Falaha. Mme Le Blanc y eut un échange cordial avec cette dernière. Mme Le Blanc fut aussi présentée au chef de cabinet du ministère de la santé qui exprima le désir qu'elle soit présentée officiellement au ministère de la santé (ceci ne put être fait pour des raisons indépendantes de leur volonté. Mme Le Blanc et Mlle Quetier allèrent seulement saluer le chef de cabinet lorsqu'elles se rendirent au ministère pour rencontrer Dr Sogambi).

3.2.2 Le mercredi 30 janvier, Mme Le Blanc et Mlle Quetier rendirent visite au Dr Sogambi, au ministère de la santé. Elles parlèrent de la nécessité et des possibilités de supervision pour les fonctionnaires du ministère qui enseignent la MAO et aussi du stage d'entraînement de superviseurs à Maurice, stage auquel participeront deux fonctionnaires. Le 2 mai fut choisi comme date de départ de Bangui. Le choix de Dr Sogambi s'est porté sur Mme Ouaimang, sage-femme et Mme (Dr) Frank Gisèle, généraliste, qui sera promue bientôt chef de service.

3.2.3 Mardi 29, visite à Mme K Montgomery (AID) à l'ambassade des Etats Unis.

3.2.4 Dimanche 27, visite au Dr Johnson, psychiatre et sexologue, chargé de réorganiser le service de psychiatrie.

3.2.5 Mercredi 30, visite au camp militaire de Kasai où l'infirmier major donne régulièrement des séances d'éducation PFN aux mères.

3.2.6 Mercredi 30

- i) Visite au Centre de PF des Castors à des infirmières qui distribuent des contraceptifs mais enseignent également la MAO. Elles sont très pro-PFN pour les jeunes femmes.
- ii) Visite à la maternité des Castors à Sr Julienne, sage-femme, chef de service, très pro-PFN.

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Commentaires:

Mlle Quetier est vraiment très populaire à Bangui et a su gagner la collaboration du gouvernement. Les habitants, plus que souvent ailleurs, semblent devoir être des "ready acceptors" de la PFN. Mlle Quétier est entourée d'une équipe très motivée. Il y a donc de bonnes perspectives d'avenir.

Jusqu'à présent il y a eu surtout un très grand travail de sensibilisation et d'éducation en groupe. Malheureusement, on ne sait pas beaucoup de l'impact car très peu de suivi est fait. D'autre part, certains éducateurs qui ont commencé l'enseignement le font totalement sans supervision; il n'y a donc pas de garantie sur la qualité du service offert. Mlle Quetier semble en être très consciente et compte sur l'introduction de la supervision, après le stage de trois des membres de la EMP à Maurice, pour instaurer l'encadrement des utilisateurs et des éducateurs.

Concernant le choix des trois superviseurs de la EMP à être envoyés à Maurice, ce sont les plus indiqués pour Bangui et il semblerait qu'aucune autre province ne soit prête à entreprendre un programme important. Il serait souhaitable que pour la session juillet/août à Maurice, la délégation de la RCA comprenne, en dehors de Mlle Quetier, une ou plusieurs déléguées des provinces.

En conclusion, la EMP est un mouvement très dynamique dont la priorité, pour le moment, devrait être de s'étendre en profondeur avec le contrôle de la qualité. Il pourra ensuite poursuivre son expansion horizontale et deviendra très probablement un programme important.

5

Liste des personnes rencontrées:

- | | | |
|----|--|--|
| 1. | Equipe PFN;
Directrice
Vice-présidente

Secrétaire | Mlle Micheline Quetier
Mme Angèle Combet, assistante-
sociale au service de santé scolaire
M Jean Sang-Houlé, infirmier au
dispensaire du Foyer de Charité
- deux autres membres du bureau
de la EMP
- des éducateurs dont le major
du camp militaire de Kasai |
| 2. | A l'ambassade des
Etats Unis | Mme Katherine Montgomery |
| 3. | UNICEF | Mme (Dr) F Palaha |
| 4. | Ministère de la
santé et personnel
médical ou para-
médical | le Ministre de la santé
le chef de cabinet
Dr Pierrette Sogambi, directrice
SMI/PP
Dr Johnson, psychiatre et sexologue
Deux infirmiers du centre de PF
des Castors
Sr Julienne, chef de service à
la maternité des Castors |

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ZAMBIA VISIT

(2/10 - 2/17, 1985)

III 1. Local Host:

Mrs Le Blanc's visit in Zambia was coordinated by Father R Cremins, s.j, director of the Family Life Mouvement of Zambia. While in Lusaka, Mrs Le Blanc stayed at Ndiike Hotel. In Kitwe, she stayed at Hotel Edinburg, P O Box 21806; in Monze, at the Holy Rosary Sisters', in Choma, with the sisters of Charity; in Livingston, at Musio-O-Tunya, inter-continental Hotel, P O Box 60151.

2. Sequence of visits:

2/10 - 2/11	Lusaka
2/11 - 2/12	Copperbelt Province
2/12 - 2/13	Lusaka
2/13 - 2/14	Monze
2/14 - 2/15	Choma
2/15 - 2/16	Livingston
2/16 - 2/17	Lusaka

3. Objectives of the visits:

1. To review the actual situation of the local NFP programme
2. To study the local conditions affecting NFP services
3. To study the methodology and techniques used in the local NFP services
4. To discuss with the local teams - follow-up, supervision needs and realistic ways of implementing supervision
5. To discuss the supervisors training programme in Mauritius

4. Visits and Contacts:

In each province, Mrs Le Blanc extensively discussed with the supervisors NFP initial and follow-up instruction, the need for supervision, the possible ways and means of supervision and related problems.

4.1 In the Copperbelt Province (2/11 - 2/12):

a) In Kitwe

Mrs Le Blanc was greeted by Sister Elizabeth Mary, supervisor of a great part of the province, Mrs Flora Chishimba, the secretary who is also a teacher (of NFP) and Mrs Irene Kabwe, belonging to the tutor team. Later, Mrs Le Blanc was invited to visit two client-couples (teacher-to-be). There was an informal sharing among Mrs Le Blanc, Sr E Mary, Mrs Chishimba, and two teachers.

4.1

Monday evening and Tuesday morning, Mrs Le Blanc, Sr Elizabeth Mary, Mrs Chishimba and Mrs Kabwe had an interesting meeting on the NFP services in the province. One question was brought up: Will clients accept the visit of a supervisor in addition to that of the teacher?

b) In Ndola

Mrs Le Blanc met with Sr Rosemary Nge Ndo, supervisor of the district. The latter had clients and was training eight couples to become teachers. Four of them had attended the national training workshop in Lusaka. Mrs Le Blanc met one of them, whom she found very motivated and able.

Mrs Le Blanc was introduced to Fr Doran, vicar-general of the diocese of Copperbelt, who had been very helpful and had contributed much to the movement. She also paid a visit to Bishop De Jong who showed much interest in NFP. He nevertheless expressed the fear that the NFP movement might be in competition with the "marriage encounter" movement when it comes to the recruitment of human resources.

Both in Kitwe and Ndola, Mrs Le Blanc was very much impressed by the enthusiasm of the couples met. They witnessed about the promotion that NFP had brought to their family life, bettering communications in their couples as well as with their children. They were happy now to be able to talk about sexual problems with the latter.

4.2 In Monze (2/13 - 2/14);

Mrs Le Blanc met with Dr (Sr) Lucy O'Brien, supervisor of the province. They talked about the present situation and the future plans for the province, including supervision. There was a short meeting with three district supervisors and a few teachers. Most of them had attended the national training session in Lusaka. Mrs Le Blanc also met with another teacher and the latter's client. Both expressed difficulties with regard to abstinence.

4.3 In Choma (2/14 - 2/15) :

Mrs Le Blanc was briefed by Sr Thérèse Xavier, the supervisor. There were about 25 clients; most of them being clients of Mrs Haangala, a nurse working at the mine. Sr Thérèse Xavier, had not been able to give as much time as she would have liked to NFP. She is also the supervisor of Maamba, 80 miles away, where there are two teachers. These were probably lacking support. The volume of paper work seemed to be a problem. Some questions in the reporting forms, having to do with the couples' intimate conjugal life, were considered too touchy.

Mrs Le Blanc met Mrs Haangala and one of her clients. As Mrs Haangala was keeping copies of her clients' charts, Mrs Le Blanc had the opportunity to conduct a chart review session.

4.3

Mrs Le Blanc was pleased that field visits had been scheduled for the day. With Sr Thérésa Xavier, she thus visited two clients who expressed their total satisfaction with NFP. They were able to interpret their charts.

4.4 In Livingstone (2/15 - 2/16):

Sr Charles Lwanga, director of the NFP regional organisation, known as "Livingstone Family Life Group" (LFLG), informed Mrs Le Blanc of their achievements. This group, which is part of the national movement, owes much to the dynamism of Sr C Lwanga. Four teachers or couple-teachers and many of the 40 clients were already active members of LFLG. Teachers and clients used to meet together once a week. It was felt that special teacher meetings, in addition, would create a more dynamic development of NFP teaching. LFLG held recently a week-end seminar with 35 participants including nine priests. Two doctors also participated in the workshop and contributed as resource persons. Many participants became clients, subsequently.

People are becoming more and more aware of the movement, the priests and the two doctors are helping in that field. A special meeting was held on Friday evening among Mrs Le Blanc, the teachers, and some clients. Fr Alphonso was present. Many participants expressed their satisfaction with respect to the positive contribution of NFP to their lives. A teacher, Daniel Mwansa, expressed his gratitude to Action Familiale of Mauritius which, by its perseverance, had helped NFP to be recognised by international organisations now willing to financially support NFP programme services.

4.5 In Lusaka (2/10 - 2/11, 2/16 - 2/17)

On the 10 February, Mrs Le Blanc had a first meeting with Dr (Sr) Mona Tyndall, national director of the teachers' training and supervisor of about ten teachers, and Sr Gabriel, supervisor of twelve teachers. Both were considering supervision as important and in fact some form of supervision was already being done.

Some of the problems that were brought forward are:

- Difficulties to meet regularly all teachers on account of the long distances
- Teachers find some difficulties in recruiting clients
- Medical centres in Zambia have less clients than religious centres.

b) Having completed her trip through the provinces previously mentioned, on Saturday evening, Mrs Le Blanc had an intensive and interesting sharing with Fr Cremins, Dr (Sr) Tyndall and Sr Gabriel about the achievements throughout the country, and the difficulties and possibilities of supervision.

Plans were set up for the three-week training for NFP teachers' supervisors in Mauritius. The objectives and content of this training were discussed as well as the selection criteria for the candidates. It was also decided to recommend that five supervisors rather than three be sent to Mauritius and finally the 31 May was chosen as the day of departure from Zambia.

On Sunday morning, Mrs Le Blanc, together with Fr Cremins and Sr Tyndall visited two health centres where NFP teaching centres would be installed.

5. Mrs Le Blanc's comments:

"The FLMZ is developing on a well-structured base, the members are motivated and committed. I was deeply impressed by the potentialities of the sisters and of some of the teachers and by the enthusiasm for NFP that many of the couples I met, manifested."

I would like to pay tribute to FLMZ leaders, especially Fr Cremins, for winning the Government's official support which indeed brings many advantages, the most important ones being:

- official approval
- accomodation in health centres for FLMZ teachers
- partial or total release of some medical and para-medical personnel to enable them to work for the NFP services.

Conditions therefore exist for a promising development of the programme.

Two facts struck me:

- Many trainee-teachers, though having successfully attended the Lusaka teacher training workshop, had not started teaching.
- At least two teachers had started teaching but were not providing sufficient follow-up.

It seems to me that they were either not feeling much at ease with their new responsibility or not knowing exactly how to proceed. This brought me to the conclusion that though a good knowledge of NFP was given to the trainees, they were not receiving enough teaching know-how. I would suggest that the trainees be given the opportunity to accompany teachers on their teaching work.

Concerning supervision, the temptation to wait for further development of the movement to start systematic supervision may arise. Will that not be dangerous because, in the meantime teaching can be of a low standard and this will do a great wrong to the clients and to the movement. There will, of course, be problems, the long distances being one of them, but I think that, if supervision is felt as something necessary, it can be made possible.

Though many couples have expressed satisfaction about NFP, two problems were underlined:

- i) difficulty to recruit clients
- ii) abstinence

I wondered at the recommendation to abstain throughout the whole first cycle. Will it not be possible for the teachers to follow-up new clients close enough to be sufficiently confident in their observations to recommend the use of, at least, the post-ovulatory infertile phase. Sympto-thermal makes this much more possible than mucus alone. This is an aspect of the teaching where the teacher's know-how will prove particularly important.

6. List of persons met:

- F L M Z
1. In Lusaka;
Director: Fr Richard Cremins, s.j
Chief trainer and supervisor: Dr (Sr) Mona Tyndall (FRCS)
Supervisor: Sister Gabriel
Coordinating Secretary: Mr Raymond Muchindu
 2. In Kitwe:
Province Supervisor: Sr Elizabeth Mary
Secretary and teacher: Mrs Flora Chishimba
Tutor: Mrs Irene Kabwe
Three teachers or teacher couples
 3. In Ndola:
District Supervisor: Sr Rosemary Nge Ndo
One teacher couple
 4. In Monze:
Province supervisor: Dr (Sr) Lucy O'Brien (gynecologist)
Three district supervisors
Several teachers
One client
 5. In Choma:
Province Supervisor: Sr Thérésa Xavier
Teacher: Mrs Haangala
Three clients

6, In Livingstone:
Province Supervisor: Sr Claude Lwanga
Several teachers and clients

Church leaders:

In Ndola:
Bishop De Jong
Fr Doran (vicar general)

In Livingstone:
Fr Alphonso

ZAMBIA VISIT

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b) Having completed her trip through the provinces previously mentioned, on Saturday evening, Mrs Le Blanc had an intensive and interesting sharing with Fr Cremins, Dr (Sr) Tyndall and Sr Gabriel about the achievements throughout the country, and the difficulties and possibilities of supervision.

Plans were set up for the three-week training for NFP teachers' supervisors in Mauritius. The objectives and content of this training were discussed as well as the selection criteria for the candidates. It was also decided to recommend that five supervisors rather than three be sent to Mauritius and finally the 31 May was chosen as the day of departure from Zambia.

On Sunday morning, Mrs Le Blanc, together with Fr Cremins and Sr 'yndall visited two health centres where NFP teaching centres would be installed.

5. Mrs Le Blanc's comments:

"The FLME is developing on a well-structured base, the members are motivated and committed. I was deeply impressed by the potentialities of the sisters and of some of the teachers and by the enthusiasm for NFP that many of the couples I met, manifested."

I would like to pay tribute to FLME leaders, especially Fr Cremins, for winning the Government's official support which indeed brings many advantages, the most important ones being:

- official approval
- accomodation in health centres for FLME teachers
- partial or total release of some medical and para-medical personnel to enable them to work for the NFP services.

Conditions therefore exist for a promising development of the programme.

Two facts struck me:

- Many trainee-teachers, though having successfully attended the Lusaka teacher training workshop, had not started teaching.
- At least two teachers had started teaching but were not providing sufficient follow-up.

It seems to me that they were either not feeling much at ease with their new responsibility or not knowing exactly how to proceed. This brought me to the conclusion that though a good knowledge of NFP was given to the trainees, they were not receiving enough teaching know-how. I would suggest that the trainees be given the opportunity to accompany teachers on their teaching work.

Concerning supervision, the temptation to wait for further development of the movement to start systematic supervision may arise. Will that not be dangerous because, in the meantime teaching can be of a low standard and this will do a great wrong to the clients and to the movement. There will, of course, be problems, the long distances being one of them, but I think that, if supervision is felt as something necessary, it can be made possible.

Though many couples have expressed satisfaction about NFP, two problems were underlined:

- i) difficulty to recruit clients
- ii) abstinence

I wondered at the recommendation to abstain throughout the whole first cycle. Will it not be possible for the teachers to follow-up new clients close enough to be sufficiently confident in their observations to recommend the use of, at least, the post-ovulatory infertile phase. Sympto-thermal makes this much more possible than mucus alone. This is an aspect of the teaching where the teacher's know-how will prove particularly important.

6. List of persons met:

- P L M Z
1. In Lusaka;
 Director: Fr Richard Cremins, s.j
 Chief trainer and supervisor: Dr (Sr) Mona Tyndall (FRCS)
 Supervisor: Sister Gabriel
 Coordinating Secretary: Mr Raymond Muchindu
 2. In Kitwe:
 Province Supervisor: Sr Elizabeth Mary
 Secretary and teacher: Mrs Flora Chishimba
 Tutor: Mrs Irene Kabwe
 Three teachers or teacher couples
 3. In Ndola:
 District Supervisor: Sr Rosemary Nge Ndo
 One teacher couple
 4. In Monze:
 Province supervisor: Dr (Sr) Lucy O'Brien (gynecologist)
 Three district supervisors
 Several teachers
 One client
 5. In Choma:
 Province Supervisor: Sr Thérésa Xavier
 Teacher: Mrs Haangala
 Three clients

6, In Livingstone:
Province Supervisor: Sr Claude Lwanga
Several teachers and clients

Church leaders:

In Ndola:
Bishop De Jong
Fr Doran (vicar general)

In Livingstone:
Fr Alphonso

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(janvier 26 - février 1 et février 10 - février 19, 1985)

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 2. Etudier les méthodes de travail de l'équipe locale pour la prestation des services PFN
 3. Etudier l'environnement
 4. Etudier les possibilités de suivi et de supervision
 5. Rencontrer les fonctionnaires et militaires qui enseignent la PFN
 6. Rencontrer les officiels du gouvernement concernant la participation de deux fonctionnaires au stage de formation de superviseurs à Maurice
3. Visites et contacts
- 3.1 Visites et contact pour répondre aux objectifs 2.1 à 2.4.
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d) Mme Le Blanc et Mlle Quetier établirent les sujets devant figurer au programme de formation des superviseurs à Maurice.

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Au cours de la réunion les trois "superviseurs" qui participeront au stage d'entraînement de trois semaines à Maurice furent désignés. Ils sont:

- Mme Angèle Comblet, assistante sociale au service de santé scolaire, vice-présidente de la EMP
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Les candidats souhaitent un certificat officiel de participation au stage, émanant de la FIDAF. De plus, il est demandé une invitation officielle de la fédération afin qu'ils puissent obtenir congé.

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Commentaires:

Mlle Quetier est vraiment très populaire à Bangui et a su gagner la collaboration du gouvernement. Les habitants, plus que souvent ailleurs, semblent devoir être des "ready acceptors" de la PPN. Mlle Quétier est entourée d'une équipe très motivée. Il y a donc de bonnes perspectives d'avenir.

Jusqu'à présent il y a eu surtout un très grand travail de sensibilisation et d'éducation en groupe. Malheureusement, on ne sait pas beaucoup de l'impact car très peu de suivi est fait. D'autre part, certains éducateurs qui ont commencé l'enseignement le font totalement sans supervision; il n'y a donc pas de garantie sur la qualité du service offert. Mlle Quetier semble en être très consciente et compte sur l'introduction de la supervision, après le stage de trois des membres de la EMF à Maurice, pour instaurer l'encadrement des utilisateurs et des éducateurs.

Concernant le choix des trois superviseurs de la EMF à être envoyés à Maurice, ce sont les plus indiqués pour Bangui et il semblerait qu'aucune autre province ne soit prête à entreprendre un programme important. Il serait souhaitable que pour la session juillet/août à Maurice, la délégation de la RCA comprenne, en dehors de Mlle Quetier, une ou plusieurs déléguées des provinces.

En conclusion, la EMF est un mouvement très dynamique dont la priorité, pour le moment, devrait être de s'étendre en profondeur avec le contrôle de la qualité. Il pourra ensuite poursuivre son expansion horizontale et deviendra très probablement un programme important.

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ZAIRE
January-June 1985

Reports received during this period:

- 1) from Diocese of Kinanga, client statistics for Dioceses: Kinanga, Luisa, Mweka (attached in USAID/CIO's report.
NOTE: These activities not yet funded by A.I.D.
- 2) Historical report of PROPER/Rural Women's/Promotion/ Diocese of Kinanga.

As with the Congo, the major event of this reporting period was attendance at the Brazzaville. Information Conference for PanAfrican government health officials. Zaire sent 8 delegates, all financed by the AID/IPPLP initial technical assistance project. Copies of the letters selecting these delegates are attached in the AID/CIO's report.

The initial technical assistance budget for Zaire being only \$5000, of which most is earmarked for foreign scholarships and consultant visits, little remains for service development though this will be taken up in the supplementary project which is pending approval of USAID/Kinshasa.

When reading the report from the Diocese of Kinanga, it should be noted that NFP teaching has been going on for some years in Zaire. What is necessary now is the supervision of these teachers for quality control and the expansion of client service through the training of more teachers. These needs will be catered to in the supplementary assistance project if it is approved.

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Other Countries:

- .Ghana, Lesotho
- .Senegal, Madagascar, Tunisia
- .Rwanda

This group of countries can be classified as follows:

Ghana-Lesotho

- 1) Just beginning collaboration with IPPLP/AID in NPP through the Supplementary Grant
- 2) No financial disbursements were yet made to the projects under A.I.D. Supplementary Technical Assistance. Ghana's Supplementary Technical Assistance project was only approved in October 1985. USAID/Lesotho is still deliberating approval.

Senegal-Madagascar-Tunisia

The A.I.D. initial technical assistance project budgets for these countries is very small (Senegal-\$5000, Madagascar- 2900, Tunisia-\$6000) and funds only the budget line items of Foreign Scholarships and Teaching Materials. A.I.D. funded foreign scholarships for this period are listed below. Promotion Familiale de Senegal is also negotiating inclusion in the A.I.D./GOS family planning bilateral project.

Rwanda

Although Rwanda was awarded a substantial grant of \$34,000 as Initial Technical Assistance, of which \$15,000 is budgeted for service development, IPPLP has not been successful in transmitting funds to their bank. A grant of \$2500 was made to Rwanda in January 1985, IPPLP was notified in May 1985 that the funds never reached Kigali. A disbursement of \$10,000 via a new bank route was made in November 1985 and will be followed closely to see that it gets to the project holder. In addition, there was some hesitation to fully fund the project under the Initial Technical Assistance Grant until it was known for certain whether NPP will be included under the AID/GOR bilateral family planning program. Now that it is fairly certain that this will not be the case, the project can proceed on course as originally planned, with three NPP supervisor-trainees scheduled for training in early 1986 in Mauritius.

Foreign Scholarships for these Countries Funded by A.I.D., Jan-June 1985

	BRAZZAVILLE PAN-AFRICAN NFP/GOVT REP. SEMINAR 21-25 JAN 1985	MAURITIUS MEETINGS NFP WORKSHOPS/ZONAL COUNCIL 22 JULY-2 AUG 1985
Lesotho		
Ghana		2
Madagascar		2
Rwanda	3	1
Senegal	1	2
Tunisia		1 *

* Tunisia at the last moment was not able to send anyone to the Mauritius Meetings.

L'A.S.P.F est née au lendemain du voyage d'études du Docteur FELICIEAN ANANI ADOTEVI à Hong-Kong sur la planification familiale naturelle. Elle est née de la volonté commune de la vccmmission diocésaine de Dakar, des Soeurs des maternités catholiques et d'autres compétences médicales et paramédicales. Cette volonté est celle de mettre à la disposition de la population sénégalaise des moyens naturels et rationnels de Planification Familiale. Sa philosophie s'inscrit dans une approche éducative en vue de la libération de l'homme. Son bureau est composé comme suite :

- Présidenty : Docteur FELICIEAN ANANI ADOTEVI
- Secrétaire Général : Docteur MICHEL GNOPGANE
- Trésorier : Docteur MARTIN TYNOKPA
- Conseiller Spirituel : Père JACQUES F. JNCUX
- Secrétaire aux affaires familiales et sociales : M. HENRI DIOP
- Conseiller pédagogique : Soeur MARIE LUC

Les activités de l'A.S.P.F s'adressent aux femmes, aux jeunes et aux couples. Ce sont les activités d'information, d'éducation et de formation.

1) Information et Education :

L'A.S.P.F a organisé dans la région du Cap-Vert une série de rencontres d'information à l'endroit des jeunes et des couples. Ces rencontres ont eu lieu au Foyer de Charité du Cap des Biches (au nombre de 3), puis à Dakar, au centre culturel Leuret (Saint Dominique), les premier et troisième Vendredi de chaque mois. Ces derniers ont commencé en Janvier 1985. Le thème de ces rencontres sont disponibles au Foyer de Charité et chez le Docteur Félicien Anani ADOTEVI. Dans la région de Thiès et de Kaolack, les mêmes activités ont eu lieu à Keur Moussa, dans Thiès-Ville, à Kaolack et à Sibasor. Comme thème déjà abordé cette année(84-85) avec les jeunes après deux séances d'organisation interne :

- Qui-est-ce que l'amour ?
- L'acte sexuel contribue-t-il à l'équilibre de l'individu ?
- Les jeunes face à la polygamie.
- Les jeunes face aux drogues.

2) Formation :

La réussite de la Planification Familiale Naturelle dépend de la motivation du couple, de l'entente conjugale, et de la compétence des animateurs et des formateurs. Dans le souci d'offrir un service de qualité aux familles sénégalaises, l'A.S.P.F a consacré une partie de ces activités à la formation d'animateurs, d'éducateurs et de formateurs. Cette formation se fait par biais de séminaires et de rencontres périodiques. Nous avons tenu au Foyer de Charité du Cap des Biches un séminaire en Novembre 1984 ; un séminaire à Keur Moussa, un séminaire à Thiès et un séminaire à Kaolack (Sibasor). Des rencontres entre formateurs se déroulent au Cap des Biches ou à Dakar chez les Soeurs des maternités catholiques. Au terme de ces séminaires et rencontres, l'A.S.P.F compte 10 formateurs, une dizaine d'animateurs confirmés et une centaine en formation.

3)

L'A.S.P.F se consacre aussi des travaux de recherche grâce auxquels du matériel didactique mieux adapté a été élaboré.

4) Prévision :

Nous prévoyons poursuivre nos activités d'information et de formation. Nous prévoyons aussi mieux structurer notre Association afin de répondre aux

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nombreuses demandes qui sont de plus en plus grandes. Nous envisageons poursuivre notre démarche en vue de notre reconnaissance comme O.M.G. Nous espérons pouvoir participer aux rencontres internationales auxquelles, nous sommes invités en vue de renforcer notre crédibilité. Les activités de l'A.S.P.F n'ont pu se dérouler cette année grâce au soutien matériel important mis à sa disposition par le Poyer de Charité, également à la bonne volonté et à la disponibilité et enfin à un financement partiel de la F.I.D.A.F (Fédération Internationale d'Action Familiale).

Nous souhaiterions voir les Diocèses prendre une part active dans la réalisation de nos projets, afin que nous soyons maintenant moins dépendant de l'extérieur et surtout pour que nous puissions pluriplu poursuivre ce qui a été commencé lorsque l'aide extérieure viendrait à faire défaut.