

PD-AAW-835

MM-53322



**intraH**

**Trip Report**

# 0-147

**Travelers:** Miss Pauline Muhuhu  
INTRAH/ESA Director

**Country Visited:** UGANDA

**Date of Trip:** July 26 - 31, 1987

**Purpose:** To accompany PAC-II Mid-Project  
Evaluation Team.

DPE-3031-C-00 4077-00

Program for International Training in Health  
208 North Columbia Street  
The University of North Carolina  
Chapel Hill, North Carolina 27514 USA

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## LIST OF ABBREVIATIONS

<b>ADMS</b>	Assistant Director of Medical Services
<b>CTT</b>	Core Training Team
<b>FHI</b>	Family Health Initiatives
<b>FPAU</b>	Family Planning Association of Uganda
<b>IEC</b>	Information, Education and Communication

EXECUTIVE SUMMARY

Miss Pauline Muhuhu, INTRAH/ESA Director, visited Uganda July 26 - 31, 1987. The purpose of the visit was to accompany PAC-II Mid-Project evaluators Ms. Patricia Baldi, Mr. Robert Blomberg and Mr. Fred Abbatt. During the one-week visit in Uganda the team interviewed selected PAC II trainees, observed the core training team in action, and held discussions with Ministry of Health senior personnel and other non-governmental agencies. Visits were made to hospitals in Mulago, Entebbe, Mbale, Jinja and Nsambya. A total of 34 service persons were interviewed. The team's major findings included the following:

- INTRAH has a good relationship at a high level with the Ministry of Health.
- INTRAH trainees have returned to positions where they are providing FP services for which they were trained.
- Orientation of hospital management teams appears to have played a major role in positively influencing the attitude of this group towards the importance of family planning and enhancing the group's role in family planning service delivery.
- The Ministry of Health has recognized the need to accelerate family planning training in order to increase FP service delivery points.
- A need exists for continued and accelerated work by INTRAH.

SCHEDULE OF ACTIVITIES

July 26 Arrived in Entebbe.

July 27 Briefed at USAID/Kampala.

Briefed with Deputy Director of Medical Services at Ministry of Health, Entebbe.

Interviewed and held discussions with Dr. Kaijuka, ADMS, MCH/FP, Entebbe.

Observed FP clinical skills training, Kampala.

July 28 Conducted interviews with INTRAH trainees at Nsambya Catholic Hospital, Kampala.

Met with representatives of Coopers & Lybrand, Kampala.

Conducted interviews at Entebbe Hospital.

Observed FP clinical skills training, Kampala.

Conducted interviews at Murchison Bay Hospital, Kampala.

PAC-II Mid-Project Evaluator Mr. Fred Abbatt observed trainers throughout these two days.

July 29 Conducted interviews with Bududa Hospital Management Team and Eastern Region Nursing Officer at Mbale Centre for Continuing Education, Mbale.

Visited Busoga Diocese Multi-Sectorial Rural Health Project Officer, Mbale.

Travelled to Kampala.

July 31 Morning Held discussions at Family Planning Association of Uganda, Kampala.

Debriefed at USAID/Kampala.

Afternoon Debriefed at Ministry of Health, Entebbe.

Departed for Nairobi.

**I. PURPOSE OF TRIP**

The purpose of the trip was to accompany three members of the PAC-II Mid-Project Evaluation team visiting Kenya and Uganda as part of the AID mid-program evaluation of the PAC-II program.

The major objective of the team's visit was to conduct field-based observations of the INTRAH training products in order to determine:

1. The impact INTRAH family planning training efforts have had on the institutionalization of family planning training.
2. How the INTRAH-supported family planning program has affected the delivery of MCH/FP services.
3. Whether there have been any unplanned effects.
4. What, if any, project materials or activities, e.g., training materials, project development strategies, evaluation approaches etc. have applicability beyond PAC-II.

**II. ACCOMPLISHMENTS**

During the one-week visit the team carried out the following activities:

- A. Briefed at USAID/Kampala and the Ministry of Health. USAID/Kampala informed the team that progress is being made towards making FHI funds available to the MOH for conduct of training and for the clinical skills course currently in progress. Funds will be available for the January training workshop. The MOH informed the team that there was a need to accelerate training in order to increase the number of trainers.

- B. During discussions with Mr. George Egaddu of Coopers & Lybrand, it was learned that the use of a fiscal agent has made funds easily accessible to the Ministry of Health. Transfer of funds from USA was cited to be very expeditious (48 hours).
- C. Interviews with PAC-II/INTRAH trainees revealed trainee satisfaction, very low personnel attrition and definite introduction of FP services as a result of training. The training team was found to work very well as a team with good documentation pertaining to their training efforts. However, they were found limited in the scope of training methodologies.
- D. Debriefed at USAID/Kampala and the Ministry of Health.

### III. BACKGROUND

Uganda was one of two countries in Eastern and Southern Africa to be selected for field visits by the PAC-II Mid-Project Evaluation team as part of AID/Washington's global PAC-II Mid-Project Evaluation. INTRAH has provided training and financial assistance to the Uganda Ministry of Health since 1984 with the major thrust of training taking place during PAC-II. Miss Muhuhu visited Uganda July 12-15, 1987 to finalize plans for the PAC-II Mid-Project Evaluation team and to participate in final planning for the FP clinical skills workshop that commenced on July 20, 1987. Plans were made for the Evaluation team to interview a cross-section of INTRAH trainees.

### IV. DESCRIPTION OF ACTIVITIES

The Evaluation team separated on several occasions in order to cover all areas of the evaluation. Mr. Abbatt spent two days observing trainers conduct an FP

clinical skills workshop at Makerere University. Mr. Blomberg visited Entebbe Hospital while Ms. Baldi interviewed Mr. George Egaddu of Coopers & Lybrand. The remaining site visits and interviews were conducted jointly. The field visits outside Kampala and Entebbe were dictated by country security and distance. Approximately thirty-two persons were interviewed.

**A. USAID/Kampala**

The Evaluation team met initially with Mr. Kurt Shaffer, Program Officer and Mr. Edward Zziwa, FHI Project Manager on July 25, 1987. The team was informed of the reasons for the present difficulties encountered in releasing local currency for the INTRAH/FHI cost sharing project. Should the problem persist, USAID/Kampala will utilize dollar funds to fund training activities. FHI funds will be used for the January 1988 workshop which is presently one of the INTRAH funded activities. The on-going clinical skills workshops which should have been funded through FHI contribution has been funded by INTRAH.

During a debriefing meeting on July 31, 1987 the team was informed of the 1 million dollar (local currency) budget for FY 87/88. USAID/Kampala requested a proposed budget for additional training to accelerate opening of new FP service delivery sites. The team briefed the Mission Director on the findings of their evaluation.

**B. Ministry of Health**

Two meetings were held with the MCH/FP Assistant Director of Medical Services. Discussed was the need to accelerate training in order to open 600 FP service delivery points. The ADMS cited finances as the only inhibiting factor. The proposed training would exclude

IUD insertions as the method is not popular. Omission of IUD insertion training would shorten training. The need to review the present training plan with a view to increasing the number of trainees was discussed.

C. Coopers & Lybrand

The purpose of the discussions was to find out the role of Coopers & Lybrand in enabling smooth implementation of the project. The Director of Coopers & Lybrand expressed satisfaction at the form and speedy manner in which financial transfers are carried out between INTRAH/Chapel Hill and Kampala and between Coopers & Lybrand and the Ministry of Health. Other areas that Coopers & Lybrand could assist in were discussed.

D. Interviews and Observations of PAC-II/INTRAH Trainees

A cross-section of trainees was interviewed representing each category of in-country, third country and U.S.-based training. A number of non-trainees working closely with trainees, e.g., supervisors and colleagues, were also interviewed.

1. Core Training Team

Five members of the team were interviewed and observed over a period of two days. Mr. Abbott spent two days with trainers and trainees. Ms. Baldi and Miss Muhuhu observed trainers for a period of about five hours. The core training team was observed to work very well as a team, and appeared committed to their work with excellent documentation of their work. In reviewing the general training of trainers curriculum, the evaluators criticized the amount and scope of content included. Mr. Abbott maintained that if the aim of TOT was to prepare competent trainers, curriculum should then contain training methodologies and exclude contraceptive technology update; curriculum development; and evaluation. In his view curriculum development should be conducted separately.

2. Natural Family Planning Training of Trainers

Two first generation and one second generation trainees were interviewed. The two first generation trainees have been involved in training of FP service providers and diocesan trainers. A total of 54 second generation trainees have so far been trained and are providing FP services and training, but the NFP component in FP clinical skills courses is not included. A second generation trainee interviewed provides FP services to 8-10 couples a week in a Catholic hospital clinic. She refers to and receives referrals from the FPAU clinic.

There are plans to expand the scope and accelerate training.

3. Orientation of Hospital Management Teams

The nurse and doctor teams were interviewed together. A positive attitude towards integration of family planning into MCH services was described by participants with great enthusiasm. Actions have been taken towards either integration or introduction of family planning services. This includes training, acquisition of space and provision of FP services. It was also noted that the younger doctors were much more positive and enthusiastic about family planning than the older generation. A need to orient all hospital management teams was expressed.

4. The Nurse/Doctor Teams (FP clinical skills training in Manila)

The participants were interviewed at Mbale. One of the Manila-trained doctors has left the employment of the MOH. The most striking post-training effect on this training is the understanding between the nurses and the doctor. The nurses now find it easier to refer clients to the doctor as the doctor is now more responsive.

5. Clinical skills training

The effort to provide FP services where they were non-existent prior to training was very encouraging. Trainees were highly motivated.

6. Evaluation Training (Chapel Hill and Nairobi)

Former participants were asked how useful training was to their jobs. An attempt was made to assess the appropriateness of mixing Chapel Hill training participants and newcomers in the Nairobi March 1986 follow-up workshop.

E. Family Planning Association of Uganda

The team met with the Nursing Officer, IEC Officer, and Evaluation Officers. The MOH/INTRAH/FPAU relationship was described as very healthy and productive. The MOH push towards integrating FP into MCH services was also described as having positively influenced the public and politicians' attitudes towards family planning. FPAU anticipates heavy INTRAH technical assistance in Uganda in order to meet FP service delivery needs.

F. Other Areas of Interest to Evaluators

This included usefulness and the extent of the use of INTRAH training materials; and the future role and direction of INTRAH activities in Uganda. See Appendix B for briefing with PAC-II Mid-Project Evaluators.

V. FINDINGS/CONCLUSIONS/RECOMMENDATIONS

Findings/Conclusions

1. An excellent MOH/INTRAH relationship.
2. Orientation of hospital management teams has enhanced implementation of the project. This was seen as a major project strength. The results indicate that all hospital management teams should receive this orientation.
3. Present family planning coverage is low and FP services provided only at the hospital level. The MOH is now ready to extend FP services to the health centre level, hence the need to accelerate training.
4. The FHI project has an additional one million dollars proposed for the period July 1987 - June 1988. The MOH and INTRAH could utilize some of these funds to accelerate training.

5. Possibilities of Mbale beginning training of 5 midwives at a time were discussed with clinic personnel, the nursing officer in-charge and other departmental heads. All were positive on this. Rachael Rushota to follow-up.

#### Recommendations

1. Training can and should be accelerated and the training team expanded. FP clinical skills training without IUD insertion should start as planned at Mbale using both the MOH and FPAU facilities for clinical practicum.
2. The Project Coordinator should estimate additional numbers to be trained, propose a budget for discussion with INTRAH/ESA before submission to USAID/Kampala. The training plan should be revised during the October 1987 annual review.
3. Training of 5 midwives at a time could be conducted with little or no funds if trainee selection is done within hospital MCH/FP maternity and mobile services in Mbale.

APPENDIX A

PERSONS CONTACTED/MET

**APPENDIX A**

**PERSONS CONTACTED/MET**

**USAID/Kampala**

Mr. Richard PODOL, Mission Director  
Mr. Kurt SHAFFER, Program Officer  
Mrs. Edward ZZIWA, FHI Project Manager

**Ministry of Health**

Dr. JAGGWE, Deputy Director of Medical Services (Med)  
Dr. KAIJUKA, Assistant Director of Medical Services,  
(MCH/FP)  
Mrs. Faith ELANGOT, Deputy Chief Nursing Officer  
Mrs. Rachel RUSHOTA, FHI Project Coordinator  
Ms. Joyce ZIRAMBAMUZALE, CTT member  
Mrs. Lucy ASABA, CTT member  
Mrs. Mary LUYOMBYA, CTT member  
Dr. Anthony ABODA, CTT member  
Mr. Danny PARMA-BUSULWA, CTT member  
Mrs. Salome KATESIGWA, Principal Nursing Officer, Mulago  
Dr. NYABWANA, Medical Officer, Prison Service  
Ms. Joyce TONYA, Nursing Officer In-charge, Prison Service  
Mr. MUTESASIRA, Surgeon, Medical Superintendent,  
Jinja Hospital  
Dr. ACHENDERE, Medical Superintendent, Mbale Hospital  
Mrs. WASIKYE, Nursing Officer, Mbale Hospital  
Ms. Samalie MUNYAMA, FP Clinic Nurse, Mbale Hospital  
Ms. NAMAKONKO, FP Clinic Nurse, Mbale Hospital  
Dr. KATOORA, Medical Officer (med), Mbale Hospital

Mrs. Mary MURI, Senior Nursing Officer, Mbale Hospital  
Mr. MULEKWA, Medical Assistant Tutor, Mbale Hospital  
Dr. KUSOLO, Medical Superintendent, Bududa Hospital  
Ms. ABURO, Senior Nursing Officer, Bududa Hospital  
Mrs. MUHANGI, Regional Public Health Nurse, Mbale  
Dr. Pauline PSEKOOKO, Regional Medical Officer, Mbale

Family Planning Association of Uganda

Mr. MANDU, Area Officer, Mbale  
Mrs. Lydia MURANGA, Nursing Officer, Kampala  
Mr. MUGABO, Information, Education and Communications  
Officer, Kampala  
Mrs. Specicosa, KALAWEJERE, Evaluation Officer, Kampala

Uganda Catholic Medical Bureau

Mrs. Christine KABUGO, Secretary  
Ms. Helen NTAMBI, Registered Midwife, Nsambya Hospital

COOPERS AND LYBRAND

Mr. George EGADDU

APPENDIX B

BRIEFING WITH PAC-II MID-PROJECT EVALUATION TEAM  
ON MOH/INTRAH FAMILY PLANNING TRAINING PROJECT

BRIEFING EXTERNAL EVALUATION TEAM ON MOH/INTRAH FAMILY  
PLANNING TRAINING PROJECT

VITAL STATISTICS (1986):

Total population	-	15.2 Million
Annual Growth Rate	-	3.4 %
Crude Birth Rate (CBR)	-	50%
Crude Death Rate (CDR)	-	17%
Infant Mortality Rate (IMR)	-	112/1000
Maternal Mortality Rate (MMR)	-	5/1000
Child Death Rate (1-4)	-	15%
Women in Reproductive age	-	25%
Ratio of Males to Females	-	98:100
Population under 15 years	-	49%
Dependency Rate	-	1:1
Average national Population density	-	67/Km squared
Population living in Rural areas	-	36%
Life expectancy at birth	-	49 years
Income per Capita US\$	-	220
Total Fertility Rate	-	7.0

Government Policy Statements on Population:

In 1981, the government adopted an explicit population and family planning policy. The policy had two stated objectives;

- a) To lower the population growth rate from the then projected figure of 3.2% per annum to 2.6 per annum over a 15 year period (1981 - 1995).

- b) To improve the quality of the population in terms of physical and mental capacity: educational status and access to adequate re-creational cultural and other social services.

The main programme strategies for this policy include:

- a) Integrating family planning services in all governmental and missionary health units.
- b) Integrating population education into all levels of formal and non-formal education.
- c) Raising the legal age of marriages.
- d) Fostering women's development with emphasis of formal education.

The Ministry of Health has already initiated activities towards the family planning component of this plan with the assistance from organizations like USAID, INTRAH, FPIA, Pathfinder Fund, JHPIEGO, WHO, UNICEF and UNCESCO.

#### FAMILY PLANNING SERVICES IN UGANDA:

Family Planning (FP) services in Uganda are being offered in 92 health units throughout the country. These units are run by Family Planning Association of Uganda (FPAU), Ministry of Health, Missionary and Private Organizations. FP services are also offered by Private Medical Practitioners and through Community-Based Distribution (CBD) and outreach delivery units.

Approximately 72,000 clients were served during 1986 (approximately 2% of women in reproductive age).

2.1 Organization and management of MCH/FP supplies. FPAU has been the main organization handling FP supplies in Uganda. This is a voluntary organization affiliated to IPPF. Procurement of contraceptives by FPAU is based on the contraceptives issued to acceptors during the previous year, plus a stock retention for 9 month. The quality of contraceptives determined are forwarded to IPPF through the regional office, every year, at specified time which mobilizes to send supplies required free of charge.

Contraceptives are exempted from tax. FPAU meets the clearance charges. These supplies are stored at FPAU main store.

FP services within the MOH:

In 1984, the Ministry of Health acquired the necessary supplies and equipment, and is now engaged in establishing a logistic management system.

A team of 5 people trained at ESAMI in 1984 designed data collection and reporting formats. These formats have already been approved. Due to financial problems, these formats have not been printed and distributed to stores and SDPs in the country. The in-country training programmes scheduled for 1985 in management of logistics and supplies were postponed.

Background of the Project:

The Ministry of Health/INTRAH Training Project for extension and improvement of family planning services PAC I commenced in January 1984 and ended October 1984. Under this contract the following categories of Health Staff from Government and non-governmental hospitals (in-country training).

1. 33 Registered Nurse/Midwives were trained in FP clinical skills to provide FP services. Jan/Feb. and June/July 1984.
2. 28 Heads of Training institutions drawn from Nursing/Midwifery, Public Health Nursing and medical Assistant Schools in family planning (March 1984).
3. 20 Nurse/midwives/Medical Assistants Tutors were trained in FP clinical and curriculum development where a prototype curriculum in FP which has already been intergrated in 20 schools from where the participants were drawn. (April/may 1984).
4. Follow-up activity was conducted of MOH/INTRAH FP trainees in August 1984.

MOH/INTRAH TRAINING PROJECT FOR EXTENSION AND IMPROVEMENT OF FAMILY PLANNING PAC II:GOAL:

To extend and improve family planning services with the existing MOH and non-governmental Maternal/Child health Service system. The Project proposal was developed in October/november 1984.

In December 1984 INTRAH in collaboration with Ministry of health designed a 3 year project workplan and budget FHI project document was also reviewed for consistency with MOH/INTRAH project objectives and workscope.

FHI Project contract was signed July 18 1985.

The MOH/INTRAH PROJECT PAC II was supposed to commence January 1985 but due to prevailing situation in the country this project could not commence. Although the incountry training activities did not commence, regional and trns-regional training under this phase commenced.

1. April/May 1985: TOT and team building for 6 CTT was conducted in Nairobi (Regional Training).
2. April/June Clinical Skills Training for Physician/Nurse teams in Manila 3 Physician/Nurse Teams from Kabale, Mulago, and Mbale were trained.
3. May/July 1985 National/Regional Evaluation Resource team building Training MOH Planner and 1 CTT attended.
4. July 10 - August 6, 1985 Trans-regional study tour to Thailand for MOH Senior Level Officials and FPAU, Core training team members and project coordinator went to discuss with the Ministry of Health (Thailand) and Population and Community Development Association (PDA) and observe CBD system.
5. September 1985: 3 weeks Regional TOT 3 Ministry of Health attended.
6. February 1986: TAC meeting 1 project coordinator 1 CTT attended for one week.
7. March 1986: Evaluation follow-up workshop Nairobi. 1 MOH planner, 1 CTT (attended 1st workshop) 1 project coordinator, 1 FPAU evaluation officer (Regional)
8. Project finalisation April/May 1986 and subcontract development. Completed (INTRAH Group in Uganda)
9. Technical Assistance in Curriculum Revision. Project Coordinator and CTT 2 days (Nairobi)
10. July/August Trans-regional. 2 teams of physician/nurse teams (Philippines).
11. September TOT in Natural Family Planning trans-regional (Philippines)

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12. October TOT (CAFS) 2 CTT attended.
13. March TAC and Needs Assessment workshop. Nairobi  
1 project coordinator, 1 CTT.  
  
March - Clinical Skills course Zimbabwe 2 CTT.
14. July 1987 Supervision/evaluation workshop US/CTT  
(4 weeks).

# Program for International Training in Health

The University of North Carolina at Chapel Hill  
School of Medicine

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November 23, 1987

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Ms. Marilyn Schmidt  
Program Monitor  
ST/POP/IT  
SA 18 Room 811  
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Washington, D.C. 20523

Re: AID-DPE-3031-C-00-4077

Dear Marilyn:

Enclosed are two copies of INTRAH trip report #0-147.

Country: Uganda  
Activity Title: Project Monitoring  
Dates: July 26 - 31, 1987  
Traveller(s): Miss Pauline Muhuhu, INTRAH/ESA Director  
Purpose of Trip: To accompany PAC-II Mid-Project Evaluation Team.

Please let us know if you need additional copies of these reports or portions thereof.

Sincerely,

*Lynn*

Lynn K. Knauff  
Deputy Director

## Enclosures

cc: Mr. Richard Podol, USAID/Kampala  
Mr. Art Danart, REDSO/ESA  
AID Acquisitions  
Dr. James Lea, Director/  
Ms. Lynn Knauff, Deputy Director  
Mr. Robert Minnis, IHP/IHPS  
Mr. Jack Thomas, AFR/TR/HPN  
Miss Pauline Muhuhu, INTRAH/ESA  
Director  
Mr. Pape Gaye, INTRAH/WCA Director  
Mr. Fred Rosensweig, TRG  
Dr. Sara Seims, MSH

The logo for INTRAH, featuring the word "intra" in a stylized, lowercase font with a globe icon above the letter 'i', followed by "h" in a similar style. The logo is set against a dark background.