PD-ABH-432

85712

# REINFORCEMENT OF NUTRITION COMMUNICATION THROUGH SUPERVISION

## RIAU, INDONESIA

**Huan Wan Linnan**

**April 8 - 11, 1993**

**NUTRITION COMMUNICATION PROJECT**

**Academy for Educational Development**
**1255 23rd Street, N.W.**
**Washington, DC 20037**

in collaboration with

**PROJECT CONCERN INTERNATIONAL**

This activity was carried out through support from the United States Agency for International Development, Office of Nutrition, under contract DAN-5113-Z-00-7031-00 (Project 936-5113) with Vitamin A funds and an in-kind contribution from Project Concern International.

## TABLE OF CONTENTS

EXECUTIVE SUMMARY . . . . . 1

I. BACKGROUND/INTRODUCTION . . . . . 3

II. SUMMARY OF ACTIVITIES AND FINDINGS . . . . . 4

III. CONCLUSIONS . . . . . 9

IV. RECOMMENDATIONS . . . . . 9

V. NEXT STEPS . . . . . 11

APPENDICES

Appendix 1 Trip Agenda
Appendix 2 List of Contacts
Appendix 3 Supervisor Observation Checklist form and completed forms, February to March, 1993
Appendix 4 Revised Supervisor Observation, Self-assessment and Feedback Form for Improving *Kader* Communication Skills and guidelines for use, April 1993
Appendix 5 *Kader*'s group discussion guidelines
Appendix 6 Agenda for Supervisor Workshop and Feedback Training
Appendix 7 Supervisor's Feedback Checklist
Appendix 8 Agenda for Supervisor Practice Using the Revised Form

## LIST OF ABBREVIATIONS/INDONESIAN WORDS

| | |
|---|---|
| AED | Academy for Educational Development |
| *kader* | health post worker |
| MOH | Ministry of Health |
| NCP | Nutrition Communication Project |
| PCI | Project Concern International |
| *posyandu* | monthly community health post, including vaccination, family planning, health education and growth monitoring session |

## EXECUTIVE SUMMARY

### Background/Objectives

NCP has been collaborating with PCI (Project Concern International) in Indonesia to reinforce communications skills of *kader* (health post workers) during growth promotion sessions at *posyandu* (monthly community health session) and to strengthen the overall supervision of *kader*.

In late January 1993, PCI trained five *kader* from the Bengkalis sub-district, Riau Province, Indonesia in interpersonal communication skills using NCP's model "Learning to Listen to Mothers." After this training, these *kader's* supervisors (health center staff) worked with PCI staff and NCP Consultant Dr. Huan Wan Linnan to design a simple observation form to assess the *kader's* interpersonal communication skills when talking to mothers at *posyandu*.

From February to early April (which included Ramadan), supervisors were to fieldtest the observation activity and form. From April 8 to 11, 1993, Dr. Linnan returned to Riau to examine the results of this trial and work with PCI staff, *kader* and their supervisors to determine next steps. The specific objectives of this trip were as follows:

- Examine the results of the first field trial of the supervisor observation form.
- Obtain comments and suggestions for improvement from both *kader* and supervisors.
- Train supervisors how to provide feedback to *kader* to help them improve their interpersonal communication skills.
- Explore the value of adding a *kader* "self-assessment" step to the activity.
- Revise the observation forms, adding feedback and self-assessment elements as necessary, in collaboration with supervisors and sub-district MOH staff and train the supervisors to use the revised forms.
- Develop an implementation plan for the next three months to continue testing the supervision/feedback strategy using the revised form.

### Key Activities/Results

Group discussions were held, one with *kader* and one with their supervisors. The *kader* felt that they were not getting enough specific feedback from their supervisors and that they lacked some of the basic nutrition knowledge necessary to counsel mothers with specific problems. They offered several specific recommendations for improving communication with mothers given the constraints they face.

The supervisors received training on how to provide feedback and agreed that they needed to give more feedback on performance to *kader*, but felt that they lacked the time. Based on these and other input from *kader* and supervisors, the observation/feedback forms were revised to include self-assessment and an implementation plan was drawn up to increase the effectiveness of supervision to improve nutrition counseling.

Both *kader* and supervisors have benefited from the fieldtest activity in terms of improved communication skills and welcomed the enhancement of supervision procedures by adding self-assessment and feedback elements.

Next Steps - July/August 1993

1. Observe actual supervisor-*kader* and *kader*-mother interactions at *posyandu.*
2. Analyze the completed observation forms.
3. Conduct another round of discussions with *kader* and supervisors.
4. Conduct interview with mothers to assess how they have benefited from *kader's* counseling training and on-the-job supervision.

## I. BACKGROUND/INTRODUCTION

NCP has been collaborating with PCI (Project Concern International) in Indonesia to reinforce communications skills of *kader* (health post workers) during growth promotion sessions at *posyandu* and to strengthen the overall supervision of *kader*.

In late January 1993, PCI trained five *kader* from the Bengkalis sub-district, Riau Province, Indonesia in interpersonal communication skills using NCP's model "Learning to Listen to Mothers." After this training, these *kader's* supervisors (health center staff) worked with PCI staff and NCP Consultant Dr. Huan Wan Linnan to design a simple observation form to assess the *kader's* interpersonal communication skills when talking to mothers at *posyandu*. (This interpersonal counselling training and supervisor workshop is described in Dr. Linnan's January, 1993 trip report.)
From February to early April (which included Ramadan), supervisors were to fieldtest the observation form. From April 8 to 11, 1993, Dr. Linnan returned to Riau to examine the results of this trial and work with PCI staff, *kader* and their supervisors to determine next steps. The specific objectives of this trip were as follows:

- Examine the results of the first field trial of the supervisor observation activity and form.
- Obtain comments and suggestions for improvement from *kader* and supervisors.
- Train supervisors how to provide feedback to *kader* to help them improve their interpersonal communication skills.
- Explore the value of adding a *kader* "self-assessment" step to the activity.
- Revise the observation forms, adding feedback and self-assessment elements as necessary, in collaboration with supervisors and sub-district MOH staff and train the supervisors to use the revised forms.
- Develop an implementation plan for the next three months to continue testing the supervision/feedback strategy using the revised form.

Two PCI/Riau staff, Mr. Chandra and Mr. Ismail, assisted Dr. Linnan in conducting these activities.

## II. SUMMARY OF ACTIVITIES AND FINDINGS

### A. Group discussions with kader

PCI led a group discussion with the *kader* to get their opinions and suggestions about their experience over the past couple of months. Unfortunately, only three out of six *kader* that had been trained in January attended; two *kader* had not returned from their Ramadan holiday and one had left his post after being recruited as a school teacher.

1. General reactions

In general, *kader* felt that their communication skills had improved after the January training. They were more confident and were able to provide specific suggestions to mothers. They felt that mothers were more interested in attending *posyandu* (a monthly communinity health post conducted by *kader* and other health workers) since they felt they could now get some real help from *kader*. *Kader* stated that more mothers attended *posyandu* than before and that they therefore did not have to go door-to-door to invite mothers as they used to before *posyandu* day. They attributed this to their increased ability to communicate which resulted in mothers' getting more out of the session.

Since two out of the three *kader* had only conducted one *posyandu* in February and March, they indicated that they had not had time to practice all five aspects of effective communication skills. They said that they would like to have more opportunity in the future to practice the skills they learned during the January training. They noted that listening to mothers and asking mothers to repeat their plan to improve nutritional status were the easiest of the five communication skills taught for them to do. However, they felt that it was difficult for them to help a mother make a plan that was tailored to her child's growth needs since they (the *kader*) do not have sufficient health and nutrition knowledge. This was even more challenging if a mother had several children with different needs. The *kader* said they would like further training on health and nutrition in order to provide better and more specific information to each mother.

While the *kader* thought that many mothers reacted to them more seriously since they started use their new skills to listen to mothers' problems and provided specific suggestions, some older mothers did not have confidence in young *kader*. *Kader* would also like the mothers to stay longer so they would have more time to talk. When asked how they felt about the extra time they spent on this activity, *kader* replied that they already arranged their household chores and were prepared to spend whatever time the *posyandu* session required.

2. Communication with supervisors

These *kader* said that the supervisor's presence did not cause them any difficulty. Instead, it gave them moral support and backed them up if mothers asked questions they could not answer. So far, they did not see any significant change in their relationship with their

supervisors due to this activity.

These *kader* said that their supervisors did not show them the observation forms nor provide any feedback on their communication skills. Some supervisors held a meeting with all *posyandu kader* at the end of the session to summarize the growth monitoring and immunization coverage, but did not mention their communication skills. Thus, *kader* did not know what their supervisors thought about their performance in this area.

*Kader* said that they would like their supervisors to:

- Stay longer and discuss their performance on interpersonal communication. They noted that mothers would probably stay longer if supervisors were present.
- Advise *kader* on how to deal with certain special cases (e.g., one *kader* mentioned a stubborn mother who would not listen *kader*'s suggestions).
- Announce to mothers that the *kader* had acquired more skills and had higher credentials than before to increase the mothers' confidence in their abilities.

They had not discussed these ideas with the supervisors, only with the NCP/PCI team during the group discussion.

3. *Kader*'s self-assessment

As mentioned earlier, *kader* felt that they did very well on the two skills of "listening to mothers without interruption" and "asking mothers to repeat the plan to improve the child's nutritional status." They felt least comfortable with the skill of "helping mothers to make a specific plan," due to their lack of knowledge about health and nutrition: they only receive basic training in key skills and messages, but not any in-depth nutrition information or explanation.

*Kader* said that they would very much like to tell their supervisors how they feel about their own performance and ask their advice. They thought the community would respond very positively if they were able to really understand mothers' problems and help them to solve these problems.

4. Ideas for improvement

When asked what supervisors could do to help them improve their interpersonal communication skills, the *kader* answered that their supervisors needed to understand that when a communication problem occurs it may be due to the *kader*'s lack of health and nutrition knowledge. They would like their supervisors to help them to solve the problem by providing them with necessary nutrition information.

In addition to conducting *posyandu*, *kader* monitor malnourished children by conducting home visits. They hope that by reminding mothers in their homes to follow the plan they made at *posyandu*, the nutritional status of these children will be improved by the next *posyandu*.

*Kader* suggested grouping mothers whose children have similar nutritional problems together and providing problem-specific information by group during *posyandu*. They felt that this is a more efficient way to provide health education at *posyandu* than talking to each individual. They had never tried this approach, which would probably require mothers to stay longer (since, due to the *posyandu* setup, it would most likely occur after all else was completed).

These *kader* also suggested that all *kader* in a *posyandu* should be trained in interpersonal communication skills so that other *kader* can take their place in case they themselves were unavailable to work during a *posyandu*.

At the end of the group discussion, each *kader* was given a copy of a preliminary revised observation form, which included instructions for self-assessment and feedback. The *kader* were happy to see a space for their own self-assessment and a space for them to put their signatures. No further comments on the revised form were offered.

## B. Summary of Supervisor workshop

### 1. General reactions

On April 9 and 10, PCI staff led a workshop with the six supervisors and two health center doctors. The workshop opened with a guided discussion including participatory activities focusing on the observations conducted to date (February - early April trial period). While the supervisors noted that they've spent more time at *posyandu* since the observation activity began, they said they didn't mind since they, themselves, improved their own communication skills by observing *kader*/mother interactions. Most of the supervisors felt that this activity did not interfere with his/her own tasks at posyandu. The two vaccinators, however, explained they could not stay longer to talk to the *kader* since they had to go to the next *posyandu* in another village.

Most supervisors felt that the best part of the supervision activity was their open communication with *kader*, and half of them felt that their relationship with *kader* was closer than before. They also liked the idea of open communication between *kader* and mothers. Supervisors said they had no difficulties observing *kader*'s performance and filling out the form, but they did not feel comfortable doing so in front of the *kader* since it is not polite in Indonesian culture.

Only eight forms were completed from February to early April, with three supervisors completing two each and two completing one (see Appendix 3 for completed observation forms). Overall, the skill for which *kader* were rated highest was "Asking mothers open-ended questions," followed by "giving specific and practical information," and "helping

mothers make a plan." The skill rated on which *kaders* were rated lowest was "asking the mothers to repeat the plan", followed by "listening to the mother without interruptions", the two skills on which *kader*, on the contrary, said they did best.

Most of the supervisors made general comments on the form and while they said they praised or encouraged the *kader*, didn't necessarily tell the *kader* specifically what areas they needed to work on or what they'd written on the form. One of the three *kader* observed twice showed significant increase over time in the specific skills which were poorly performed the first time (the other two didn't, though one did pretty well in all five skills to start with). This is probably due to the targeted feedback given the first time by her supervisor, who after the second visit also praised the *kader* for having improved in those specific areas.

2. Feedback training

The remainder of the workshop was devoted to training supervisors how to provide effective feedback to those they supervise. None of the supervisors had ever been trained in this skill and when asked their experience providing feedback, most of the supervisors answered that feedback is to praise people and point out what they have done wrong. This is basically what they had done with the *kader* they supervised during this period.

The trainer presented principles of providing effective feedback to supervisors: feedback should be prompt, motivating, specific, receiver-oriented and behavior-related. The process of providing feedback should also involve two-way communication between the provider and receiver. At first, supervisors could not understand the abstract concept that feedback needs to be "behavior-oriented" and "receiver-oriented". But after being given very detailed and concrete examples, they were able to relate these concepts to their daily work. These principles were reviewed the next morning and supervisors stated that they started to understand the implications.

Trainers then performed role-plays demonstrating how to provide effective feedback to *kader*, putting the theory into practice. Each supervisor observed and recorded his/her notes on the "Feedback check list" (see Appendix 7) and then a group discussion was conducted on what they had learned from this activity.

Sub-district MOH staff recommended that supervisors provide *kader* feedback after each *kader*-mother interaction if time permits. However, supervisors thought it would be very unlikely that there would be enough time and it was decided to have a separate meeting after *posyandu* to provide feedback.

The supervisors agreed with the *kader*'s comments, presented by the trainers, that they had not previously provided effective feedback to *kader* after *posyandu* and agreed they could announce to the mothers that the *kader*, having been recently trained, was more qualified. They also thought it was a good idea to group the mothers with similar problems together and that supervisors should provide more advice on nutrition problems to the *kader*. However,

not all of them have the necessary background themselves, especially those who specialize in family planning or vaccination.

3. Revised form and implementation plan

Supervisors felt that the preliminary revised observation form presented by the trainers, which included instructions for self-assessment and feedback, would allow them to provide specific feedback and open up dialogue with *kader*. The only change supervisors made was to rephrase the question dealing with *kader* self-assessment. Instead of asking *kader* "how do you think you did in each aspect of the communication skills?", the supervisors noted that they need to know which particular aspect that *kader* felt was difficult to do. This would allow the supervisors to focus on specific problems that require assistance.

After this, supervisors were divided into two groups to practice observing *kader*-mother interactions, providing feedback and filling out the revised form. Assisted by the health center doctors, each supervisor rotated playing roles of supervisor, *kader* and mother. This gave them a chance to experience what it is like to be a *kader*, a mother and a supervisor and to understand the implication of providing and receiving effective feedback. The average mother-*kader*/*kader*-supervisor session took about 10 minutes.

Finally, the group made an implementation plan for the next three months which included the following logistical concerns and practical tips:

1. *Posyandu* schedules will be rearranged so that the *posyandu* with trained *kader* will be the last during the day for the supervisor, so there will be more time to provide feedback, instead of his/her having to rush off to another *posyandu*.

2. After each *posyandu* session, the supervisor will meet with the health center doctor to discuss the day's activity, any problems encountered and possible solutions.

3. Health center doctors will review the completed form to assure it is correct and complete and give a new form to supervisors for the next visit.

4. Supervisors will photocopy the completed form, put it together with the blank form and make sure to bring both to the next posyandu in order to track progress from one session to the next.

The supervisor whose *kader* became a teacher volunteered to fill in for the vaccinator supervisor if he is too busy to go to the *posyandu* of his *kader*-supervisee.

The supervisors also discussed possible ways of attracting mothers to stay longer at *posyandu*, such as bringing a TV set and toys for children to play with. It was suggested that a community lottery club called *Arisan* (in which each participant would have the opportunity to borrow money from the club — a practice in some *posyandu* in Bengalis) could be held

after all *posyandu* sessions. Supervisors believed that mothers would be likely to attend the *Arisan* after their children are weighed and immunized, and thus would have time to receive additional health information from *kader*.

## III. CONCLUSIONS

The two major accomplishments of this field trip were: the finding that both *kader* and supervisors have benefited from the fieldtest activity in terms of improved communication skills (and greater respect among mothers for *kader* which facilitates their task); and the welcome enhancement of supervision procedures by adding self-assessment and feedback elements.

The main obstacle preventing supervisors from providing feedback and overall supervision is that they simply do not have enough time during *posyandu*. Perhaps this will be overcome by rearranging their rotation schedule and following the above-mentioned implementation plan. A limit to extending this supervisory activity throughout the health system is the absence of any effective monitoring mechanism.

This first time training of supervisors in Bengkalis sub-district in providing constructive and specific feedback generated a strong interest among the health center doctors to expand this training to supervisors in the entire sub-district.

The PCI team worked hard and did an excellent job, given the short preparation time and the novel nature of the activity. The next day's activities were rehearsed every evening and everyone helped each other out. There was a very productive working relationship between PCI staff, the local MOH, and AED's consultant, Dr. Linnan.

## IV. RECOMMENDATIONS

The following are a set of recommendations for improving and expanding this effort:

1. Over the next years, expand the interpersonal communication training to all *posyandu kader* and supervisors in 100 villages in four districts. This way, in the absence of health education *kader*, others will also be available to listen to mothers' concerns and help them to make positive changes for their children's nutritional status.

   The five interpersonal communication skills selected from "Learning to Listen to Mothers" for inclusion in the supervisor's observation form for nutritional counseling can be applied to other community health activities such as home visits and health center patient education.

2. Empower more supervisors to provide effective feedback to *posyandu kaders* through expanding counseling, supervision and feedback training and on-the-job

practice to all supervisors in other health centers. The health center doctors were very interested in this prospect.

3. Further refine and expand this observation/feedback system to support the interpersonal communication skills of all *kader*, not just those responsible for health education. Providing effective feedback should be incorporated into the health center staff job descriptions and included when reviewing and scoring performance.

4. Determine what type and depth of nutrition training is needed, so that *kader* can confidently counsel mothers. Some *kader* feel that they lack the knowledge to "give information to mothers" and "help mothers make a plan" to improve their child's nutritional status. The communication/observation form itself could be used directly to hone in on what areas *kader* need to know more about nutrition. Supervisors could impart this information as part of the feedback if they have the necessary training and time. Otherwise, the "Learning to Listen to Mothers" workshop could be expanded to teach more about "technical" nutrition issues. Complementary materials, such as UNICEF's "Facts for Life," may also be useful.

5. Health center doctors should take a more active role in guiding and monitoring supervisor's activities at *posyandu*. Perhaps they could attend supervisor-*kader* post-*posyandu* meetings and observe the supervisor-*kader* interaction. These doctors should also review completed Observation, Self-Assessment and Feedback forms with supervisors and discuss problems encountered and possible solutions.

6. As there are no funds currently available to expand this activity, all efforts should be made to find resources to train *kader* in interpersonal communication and/or supervisors in feedback skills, as recommended by Riau field staff.

7. Use qualitative approaches to evaluate the impact of this training/supervisory activity. The following are several evaluation possibilities:

- Review the completed Observation, Self-assessment and Feedback forms in July to determine what changes in *kader*'s interpersonal communication skills have occurred over the six-month period. Results from the first trial (February - early April) should be compared to the results from the second trial (mid-April - July) to ascertain impact due to the self-assessment and supervisor feedback.

- Conduct another group discussion with kaders in July and compare the findings with those from the *kader* group discussion during this visit to help assess changes in supervisor feedback and perceived impact of this feedback on *kader* performance. The analysis of the observation/self-assessment forms above will serve to provide topics of concern/interest as a basis for this discussion.

- Observe *kader*-mother and *kader*-supervisor interactions and attend post-*posyandu* meeting. This will furnish the opportunity to see the total picture and make further, feasible adjustments to the system.

- Interview mothers to assess how they have benefited from *kader* training and supervision. This will also give ideas on how to improve *kader* communication skills training if the Sub-district MOH decides to expand the training.

## V. NEXT STEPS

1. PCI staff should observe *kader*/supervisor interactions at *posyandu* at their earliest convenience, using the Feedback Checklist as a model, and provide feedback to supervisors. Mr. Chandra (PCI staff) will arrange this activity during his next visit to Bengkalis and will provide written comments to NCP.

2. Dr. Linnan/PCI will contact the sub-district MOH staff monthly to assure the activity is implemented as planned.

3. A third and final field trip is proposed for the end of July. Objectives and activities for this trip include:

Objectives

- Revise and finalize the Observation, Self-assessment and Feedback Form so that it can be shared with others worldwide.

- Evaluate impact of the training/observation/feedback on *kader* performance as well as *kader*/supervisor and *kader*/mother relationships.

- Explore feasibility and potential funding sources for each of the above recommendations with PCI staff and MOH as appropriate.

Activities

- Observe the supervision activities at *posyandu*.

- Discuss supervisors' experiences on providing feedback to *kader*.

- Conduct a *kader* group discussion to compare with the results from the one described in this report.

- Interview mothers to assess how they have benefited from *kader's* counseling training and on-the-job supervision.

APPENDIX 1

**Second Trip Agenda**

April 8
- Travel from Jakarta to Bengkalis. Met with Nurul and PCI staff. Discussed the work schedule in Pekanbaru.
- Met sub-district MCH/nutrition team and discussed the work schedule.
- Discussed group discussion goals and the concept of how to give effective feedback with PCI staff. Practiced the Supervisors feedback training.

April 9
- Observed the kader group discussion in the morning (moderators: PCI staff. Three *kader* attended).
- Supervised the Supervisor workshop and feedback training.
- Analyzed and summarized kader group discussion.
- Prepared the next day training.

April 10
- Revised the Observation, Self-assessment and Feedback form.
- Supervised the Supervisor training on how to use the revised form.

April 11
- Travel from Bengkalis to Jakarta.

## APPENDIX 2

### List of Contacts

(1) Kaders group discussion:

| | |
|---|---|
| Facilitator: | Mr. Chandra, PCI/Riau |
| Note taker: | Mr. Ismail, PCI/Riau |
| Kaders: | Ms. Mariyatun, Ms. Ramnah and Ms. Maria. |

(2) Supervisor workshop and feedback training

| | |
|---|---|
| Trainer: | Mr. Chandra, PCI/Riau |
| Facilitators: | Mr. Ismail, PCI/Riau and Huan Wan Linnan, AED Consultant. |
| Trainees: | Dr. Eri Christain, Public Health Center Doctor, Supervisor. |
| | Dr. Sony, Public Health Center Doctor, Supervisor. |
| | Mr. Perwira, Vaccinator, Supervisor. |
| | Ms. Sufniwati, Nurse, Supervisor. |
| | Ms. Ariyanti, Nurse, Supervisor. |
| | Mr. Chalid, Sanitation Worker, Supervisor. |
| | Ms. Faridah Eriani, Midwife, Supervisor. |
| | Ms. Rohani, Family Planning Field Worker, PKK member, Supervisor. |

(3) Sub-district MOH

Mr. Ismail Mahyuddin, Head of MCH division, Bengalis Sub-district MOH

APPENDIX 3

**Supervisor Observation Checklist form and completed forms, February to March, 1993**

Appendix 3

Trial - 1

**Check List for Observing and Supervising Kader's Communication Skills**
(English translation)

**Health post:** _____ **Village:** _____ **Health center:** _____
**Supervisor**_____ **Kader:** _____ **Date:** _____

| Mothers talked / Aspects to be observed | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Total "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Ask mothers open questions | | | | | | | | | | | |
| 2. Listen to mothers without interruption | | | | | | | | | | | |
| 3. Give specific and practical information | | | | | | | | | | | |
| 4. Help mothers to make a plan | | | | | | | | | | | |
| 5. Ask mother to repeat the plan | | | | | | | | | | | |
| Total number of "+" | | | | | | | | | | | |

**Instruction for using this check list:**

- Put "+" if kader demonstrates the relevant communication skill, put "-" if not. "±" is not allowed.
- At the end of the health post session, add number of "+" in each row and each column, then sum the total number of "+" and put the number in the bottom right cell.
- Check the following box according to your observation:

___ Yes, this kader demonstrated he/she is able to apply good communication skills when talking to the mothers.
___ No, this kader need to improve the following communication skills: _____

In order to improve the kader's communication skills, I have done the following: _____

Supervisors signature_____ Acknowledged by _____ (Health center doctor)

UJI COBA : K1

TANGGAL : 15 - 3 - 1995

(1)

LEMBAR PENGAMATAN KETERAMPILAN KADER
DALAM BERKOMUNIKASI

POS YANKES : Suradaya
KECAMATAN : Bengkalis

DESA : Selat Baru
KADER : [illegible]

PUSKESMAS : Selat Baru
PENYELIA : Faridah Eriani

| IBU YANG DIAMATI / ASPEK KOMUNIKASI YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Jumlah "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Mengajukan pertanyaan terbuka kpd ibu | + | + | + | + | + | + | + | + | + | + | 10 |
| 2. Mendengarkan dengan baik kepada ibu | + | – | + | + | + | + | + | + | + | + | 9 |
| 3. Memberikan nasehat/informasi kesehatan yang tepat & praktis kepada ibu | + | + | + | + | + | + | + | + | + | + | 10 |
| 4. Membantu ibu dalam membuat rencana kerja | + | + | + | + | + | – | + | + | + | + | 9 |
| 5. Meminta ibu tersebut untuk mengulang/mengutarakan rencana tsb | + | + | + | + | + | + | + | + | + | + | 10 |
| TOTAL | 5 | 4 | 5 | 5 | 5 | 4 | 5 | 5 | 5 | 5 | 48 |

KETERANGAN UNTUK MENGISI FORMULIR :

- beri tanda "+" jika kader telah memperlihatkan aspek-aspek keterampilan berkomunikasi dengan baik, dan "–" jika tidak
- setelah selesai pengamatan, jumlahkan semua tanda "+" pada setiap baris dalam kolom.

Menurut pengamatan, kader ini :

[✓] sudah memiliki keterampilan yang baik dalam berkomunikasi dua arah

[ ] masih perlu memperbaiki keterampilan sbb:

–

–

untuk membantu kader memperbaiki keterampilan tsb, penyelia telah melakukan upaya sbb dengan kader : memberikan pujian kepada kader karena dalam memberikan [illegible]

To help kader improving their skill, supervisor doing the following: Giving praise for the improvement they made compared to month before and support them to make more effort to be better.

Faridah Eriani
NIP. 140 236 799.

PUSKESMAS SELAT BARU BENGKALIS

( Drs. Onny Hendra )
NIPPT. 04.1.00.2306.

16

UJI COBA : K1 TANGGAL : 15 Feb 93

## LEMBAR PENGAMATAN KETERAMPILAN KADER DALAM BERKOMUNIKASI

POS YANDU : [illegible] DESA : [illegible] PUSKESMAS : [illegible]

KECAMATAN : [illegible] KADER : [illegible] PENYELIA : [illegible]

| IBU YANG DIAMATI / ASPEK KOMUNIKASI YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Jumlah "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Mengajukan pertanyaan terbuka kpd ibu | + | + | + | + | + | + | + | + | + | + | |
| 2. Mendengarkan dengan baik kepada ibu | – | – | – | – | – | – | – | – | – | – | |
| 3. Memberikan nasehat/informasi kesehatan yang tepat & praktis kepada ibu | + | + | + | + | + | + | + | + | + | + | |
| 4. Membantu ibu dalam membuat rencana kerja | + | + | + | + | + | + | + | + | + | + | |
| 5. Meminta ibu tersebut untuk mengulang/mengutarakan rencana tsb | – | – | – | – | – | – | – | – | – | – | |
| T O T A L | | | | | | | | | | | |

KETERANGAN UNTUK MENGISI FORMULIR :

- Beri tanda "+" jika kader telah memperlihatkan aspek-aspek keterampilan berkomunikasi dengan baik, dan "–" jika tidak
- Setelah selesai pengamatan ,jumlahkan semua tanda "+" pada setiap baris dalam kolom.

Menurut pengamatan ,kader ini :

☐ sudah memiliki keterampilan yang baik dalam berkomunikasi dua arah

☐ masih perlu memperbaiki keterampilan sbb:

- [illegible]

[illegible]

**Skill needs improvement:**

- **Listening carefully to mothers**
- **Ask mother to repeat/talking about plan**

**To help kader improving their skill: After Posyandu session, supervisor inform the weaknesses of CIE had been conducted, to get improvement for next session.**

PENYELIA

( [illegible] )

DIKETAHUI OLEH :

KEPALA PUSKESMAS .....

( [illegible] )

DINAS KESEHATAN KABUPATEN DATI II BENGKALIS PUSKESMAS SELAT DARU

17

UJI COBA : K1 TANGGAL : 14-2-1995

(3)

LEMBAR PENGAMATAN KETERAMPILAN KADER
DALAM BERKOMUNIKASI

POS YANKES : Rambutan DESA : Alun pas PUSKESMAS : Bungkalis
KECAMATAN : Bungkalis KADER : Ramnaq PENYELIA : Syafrizal

| IBU YANG DIAMATI / ASPEK KOMUNIKASI YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Jumlah "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Mengajukan pertanyaan terbuka kpd ibu | − | − | + | + | + | − | − | + | + | + | 6 |
| 2. Mendengarkan dengan baik kepada ibu | + | + | − | + | − | + | + | + | − | + | 7 |
| 3. Memberikan nasehat/informasi kesehatan yang tepat & praktis kepada ibu | + | + | + | + | − | + | + | − | + | + | 8 |
| 4. Membantu ibu dalam membuat rencana kerja | − | + | + | − | + | − | − | + | + | + | 6 |
| 5. Meminta ibu tersebut untuk mengulang/mengutarakan rencana tsb | + | − | − | − | + | − | − | + | + | − | 4 |
| TOTAL | 3 | 3 | 3 | 3 | 3 | 2 | 2 | 4 | 4 | 4 | 31 |

KETERANGAN UNTUK MENGISI FORMULIR :

- beri tanda "+" jika kader telah memperlihatkan aspek-aspek keterampilan berkomunikasi dengan baik, dan "−" jika tidak
- setelah selesai pengamatan, jumlahkan semua tanda "+" pada setiap baris dalam kolom.

Menurut pengamatan, kader ini :

☐ sudah memiliki keterampilan yang baik dalam berkomunikasi dua arah

☐ masih perlu memperbaiki keterampilan sbb:

meminta ibu utk mengulang/mengutarakan rencana

**Skill needs improvement:**

- **Ask mother to repeat/talking about work plan**

**To help kader improving their skill: Ask kader to ask mothers repeat their work plan.**

dengan kader

mengulang/mengutarakan rencana kerja nya.

PENYELIA

Syafrizal

DIKETAHUI OLEH :
DOKTER PUSKESMAS Bungkalis

(dr. Christian Eryl)

UJI COBA : K1

TANGGAL : 16-2-199

LEMBAR PENGAMATAN KETERAMPILAN KADER
DALAM BERKOMUNIKASI

POS YANDU : KARANG PANJANG DESA : MUSKAM PUSKESMAS : BENGKALIS
KECAMATAN : BENGKALIS KADER : SANGET. PENYELIA : CHALID.AR.

| IBU YANG DIAMATI / ASPEK KOMUNIKASI YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Jumlah "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Mengajukan pertanyaan terbuka kpd ibu | + | + | + | + | + | + | + | + | + | + | +10 |
| 2. Mendengarkan dengan baik kepada ibu | + | − | + | + | + | − | + | − | + | + | +7. |
| 3. Memberikan nasehat/ informasi kesehatan yang tepat & praktis kepada ibu | + | + | − | + | + | + | − | + | + | + | 8 |
| 4. Membantu ibu dalam membuat rencana kerja | + | − | + | + | − | + | + | + | + | − | 7 |
| 5. Meminta ibu tersebut untuk mengulang/mengutarakan rencana tsb | − | + | + | − | + | + | + | − | − | − | 5 |
| TOTAL | | | | | | | | | | | 37. |

KETERANGAN UNTUK MENGISI FORMULIR :

- beri tanda "+" jika kader telah memperlihatkan aspek-aspek keterampilan berkomunikasi dengan baik, dan "−" jika tidak
- setelah selesai pengamatan ,jumlahkan semua tanda "+" pada setiap baris dalam kolom.

Menurut pengamatan ,kader ini :

[✓] sudah memiliki keterampilan yang baik dalam berkomunikasi dua arah

[ ] masih perlu memperbaiki keterampilan sbb:

**Skill needs improvement:** IEC

- **In giving CIE, kader should ask audience to be quiet.**

Untuk membantu kader memperbaiki keterampilan tsb,penyelia telah melakukan upaya sbb dengan kader :

PENYELIA

= CHALID.AR
NIP.140076607

DIKETAHUI OLEH :
DOKTER PUSKESMAS

DR. CHRISTIANTI

UJI COBA : K1

TANGGAL : 12/2 1993

LEMBAR PENGAMATAN KETERAMPILAN KADER
DALAM BERKOMUNIKASI

POS YANDU : DURIAN
KECAMATAN : BENGKALIS
DESA : P. BATANG
KADER : MARIATON
PUSKESMAS : BENGKAL
PENYELIA : PERWIRA

| IBU YANG DIAMATI / ASPEK KOMUNIKASI YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Jumlah "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Mengajukan pertanyaan terbuka kpd ibu | + | + | + | + | + | + | + | + | + | + | 10 |
| 2. Mendengarkan dengan baik kepada ibu | + | + | + | + | + | + | + | + | + | + | 10 |
| 3. Memberikan nasehat/informasi kesehatan yang tepat & praktis kepada ibu | + | + | + | + | + | + | + | − | + | − | 8 |
| 4. Membantu ibu dalam membuat rencana kerja | + | + | + | + | − | − | + | + | + | + | 8 |
| 5. Meminta ibu tersebut untuk mengulang/mengutarakan rencana tsb | + | − | + | + | + | − | + | + | + | + | 8 |
| TOTAL | 5 | 4 | 5 | 5 | 4 | 3 | 5 | 4 | 5 | 4 | 44 |

KETERANGAN UNTUK MENGISI FORMULIR :

- beri tanda "+" jika kader telah memperlihatkan aspek-aspek keterampilan berkomunikasi dengan baik, dan "−" jika tidak
- Setelah selesai pengamatan, jumlahkan semua tanda "+" pada setiap baris dalam kolom.

Menurut pengamatan, kader ini :

[✓] sudah memiliki keterampilan yang baik dalam berkomunikasi dua arah

[ ] masih perlu memperbaiki keterampilan sbb:

Untuk membantu kader memperbaiki keterampilan tsb, penyelia telah melakukan upaya sbb dengan kader : MEMBERI PUJIAN KEPADA KADER A

To help kader improving their skill: Giving praise and ~~CHE~~ IEC to kader.

PENYELIA

PERWIRA

DIKETAHUI OLEH :
PUSKESMAS .....

DINAS KESEHATAN PUSKESMAS KEC. BENGKALIS BENGKALIS

20

UJI COBA : K1

TANGGAL : 13 / 2 / 1992

LEMBAR PENGAMATAN KETERAMPILAN KADER
DALAM BERKOMUNIKASI

POS YANKES : MELATI PUTIH
KECAMATAN : BENGKALIS
DESA : S. ALAM
KADER : SURYANINGSIH
PUSKESMAS : BENGKALIS
PENYELIA : PERWIRA

| IBU YANG DIAMATI / ASPEK KOMUNIKASI YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Jumlah "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Mengajukan pertanyaan terbuka kpd ibu | + | + | + | + | + | + | + | + | + | + | 10 |
| 2. Mendengarkan dengan baik kepada ibu | + | + | + | + | + | + | + | + | + | + | 10 |
| 3. Memberikan nasehat/informasi kesehatan yang tepat & praktis kepada ibu | + | + | - | + | + | + | - | + | + | + | 8 |
| 4. Membantu ibu dalam membuat rencana kerja | + | + | + | - | + | - | + | - | + | + | 7 |
| 5. Meminta ibu tersebut untuk mengulang/mengutarakan rencana tsb | + | + | + | + | + | - | + | + | + | + | 9 |
| TOTAL | 5 | 5 | 4 | 4 | 5 | 3 | 4 | 4 | 5 | 5 | 44 |

KETERANGAN UNTUK MENGISI FORMULIR :

- beri tanda "+" jika kader telah memperlihatkan aspek-aspek keterampilan berkomunikasi dengan baik, dan "-" jika tidak
- setelah selesai pengamatan, jumlahkan semua tanda "+" pada setiap baris dalam kolom.

Menurut pengamatan, kader ini :

[✓] sudah memiliki keterampilan yang baik dalam berkomunikasi dua arah

[ ] masih perlu memperbaiki keterampilan nbb:

Untuk membantu kader memperbaiki keterampilan tsb, penyelia telah melakukan upaya nbb dengan kader : MEMUJI KADER SUPAYA MENGEMBANGKAN PARTISIPASINYA

To help kader improving their skill: Praise kader and ask to improve QIEC

PENYELIA

PERWIRA

DIKETAHUI OLEH :
KEPALA PUSKESMAS .....

DINAS KESEHATAN PUSKESMAS BENGKALIS KECAMATAN BENGKALIS

HALO SR
190076 607

21

UJI COBA : K1 TANGGAL : 2 PEBRUARI 8

LEMBAR PENGAMATAN KETERAMPILAN KADER
DALAM BERKOMUNIKASI

POS YANKI : RAMBAI DESA : PEDERIK PUSKESMAS : BENGKALIS
KECAMATAN : BENGKALIS KADER : MARIA PENYELIA : ROHANI

| IBU YANG DIAMATI / ASPEK KOMUNIKASI YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Jumlah "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Mengajukan pertanyaan terbuka kpd ibu | + | - | + | + | + | - | + | + | + | - | 7 |
| 2. Mendengarkan dengan baik kepada ibu | - | + | + | - | + | - | + | - | + | + | 6 |
| 3. Memberikan nasehat/informasi kesehatan yang tepat & praktis kepada ibu | + | - | + | + | - | + | + | + | - | + | 7 |
| 4. Membantu ibu dalam membuat rencana kerja | + | + | - | + | - | + | + | - | + | - | 6 |
| 5. Meminta ibu tersebut untuk mengulang/mengutarakan rencana tsb | - | + | - | + | + | + | - | + | - | + | 6 |
| TOTAL | 3 | 3 | 3 | 4 | 3 | 3 | 4 | 3 | 3 | 3 | 32 |

KETERANGAN UNTUK MENGISI FORMULIR :

- beri tanda "+" jika kader telah memperlihatkan aspek-aspek keterampilan berkomunikasi dengan baik, dan "-" jika tidak
- Setelah selesai pengamatan ,jumlahkan semua tanda "+" pada setiap baris dalam kolom.

Menurut pengamatan ,kader ini :

[ ] sudah memiliki keterampilan yang baik dalam berkomunikasi dua arah

[X] masih perlu memperbaiki keterampilan sbb:

KADER DALAM MELAKSANAKAN TUGAS MASIH KAKU [illegible]

Skill needs improvement:

- In doing their job, kader's performance is still awkward. Need more improvement.

To help kader improving their skill: Ask kader to show their good and understandable communication to ~~baiita's~~ mothers. Kader needs to be improved for the next ~~year~~.time

AKAN DATANG KADER PERLU DITINGKATKAN KEMBALI

PENYELIA

ROHANI.H.

DIKETAHUI OLEH :
DOKTER PUSKESMAS KEC. BKS

DINAS KESEHATAN KABUPATEN DATI II BENGKALIS PUSKESMAS KEC. BENGKALIS

DASSAUL BAHRI RAB
NIP. 140 149 534.

22

UJI COBA : K1

TANGGAL : 2 - 4 - 1993

## LEMBAR PENGAMATAN KETERAMPILAN KADER DALAM BERKOMUNIKASI

POS YANKES : RAMBAI
DESA : PEDEKIK
PUSKESMAS : BENGKALIS
KECAMATAN : BENGKALIS
KADER : MARIA. S
PENYELIA : ROHANI.

| IBU YANG DIAMATI / ASPEK KOMUNIKASI YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Jumlah "+" |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Mengajukan pertanyaan terbuka kpd ibu | + | + | - | + | + | - | + | - | + | + | 7 |
| 2. Mendengarkan dengan baik kepada ibu | - | + | + | - | + | - | + | - | + | + | 6 |
| 3. Memberikan nasehat/informasi kesehatan yang tepat & praktis kepada ibu | - | + | + | + | - | + | - | + | - | + | 6 |
| 4. Membantu ibu dalam membuat rencana kerja | + | + | - | + | - | + | + | - | + | + | 7 |
| 5. Meminta ibu tersebut untuk mengulang/mengutarakan rencana tsb | - | + | + | - | + | + | - | + | + | + | 7 |
| TOTAL | 2 | 5 | 3 | 3 | 3 | 3 | 3 | 2 | 4 | 5 | 33 |

KETERANGAN UNTUK MENGISI FORMULIR :

- beri tanda "+" jika kader telah memperlihatkan aspek-aspek keterampilan berkomunikasi dengan baik, dan "-" jika tidak
- Setelah selesai pengamatan ,jumlahkan semua tanda "+" pada setiap baris dalam kolom.

menurut pengamatan ,kader ini :

[ ] sudah memiliki keterampilan yang baik dalam berkomunikasi dua arah

[V] masih perlu memperbaiki keterampilan sbb:
KADER KURANG JELAS MEMBERIKAN NASEHAT TENTANG MAKANAN BALITA YANG PRAKTIS

Skill needs improvment:
- Unclear advice about practical and nutritious food for balita children.

To help kader improving their skill: Supervisor give praise and advice to kader in improving their communication skill

UNTUK DIPERHATIKAN

PENYELIA

ROHANI

DIKETAHUI OLEH :
DOKTER PUSKESMAS KEC. BKS

DR. CHRISTIAN. ERY
NIP. 130454951

APPENDIX 4

**Revised Supervisor Observation, Self-assessment and Feedback Form for Improving *Kader* Communication Skills and guidelines for use, April 1993**

Appendix 4

Trial - 2

**Observation, Self-assessment and Feedback Form for Improving Kader's Communication Skills**

(English translation)

Health post: _____ Village: _____ Health center: _____

Supervisor_____ Kader: _____ Date: _____

| Aspects to be observed / Mothers talked | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. Asks mothers open questions | | | | | | | | | | | |
| 2. Listens to mothers without interruption | | | | | | | | | | | |
| 3. Gives specific and practical information | | | | | | | | | | | |
| 4. Helps mothers to make a plan with 1 or 2 positive changes | | | | | | | | | | | |
| 5. Asks mother to repeat the plan | | | | | | | | | | | |

**Instruction for using this form:**

**1. Supervisor's Observation**

Put "+" if kader demonstrates the relevant communication skill, put " - " if not. "±" is not allowed. By the end of posyandu, add the number of "+" in each row and record the number in the "Total" column.

**2. Kader's self-assessment**

At the end of the posyandu, please ask the kader which aspects that she feels she has done well and which aspects are difficult for her to do: (1)_____

(2)_____ (3)_____

(4)_____ (5)_____

Problems encountered _____

_____

What she would like to do next time when a similar situation happens_____

_____

_____

**3. Supervisor provide feedback to kaders**

What 2 aspects did she do best today (1) _____(2)_____
Check the number of total "+" of each row and compare with the same row on the form from last month form. Then tell the kader what aspect(s) did she improve since last time _____

_____

_____

What aspect(s) need to be improved next time _____

_____

_____

Specific suggestions on how to improve kader's communication skills:

_____

_____

_____

_____

Approximate length of the average kader/supervisor session_____ minutes.

Supervisors signature_____ Kader's signature_____
Acknowledged by _____ (Health center doctor)

**Guidelines for Supervisors to Use this Observation, Self-assessment and Feedback Form**

Specific Objectives

- To reinforce effective two-way communication between kaders and mothers in growth monitoring and promotion at the integrated health post (posyandu);
- To strengthen the supervisor's feedback function in supervising kader's communication with mothers;
- To test the supervisory strategy, recording and reporting procedure;
- To conduct a small scale trial to use this Observation, Self-assessment and Feedback Form as a means to assess and improve kader's communication skills on-the-job.

Procedures for Using this Observation, Self-assessment and Feedback Form

(1) Observing and Recording

During the integrated health post session, the supervisor arranges his/her working desk next to the health education desk or somewhere where he/she can see the kader very well. The supervisor will select a minimum of 10 pairs of kader-mothers and observe their conversations and interactions after he/she finishes his/her own tasks. The supervisor will record the result on the Observation, Self-assessment and Feedback Form as instructed.

(2) Identify the Strengths and Weaknesses of the Kader's Communication Skills

After observing 10 pairs of kader-mothers conversations, add all "+" in each row of the form and fill the number in the "Total" column. The row with the most "-" means that the kader has done poorly and needs to improve his/her communication skill in that aspect.

(3) Ask kader to do a self-assessment

At the end of the integrated heath post session, please spend a few minutes with the kader to summarize and evaluate this activity. First, please invite her to tell you what does she think about how she did in each aspect and record her views on the form. Second, ask her what she would like to do next time when the similar situation happens. Please do not say anything specific to the kader about her

performance until she finishes her self-assessment. Third, praise the kader for her efforts.

(4) Provide feedback to kaders

Providing feedback to kaders is one of the most important tasks for a supervisor. After listening to what the kader has to say, you will then provide your feedback to him/her in the following three aspects: (a) What aspect(s) did the kader do best today; (b) What aspect(s) did the kader improve since last time? and (c) What aspect(s) could be improved? Please give specific examples and suggestions. For example:" you could have tell the mother with the diarrhetic child to give extra food to her child after the he has recovered form the illness." Make a note on the form.

(5) Reporting

After each integrated heath post session, please write down approximately how much time you spent with the kader and turn this form to the health center doctor. The District MCH/nutrition staff will collect this form at the beginning of each month from the doctors. Blank forms can be obtained from health center doctors if needed.

(6) Monitoring Plan

The first phase of this strategy and Observation, Self-assessment and Feedback Form has been conducted from the beginning of February till the beginning of April. We are now beginning the second phase. We are going to implement this activity from mid-April to the mid-July. Dr. Huan Linnan will be back around the beginning of July again to collect the result of this trial. Please share your experiences with her on using this form to supervise kaders. She will also ask your suggestions and ideas on how to improve the self-assessment and providing feedback to kaders.

Thank you very much for your time and effort.

FORMULIR PENGAMATAN, PENJAJAGAN DIRI AND DEPANDALIE
UNTUK MENINGKATKAN KETRAMPILAN KOMUNIKASI KADER

POSYANDU : _____ DESA : _____ PUSKESMAS : _____

PENYELIA : _____ KADER : _____ TANGGAL : _____

| IBU - IBU YANG BERBICARA / ASPEK- ASPEK YANG DIAMATI | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1. MENGAJUKAN PERTANYAAN TERBUKA | | | | | | | | | | | |
| 2. DENGARKAN TANPA MEMOTONG | | | | | | | | | | | |
| 3. BERIKAN INFORMASI SECARA RINCI & PRAKTIS | | | | | | | | | | | |
| 4. BANTU PARA IBU MEMBUAT RENCANA DENGAN SATU ATAU DUA PERUBAHAN YG MEMBERI ARAH POSITIF | | | | | | | | | | | |
| 5. PERSILAKAN PARA IBU MENGULANG RENCANA TERSEBUT | | | | | | | | | | | |

URUT - URUTAN DALAM MENGGUNAKAN FORMULIR INI :

1. Pengamatan Penyelia

   Beri tanda " + " jika Kader menampilkan ketrampilan komunikasi yang sesuai, beri tanda " _ " jika tidak. Tanda " + " tidak diperbolehkan. Bila kegiatan di Posyandu selesai, tambahkan tanda - tanda " + " pada setiap baris dan catlah jumlahnya pada kolom TOTAL.

2. Penjajakan _ Diri Kader

   Pada saat kegiatan di Posyandu selesai, tanyakan kepada kader apa yang mereka capai untuk setiap aspek.

3. _____

4. _____

5. _____

Masalah yang dihadapi _____

_____

Apa yang akan mereka lakukan bila mengalami situasi yang sama lagi ?

_____

_____

3. Penyelia memberi umpanbalik kepada kader
   2 aspek terbaik yang telah dilakukannya hari ini :

[ 1 ] _____

[ 2 ] _____

Cek jumlah total tanda " + " ditiap baris dan bandingkan dengan formulir bulan lalu pada baris yang sama. Katakan kepada kader aspek-aspek apa yang mengalami peningkatan _____

_____

_____

Aspek - aspek yang perlu ditingkatkan selanjutnya : _____

_____

_____

Saran - saran tentang bagaimana cara melakukan peningkatan berdasarkan pengamatan yang specifik :

_____

_____

_____

_____

Waktu rata-rata yang diperlukan untuk umpanbalik kader / penyelia _____ menit.

Penyelia _____ , Kader _____

ap

Appendix 5

## Kader's FGD Topic Guide

1. Introduction

Good Morning. Thanks for coming. The goal of this meeting is to discuss what your reactions to the refresher training and the supervisor observation carried out during the last two months. I am interested in all your comments, ideas and suggestions. There are no right or wrong answers. Please feel free to tell me whatever you think about the activity. All comments, both positive and negative are welcomed. We will keep it confidential. We will helps us learn how to improve this activity. Thank you.

2. Communication with mothers during posyandu

- Where the communication skills practiced?
- Which communication skills was practiced? Which was not?
- What do you feel you need to use these skills better/more often?
- What is the easiest thing for you to talk about with mothers?
- What is the most difficult thing for you to talk about with mothers?
- How did mothers react to your communication skills?
- Hoe do you feel your communications with mothers has changed since the training? Please explain.
- What made you change your communication with mothers?
- If you do not think there is any change, why?

3. About your supervisor

- How do you feel about the supervisor observing you while you are talking to mothers?
- How does the supervisor observation affect your work? (Wait for the answer and then probe: Your encounter with mothers? The flow of the posyandu? Mothers' reaction to your speech?)
- What did the supervisor talk to you about after the posyandu? (Wait for the answer and then probe: Did he/she tell you what communication aspect you did very good and what you need to improve?)
- How do you feel about it ? (Wait for the answer and then probe: How did it help you to see what communication skills you need to improve?)
- What was the difference between what the supervisor told you and what you thought about your performance yourself? If yes, please explain.
- Did your supervisor show you what he/she wrote on the form?
- How did this activity affect the relationship with your supervisor? (Wait for the answer and then probe: Does it help to improve your relationship? Does it causing any difficulties? )



31

- How did mothers' react to your supervisor observing you while they were talking to you?
- How do you feel about the time spent on this activity?

4. Concepts of self-assessment

Self-assessment helps you to remind yourself what you are really good at it and to identify problems you encountered. We have just done one early on. It is also a good way by which you can ask for help. For example:

How do you feel you did on skills (see the observation form)

#1 _____
#2 _____
#3 _____
#4 _____
#5 _____

-Would you like to tell your supervisor how you felt about your conversation with mothers?
- What would you like to say? (Wait for the answer and then probe: Would you like to tell him/her what aspects you think you did well and what aspects you need his/her help to improve?)

5. Ideas for improvement
(Give everyone a copy of revised form and ask their ideas to improve it)

-What could your supervisor do to help you to talk to mothers?
-What do you think your supervisor could do to improve your communication skills more than you learned from the training ? (Wait for the answer and then probe: Provide more specific feedback? Let you have a chance to discuss how did you feel about it?)
-What could you have done differently to learn more about the mothers?
-What could you have done differently to help the mothers learn more about child growth and monitoring?

- Would that help you to see what progress you made since last time?

6. Closing

Before we end, I would like to ask you if there is anything else you would like to say about this activity. Thank you so much for coming. I hope we will continue to work together to better communicate with mothers on child growth and monitoring.



96'

Appendix 6

## Agenda for Supervisor Workshop and Feedback Training

(April 9, Friday afternoon. Estimated time: 3 hours)

### Objectives

- To collect comments and suggestions on the supervisor observation activity.
- To train supervisors on how to promote self-assessment, provide constructive and specific feedback to kaders to help him/her improve his/her interpersonal communication skills.
- To introduce the draft revised form and reactions.

### Activities

1. Comments on the supervisor observation activity (2:00 - 2.30)

Ask supervisors whether each of the following has increased, decreased or stay the same (Use "↑", "↓", "--"):

- time spent;
- relationship with kaders;
- their own communication skills;
- kaders communication skills.

Activities have been good/bad for them (use "+" and "-")

- observing
- filling out the form
- providing feedback
- your own tasks at posyandu
- the time you spent on this activity
- your relationship with kaders

2. Self-assessment and Effective Feedback (2:30 - 3:30)

a. Self-assessment:

Supervisors evaluate how did they do in this activity:

- List what do they feel they did very good
- List what do they feel need to be improved



33

b. Feedback

In your experiences, how do you provide effective feedback? One supervisor contribute one thing that he/she thinks is the most important.

Feedback means communicating to kaders your reaction regarding their interpersonal communication skills. Your feedback allows kaders to know what they have done well, where they need improvement, and how they can improve.

Principles of providing effective feedback are:

(1) **Prompt:** Give feedback to kaders after each posyandu. Do not wait until next time. The longer the delay, the weaker the effect of the feedback.

(2) **Receiver-oriented:** Feedback can be destructive when it only serves your needs. You should consider the kader's needs first since your feedback is aimed to help kader to improve her performance.

(3) **Motivating:** Start with positive feedback. Tell the kader what you like about what he/she has done and emphasize what improvement he/she has made since the last time. Then tell the kader what he/she could have done differently to help mothers learn more about nutrition and growth monitoring. You also need to find evidence to show him/her what impact his/her work brought about.

(4) **Behavior-related:** Your comments should be directed toward the communication skills which the kader can do something about. If your feedback is on a kader's shortcomings that she has no control over, she will feel frustrated.

(5) **Specific:** Discuss with kaders how they can improve their communication skills. Give them concrete and specific suggestions so that when a similar situation happens next time they will know what to do.

(6) **Two-way communication:** After giving your feedback to kaders, you could ask them to repeat your feedback to make sure he/she understood your comments and suggestions.

Break (3:30 - 3:45)



34

3. Demonstration (3:45 - 4:00)

Trainers demonstrate how to provide effective feedback to kaders (Mother played by MOH staff, Kader played by trainer 1, and Supervisor played by training 2.). All participants observing their demonstration and taking notes on the "Feedback check list".

4. Discussion (4:00 - 4:15)

The group discusses and evaluates the trainers demonstration based on the "Feedback check list".

5. Summarize (4: 15 - 4:45)

- What we have learned about feedback today.

- Each supervisor list one thing they will do differently in the future.

6. Hand out the draft revised form and the guidelines as home work (4:45 - 5:00)

Appendix 7

## Supervisor's Feedback Checklist

(Used to observe trainer's demonstration on Friday, April 9)

____ Give feedback immediately after the posyandu session.

____ Consider the kader's needs first. Show you care about her performance.

____ Giving positive feedback first.

____ Tell the kader what improvement he/she has made since the last time.

____ Show the kader what impact his/her work brought about.

____ Then tell the kader what he/she could have done differently to improve her communication skills.

____ Direct your feedback toward the communication skills which the kader can do something about, and not for things that she has no control over.

____ Give the kader concrete and specific suggestions so that when a similar situation happens next time he/she will know what to do.

____ Ask the kader to repeat your feedback to make sure he/she understood your comments and suggestions.

Summarize what the supervisor has done well:

1.
2.
3.

What the supervisor could have said and done better:

1.
2.
3.

Appendix 8

## Agenda for Supervisor Practice Using Revised Form

(April 10, Saturday. Estimated time: 3.5 hours)

**Objectives**

- To revise the Observation, Self-assessment and Feedback Form.
- To present the results from the kader FGD.
- To practice using the revised form.
- To make a practical implementation plan.

**Activities**

1. Group discussion on revising the Observation, Self-assessment and Feedback Form (8:00 - 8:30).

2. Present the results from the kader FGD (8:30 - 8:45)

3. Review the principles of providing effective feedback (8:45 - 9:15)

Break (9:15 - 9:30)

4. Practice using the revised form (9:30 - 10:30)

Divide participants into 2 groups to practice using revised form to observe kader-mother interactions and to provide feedback and practice filling out the form. Roles of supervisor, kader and mother will be rotated within the group. Person who play the supervisor should take notes and fill out the form.

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

- Observing the interaction between kader and mothers without interruption.
- Encouraging kaders to do a self-assessment and listening to it carefully to get his/her point of view.
- Reacting to kader's self-assessment non-defensively even you do not agree.
- Providing constructive and specific feedback to kaders to help him/her improve his/her interpersonal communication skills;
- Correctly follow the guidelines and use the revised Observation, Self-assessment and Feedback Form.

5. Group Discussion (10:30 - 11:00)

- Report the result of the role play.
- Discuss how participants felt when they played the role of supervisor, kader and mother. Discuss how this practice to help you to understand the self-assess-

ment, feedback process.
- Discuss any difficulties encountered in this activities and ways to overcome them.

6. Summarize and make an implementation plan (11:00 - 11:30)

- What we have learned today.

- Making a detailed practical implementation plan for the next three months.

7. Closing Remarks