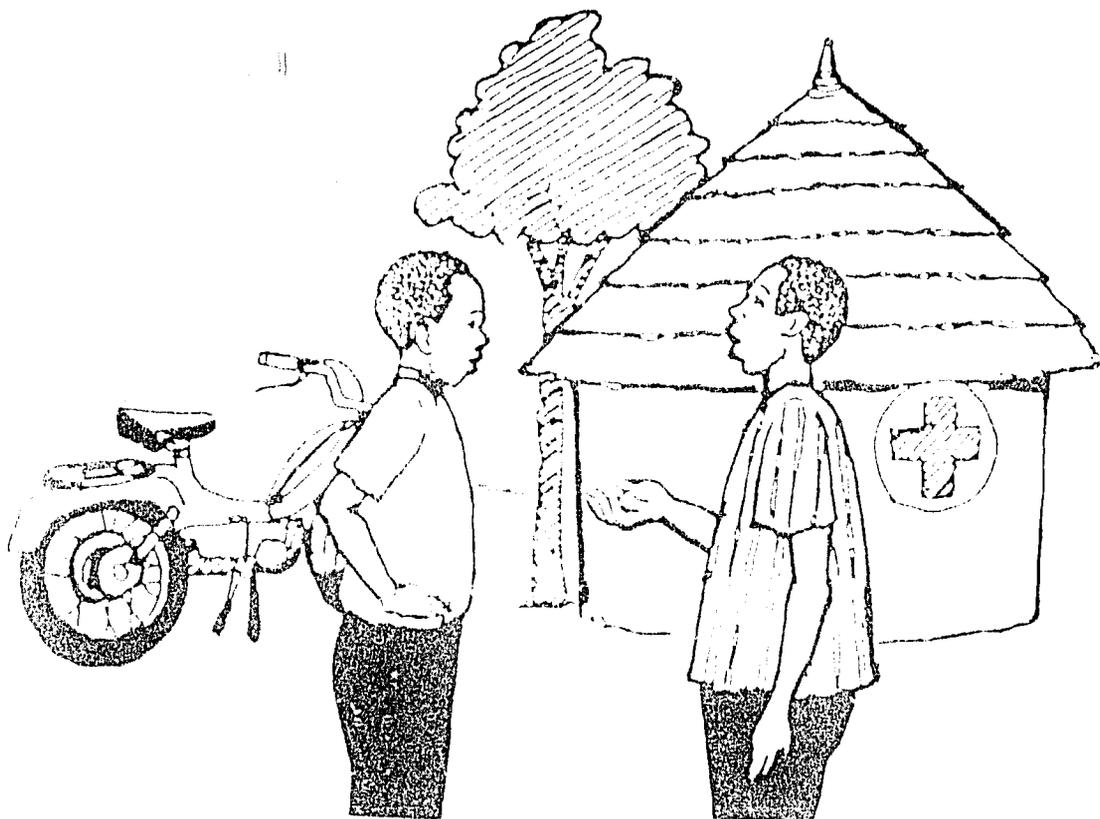


TRAINING FOR THE CONTROL OF DIARRHOEAL DISEASES

INTERMEDIATE LEVEL

## MODULE 4

# ELEMENTS OF A NATIONAL PROGRAMME TO COMBAT DIARRHOEAL DISEASES



Management Sciences for Health  
**PRITECH**  
Technologies for Primary Health Care

1987

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## **MODULE 4**

# **ELEMENTS OF A NATIONAL PROGRAMME TO COMBAT DIARRHOEAL DISEASES**

**This module was developed with the technical and financial participation of the Diarrhoeal Diseases Control Programme of the World Health Organisation (WHO), Regional Bureau for Africa, Brazzaville.**

**MANAGEMENT SCIENCES FOR HEALTH  
THE PRITECH PROJECT  
USAID FUNDED**

## TABLE OF CONTENTS

# MODULE 4

### Contents

Pre-requisites.....	4
Learning Objectives.....	5
Components of a Diarrhoeal Diseases Control Programme.....	6
Personnel Training.....	9
Information System.....	15
Management of Supplies.....	18
Supervision.....	21
Evaluation.....	26

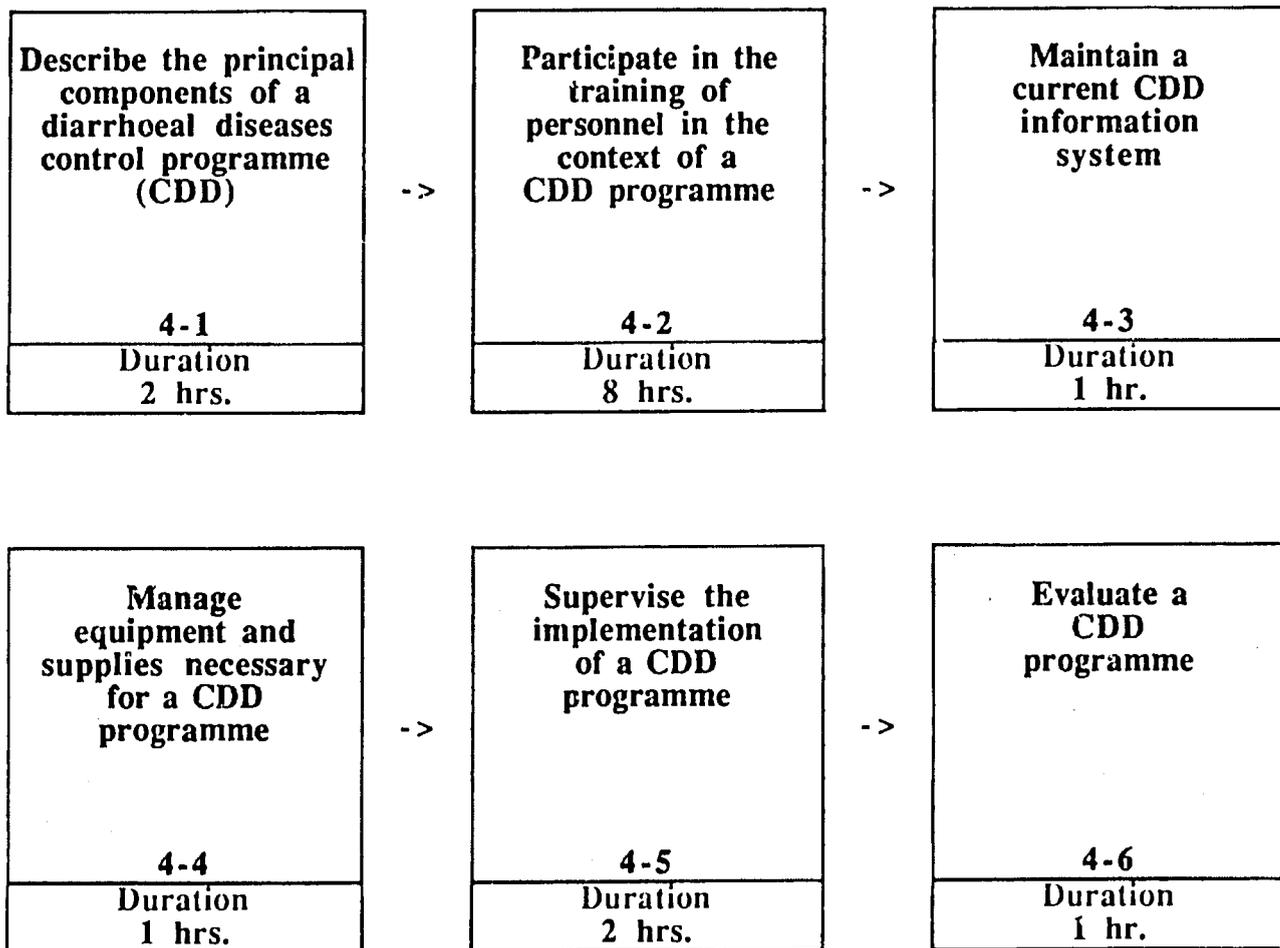
**PRE-REQUISITES**

The student should have basic knowledge of the following:

- **MODULES 1, 2, 3**
- **Organisation and Administration of Health Care Services**

# LEARNING OBJECTIVES

- This module presents the principal elements of a diarrhoeal diseases control programme (CDD), an approach for planning a training course and elements of management.
- The following diagram lays out the learning objectives. These objectives are based on the tasks that the student will carry out after his studies. The information provided and practical exercises are designed to facilitate learning.



## COMPONENTS OF A DIARRHOEAL DISEASES CONTROL PROGRAMME

### LEARNING OBJECTIVE: 4.1

Describe the principal components of a CDD programme.

The elements of a diarrhoeal diseases control programme are generally the same as those of any public health programme.

These elements are:

- A. The definition of the public health problem.
- B. Programme objectives.
- C. Programme strategies.
- D. Programme organisation.
- E. Programme activities.
- F. Programme evaluation.

#### A. Definition of the public health problem

to be addressed by the programme.



#### EXERCISE 4-A

Make a list of the types of information which could be included in a description of the diarrhoeal diseases problem.

Compare your list with the items listed below.

In the case of diarrhoeal diseases, the following problems could be included:

- incidence of diarrhoea in children under five (target group of the programme). This incidence can be determined by a sample survey. The survey should try to find out the number of children under five years of age who have begun or ended a bout of diarrhoea during the eight days preceding the study.
- the prevalence of diarrhoea: the number of children under five years of age who have diarrhoea on the day of the study.
- the duration of episodes of diarrhoea.
- the principal causes of diarrhoea.
- the number of cases of diarrhoea in children under five years of age seen in health care facilities.
- the number of deaths associated with diarrhoea compared to the total number of deaths in children under five years of age.

## B. Programme objectives

The programme objectives should be based on the problems as they have been defined. These objectives must be:

- Relevant
- Feasible
- Logical
- Precise
- Observable
- Measurable

For example, in the personnel training component of the programme, the overall objective may be:

To train health personnel in ORT techniques during the first two years of the programme.

During the implementation of the training component, more specific objectives based on the overall objective may be developed. For example: At the level of Region X, train 20 health post nurses in ORT techniques during the first term of the programme.



Exercise 4-B							
Analyse the two preceding objectives using the six criteria listed above.							
OBJECTIVE	CRITERIA						OBSERVATIONS
	Relevant	Feasible	Logical	Precise	Observable	Measurable	
During the first term of the program, train 20 health post nurses to use ORT							

## C. Programme strategies

Strategies generally include programme implementation policies. For example, strategies can determine:

- at what level ORS-packets will be available, and whether they will be sold or distributed free of charge.
- how to organise an awareness campaign for villagers at the rural community level.

#### **D. Programme organisation**

Programme organisation must specify programme structures and positions of responsibility at all levels. For example:

- a national committee
- a national coordinator
- regional committees and regional coordinators
- local committees

#### **E. Programme activities**

The responsibilities and authority of each of these structures must be clearly defined, and a job description for each position clearly stated.

There must be clearly defined programme activities at each level of implementation. Generally, planned activities include the following components

- The training of personnel
- The development of teaching materials
- The procurement of a supply of ORS-packets
- A public awareness campaign
- Follow-up and evaluation of the programme.

These activities and a timetable for their implementation should be included in the work plan of the programme.

#### **F. Programme evaluation**

Programme evaluation must look at the programme objectives. A programme can be evaluated by:

- measuring the impact of the program on the diarrhoea mortality rate in hospitals or on the awareness and practices of mothers in treating diarrhoea.
- measuring the degree to which planned activities have been achieved. For example, the number of personnel trained, or the number of ORS-packets distributed. A CDD programme must specify the evaluation criteria to be used.



#### **EXERCISE 4-C**

Using your country's national programme:

1. List the factors which would indicate the magnitude of the problem.
2. Discuss possible ways of measuring the achievement of programme objectives.
3. List the principal strategies of the national programme.
4. List five activities which should take place at a MCH centre in the context of the national programme.
5. Specify who should participate in the implementation of each of these activities.
6. Propose five evaluation criteria for your county's national programme.

## PERSONNEL TRAINING

### LEARNING OBJECTIVE: 4.2

Participate in the training of personnel who will be working in a CDD programme.

#### A. Formulating learning objectives

The tasks which a village health worker (VHW) must perform within the context of a CDD programme will be the learning objectives for their training.

Here is an example of a task: Prepare an oral rehydration solution from water, salt, and sugar.

The same task defined as an objective would be: **BY THE END OF THEIR TRAINING, THE VILLAGE HEALTH WORKER MUST BE ABLE TO:** prepare an oral rehydration solution from water, salt, and sugar.



#### EXERCISE 4-D

1. List three tasks which a VHW must perform in the context of a CDD programme.
2. Based on these three tasks, formulate three learning objectives for a VHW.

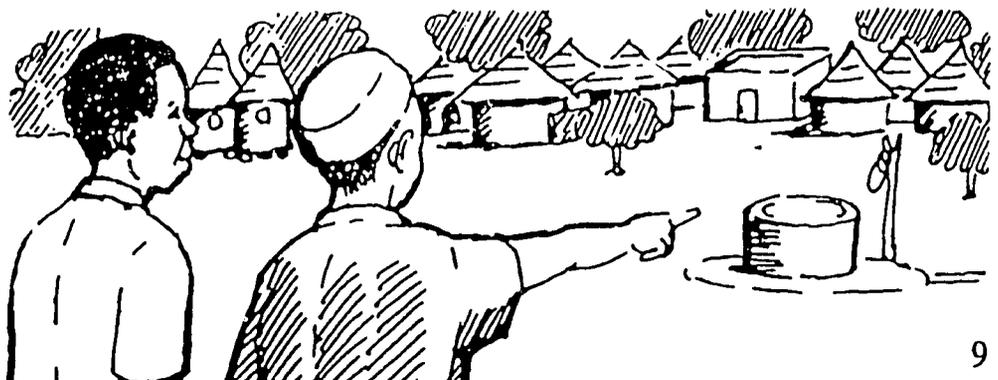
#### B. Training methods and learning activities

When you have defined the tasks to be taught, answer the following question:

#### WHAT IS THE BEST WAY TO TEACH THESE TASKS?

Teaching or methods are what you use to help people learn. Remember how you learned to give an injection, bandage a wound, etc. You were probably given several explanations of what to do. Then you watched someone do it. Finally you tried it by yourself. We can say, therefore, that there are three ways of learning:

- BY LISTENING TO AN EXPLANATION
- BY WATCHING A DEMONSTRATION
- BY DOING IT



Provide	Methods that can be used:	The trainee participates:	<p style="text-align: center;">LESS ACTIVE</p> <p style="text-align: center;">↓</p> <p style="text-align: center;">MORE ACTIVE</p>
<p>explanations</p> <p>or reading</p>	<ul style="list-style-type: none"> <li>• written or oral explanations</li> </ul>	<ul style="list-style-type: none"> <li>• by listening</li> <li>• readings</li> <li>• lectures</li> </ul>	
<p>examples</p>	<ul style="list-style-type: none"> <li>• demonstrations</li> <li>• photos or slides</li> </ul>	<ul style="list-style-type: none"> <li>• by observing</li> <li>• written</li> <li>• films</li> </ul>	
<p>examples</p> <p>the chance to practise</p>	<ul style="list-style-type: none"> <li>• by discussing</li> <li>• role plays</li> <li>• supervised practice in real situations</li> <li>• written exercises</li> </ul>	<ul style="list-style-type: none"> <li>• by practising</li> </ul>	

It is not always necessary to use all three methods. It may not be necessary to explain how to do a task. In some cases, after a demonstration of what to do, students could be asked to do what they have observed. That would let them put into practice what they have seen, which is the most important part of their training. It is only at this point that you will be able to tell whether or not a worker will be able to perform the required task.

**PRACTISE is always necessary in learning a task.**



Once the instructor has chosen the training methods, he must devise precise training activities for the student to perform, based on the learning objectives. These are the learning activities.

**Example:**

Learning Objective	Learning Activities
<p><b>At the end of training the village health worker should be able to:</b></p> <p><b>Prepare an oral rehydration solution using water, sugar, and salt</b></p>	<ul style="list-style-type: none"><li>• Watch the demonstration done by the teacher</li><li>• Gather the things needed to prepare the solution</li><li>• Prepare the ORS with the other participants watching</li><li>• Discuss questions raised by this demonstration</li></ul>



**EXERCISE 4-E**

Using the example given above, choose a learning objective from your list of objectives for training a Village Health Worker. Based on this objective, develop and list appropriate learning activities.

**C. Preparing a lesson plan**

Once the learning activities have been chosen, the trainer must estimate the time needed for each activity. This will permit the trainer to determine the length of time needed for training and to organise and schedule the learning activities within the time frame allotted.



**EXERCISE 4-F**

Using the learning activities you selected above, estimate how much time you would need for each one.

**D. Preparing the materials needed**

Based on the learning activities to be taught, the trainer must make provision for all the materials that he will need. For example:

- supplies for demonstrations
- programme-related teaching aids, etc.

**It is important that supplies and material used in training be as similar as possible to those available in the field.**

## E. Implementation of training

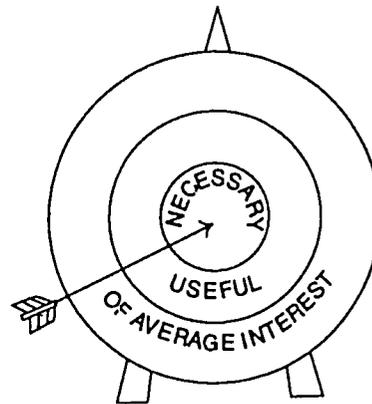
### Planning a training course

Here are several suggestions for planning a training course:

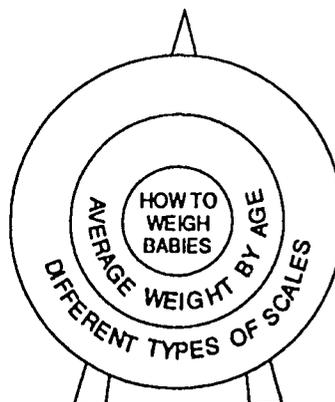
- At the beginning of the training period, remind students frequently what they will be learning and why it is important for them to learn it. This will help them to know what their goal is. Describe the situations in which they will apply what they learn.
- Make sure the students have all the information they need before asking them to perform a task.
- Each time a student demonstrates a skill, congratulate him on what was well done, and give him suggestions on how to improve.
- Let the student practise until he/she has mastered the task and does it correctly.

There are no strict rules governing the order of a training programme. You may decide to begin with a demonstration so that students observe what they will be learning. This method may stimulate their curiosity and their interest in the information you will give them after the demonstration. However, if it is difficult to demonstrate a task, or if it would be confusing without background information, you can begin with an explanation of the task rather than with a demonstration.

In planning, keep in mind what the students already know. Do not repeat or include unnecessary information which will bore or distract the students.



**EXAMPLE:** A health centre has received a baby-weighing scale. The nurses do not know how to use it. Look at the drawing below. Use an arrow to point to the task which is the most important thing to explain, to demonstrate, and to have them practise.



**F. Evaluate training and improve it if necessary**

The best way to find out if training has been effective is to see whether or not trainees know how to perform the tasks they have been taught when they return to their own posts. You should ask yourself the following questions:

- **WHAT ARE THE HEALTH WORKERS STILL UNABLE TO DO, AND WHY?**
- **HOW CAN I IMPROVE TRAINING NEXT TIME?**

If trainees can perform the tasks taught, the training can be considered successful. (But you must continue to check on their performance to make sure that they don't forget).

If, in the course of their work, trainees cannot perform a certain task, try to find out why. Perhaps the training was not appropriate for them, or perhaps there are other problems (lack of time, lack of equipment, some aversion to doing the task - cultural or otherwise). If it seems that the training was not appropriate, try to discover which aspects were not well done in order to place greater emphasis on these points during the next training session.

**G. Conclusions about training**

**Use the results of the evaluation to  
IMPROVE THE TRAINING**

- Training must always include the performance of tasks, in a setting as similar as possible to the real work setting of the trainee.
- Before the actual performance of a task, the trainees should receive all the information they need to know, and be able to witness a demonstration.

<b>Provide:</b>	<b>Methods that can be used:</b>	<b>The trainee participates:</b>	<b>LESS ACTIVE</b> ↓ <b>MORE ACTIVE</b>
<b>explanations</b>	<ul style="list-style-type: none"> <li>• written or oral explanations</li> <li>• readings</li> <li>• lectures</li> </ul>	<ul style="list-style-type: none"> <li>• by listening or reading</li> </ul>	
<b>examples</b>	<ul style="list-style-type: none"> <li>• demonstrations</li> <li>• photos or slides</li> <li>• written examples</li> <li>• films</li> </ul>	<ul style="list-style-type: none"> <li>• by observing</li> <li>• by discussing</li> </ul>	
<b>the chance to practise</b>	<ul style="list-style-type: none"> <li>• role plays</li> <li>• supervised practice in real situations</li> <li>• written exercises</li> </ul>	<ul style="list-style-type: none"> <li>• by practising</li> </ul>	

- Trainees should receive suggestions about their practical performance of the task, so they will know what they do well, and how to improve their work, if it needs improving.
- Evaluate the training by watching the trainees in their normal work environment. If they still have difficulty in performing a task successfully, try to find out why. Use the results of the evaluation to improve training.



#### **EXERCISE 4-G**

Pretend that you must train a group of village health workers in ORT: how to prepare and use oral rehydration solution.

Work in small groups of 4-6 persons to plan a complete training programme.

- Be sure to include:
- Preparation of objectives
  - Training methods
  - Learning activities
  - Course outline or plan
  - Evaluation methods

**LEARNING OBJECTIVE: 4.3**

**Maintain a current CDD information system**

At the very least, the reporting system for a CDD programme should provide information about the following:

- The activities of health care personnel at all levels
- The size of the diarrhoea problem in the country, and any changes over time
- The number of ORS-packets used, in order to quantify needs at all levels
- The methods of treatment used.



**EXERCISE 4-H**

Collect examples of all the information-gathering forms used by the national CDD programme in your country.

Discuss the usefulness of each form with the students, and how to fill them out.

Following is an example of an information-gathering form.  
Compare it with the forms in your own country.

# NATIONAL DIARRHOEAL DISEASES CONTROL PROGRAMME

## EVALUATION OF ACTIVITIES: QUARTERLY REPORT

Region: \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_ 198\_\_

District of \_\_\_\_\_

### 1. PARTICIPANTS AT ORT TRAINING SESSIONS

Type of Personnel	No. trained during 3-month period	Total no. trained to date	Total no. to receive training	% of total already trained
Nurses and midwives				
Health inspectors				
Auxiliary staff				
Social workers				
Teachers				
Literacy staff				
Other agents				
VHWs				
TBAs				
SRO vendors				

### 2. DISTRIBUTION OF ORS PACKETS (FOR 3-MONTH PERIOD)

Packets used in health facilities	
Packets distributed free to mothers	
Packets sold in the district (pharmacies, depots, other outlets)	

### 3. QUANTITY OF PACKETS IN STOCK

Quantity at health facilities	
Quantity at village level	

#### 4. DISTRIBUTION OF EDUCATIONAL MATERIALS

Type of material	No. distributed	Quantity in stock
Posters		
Flyers		
Booklets		
Other		

#### 5. TREATMENT OF DIARRHOEA CASES AT HEALTH FACILITIES

Under-fives treated with ORS at facility:	
Under-fives consulting for diarrhoea <u>without dehydration</u> :	
Under-fives consulting for diarrhoea <u>with dehydration</u> (other than cholera):	
Under-fives consulting for cholera:	

#### 6. DEATHS REGISTERED

Total under-fives deaths registered in the 3-month period:	
No. of deaths with diarrhoea as principal cause:	

#### 7. EDUCATION SESSIONS ON ORT

No. of sessions carried out by health staff:

No. of sessions at health facility:	No. of community meetings:
-------------------------------------	----------------------------

#### 8. REMARKS (difficulties, suggestions):

Person responsible for report: \_\_\_\_\_

Date: \_\_\_\_\_

**LEARNING OBJECTIVE: 4.4**

**Manage equipment and supplies necessary for the Program to Combat Diarrhoeal Diseases in his/her area.**

**AS AN EXAMPLE, WE HAVE CHOSEN: ORS-PACKETS**

**Estimate the need for ORS-packets**

Before ordering ORS-packets, the health worker must know:

- the target group for treatment of diarrhoeal disease in his/her community: children under five years of age
- the number of children under five years of age who have been treated for diarrhoea in the past year
- the number of ORS-packets which have been used to treat cases of diarrhoea during the past year
- the number of ORS-packets which have been lost or used for people NOT in the target population during the past year
- the number of ORS-packets which will remain in stock when the new order arrives
- an approximate idea of how long it will take between the time an order is sent and its delivery.

From this information the health worker must:

- estimate the total number of packets needed for the year ahead, keeping in mind that the use of packets will probably increase.
- subtract the number of packets expected to remain in stock when the new order arrives.
- make all possible arrangements to ensure delivery on time.



### EXERCISE 4-I

Estimate the number of ORS packets needed for your community, considering:

- Reports show that under-fives have 3500 diarrhoea episodes per year and that two 1-litre packets are needed for each episode.
- You have decided to increase your ORS stock by 30% to cover a reserve stock, some adult cases, and wastage.
- You can make 2 orders a year and you have 450 packets in stock.
- How many packets do you need each year?
- How many packets do you need for each order?
- Give the difficulties of communication in your zone (roads, vehicles), how long will it be after your order that you receive the packets?



### Receipt of the Order

Once the order has arrived, the packets must be recorded.

Records must include:

- the date of receipt
- the quantity received
- the number or letter of the series
- the total quantity in stock
- the date of expiration of the packets

For outgoing stock, record:

- the date of issue
- the quantity issued
- the health service which received the stock
- the stock remaining

It is also recommended that the records include the rate of consumption of packets, and the level of stock at which a new supply should be ordered.

It is advisable to do an inventory of stock every three months, and to cross-check the results with the quantities indicated in the records. An inventory is an important factor in determining the quantities of ORS-packets that will be needed in the future.



#### EXERCISE 4-J

On January 5th you received 4,885 ORS-packets from X Pharmacy. You have 139 packets left from last year's stock.

On January 10 you sent 750 packets to Health Centre X for their program.

On February 2nd you sent another 540 packets to the same health centre.

On February 10th you sent 130 packets to the health worker in village X.

Create a record book including stock in and out, using the information given above.

Storage should include the rotation of stock so that the older packets (identified by the date of expiration or date of reception at your warehouse) are used first.

#### Regular inspection of packets

Sealed ORS-packets in aluminum last at least three years. Check the date of manufacture on the label.

ORS-packets must be checked every three months to make sure that they are still of acceptable quality. Check the ORS-packets if the cartons seem damaged. Open at least one packet at the top of the carton, one from the middle, and one from the bottom of the carton to see whether or not they are still usable.

## LEARNING OBJECTIVE: 4.5

**Supervise the implementation of a program to combat diarrhoeal disease in the trainee's area.**

The success of a program to combat diarrhoeal disease depends largely on the work of its field workers. It is, therefore, important to supervise their work closely.

### Define what must be supervised

It should be easy to define the activities to be supervised. It is important, naturally, that the health workers be able to do all their tasks well. However, you have little time and few resources to spend on supervision; you must limit the number of activities to be supervised. You could begin by checking a few specific activities in each health service, and gradually increase the number.

Carefully chose which aspects of the activities you will supervise. Consider the following questions:

- Which aspects of the activities are most important to the success of the program?
- Which aspects of the activities will be the most difficult to accomplish?
- What is new for the health workers?
- What is most indicative of a job well done?



### Establish checklists for supervision

It is useful to have a checklist of what you are going to watch for while supervising an activity.

Generally this checklist should be:

- brief (only include the most important aspects of the activities to be checked), and
- easy to use (it should allow you to check off prepared comments or quickly note your observations for each item).

The checklist should allow space for comments and recommendations at the end, especially if some problems have been identified.

See the example of a checklist for the supervision of a rural clinic (page 25).



### EXERCISE 4-K

Imagine that you have to supervise a health worker consulting a child with diarrhoea. Make a checklist of points to watch for.

Depending on the time, information and personnel available, you may choose from several supervisory methods:

- Observe the health workers
- Talk with the health workers
- Consult the files and records
- Talk with mothers during the treatment
- Analyse the reports done by the health workers.

Following are some descriptions of these methods:

- **Observe the health worker.** This is an effective method. Watch him/her and note the setting in which he/she works. For example, watch a health worker treating a child with diarrhoea to see if the child is well looked after. It is important that the health workers know that you are there to observe them in order to help them, not to criticize them.
- **Talk with the health workers.** This method will help you confirm what they know, and let you know what they think about their work. If you have identified some problems, try to learn from them what the possible causes of these problems might be. Solicite their suggestions for solutions to the problems. Conversations you have with health workers you supervise are an opportunity to congratulate them on the work they are doing well.



- **Consult the files.** This method is often used, as the supervisor usually has access to the health worker's files as well as to those of the medical establishment. It is also a quick means of gathering information. However, the files are not always complete enough. The information you do find will enable you to tell whether or not patients have been referred to appropriate medical facilities, and whether or not prescribed treatment was suitable for the patient's condition. But you will not learn how the treatment was administered, nor what advice was given to mothers.
- **Talk with mothers during treatment** (or listen to what the health workers are telling them). This will help you know if the mothers understand the counsel they are being given. For example, you may ask several mothers how they plan to feed their child during and after an episode of diarrhoea; this will give you an idea of how much they have learned from the health worker. This method will also give mothers the chance to talk with you about any problems which they might have with the services rendered.
- **Make home visits.** You will be able to observe patients who have been treated and talk with the mothers. This will help you to determine whether the patient was correctly treated, if advice given has been understood and followed, and what the mother intends to do next time her child has an episode of diarrhoea. You will also learn whether or not the mothers are satisfied with the care given to their children.



## DIFFERENT SUPERVISORY STYLES

### a) The autocratic supervisor

He/she wants to see, to know, to understand everything, and to be everywhere; he/she does not delegate responsibility, and often confuses authority with domination. This person performs his/her duties by giving strict orders and by controlling the implementation of activities as if he/she were a policeman (controller, invigilator, inspector).

### b) The "laissez-faire" supervisor

This person is the opposite of the autocratic supervisor. He/she places complete confidence in the team and does not interfere in anything. His/her major concern is to keep everyone happy.

### c) The democratic manager

This person:

- discusses his observations openly with the personnel being supervised
- tries to understand the reason behind situations before commenting
- helps supervisees find their own solutions to problems encountered.

Each style of leadership has its advantages and disadvantages. They should be applied according to the situation at hand.



#### EXERCISE 4-L

At health post X the supervisor noticed that the health post nurse distributed ORS-packets to mothers with children suffering from episodes of diarrhoea WITHOUT demonstrating how to prepare the solution, and without checking to make sure whether or not the mothers understood the instructions given. Simulate the interaction between the supervisor and the health post nurse.

After the role-play:

- Discuss the approach used by the "supervisor"
- Make suggestions to improve his/her style
- Ask other members of the group to re-enact the situation, using the suggestions made in discussion.

# EXAMPLE OF A CHECKLIST FOR SUPERVISING A RURAL DISPENSARY

Name of Dispensary: \_\_\_\_\_

POINTS TO REMEMBER	OBSERVATIONS		
	YES	NO	REMARKS
1. Children with diarrhoea are treated with ORS in the dispensary			
2. Children with diarrhoea receive packets for home treatment			
3. Children with diarrhoea receive anti-diarrhoeal drugs			
4. A place exists for surveillance of children receiving ORT			
5. Appropriate supplies exist for children's surveillance at dispensary			
6. Material exists for ORT demonstrations			
7. Educational materials exist for teaching mothers			
8. Mothers receive individual advice: <ul style="list-style-type: none"> <li>- on oral rehydration</li> <li>- on feeding of child with diarrhoea</li> </ul>			
9. Group education sessions are held with mothers			
10. ORT demonstrations are done with mothers			
11. community meetings on ORT/CDD are held			
12. Home visits are made for the follow-up of some cases			
13. Diarrhoea cases are properly registered			
14. Reports on ORT/CDD are submitted regularly			
15. ORS packets are inventoried and well-stocked			
16. Educational materials are inventoried and well-stocked			

## **LEARNING OBJECTIVE: 4.6**

### **Evaluate a programme to combat diarrhoeal diseases.**

Program evaluation is a methodical way to test all the data which could serve as a basis for **determining the extent to which defined objectives have been reached**, and also enables one to make appropriate decisions at each phase of programme implementation.

To evaluate a programme to combat diarrhoeal disease, it is necessary to have an accurate idea of the **situation at the beginning of the programme** (baseline data). For example:

- the percentage of deaths associated with diarrhoeal diseases
- the present methods of treatment of these cases
- the number of persons presently trained in ORT
- knowledge and practices of mothers, etc.

**During the implementation of the programme**, it is necessary to do periodic evaluations in order to make any needed adjustments and modifications.

**Upon completion of a programme**, it is necessary to evaluate it in order to determine the results, and from it, draw conclusions.

### **EVALUATION IS AN ON-GOING PROCESS**



The following principles are important to remember if evaluation, at all stages of programme implementation, is to be the most beneficial:

- **DESCRIBE THE SITUATION AT THE BEGINNING OF THE PROGRAM**
- **CLEARLY DEFINE THE OBJECTIVES OF THE PROGRAM**
- **SET CRITERIA BY WHICH TO JUDGE THE SUCCESS OR FAILURE OF THE PROGRAMME**
- **CHOOSE EVALUATION METHODS TO BE USED.**

**Evaluation criteria or indicators**

**Evaluation criteria for a programme to combat diarrhoeal diseases flow from the stated objectives of the programme.**

There are three types of indicators. These should measure:

I	The degree of completion of programme activities
II	The immediate results of the programme
III	The overall results of the programme

**The first type of indicators must measure the extent to which programme activities have been completed, because one supposes that these activities must take place in order to have an impact on the problem.**

Here are some examples of evaluation indicators for a programme to combat diarrhoeal disease:

- Number of cases of diarrhoeal disease treated by ORT in health centres compared to total number of cases of diarrhoeal disease treated.
- Number of persons trained in ORT compared to total number of persons left to train.



**EXERCISE 4-M**

Using the examples above, formulate two other indicators to evaluate activities in a program to combat diarrhoeal disease.

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**The second type of indicator must measure immediate results, for example:**

- Number of mothers who know about and correctly use ORT compared to the total number of mothers targeted by the program.
- Number of mothers who have used ORS-packets before coming to a health centre compared to the total number of patients seen for diarrhoeal disease.
- Number of severe cases of dehydration seen in health centres compared to total number of cases treated for diarrhoeal disease.



#### **EXERCISE 4-N**

Based on these examples, give two other evaluation indicators to measure immediate results.

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**The third type of indicator measures the overall results of the program, for example:**

the reduction of cases of death linked to diarrhoea compared to the total number of deaths in the target population.

### **Evaluation methods**

Current evaluation methods are:

- Gathering of facts from files and reports supplied by health centres (certain units may be chosen to gather more detailed information through the use of special reporting forms. These units are commonly called pilot centres).
- Random sampling surveys which gather information at the community level.
- Gathering of qualitative information about the programme from:
  - meetings with all persons concerned
  - Studying documents referring to the program.

## **MODULE 4**

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