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**ASSESSMENT OF THE JUNIOR PUBLIC HEALTH
NURSES TRAINING, INCLUDING THE PRACTICAL
SECONDMENT, IN AWASSA HPTI, SNNPR:
TRIP REPORT TO ETHIOPIA: ADDIS ABABA AND AWASSA**

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1

TABLE OF CONTENTS

ACRONYMS

EXECUTIVE SUMMARY	1
PURPOSE OF VISIT	3
BACKGROUND	3
TRIP ACTIVITIES	4
RESULTS AND CONCLUSIONS	4
RECOMMENDATIONS	7
FOLLOW-UP ACTIONS REQUIRED	9

APPENDIXES

- A List of Contacts
- B Suggestions for Development of the Junior Public Health Nurses Curriculum in SNNPR
- C Suggested Plan for the Community Practice Assignment
- D Copy of the Junior Public Health Nurses Curricula, Ethiopian MOH, 1995

ACRONYMS

BASICS	Basics Support for Institutionalizing Child Survival
BESO	Basic Education Structural Overhaul
CHA	Community Health Agent
COP	Chief of Party
ESHE	Essential Services for Health in Ethiopia
FDGE	Federal Democratic Government of Ethiopia
HPN	Health, Population and Nutrition
HPTI	Health Professional Training Institute
IMCI	Integrated Management of the Sick Child
MCH	Maternal and Child Health
MOH	Ministry of Health
NGO	Nongovernmental Organization
PMW	Primary Midwife
PH	Public Health
PHN	Public Health Nurse
PHO	Public Health Officer
RHB	Regional Health Bureau
RTC/H	Regional Training Center for Health
SIDA	Swedish International Development Agency
SNNPRG	Southern Nations, Nationalities and Peoples Regional Government
TOT	Training of Trainers
TBA	Traditional Birth Attendants
USAID	United States Agency for International Development

EXECUTIVE SUMMARY

The BASICS project in Ethiopia has been involved in strengthening basic and continuing education for primary health care (PHC) in the SNNPR for some time. Following recommendations by consultant Dr. Dennis Carlson, USAID and BASICS requested further technical assistance to evaluate the junior public health nurses curriculum: identify gaps in the program and suggest methods of implementing the community health component of the training. Evaluation of the training needs of the Health Professional Training Institute (HPTI) public health tutors was also a priority, along with identifying the material needs to support these initiatives.

Within the policy of supporting a decentralized health system, new regional training institutes have been established, and in the SNNPR, new health institutes have been established in Awassa, Hosaina, and Arba Minch. The HPTI in Awassa started training 81 health students in October 1996 as junior public health and clinical nurses, junior midwives, and junior laboratory technicians.

Each training course lasts one academic year. The nursing courses have some practical experience during the theoretical blocks, but the majority of time devoted to clinical practice is in the final 12 weeks of the course. This is supposed to be a time when all the students of the HPTI join together in a 'team building' exercise.

The consultant traveled to Awassa and met with representatives from the Regional Health Bureau and training institutions, and discussed curriculum issues and the plan for community experience for the students. Discussions also took place with various NGO representatives operating in the region. Field visits were made to a local mission hospital and health center, and to one of BASIC's focus woredas.

After the discussions, the consultant drafted comments on the existing curricula, a suggested plan for the community practical assignment, and a list of follow-up activities.

It was clear after several discussions that some issues are related to central-level organization and some to regional circumstances. There is a need to revise the PHN curriculum to focus it more on key public/primary health care issues, perhaps reducing the number of topics currently covered. In addition, attention needs to be paid to the current learning environment and standards of health services in which students will be placed for clinical/field experience. There also exist some issues relating to equal opportunities for entry into nurse training. Since regions are obliged to follow the present curriculum and the examination/registration procedures from central level, this limits regional adaptation.

1

4

PURPOSE OF VISIT

The main objective of the visit was to review and make suggestions regarding the junior public health nurses curriculum, particularly the community health nursing component at the Awassa HPTI in SNNPR, Ethiopia. This would include the identification of gaps in the curriculum and the focus on integrated maternal and child health care and reproductive health. The needs of the HPTI public health tutors would also be assessed, and a timeline and identification of materials to support these needs would be decided on.

BACKGROUND

Ethiopia has a population of approximately 53 million, with 12-14 million living in the Southern Nations, Nationalities and People's Region (SNNPR) where USAID and the BASICS project are focusing their health activities. Infectious diseases and malnutrition continue to be the major causes of morbidity and mortality.

The Ethiopian government is implementing new national and regional policies that focus on decentralization and an overall reorganization of health services. New health centers, serving a specific population and supervising five health posts, are being planned to provide more equitable access to health services. New staffing patterns and categories are also being developed, which will increase the number of training facilities needed. Health centers are to be managed by public health officers (a 3.5 year training), supported by junior-level clinical, midwifery, and public health nurses, and laboratory staff. Each of these junior categories of staff will be trained in a 1-year course. It is planned to train senior levels of each of these staff categories in a 2-year program and to enable the junior categories to upgrade. The senior programs have not yet commenced, but will be conducted in regional health science colleges (RHSCs) that are part of regional universities. Health assistant training is also to cease and be replaced by nursing courses. Upgrading courses for health assistants already qualified are also planned.

In the SNNPR, a Health Professionals Training Institute (HPTI) has been established in Hosaina, Arba Minch, and Awassa (previously the Health Assistants School). Eighty-one students in the junior categories commenced their training at the Awassa HPTI in October 1996.

Regional training centers for health (RTC/H) have been established in regional capitals as part of Regional Health Bureaus (RHB). They are responsible for the continuing education and in-service training activities at regional levels, and for facilitating district training as well.

TRIP ACTIVITIES

Attempts to consult with officials from the MOH Training Division were initially unsuccessful, and the consultant traveled to Awassa with Dr. Paul Freund and Mr. Sjoerd Postma of the BASICS team. A briefing at the BASICS regional office took place with Freund and other staff from the BASICS/Awassa office. Initial visits were then made to the RHB and the Awassa RTC/H, and HPTI.

Discussions at the HPTI continued, and a plan of a community assignment for the public health students was drafted along with suggestions for the development of the curricula. The consultant traveled back to Addis Ababa for a meeting with the child survival advisor for Africare, who was also a nurse tutor with extensive curricula and teaching experience in Africa. On returning to Awassa, discussions were continued with the HPTI, and a meeting with a member of BESO was useful in exploring more general aspects of developing curricula in the southern region. Field trips were then made to Wicho, one of BASICS' focus woredas, a health center at Yirgalem, and a Catholic mission hospital designated as a major health center at Bushulo, a few kilometers outside Awassa town.

A debriefing was held at the HPTI with the principal and the PH tutors, who had until this moment been teaching in the field and unavailable for meetings. Final drafts of the documents were presented and discussed. The consultant then had debriefing meetings in Addis Ababa with the MOH Evaluation, Registration, and Licensing Division, USAID, and the COP for BASICS, where results and recommendations were discussed further.

RESULTS AND CONCLUSIONS

Syllabus issues

After review of the junior PH nurses curriculum, and discussions with the principal of the HPTI, it was clear that the curriculum had been developed using portions of other curricula (e.g., clinical nurses, laboratory technicians). There is insufficient emphasis on public/community health, primarily because so many topics are covered—basic sciences along with curative topics competing with the PH issues. It is the consultant's opinion that since most students have no prior nursing or medical training the curriculum is overly ambitious and does not allow for sufficient emphasis on the key PH areas. The five main areas recommended by the consultant to form the focus of the training would be—

- MCH (including EPI, family planning, and pediatrics)
- Nutrition (particularly breastfeeding, malnutrition, and micronutrient deficiencies)
- Communicable disease control

- Basic epidemiological skills and use of data for health decision making, e.g., understanding child morbidity rates calculated from clinic attendance figures and how to target the priority problems in the community
- Environmental health (particularly personal and household hygiene, food and water safety, and sanitation)

Practical communication and health teaching skills should be emphasized throughout all the topics.

Practical Training

The syllabus is arranged to give the students a period of one month's practical secondment to medical and surgical nursing. There is no further practical experience until the end of the course, when 12 weeks are allocated for the PHN. It would be better for the students to have shorter periods of practical experience directly related to theory blocks, e.g., pediatrics or MCH. This would also reduce logistic and supervisory problems associated with having so many students out on practical assignments at one time.

The last eight weeks of all the junior courses are allocated to a 'team training' experience. No details were listed as to what this experience should consist of, except that all categories of students are to go on practical assignment together. This immediately poses logistic and supervisory problems, as mentioned above. It is the consultant's opinion that this will be very difficult to implement, and since each category of students has different learning objectives, a single, joint practical experience will not meet all needs unless great care is given to intensive supervision of the public health nursing students.

Although training has been regionalized, the principals of the HPTIs are not allowed to alter the syllabuses or the hours allocated to individual subjects. It was not clear whether they had the authority to re-arrange the practical components of the course, but they seemed obliged to follow what has been suggested. The other constraint was that the final examination, or at least a substantial proportion of the final examination, will be set at the central level, so that even some emphasizing and de-emphasizing of certain syllabus topics may result in difficulties when the students take the final qualifying examinations. In this sense, regional training institute programs are still largely determined by central-level policies.

Sites for Practical Training

A brief time was spent visiting field sites. A health center which was considered one of the busiest was visited and consideration was given to HCs in general as training sites, since this is where the junior health staff will work when qualified. In terms of physical structure, much could be done to upgrade these facilities. It appeared that the main focus of the HC was still curative, and so in terms of supervisory standards for students, qualified staff need refocusing on more

PH/community issues. A major HC run by a Catholic mission, (but part of the MOH) was extremely busy and short staffed, but could offer good practical training. However, there seems to be general reluctance on the part of the MOH to collaborate with NGOs.

The HPTI staff were very enthusiastic and keen to develop the courses offered, but the ideas presented by the consultant were quite new in concept and probably more educationally broadly based than anticipated. More time for discussion and exchange of ideas is probably required before the staff will decide on the final outline for the community experience.

Training Requirements of HPTI Nurse Tutors

A shorter time than initially anticipated was spent discussing training needs with the HPTI nurse tutors. Generally it was felt that more training is specifically needed on public/community health. The consultant felt that a specific local PH training course would be beneficial for the nurse tutors, or a study tour to view other countries in the region where PH was practiced more comprehensively, especially demonstrating a broader nursing role. A timetable could not be immediately planned for this until further follow-up activities identified suitable courses or programs to visit.

It should be noted that one of the three PH tutors holds a Masters degree in PH/Community health from the Phillipines (but is not a nurse), so the HPTI does have some 'in house' expertise to develop the course.

General and National Nursing Issues

Since Ethiopia is still undergoing extensive health sector reform, questions and thoughts about nurses' roles have not been determined in specific detail yet. In industrialized societies, nurses' roles have broadened considerably into jobs which deal with many facets of health. It is likewise essential that a broad health perspective be encouraged in developing countries where resources, particularly personnel, are scarce. For this reason, and the role of the central MOH outlined above, it would be highly advantageous if an ongoing professional forum were established where nursing education and practitioners could examine issues and make recommendations. This might take the form of a nursing advisory group or forum. A 'central nursing council' is being established within the MOH, but is part of a combined registry for all health professionals and mostly concerned with other issues.

In discussions, questions were raised about equality/equity in applicants applying for nursing training, particularly with regard to gender. It seems more males than females are being accepted into nurse training. In Awassa, the PH nurses' group had 7 females in of a class of 24. A national forum of nursing educators and practitioners could address the entry qualifications and encourage greater equity. This of course might be addressed at regional level as well.

RECOMMENDATIONS

Regional Level

A *Development of the PHN Curriculum*

As described above, this will require changes at central level, either to revise the curricula or to allow the RTC to do so. This will be tied to the standards set for registration, so probably will have to be done at national level.

The five main areas recommended by the consultant to form the core of PHN training would be—

- MCH (including EPI, family planning, and pediatrics)
- Nutrition (particularly breastfeeding, malnutrition, and micronutrient deficiencies)
- Communicable disease control
- Basic epidemiological skills and use of simple data for health decision making
- Environmental health with an emphasis on practical application and health teaching skills throughout the course

There should be less emphasis or importance placed on strict academic criteria on a course of only one year which is primarily aimed at increasing the service provided by frontline health workers. One idea might be to design an intensive PH training module incorporating essential information on these five topic areas, with a very practical focus. This could be added as a 'pre practice' block before the community assignment. BASICS could assist in preparing the materials and teaching plan in detail with the HPTI tutors. This would, therefore, not involve any immediate changes in the curricula.

B *Develop Plan for Community Experience*

The idea of team training is conceptually good, but practically difficult to implement. The consultant recommends that each group of students have their practical training arranged so that the students learn their public health functions very thoroughly and that more practice be arranged throughout the course rather than occurring as a final block at the end of training. The consultant feels that in addition to experience in the HC, the PH students should have some exposure to a more community-based activity, which would emphasize dialogue with the community members and the recognition of practical difficulties that people face in daily living, and some experience with basic epidemiology—collection of baseline data and the planning of health services in response to that information.

The possibility of a rotation of experience for students at the health-post level, as well as the health center, perhaps in BASICS' focus woredas where staff could assist with community activities, might give a similar broader PH experience.

C Practical Training Sites

The environment of the HC should be improved if large numbers of students are to be sent there for practical experience. A 'model' training facility (or several such centers) could be developed with in-service TOT courses for staff focusing on public/community health topics. This idea was well received at the HPTI and was discussed at the de-briefing with USAID.

The consultant feels that additional opportunities exist for working with NGOs and for broadening the training experience, especially with outreach programs where transportation is difficult. Small groups of students could join EPI or family planning outreach visits on a weekly basis in communities close to Awassa, including parts of Awassa town.

D Support of Tutorial Staff at the HPTI

Following brief discussions with the tutorial staff, it would be helpful to continue to supply teaching materials and to explore the possibilities of local training in public/community health to update them. A study tour within the region and to other parts of Ethiopia (e.g., Attat and Jimma) to look at a program with a functioning community health function and good training sites would also be extremely beneficial. Also, perhaps visits to other countries in sub-Saharan Africa could be arranged.

Central Level

A Revise PH Curricula

The public health nurse curricula may need revision at the central level, with a reduced number of subjects to be covered and more emphasis on key topics and practical application. There needs to be less emphasis on curative skills and more emphasis on public health/preventative areas. Job descriptions should be adapted for each level of staff, and training aimed at giving the necessary practical skills required to carry out the functions of the job.

B Role of Nurses

The practical experience needs to be more focused on the causes of ill health and strategies to address these causes. At present in Ethiopia, there seems to be a somewhat narrow definition of what 'nursing' constitutes, and this vision needs to be expanded to include the many different roles which modern nurses are currently expected to fulfill. This would be facilitated greatly by the establishment of a *National Forum or Association for Nurses*.

As reported above, this is currently being organized, but for all categories of health professionals together. The MOH is waiting for government approval. The consultant feels that each group should have its own official body which reviews training standards, and codes of practice and licensing. This will help shape the profession in the future and give nurses a more influential voice. The entry criteria for nursing courses should be examined, especially in regard to gender issues.

Discussions with Dr. Fantaye in the MOH department responsible for these activities indicated an awareness of the need for such an organization and may request consultancy assistance from BASICS. BASICS has used a senior adviser in other countries to help them build official nursing structures and could be asked to give similar help in Ethiopia.

FOLLOW-UP ACTIONS REQUIRED

Short Term

BASICS regional staff to continue dialogue with the HPTI and to discuss the following ideas:

- BASICS to design and prepare materials for an intensive PH training module of about one weeks duration and to add it as extra training component to the curriculum—perhaps as a pre-community experience preparation. The tutors could be involved in this course preparation and which would also expand their teaching methodology. Preparation could take place during the teaching break in August-October.
- Investigate possible training courses in PH/community health or a study tour in the region to view more practical PH implementation and to broaden the perspective of the HPTI tutors.
- Consultant and BASICS country staff to provide more teaching materials, especially linked with the above course.
- BASICS to offer assistance with the practical community experience, either A) as outlined as option 2 in appendix C, or B) placement of students in one of BASICS focus woredas, perhaps at the health-post level, as well as at the health center to give more of a community perspective and focus on outreach activities.

Long Term

- BASICS to continue in-service training for HC staff in the SNNPR on public health/community health topics. This currently focuses on the implementation of supervisory checklists and in-service training.

- BASICS (after further discussions with USAID) may formulate a proposal to upgrade one or more HCs within the SNNPR to be used as a 'model' field training site (other than Yirgalem).
- Dr. Vincent David could clarify what divisions currently exist within the MOH to deal with training, curricula, national health professional examinations and licensing, and their level of functioning. Revision of the curricula at the national level is also an area where we could assist, and is a priority.

APPENDIXES

APPENDIX A
LIST OF CONTACTS

APPENDIX A

List of Contacts

Ms. Carina Stover	USAID HPN officer, Addis Ababa
Dr. Isabel Abidie	Head, Bushulo Health Center (Catholic Mission Hospital)
Sr. Mentwab Ali	Public Health Nurse Tutor, HPTI, Awassa
Dr. Mengistu Asnake	BASICS office, Awassa
Ato Getachew Assefa	Member of the RTC/H, Awassa
Sr. Shurube Bosha	Public Health Nurse Tutor, HPTI, Awassa
Dr. Mulageta Betre	BASICS office, Awassa
Ato Bassamo Deka	Head of the Training, RHB, Awassa
Dr. Vincent David	BASICS Chief of Party, Addis Ababa
Dr. Fantaye	Team Leader, Health Professionals Evaluation Registration and Licensing Team, MOH, Addis Ababa
Dr. Paul Freund	BASICS, Deputy COP, Awassa
Ms. Roberta Lee	Child Survival Adviser, Africare
Ato Dawit Mengistu	Principal, HPTI, Awassa
Mr. Sjoerd Postma	BASICS, Health Planning and Management Advisor, Awassa
Ms. Linda Pursley	BESO, Awassa

APPENDIX B

**SUGGESTIONS FOR DEVELOPMENT OF THE
JUNIOR PUBLIC HEALTH NURSES CURRICULUM IN SNNPR**

**Junior Public Health Nurses Curriculum
MOH, Ethiopia, 1995.**

Suggestions on development of this curriculum for the Awassa HPTI.
J.Moore, BASICS consultant. February 25, 1997.

General Comments

Since this training is aimed at producing qualified staff with a broad public health remit, and that clinical nurses will be performing the majority of diagnostic and curative care, there is still a large emphasis within this curriculum on curative aspects. This is seen in the number of hours allocated to topics.

General topics covering social sciences, personal hygiene, first aid, anatomy and physiology, basic nursing, microbiology and parasitology, ethics, medical and surgical nursing, clinical diagnosis, pharmacology and ecology account for 336 hours of theoretical tuition time and 23 credit hours. Public health topics include primary health care, nutrition, health education, public health nursing, obstetrics/MCH/paediatrics, epidemiology, communicable disease control, environmental health, vital statistics, health planning and management and community participation are allocated 288 hours of theory and 19 credit hours.

With decentralization efforts now in process, it is important that there is some flexibility in the national curricula to allow regional training centers to adapt the program to meet specific regional needs.

The 'Nursing Process', which is the now generally accepted worldwide rationale behind nursing practise is not mentioned in the present outline and this should be reflected in the National Nursing curricula of Ethiopia, occurring as a continuing theme throughout all the subject areas. The section on nursing care lists a number of tasks to be learnt and does not focus on the concept of total care for the patient (physical, mental and emotional wellbeing).

Certain diseases have been omitted - the most critical one being Human Immunodeficiency Virus or HIV. This disease is now affecting every country in the world and all sectors of the population and needs serious efforts from the public health sector in preventing transmission. It is not listed as a topic anywhere in the curricula.

It is the opinion of the consultant that the five core areas which Public Health nurses should be focusing on are—

1. Maternal and child health services, including EPI services, TT for women of childbearing age, family planning services and school health services.
2. Nutrition, including the promotion of breastfeeding, the prevention and treatment of child malnutrition and diseases resulting from micronutrient deficiencies, - iron deficiency anemia, blindness and infectious susceptibility resulting from vitamin A deficiency,

cretinism and goitre resulting from iodine deficiency, rickets, scurvy and berberi resulting from vitamin D,C and B deficiencies.

3. Communicable disease control including investigation and preventative strategies. Key areas to focus on would be the commonest causes of morbidity/mortality resulting from diarrheal disease, acute respiratory infections, malaria, TB, vaccine preventable diseases, leprosy, HIV/AIDS infections and STDs.
4. Basic epidemiological skills and use of data for health planning and evaluation.
5. Environmental health - safety of water supplies, promotion of safe sanitation methods, vector control and reduction of other environmental hazards.

Besides technical knowledge of the above areas, skill development should focus on communication and teaching skills, especially involving community participation and motivation.

The author recommends that some of the hours allocated to theory should be used in practice at some local health facility in Awassa, since this would consolidate skills with theory, rather than leaving all practice until the end of the course.

Specific comments on each section.

Social sciences - 48 hrs allocated. Could be reduced in time. The 16hrs on ecology could be combined with the environmental health module.

Primary Health Care

No outline of topics listed here, so no comments, except that the time allocated to such a fundamental topic is brief.

Personal Hygiene

The concept of teaching this as a separate topic is rather outdated - it would be better placed within the nursing skills section or the environmental section and the time could be reduced.

First Aid

No comments, seemed comprehensive..

Nutrition

This whole module needs review and re emphasis. Breastfeeding and weaning foods need to appear as topics in their own right, rather than termed as a sub heading- 'nutritional requirements'. Likewise, malnutrition (kwashiokor and marasmus) needs to be seen as a separate category, also growth monitoring and key micronutrient deficiencies (A,B,C,D and iodine), and iron deficiency anemia. Students need to be exposed to currently used terminology relating to these conditions.

This really needs to be tied to practical application and health education.

Anatomy and Physiology

No comments.

Basic Nursing Art

As mentioned above, this is a list of tasks. There is no philosophy here of caring for the physical, mental and emotional needs of the patient, and no mention of the 'Nursing Process', involving assessment, planning, implementation and evaluation of care. There is also no description of basic needs - food, hygiene, comfort, including relief of pain, communication about procedures/care. The elements of personal hygiene could be included here.

Vital Statistics

This module should be incorporated within the epidemiology module, since it is an integral part of an epidemiology course.

Microbiology and Parasitology

The educational objective should have something to do with understanding common microbes and parasites - how they cause disease, modes of transmission, lifecycles of parasites, preventive strategies and treatment, not how to collect specimens correctly. Major diseases should be concentrated on, TB, AIDS/HIV, diarrheal and respiratory infective agents, malaria, leprosy, meningitis, the vaccine preventable diseases, common parasites, eye, ear and skin infections, rather than all infections related to a biological system. Diseases which do not occur in Ethiopia should not be included.

Ethics

A large portion of time is allocated to this topic. Perhaps it could be reduced and a subject like AIDS used as a vehicle to demonstrate ethical principles.

Medical and Surgical Nursing

Under

- Section 1.D History taking, Social history needs to be included.
- Section 2.A Skin diseases should include fungal infections, parasitic dis. e.g., scabies, allergic reactions and general information on skin rashes.
- Section 6.D Need to mention malignant conditions of the lower GI tract.
 - F Diseases of the liver should include hepatitis (different types) and amoebic liver abcess.
- Section 7.C Diseases of the thyroid gland should specifically include thyrotoxicosis, hypothyroidism and goitre.
- Section 9.C Under disorders of the throat, tracheostomy is a treatment not a medical condition.
- Section 10.A The diseases listed are not disorders of the conjunctiva. Conjunctivitis caused by bacterium/viruses including those from gonococcus and chlamydia and resulting conditions, such as trachoma. Glaucoma and cataracts are caused by other factors.
- Section 11.C Nervous system diseases should include meningitis, malaria, causes of encephalitis, tumors of the brain and chronic degenerative conditions such as multiple sclerosis.

Health Education

More time should be allocated to this important topic. Under course content, 4 hours devoted to definitions is probably too much, and minimal time should be spent on historical developments. Methods of communication and teaching are the key areas, and the last four points of the module are the most important, with more than one hour needing to be spent on social mobilization.

Pharmacology

No real comments, although the time allocated to this topic could be reduced. A practical small study on a commonly used drug could be given as 'homework' for students to do. Section 14 (xiv) Acne is not an ophthalmic condition.

Obstetrics and Gynaecology

The number of hours could be increased. Students definitely need some practical experience in this field, as it is complex.

Under educational objectives, it is the authors opinion that it is unlikely that the student would be competent enough to perform deliveries on their own. Subjects such as the fetal circulation and fetal development should be covered very simply, as this type of subject will not be of immediate practical value. Emphasis should be placed on recognition and response to complications and emergency situations which students may face in the Health Center. Breast feeding and it's benefits should be included/repeated within this section, especially concerning advice given to the mother. Common conditions, such as yeast infections (thrush), signs and symptoms of STD's should be included under ante-natal care. Complications resulting from abortions are common and the student should know the best methods of dealing with different presentations of this condition.

Family planning should be covered under a separate module, except for the need to discuss the topic with women post partum.

Care of the newborn is not included in the module and is vital. Recognition, care and treatment of premature and intra-uterine growth retarded babies, and those with birth defects should also be included in this module.

Family Health

The maternal and child aspects concerned with childbirth should have been covered in the obstetric module. This module should cover family planning and problems of special groups such as, adolescents, the elderly and the handicapped (both physical and mental). The other topics related to children should come under the paediatric section. There is a lot of confusion and repetition between the obstetric, family health, paediatric and MCH modules which need to be sorted out. Obstetric or MCH should be chosen.

Paediatrics

Care of the newborn should be in the obstetric module. This module should deal with children one month and older and include again nutrition issues such as, weaning foods, malnutrition, and micronutrient deficiencies. Also common childhood illnesses and an integrated method of

dealing with them in the health center.e.g. such as the WHO method of Integrated Management of Childhood Illnesses is a key area. Advice and health education to the mother, especially concerning recognition of illnesses and care at home is also a priority issue here.

Introduction to Epidemiology

The time allocated to this topic is short, although the field exercise of a community health profile should build basic skills in a practical setting. Otherwise the specific areas outlined are appropriate.

The vital statistics section should be incorporated here within the epidemiology module.

Communicable Diseases

Perhaps should be renamed 'infectious diseases' since the original title implies person to person transmission. Course content should include:-

Under viral diseases - Rubella, because of the potential harm to unborn children if contracted by the mother.

Under bacterial diseases - Diphtheria and whooping cough (pertussis) should be added, and relapsing fever, which is a spirochetal disease.

Under Helminthic disease, tapeworm infection should be included (perhaps only taenia saginata is relevant in Ethiopia) and schistosomiasis (s.haematobium and s.mansoni).

Under filariasis - does onchocerciasis occur in Ethiopia. If not, then perhaps remove from the list.

Dracunculiasis should also be subtitled as 'Guinea worm' by which it is more often known.

Fasciola hepatica - do any of these diseases occur in Ethiopia? If not, remove from the list.

Public Health Nursing

The first time that the Nursing Process has been mentioned.

Remaining topics are fine - may need adaptation to particular community in which the PH nurses are working.

Environmental Health

Good coverage of relevant topics. Sanitation and assessment of specific environmental/industrial hazards should be mentioned in the opening paragraph. Under water supply, related diseases should be classified into water borne, lack of water etc.

Physical Diagnosis

No comments on content other than this topic could be included in each relevant subject area i.e. medical and surgical conditions under those modules, paediatric diagnoses under the paed.s section etc. Diagnosis should be linked with the theory of the disease or condition being taught, and not as a subject in it's own right.

Health Planning and Management

Content of this module is aimed at the infra-structure of a hospital or health center. Health planning for PH nurses would appear to the author to mean the assessment of health problems in the community and the management and evaluation of services provided to address these needs, not the administrative structure within the health institution. The last sub-heading is the only one which has the above focus.

Vital Statistics

As already mentioned, this topic should appear within the epidemiology module.

Community based team training program

See plan for community experience and authors comments.

Educational Strategies

What is listed under these guidelines, is good but does not seem to be reflected in the way that the rest of the curriculum is written.

APPENDIX C

**SUGGESTED PLAN FOR THE
COMMUNITY PRACTICE ASSIGNMENT**

Suggested Plan for the Practical Community Experience for
Students of the Health Professional Training Institute - Awassa, SNNPR.

Current students in HPTI.

	Numbers of students	Numbers of Tutors	Hours of Practical Experience
Jnr Public Health Nurses	24	3	480
Jnr Clinical Nurse	16	4	480
Jnr Midwives	24	3	320 + 400
Jnr Lab. Technicians	17	2	192 + 320
Total	81	12	

Sites for community experience.

Sites for the outreach activities and the health center placements should be selected with 3 main criteria in mind.

1. The number of people reached or attending the facility must be sufficient in number to provide adequate practical experience.
2. The quality of the services at these sites must also be of a sufficiently high level to act as a 'standard model'.
3. Staff at these sites must be willing and interested in teaching and supervising students, as they will be acting as tutors for the practical portion of training. They will also contribute to the evaluation of the student's practical skills.

The assignment to NGO's facilities should be considered, since there would be no financial demand on the school, students could be exposed to good standards of health service delivery, and it would enable the school to put fewer students at each site, hopefully resulting in better one on one teaching.

The sites for the community evaluation could be urban or rural - in fact a mixture of both would be beneficial, as students would get a picture of both settings if they are required to give a small presentation in the training school when the community experience is completed. To reduce costs, it might be possible to exchange students from one training school to another e.g. students from the school in Hosanna could come to Awassa town to do an urban community assessment and students from Awassa could do the same in Hosanna, so that they were in a different environment.

Option 1. Integrated training of all junior categories of health students on practical assignment - final 8 weeks of course.

Jnr Public Health Nurses and Jnr Midwives (24 in each group) would be split into 6 groups with 4 in each group.

Jnr Clinical Nurses (16) would be split into 6 groups - 4 groups of 3 and 2 groups of 2 students.
 Jnr Laboratory Technicians (17) would be split into 6 groups - 5 groups of 3 and 1 groups of 2 students.

Summary

Group No.	1	2	3	4	5	6
Jnr PH	4	4	4	4	4	4
Jnr MW	4	4	4	4	4	4
Jnr Clinical	3	3	3	3	2	2
Jnr Lab. Tech	2	3	3	3	3	3
Totals	13	14	14	14	13	13

Tutorial staff=2 would accompany each group making totals of 15 - 16 people in each allocation.

If all groups undertake community experience at the same time, then 6 sites would be needed. If they rotate between sites, then 3 sites could be used with one change over, (3 groups out at one time) or 2 sites with 2 change overs (2 groups, then 2 groups and 2 groups).

During the first month of field experience, (starting on April 28,1997) the Public Health Nurses could be divided into 3 groups of 8 students and follow the program under the Assignment 2. of Option 2. on their own. They would join with the other students for the final 8 week practical experience in the Health Centers.

It is understood that this option is the one recommended by the MOH to build team skills, however, it is the authors opinion that the size of the joint groups of all student categories is too large, both for supervision and logistic reasons. Optimally, a group should not be larger than 8-10 students with 1 tutor.

In addition, the learning objectives for each of these groups are quite different and may not be met by carrying out the same community activities. The groups could be placed in the same communities at the same time, but carry out different exercises e.g. the PH students carry out a demographic and health profile of the community involving focus group discussions, household survey and epidemiological analysis and the Lab. Tech. students could use Health Center

25

morbidity data to carry out a microbiologic survey in a community, however the logistic and supervisory problems would still remain, and the author thinks would detract from the quality of the experience.

Supervision would be difficult because of the individual tutors areas of expertise. Some tutors could supervise several groups, e.g. the clinical nurse tutors could supervise the PH, Clinical and Midwifery students, but the Lab. Tech. Tutors would not be able to supervise the nursing students.

This would increase the number of tutors that would have to be in the field.

Since the author has been asked to comment only on the Public Health Nurses program, suggestions for this are given in more detail under Option 2, which is the authors recommended course of action.

Option 2. Training of the Junior Public Health Nurses (and other categories of students) independently.

The time allocated to the practical experience is 12 weeks in total (excluding the medical and surgical nursing experience). This could be divided in to 3 periods, each having a different focus. The PH nurses class has 24 students. They could be divided into 4 groups of 6 students each. 2 of the groups could join together for the community assessment experience while the other 2 groups were allocated to the Health Center and outreach visits. The groups could then rotate, although if the assignments were all different lengths of time, this would have to be looks at more closely.

Assignment 1. Health Center - 6 weeks.

Allocated to a Health Center for 'hands on' work experience, mentored by the clinic staff.

Objectives:-

The student becomes familiar with the overall management and daily organization of the Health Center. In addition the student knows how to:-

- Plan and implement community public health programs as designated by their supervisor.
- Plan, give and evaluate health education sessions on essential topics.
- Carry out basic history taking, examination, diagnosis, treatment and give appropriate advice to all categories of patients who attend the HC.
- Recognize serious conditions and refer the patient appropriately.
- Give appropriate First Aid treatment.
- Collect and collate daily, weekly and monthly clinic statistics, calculate the required rates and ratios and submit the monthly report to the regional office.
- Order necessary drug/medical supplies.

The **experience** should include:-

- Working in the general adult clinic with a senior member of staff and assisting with the diagnosis, treatment and health education of patients, to include,

- Working in the paediatric section, again with senior staff. Students should carry out a minimum of 30 examinations of a sick child under close supervision. Emphasis should be placed on comprehensive care and include growth monitoring, immunization status and advice to the mother.
- Students should work in the maternal section and carry out 15 ante-natal, 15 post-natal and 15 newborn examinations under supervision. If practicable, they should watch normal and abnormal deliveries and carry out 3 normal deliveries under a midwives supervision.
- Students should attend 12 family planning consultations and be instructed in all methods which are available at the clinic.
- Students should attend 12 Immunization sessions and assist with all aspects of the clinic organization.
- If TB, leprosy and malaria sessions are held, the student should attend at least 3 of each.
- Students should prepare and give 6 health education sessions on different topics to HC patients and evaluate each session.
- Students should be involved in the routine record keeping and stock ordering activities and should assist in compiling the statistics or monthly report at least once.

To assist evaluation of the health center practise, all the above activities could be recorded in a small record book carried by each student and the health center staff could sign against each task which they supervised and which was completed satisfactorily. The course tutors when working in the HC with the students would then assess each students performance on each of the above tasks and grade them.

The above schedule anticipates that the health center runs separate clinics. If all activities are integrated, then the above activities should be designated as ' number of patients seen' instead of sessions or clinics attended.

Evaluation of assignment.

1. Clinical record books are completed and signed by supervisory Health Center staff.
2. Practical tasks are performed with and assessed by training school tutor.
3. Quiz or written test given in training school at end of the assignment.

Assignment 2. Community Assessment Experience - 4 weeks.

Urban and rural sites could be used. 3 sites would be needed. Basics staff have carried out household surveys in several focus woredas, and would be willing to assist with the training of nursing students carrying out a similar exercise.

Objective would be to know how to organize and carry out a demographic and health profile with the involvement of the community and suggest and implement some achievable interventions in partnership with community members.

Experience should include:-

Meeting with key members of the community and specific groups (e.g. Peasants association) to discuss reasons for activities and gain their input related to health problems. Avoid giving unrealistic expectations resulting from students activities.

Geographic mapping of the area.

Summary of environmental aspects of the community e.g. water supply, sanitation practices, vector breeding sites, other hazards or positive characteristics.

Demographic profile of the community, including gender, age and ethnic background, education and literacy rates, main sources of income, crops or livestock farmed, goods available or manufactured locally, etc.

Assess health services which currently exist and how the community utilizes them e.g. CBD, CHA, TBA, local pharmacy.

Carry out small household survey.

Analyse results with epidemiological focus. Prepare simple tables/graphs. Calculate rates/ratios. Identify primary causes of mortality/morbidity.

Present results to community and discuss several (e.g. 5) possible interventions. Discuss and assist with implementation of these interventions.

Write up a report of experience and make a brief presentation to other students and staff of the training school.

Evaluation of Assignment.

1. Continual assessment on the assignment by the training school tutors who accompany the students.
2. Grades given for final report and presentation.
3. Questions on assignment or quizzes given in training school following the practical assignment.

Note.

The author suggests that the household surveys recently carried out by BASICS in several woredas could serve as a model for the activities outlined above. The main advantages would be that BASICS staff are available to assist the tutors with carrying out the survey and that the survey instrument has been field tested in the southern region. Another suitable alternative outline is also available from the Aga Khan University's Management for PHC series.

Assignment 3. Experience with outreach services -2 weeks.

Government sectors or NGO's who are providing outreach services (most probably in the areas of EPI or Family Planning) should be identified as potential partners to take students out on visits.

The size of groups and the timing of such visits will have to be discussed. If Government health facilities are conducting outreach services from Awassa town, 2-3 students might be able to go with them for half a day per week during the theoretical semesters.

Objectives:-

The student should understand how outreach services are planned and carried out.

They should understand the constraints which affect outreach activities.

They should gain experience with developing their communication and community mobilisation skills.

Experience should include going on outreach visits and assisting the staff in carrying out their work. The students could also be given certain exercises to complete by the end of the practical assignment, e.g.

1. Make an EPI plan for village X, with a population of 52,000 which is located 5 miles from a Health Post and 20 miles from a Health Center. Show a plan for outreach visits for 1 year. Describe how you would organize maintenance of the cold chain and the logistics supply of equipment and vaccine.
2. Prepare a Health Education teaching session on the value of immunizations, to a village women's co-operative.
3. Mrs. Abebech is a married woman 26yrs old, with 2 children aged 4yrs and 18 months. She had a history of hypertension in her first pregnancy and has been treated once for gonorrhoea which resulted in a severe episode of pelvic inflammatory disease. She lives 23 miles from a Health Center and is requesting a method of family planning to delay her next pregnancy. Describe the methods of family planning which are available in your region and how you would counsel Mrs. Abebech on the most suitable method for her. What factors are you considering and what advice are you giving to her and why.

Evaluation of Assignment.

1. Satisfactory report from staff which took the student on outreach visits.
2. Completion and grading of the set assignments.
3. Inclusion of questions on outreach activities in a written test or quiz.

Follow up activities.

Consultant

Will send teaching materials/information on epidemiology and environmental health topics.

Will be available to comment/advise by fax on continuing development of the plans outlined above.

BASICS

Will provide additional training materials.

Will investigate the availability and suitability of further training courses for the PH nurse tutors.

Staff will be available to assist with the community assessment assignment, if desired.

APPENDIX D

**COPY OF THE JUNIOR PUBLIC HEALTH NURSES
CURRICULA, ETHIOPIA, MOH, 1995**

CURRICULUM
FOR
JUNIOR PUBLIC HEALTH

**MINISTRY OF HEALTH
DECEMBER 1995**

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32

Table of Content

Page

1. Introduction	1
2. Philosophy, General objectives, Admission Criteria..	2
3. Duration of Training.....	3
4. Course Content.....	3
5. Professional Courses.....	4
6. Course Distribution in Semester.....	5
7. Field Programme.....	6
8. Content Organization	
.Medical Anthropology.....	7-8
.Ecology of Health.....	9-10
.Introduction to Psychology.....	11-12
.Primary Health Care.....	13
.Personal Hygiene.....	14
.First Aid and Accident prevention.....	15-17
.Nutrition.....	18
.Anatomy and Physiology.....	19-21
.Basic Nursing art.....	22-23
.Vital Statistics.....	24
.Microbiology & Parasitology.....	25-27
.Ethics.....	28-29
.Medical & Surgical Nursing.....	30-34
.Health Education.....	35-36
.Introduction to Pharmacology.....	37-39
.Obstetrics and Gynecology.....	40-41
.Family Health (MCH/FP/Adolescent & aged.....	42-43
.Pediatric and child health.....	44-45
.Introduction to Epidemiology.....	46-47
.Communicable Disease Control.....	48-49
.Public Health Nursing.....	50-51
.Environmental Health.....	52-53
.Physical Diagnosis.....	53
.Health Planning & Management.....	54-55
.Vital Statistics.....	56
.Community based team training Programme.....	57
9. Educational Strategies.....	58-59
10. Course unit evaluation format.....	60-61
11. Annex I	
-Job Description.....	62
12. Annex II	
-Career Structure.....	63
13. Annex III	
-Reference.....	

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33

Introduction

The new health policy gives high importance to the provision of essential and appropriate health care to the people, both residing in urban and rural areas, i.e. it has adopted the Primary Health Care Global strategy in order to bring all people in the nation closer to the goal of better access to the means of achieving healthy life.

Successful implementation of health services to the grass root level is highly dependent on availability and deployment of adequately trained health professionals.

It calls for health cadres who are trained and acquired relevant attitude, knowledge and skill to be able to respond to the health needs and demands of the people they serve.

It is by no means evident that junior clinical nurse will emerge, equipped and motivated to operate in the context of community participation, to spearhead the new thrust towards promotive, preventive, curative and rehabilitation functions / activities / in the community.

The present training Programme seems to be more concerned with assuring coverage of nursing science and its applications to primary level of care than assuring that students acquire competence in delivering the kinds of nursing services that are most needed in the target population. The setting for learning is more often hospital oriented than a health care service in the community and the content of instruction deals relatively more often with complex illnesses than with common health problems, which lead patients to seek help.

The aim of developing a new curriculum is to guarantee both types of nurses to have balanced theoretical knowledge and practical skills and attitudes adaptable to the grass root level.

The Need for Curriculum Design

The nature of the curriculum revision is based on the assessment of the community health problems that had been clearly identified from different angles in which the output of the health services and the prevailing training strategies were found to be incompatible.

Philosophy

The philosophy of the curriculum is to train and produce junior clinical nurses who are committed to the realization of principles and practices of primary health care so that they can be able to solve the existing community health problems and to play an important role on the preventive, promotive (Essential curative) and rehabilitative work. It is also to produce nurses who can give appropriate nursing care for individuals, families and communities.

General Objective:

At the completion of the programme the graduate will be able to:

1. Provide promotive, preventive, curative and rehabilitative health services
2. Assist and Identifying & solving the major health problems of the community
3. Plan, organize, implement, communicate & evaluate health services at all levels
4. Demonstrate leadership skills in working with the health team, community & sectors in the provision of health care
5. Maintain medico-legal system & practice personal & ethical values
6. Maintain health related data for their proper use in the health care delivery system
7. Recognize the impact of various factors that affect the health & development of a community

Admission Criteria

A candidate to be admitted in Junior Clinical Nursing must:-

1. be from natural sciences stream and have good performance in chemistry, biology, English and Maths.
2. Produce a high school transcript with GPA of 2.00 and above a natural science. English and Maths. A special consideration will be given for female candidates.
3. Pass entrance examination and interview set by the teaching institutions.
4. be medically fit and able to produce a recent medical certificate
5. Age 18 -- 30 yrs.
6. Sex ratio of female to male is equal 3:1

7.

✓ 1.8 special words the 3 subject

DISTRIBUTION IN SEMESTER
COURSE JUNIOR PUBLIC HEALTH NURSE

I. Cor-Courses

Ser. No	Subject	Cr. Hrs.	Pra. Hrs.	Total Hrs.
1	Social Sciences -Psychology -Sociology -Anthropology -Ecology	3	-	48
2	Primary Health Care	1	-	16
3	Personal Hygiene	1	-	16
4	First Aid & Accident Pr.	1	-	16
5	Nutrition	1	-	16
	TOTAL	7	-	112

II. Allied and Common Courses

Ser. No.	Subject	Cr. Hrs.	Pra. Hrs.	Total Hrs.
1	Anatomy and Physiology	4	-	64
2	Vital Statistics	1	-	16
3	Pharmacology	2	-	32
4	Microbiology & Parasite.	2	-	32
5	Health Education	1	-	16
6	Basic Nursing	2	-	32
7	Ethics	1	-	16
8	Clinical Diagnosis	1	-	16
9	Health Planning and Mangep.	1	-	16
	TOTAL	16	-	256

III. Professional Courses

Ser. No.	Subject	Cr. Hrs.	Pra. Hrs.	Total Hrs.
1	Public Health Nursing	3	-	48
2	Environmental Health	1	-	16
3	Medical & Surgical Nursing	2	-	32
4	Communicable Disease	3	-	48
5	Neonatal Care & Paedia.	3	-	48
6	Introduction to Epide.	2	-	32
7	MCH/FP/ Adolescent Health	1	-	16
8	Obstetric & Gynecology	2	-	32
9	Clinical Experiences	-	160	-
10	Community based practice	-	160	-
TOTAL		17	320	272

IV. Field Practice

Ser. No.	Subject	Total Hrs.
1	Community based team training Programme	320
TOTAL		320

Grand Total Theory = 640

Grand Total Practice = 640

Grand Total Theory & Practice..... 1280 hrs.

**COURSE DISTRIBUTION IN
SEMESTER**

Semester I

Ser. No.	Course Title	Cr. Hrs.	Pram. Hrs.	Total Hrs.
1	Social Sciences	3 (2)	-	32 48
2	Primary Health Care	1	-	16
3	Personal Hygiene	1	-	16
4	First Aid & Accident Prevention	1	-	16
5	Nutrition	1	-	16
6	Anatomy and Physiology	4	-	64
7	Basic Nursing Art	4	-	64
8	Microbiology and Parasitology	2	-	32
9	Ethics	(2) 1	-	32
10	Medical Surgical Nursing	2	160	(192) 32
11	Pharmacology	2	-	32
	Health education	1	-	16
TOTAL		20 (20)	160	320

48-16=32
64
80
96
112
176
240
272
288
320
336

480

Semester II

Ser. No.	Course Title	Cr. Hrs.	Pram. Hrs.	Total Hrs.
1	Public Health Nursing	3	-	48
2	Obstetric & Gynacol.	2	-	32
3	Paediatric Nursing. Neonatal care	2	-	32
4	Neonatal care	2	-	32
5	Health Education	1	-	16
6	Int. to Epidemiolo.	2	-	32
7	Comm. Diseases Control	3	-	48
8	Environmental Health	1	-	16
9	Clinical Diagnosis	1	-	16
10	Vital Statistics	1	-	16
11	Health Planning & Mange.	1	-	16
12	MCH/FP/Adolescent health	2 (2)	-	32
13	Community based pact.	-	160*	-
	Pharmacology	2	-	32
	Ecology	1	-	16
TOTAL		20	160*	320

480

*4 Weeks

320 + 160 = 480

Field Programme

Ser. No.	Course Title	Total Hrs.
1	Community Based (CBTP)	320*
2	Team Training	-
	TOTAL	320

* 8 Weeks

GRAND TOTAL THEORY = 640 hrs.

GRAND TOTAL PRACTICE = 640 hrs.

TOTAL..... 1280 hrs.

Course Title: Medical Anthropology

Credit Hours: 16

Course Description

This course is designed to equip the student with some knowledge about how people understand health, causes of health problems, their reactions to the felt health problems.

Course Objectives

- At the end of the course students will be able to:
1. Define anthropology and mention to major fields of anthropology.
 2. Explain the relationship of anthropology to other sciences and its application in health services.
 3. Describe the relationship of culture, race, and ethnicity, the family, religion, language, arts, etc. to health and health problems.

Course Content

- . History of anthropology
- . Definition of anthropology
- . Nature & scope of anthropology
- . Fields of anthropology
 - physical anthropology
 - cultural anthropology
- . Relationship of anthropology to other & sciences
- . The application of anthropology
- . Culture
 - concept of culture
 - definition of culture
 - pattern of culture
 - culture & behaviour
 - culture dynamics
 - perception & cognition
 - cultural duality & behavioural integration
- . Race ethnicity & health problems
 - ethnology & social organization
- . The Family
 - marriage & mating
 - marriage & kinship
 - monogamy & polygamy
 - bride price & dowry
 - divorce
- . Religion
 - the role of religion & human societies
 - personalized supernatural
 - the theory of spirit possessions
 - religions systems as culture all constituted defence mechanisms

- . Language
 - the role of language in culture
- . The arts
 - arts & the individual
 - arts & communication
- . Political Organization
 - nature & form of political organization
- . Anthropology & health
 - contribution of anthropology to psychosomatic
 - psychological theories of windigo "psychosis" and preliminary application of a models approach
 - clinical anthropology
 - the care component in health & healing system
 - health & health practice
 - national anthropology

Course Title: Ecology of Health

Credit Hours: 16

Course Description:-

This course provides the student with basic knowledge of ecology, interaction of man & his environment with its effect on health & disease.

Course Objectives

At the end of the course, students will be able to:

1. Define ecology and explain some ecological concepts related to diseases.
2. Describe the man-environment interaction and the effects on health and diseases.
3. Mention the major pollutants of the biosphere and explain their effects on human health, animal and plant life and non-living materials.

Course Content

1. Ecology: Introduction to subject matter definition
 - Scope
 - Application of ecology
 - Ecological model of health and disease
 - Some ecological concept related to disease
 - . concept of climax
 - . concept of ecological imbalance
2. Man-environment interaction
 - Definition
 - Genetic and environmental determinants of health
 - Effects of the physical environment of health and disease
 - Adaptation
 - Medical geography
 - Geomedicine of Ethiopia
3. Biosphere and its pollution
 - Definition of the biosphere
 - Limits of the biosphere
 - Effect of technology and wastes on the biosphere
4. Discussion of specific biosphere pollutants
 - Water pollution
 - Effects of water pollutants
 - Industrial wastes
 - Resistant objects
 - Biocides
 - Fertilizers and detergents
 - Non degradable pollutants
 - Thermal pollution
 - Mercury
 - Conservation of water resources.

5. Pesticide pollution
 - Definition of pesticides
 - Classification
 - Uses (Agriculture, health)
 - Classes of insecticides
 - . Natural (plant origin)
 - Inorganic
 - . Petroleum oils
 - . Chlorinated hydrocarbons
 - . Organophosphorus
 - . Carbonatoms
 - Ecological effects
 - . Biological magnification
 - . Persistence
 - . Biological resistance
 - . Effect on non-target fauna and flora
 - . Effect on man's health
 - . Measures to reduce hazards to the biosphere
6. Air pollution
 - Constituents of ambient air
 - Historical remarks on air pollution
 - Definition of air pollution
 - Types, sources and effects of some important air pollutants
 - Sulfur, carbons, nitrogen, ozone, metals
 - Meteorological factors in air pollution
 - . Temperature inversion
 - . Green house effect
 - . Acute air pollution episodes
 - Health effects of air pollution
 - . Acute episodes
 - . Chronic
 - None health effects
 - Implication for developing countries
7. Population issues
 - Population controversies
 - Biological population growth curves
 - Human population growth

Course Title:- Introduction to Psychology

Credit Hours : 16

Course Description

This course is designed to provide relevant information about general facts of human development and its basis, its analysis on the concept that man as a biological being is influenced decisively by the interaction of heredity and environment before and after birth.

It repeatedly alerts the students that the personality of Individual is not fixed and for all time in its direction and the level, that is, the course tries to examine the physical, mental, social and emotional aspects of development from the early stages of human life through the stages of adolescence.

Educational objective

At the end of the course the student will be able to:

1. Fully understand the basic terms, facts, and concepts dealt within the course.
2. Distinguish the stages of development in human beings and infer its implication to the real life situations.
3. Relate knowledge of psychology of personality with other concepts for a better health care.

Course content

1. Science of psychology
 - Definition
 - Method & measurement
2. Biological bases
3. Behavior inheritance & development
 - Genes
 - Heredity and environment
 - Maturation & development
4. Learning & Memory
 - Methods of learning
 - Remembering & forgetting
5. Motivation
 - Biological motives, Achievement, Affiliation
6. Emotion
 - Emotional expression, frustration aggression, conflict, stress, coping

7. Sensation, attention & perception
 - Vision & audition
 - Factors affecting perception
 - Educating the blind and deaf.
8. Social Influence
 - Conformity & obedience
 - Attitudes and Attitude change
 - Group problem-solving, leadership.
9. Personality
 - Traits & defense mechanisms
 - Tests measurement
10. Mental illness & psychotherapy
11. Community health
 - Alcoholism, sexuality, contraception, violence, pain.

45

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Course Title: Primary Health Care (PHC)

Teaching hours: 16

Course Objective:

This course is intended to provide the concept and practices of primary health care with emphasis on the implementation of the eight elements of PHC, as practiced in Ethiopia.

Course Content:

- Introduction to the course
- Historical development of primary health care
- Concept of primary Health care
- Components of primary health care

Course Title: Personal Hygiene

Credit Hours:- 16

Course Description

This course is designed to help the student midwife understand the basic principles of personal hygiene & healthy body activities so as to enable student changes previous behaviour & maintain it.

Course Objectives:-

At the end of the course the student midwife will be able to:-

- Understand & apply principles of personal hygiene
- Maintain self cleanliness
- Demonstrate safe body activities
- Refrain from hazardous health habits
- Give health education

Course Contents:-

- Introduction to personal hygiene
- Importance of personal hygiene
- Personal cleanliness
- Menstruation & menstrual hygiene (participate in activities)
- Maintenance of healthy body activities
 - .Posture
 - .Regular habits of excretion
 - .Exercise
 - .Rest & sleep
- Habit hazardous to health
 - .Smoking
 - .Drugs
 - .Drinking/alcohol/
 - .Chat
 - .Narcotics interms of drug addiction and self injection (AIDS)

Course Title:- First Aid and Accident prevention

Teaching hours: 16

Course Description

First Aid training enable the student midwife to give an effective and immediate aid or care to the injured or to the one who is suddenly taken ill. The training can also enable the nurse to foresee and avoid hazards to herself/himself and other people, both in the home and outside.

It also promotes safety awareness in general, in the home, at work, at play, on streets and highways.

If includes self help and home care if medical assistance is not available or delayed.

Course Objectives:-

At the end of the unit the student will be able to:

- A. Prevent accidental injuries and care for the injured or suddenly ill.
- B. Know life saving measures and apply the knowledge into practice.
- C. Selecting appropriate material for treatment and refer cases when need arise.
- D. Know the importance of lifting and transporting casualties safely to prevent possible complications.
- E. Equipping individuals to deal with the whole situation, the person and the injury.
- F. Distinguishing between what to do and what not to do.

Course Content

Unit One - Introduction to First Aid
 - Definition
 - Reasons for First Aid
 - Value of First Aid Training
 - General directions for given First Aid

Unit Two -Respiratory Emergencies and Artificial
 Respiration
 A. Definitions
 . Respiratory Emerge
 . Artificial Respiration

- B. Cause of Respiratory failure
 - . Anatomic obstruction
 - . Mechanical obstruction
 - . Air depleted of oxygen or containing toxic gases
- C. The breathing process
- D. Artificial respiration

Note: Positioning: demonstrate different types of positioning used during artificial respiration

- E. Prevention of respiratory accidents
- F. Safety measures during swimming and boating
- F. Choking

Unit Three: Wounds

- A. Definition
 - i. Classification of wound
 - ii. Types of wounds
- B. Common causes
- C. Symptoms
- D. First Aid for open wounds
- E. First Aid for severe bleeding:
 - types of bleeding
 - sites of bleeding
 - techniques to stop severe bleeding
- F. Prevention of contamination and infection of wounds
- G. Bites:
 - insect
 - dog
 - snake
 - human
 - animal

Unit Four - Dressing and Bandages:

- Dressings
- Bandages
- Combinations dressings and bandages
- Special pads
- Application of Bandages
- First Aid kits and supplies

Unit Five - Specific Injuries:

- A. Eye injuries
- B. Head "
- C. Neck "
- D. Wounds of the chest
- E. Abdominal injuries
- F. Back "
- G. Injuries to legs and feet
- H. Injuries to the genital organs
- I. Hand injuries - First Aid
- J. Blisters - First Aid

- Unit Six - Shock :
- Definition
 - Cause
 - Sign and symptoms
 - Treatment objectives
 - First Aid
- Unit Seven - Bone and Joint injuries :
- Definitions
 - Fractures
 - Specific fractures
 - Dislocations
 - Sprains
 - Strain
 - Prevention of Accidents resulting in skeletal & muscular injuries
- Unit Eight - Poisoning:
- Definition
 - Causes
 - Sign and Symptoms
 - Objectives of treatment of First Aid
 - Contact poisons
 - Prevention
 - Poisonous insect bites
 - Prevention of Accidental poisoning
- Unit Nine - Burns :
- Definition
 - Cause and effects
 - Classification
 - Extent and location
 - First Aid
 - Prevention of heat emergencies
- Unit Ten - Disasters:
- Definition
 - Types
 - Rescue
 - Prevention
- Unit Eleven - Sudden illness and unconsciousness
- Heart attack
 - Stroke (Apoplexy)
 - Fainting
 - Convulsion
 - Epilepsy
 - Prevention of Heart Attack & Apoplexy
 - Unconsciousness

Unit Twelve - Heat Stroke, Heat cramps and Heat Exhaustion :

- Definition
- Causes
- Heat stroke
- Heat cramps
- Heat Exhaustion

Unit Thirteen - Drugs and their Abuse:

- Definition
- Identification of drugs abuse
- Classification of drugs

Course Title:- Nutrition

Teaching Hours:- 16

Course Description

This course is expected to build the concept and importance of nutrition and possible adaptations to customary diet patterns in the community. It also attempts to provide learner with the principles and practical applications of nutrition as the defence mechanism for the body against various diseases.

Course Objectives:-

At the end of the course the student should be able to;

1. Name the source of food elements
2. Identify deficiency states
3. Demonstrate preparation of balanced diet
4. Give nutritional advice and instruct how to prepare food according to the needs of the individual family

Course Content:-

1. Introduction
 - a. Definitions of food
 - b. Food groups
 - c. Nutritional status and the magnitude of nutritional problems
 - d. Needs of growing various types of food stuffs
2. The food elements
 - a. Carbohydrates; definitions, sources, sources, function, and deficiency status (diseases)
 - b. Proteins
 - c. Fats
 - d. Vitamins
 - e. Minerals
 - f. Water: definition, source, functions, absorption and loss of water, requirements
3. The balanced diet
 - a. Composition
 - b. Preparation
4. Special nutritional requirements of pregnant women
5. Nutritional requirements of infants and children
6. Methods of nutritional rehabilitations and demonstration

Course Title: Anatomy and Physiology

Credit hours: 64

Course description

This course is designed to teach the junior clinical nurse about the structure and function of the body, so that it will give the basic knowledge to understand the medical surgical disorders & be able to give the necessary nursing care.

Educational Objectives

At the end of the course the student will be able to:

- Identify normal body structure
- Describe the functions of the various organizing systems of the body
- Apply the knowledge of anatomy & physiology to the care of healthy & sick individuals

Course Content

I. Cell, tissues, organs and systems

II. The skin

- Structure
- Functions
- Pigmentations

III. Skeletal

- Function
- Features of long bones
- Types of bones
- Division of the skeletal system
- Joints

IV. Muscular System

- Characteristics
- Functions
- Kinds

V. Circulatory system

- the blood
 - function
 - components
- origin of blood
- heart
 - location
 - heart wall
 - chambers
 - valves
 - vessels of the heart
- blood vessels
- structure of arteries, veins

53

- circulation
 - systemic
 - coronary
 - portal
 - pulmonary and fatal circulation
- The lymphatic system
 - functions
 - channels

VI. Respiratory system

- Organ involved in respiration, location, structure, blood and nerve supply, functions

Three basic process of respiration

- ventilation
 - external respiration
 - internal
- Air volumes exchanged
- Mechanism of breathing
- High altitude physiology

VII. Digestive system

- Organ of digestion
 - structures
 - functions
 - pancreas structure and function
 - liver structure and functions
 - gallbladder structure and functions
 - small intestine structure and functions
 - large intestine structure and functions
 - digestion and absorption of carbohydrates fats and proteins
 - general metabolism of carbohydrates fats, proteins and energy production

VIII. The Urinary System

A. General function of the urinary system

- Homeostasis

B. Organs

- Kidneys locations
- Ureters - structures and functions
- Bladder - blood supply and innervation
- Urethra

C. Formation of urine

IX. Endocrine

- A. Different kinds of endocrine glands
- B. Locations, blood and nerve supply
- C. Hormones release
- D. Mechanism of equilibrium

X. Reproductive system**A. Male reproductive organs**

- Location
- Structure
- Functions
- Spermatogenesis

B. Female reproductive organs

- Location
- Structures
- Functions

XI. Nervous System**A. Central Nervous System****I. The brain**

- brain stem
- cerebrum
- cerebellum
- protection and coverage of the brain
- blood supply
- cerebrospinal fluid (CSF)
- Cranial nerves

II. Spinal cord

- general features, protectional coverage, vertebral canal, meningism, functions

XII. Special Senses**I. The eye**

- structures
- the eye ball, optic nerve
- the brain
- the eye
 - physiology and sight

II. The ear and hearing

- structure (external, middle and inner)
- functions (external, middle and inner)
- physiology of hearing
- mechanism of equilibrium

XIII. The Body Fluids**A. Acid-base balance****B. Body Fluids****C. Regulation of acid-base balance**

- acidosis
- alkalosis
- buffers, respiratory regulations, and renal regulation

Course Title: Basic Nursing Art

Credit hours : 64

Course description:

This course is designed to teach junior clinical nurse to do the comprehensive care of patients by using knowledge, skill & attitude in performing the various nursing procedures.

Educational Objectives:

At the end of the course, the student will be able to:-

- explain the purpose of each nursing procedure
- develop skill in handling medical equipment
- demonstrate how to perform the various nursing procedures & mental well being of the patient
- develop the ability to work with economy of time, effort & material
- describe what precautions should be taken when performing the procedures
- participate in the rehabilitation programme of the patient

Course Content

- A. Definition of cleaning and care of equipment
 - I. care of the patient unit
 - II. various kinds of equipment and goods, glassware, liner, rubber goods - etc
 - III. care of bathrooms, toilets, utility-room, floors, seals etc.
 - IV. ventilation and lighting etc.
- B. Admitting and discharging a patient
- C. Safety and comfort measures and devices cotton rings, footboard, pittows, air rings, bed cradle, side rails, sand bags, splints, fracture boards, and back rest
- D. Lifting and moving patient
- E. Different types of bed making
 - open
 - closed
 - occupied
 - anaesthetic
 - cardiac
 - amputation etc
- F. General care of patient
 - bed bath
 - tub bath
 - back care
 - mouth care
 - giving bed pant urinal
 - perineal care
 - feeding helps patient

- G. Observation of patient
 - specimen collection
 - taking vital signs
 - charting and writing notes
 - preparing and assisting physician in examining patient
- H. Care of a patient with fever
 - tepid sponging
- I. Local application of heat and cold
 - hot water bottle
 - hot compress
 - cold compress
 - ice bag
 - site bath
- J. Enemas
 - cleaning enema
 - retention enema
 - rectal washout
 - insertion of flatus tube
- K. Catheterization
 - catheterization by plain catheter
 - catheterization by indwelling catheter
- L. Administration and medication by
 - mouth
 - interdermal
 - hypodermic
 - intramuscular
 - intravenous
 - intravenous infusion
 - blood transfusion
 - setting for cut down on veins
 - administration of oxygen
 - sternal halation
- M. Pre- and post-operative care
 - consent
 - general check-up
 - immediate post operative care
 - breathing and coughing exercises
- N. Physiology of wound healing
 - dressing clean wound
 - dressing septic wound
 - dressing with drainage tube
 - wound irrigation
 - application of bandage binders
 - incision and drainage
- O. Clips application and suturing
 - removal of clips and sutures
- P. Care of the terminally-ill and care of the unconscious patient
- Q. Post-mortem care

Course Title: Vital Statistics

Credit Hours: 16

Course Objective:

- The Course is intended to give a back ground knowledge on vital statistics

Course Contents:

- Introduction to the course
(the aim of the statistical method)
- Definition of terms
- Collection of statistics information
(Questioners, house sampling)
- Presentation of statistics
(frequency distribution, statistical tables, graphs, frequency diagrams)
- Measures of central tendency
(mean, median, mode)
- Demographic methods
 - definitions, source of demographic data
 - population pyramids
 - census, definition, type
- Rates, Ratio and proportion
- Environmental health survey

Course Title: Microbiology & Parasitology

Credit Hours: 32

Course Description

- Microbiology is a key subject in the study of infectious diseases. Nurses as well as other medical and Public Health personnel involved in preventive and/or curative medicine must have sound working knowledge of the subject.

Educational Objectives:

Know the type of specimens preferred for each type of clinically suspected disease, and the special precautions that should be followed in the collection of specimens and their transport to the laboratory.

Course Content

Unit I

- Introduction
- Definition of micro-organisms
- Short historical notes, eg. dispute on "spontaneous generation"
- The germ theory of disease and other highlights that will illustrate the importance of bacteriology in the study of infectious diseases

Unit II

- sterilization and disinfection
- definition
- principles and importance in nursing
- Commonly used techniques washing, boiling, drying and moist heat, chemicals and radiation

Unit III

- Usefulness and harmfulness of bacteria and their distribution in nature
- Usefulness of bacteria to man in nitrogenous cycle, the carbon-oxygen cycles, sulfur cycles, as well as in the industrial production of substances such as alcohol, vinegar, antibiotics and several other products
- Harmfulness of bacteria, i.e. in causation of various diseases to all living things
- Distribution in nature i.e. in water, soil, air, in or on animals, including man.

Unit IV

- Host parasitic interrelationships
 - Bacteria as normal flora on or in the host (man), i.e. on skin, in the mouth and respiratory tract, genital tract and other parts of body.
 - Parasitic factors that affect the host-parasite relationship, i.e. what protects the host and what prevents the harmfulness of the parasite i.e. immunity, nutrition, age, occupation, general resistance, and other non-specific factors.
- Environmental factors that affect the host-parasite relationship by protecting or harming both the host and the parasite, i.e. geographical, cultural and socio-economical factors.

Unit V

- Topical and Systemic infections
 - Bacterial infection of skin
 - " " " respiratory tract
 - " " " gastro-intestinal tract
 - " " " blood
 - " " " genito-urinary tract
 - " " " CNS
 - " " " bones and joints

Unit VI

- Chemotherapy
 - Developmental and principles of chemotherapy i.e. selectivity, efficacy
 - Types of antibacterial agents, their uses and limitations eg. those effects i.e. against gram positive bacteria may not affect gram negative ones or vice versa
 - Consequences of misuse and widespread use of drugs (i.e. selection pressure in favor of multiple drug resistant bacteria).

Unit - VII

- Diagnostic procedures
 - Instruction of specimen collection with emphasis on aseptic techniques, immediate delivery of specimens to the laboratory and other precautions.
 - Description and demonstration of specimen collection procedures and diagnostic techniques

Unit - VIII

- Rickettsia and Viruses

- Introduction to important rickettsia and virus (as causative agents of typhus, poliomyelitis, measles, yellow fever, common cold, hepatitis etc).

Unit - IX

- Discussion of the topics covered vis-a-vis the objectives outlined
- Student feed back regarding deficiencies in the topics covered in relation to the objectives set for
- Attempt to cover deficiencies
- Immunity and susceptibility against micro-organisms

Course Title EthicsCredit Hour: 16Course Description

The course is intended to help the student nurse to develop the right attitude and understand the values of human life and ethical principles involved in caring for the patient in the hospital, and in the home as well as in working areas Industry, school, prison...)

Educational Objectives:-

At the end of this course the student will be able to:-

- Know fundamental responsibilities of junior clinical nurse who are to conserve life, alleviate suffering & promote health
- Maintain at all time the highest standard of care and professional conduct
- Sustain confidence in the methods of health team
- Cooperate & maintain harmonious relation-ship with members of the profession & accept norms of the community where she/he works

Course Content

Unit One - Introduction to Nursing Ethics

- A. Definition of Nursing
- B. History & Development of Nursing
- C. Definition of Ethics
- D. Definition of profession

Unit Two - Interpersonal Relationship with

- A. Patient, his family & visitors
- B. Staff members
- C. Community

Unit Three - Rights and obligations of Nurses

- A. Honesty
- B. Dependability
- C. Kindness and firmness
- D. Humanity and justice
- E. Maintaining good rapport
- F. Adaptability
- G. Cooperation
- H. Confidentiality
- I. Ethical dilemmas in decision - making
- J. Responsibility and accountability to the profession respect and exercise Florence Nightingale's pledges

- Unit Four - Components of Unethical Behaviour
- Unit Five - Patient's Bill of Rights (Human Rights)
- Unit Six - Ethiopian Code of Law (Ethiopian Medical-legal issues)
- Unit Seven - Ethiopian Civil code
 - Penal code

Course Title: Medical & Surgical Nursing

Credit hours: 80

Course Description:

This course is designed to teach junior clinical nurse to take proper history, identify courses & clinical manifestation of diseases, medical & surgical treatments and general & specific conditions. Throughout this course promotion of health, prevention of diseases & alleviating of suffering should be emphasized.

Educational Objectives:-

At the end of the course the student will be able to:

- Carry out interviews & obtain patients' history
- Perform physical assessment & identify patients problem & reach a diagnosis
- Give appropriate treatment & help patients to meet the physiological, psychological & psychosocial needs
- Recognize limitations & refer patients to the appropriate health institution on time
- Teach individuals, families & the community about the relationship between living habits and the occurrence of various diseases

Course Content

I. Introduction to medical and surgical nursing

A. Definition

B. General observation of patient

- Physical condition
- Emotional status
- Vital signs

C. Physical diagnosis

D. History taking

- General
- Medical
- Surgical
- Obstetrical
- Present illnesses

II. Disorders of the skin

A. Disease condition of the skin

- Dermatitis
- Eczema
- Boils (furunculosis)

B. Burns

- Causes
- Degree
- Treatment

III. Musculo-Skeletal Disorders

I. Joints and connective tissue diseases

- Arthritis
- Osteomyelitis
- Bursitis

IV. Disorders of the Respiratory System

- Bronchitis
 - Acute
 - Chronic
- Pneumonia
- Asthma

Note: Definition, Signs & Symptoms, treatment)

V. Disorders of Cardio-Vascular System

A. Peripheral vascular diseases

- Hypertension
 - types
 - causes
 - predisposing factors
 - signs and symptoms
 - treatment

- Hypotension
- causes
- predisposing factors
- signs and symptoms
- treatment

B. Blood dyscrasia

I. Anaemia

- Type of anaemia
 - nutritional deficiency
 - hemorrhagic
 - aplastic
 - hemolytic

- II. - Causes of anaemia
- Clinical manifestations
- Treatment
- Nursing care of anaemic patients
- Prevention of anaemia

VI. Gastro-Intestinal Disorders

A. Diseases of the mouth and related structures

- stomatitis
- gingivitis
- dental cares

- parotitis

B. Oesophageal diseases

- Achalasia

C. Gastric disorder

- Gastritis

- acute

- chronic

- Peptic ulcer diseases

- Pyloric stenosis

D. Disorders of the lower G.I.

- Ulcerative colitis

- Intestinal obstruction

- Appendicitis

- Peritonitis

- Hernia

- Nursing of a patient with colostomy

E. Disorders of the rectum

- Hemorrhoids

- Anal abscess

- Nursing care of patient undergoing for hemorrhoidectomy and anal abscess

F. Diseases of the liver

- Liver abscess

- Liver cirrhosis

G. Diseases of the gallbladder

- Cholecystitis

- Cholelithiasis

H. Disorders of the pancreas

- Pancreatitis

VII. Disorders of the Endocrine system

A. Diagnostic tests

- Fasting blood sugar (FBS)

- Urine test for glucose

- B. Disorders of pancreas
 - Diabetes mellitus
 - incidence
 - causes
 - predisposing factors
 - Classification
 - Treatment
 - Complication
 - ketoacidosis
 - Insulin shock
 - Nursing care and management

C. Disorders of the thyroid glands and nursing responsibilities

VIII. Disorders of the Genito-Urinary Tract

A. Diagnostic Test

- Urinalysis
- Urine culture

B. Disorders of the urinary tract

- Urethritis
- Cystitis

C. Diseases of the kidney

- Glomerulonephritis
 - acute
 - chronic
- Pyelonephritis

D. Obstruction of the urinary system

- Hydronephritis
- nephrosis
- Kidney stones
- Paraphimosis
- Orchitis
- Hydrocele

IX. Ear, Nose, throat (ENT)

A. Disorders of the ear

- Deafness and care of the deaf
- Impaction of serum (wax)
- Middle ear
 - otitis media

B. Disorders of the nose

- nasal polyp

- C. Disorders of the throat
 - Pharyngitis
 - Tonsillitis
 - Laryngitis
 - Tracheostomy

- X. Disorders of the Eye

- A. Diseases of the conjunctiva
 - Trachoma
 - Glaucoma
 - Cataract

- XI. Disorders of the Neurological system

- A. Diagnostic tests, procedures and Nursing responsibilities
 - Lumbar puncture (LP)
 - CSF - analysis

- B. Neurological manifestation
 - Headache
 - Neurological pain
 - Epilepsy

- C. Disorders of the nerves system
 - Cerebral vascular accident (CVA)
 - Bell's palsy
 - Spinal cord trauma
 - Disc prolapse

Course Title: Health Education

Credit hours: 16

Course Description:

The course provides students with the basic knowledge and skills relevant to communication activities. Principles of communication, theories of learning, social psychology, group dynamics, principles and methods of health education, operational research material/ message development techniques will be addressed.

Educational Objectives:

At the end of the course the student will be able to:

1. state the importance of information, education and communication activities for promoting and maintaining better health
2. discuss the steps involved in health education planning and implementation
3. demonstrate the importance of studying knowledge, attitude and behaviors (KAP) of individuals and communities, as well as their culture and values as social organizations, in the designing of IEC interventions
4. appreciate the value of operational health education/ communication skills
5. design, develop and Pre-test messages/ materials
6. identify the appropriate methods and media for distributing and disseminating messages and materials
7. teach the community about the common local health problems using the appropriate teaching aids

Course Content:

1. Health education (4 hours) definitions
 - a. definitions
 - b. historical developments
 - c. objectives
 - d. health education in relation to PHC approach

69

2. Methods and techniques of health education (6 hrs.)
 - a. interviewing techniques
 - b. the APEAC approach (ask, praise, encourage, advise, check)
 - c. other health education methods
3. Audio-visual methods and materials in health education (4 hrs.)
 - a. characteristics of audio-visual aids
 - b. mass media
4. Communication materials design, development and Pre-testing
5. Social mobilization (1 hr.)

Course Title: Introduction to pharmacology

Credit Hours - 32

Course Description:

This course is designed to help the student acquire pharmacotherapeutic knowledge, skill and attitude about the action of drug in the body, the correct range of dosage, the method of administration, the symptoms of over dosage and toxicity, as well as the abnormal reactions that may arise from individual differences in response.

Educational Objectives:-

At the end of the course the student will be able to:-

- identify the action and effects, indications, contra indications and side effects of the community used essential drugs
- Administer drugs correctly according to the rules of medication and take necessary measures to counter act toxic effects of drugs
- Show an understanding of the problems associated with the use of narcotic drugs & their control
- Advice coworkers & the public about the correct use of medicine

Unit I

Introduction

- Orientation to pharmacology
- Application of pharmacology in nursing
- Drug names and sources of drugs
- Pharmaceutical dosage forms
- System of measurements

Unit II

Basic Principles of Pharmacology

- Adverse drug reactions
- Drug interactions
- Sources of individual variation in drug responses

Unit III

Gastrointestinal Drugs

- Drugs for peptic ulcer diseases
- Laxatives

Unit IV

Anti-inflammatory drugs

- Aspirin-like drugs
- Drug therapy of rheumatoid arthritis and gout

Unit V

- Nutrients and Related Drugs
- Vitamins
- Enteral and Parenteral Nutrition

Unit VI

Chemotherapy of Infectious Diseases

- Drugs that weaken the bacterial cell wall: Penicillin and Cephalosporin
- Bacteriostatic inhibitors of protein synthesis
- Bacteriocidal inhibitors of protein synthesis
- Antimycobacterial agents: Drugs for Tuberculosis and leprosy
- Antifungal agents

Unit VII

Chemotherapy of Parasitic Diseases

- Anthelmintic
- Antiprotozoal drugs (antimalarial)

Unit VIII

Antiseptics and Disinfectants

- General considerations
- Properties of individual antiseptics and disinfectants

Unit IX

Peripheral Nervous system Drugs:

- Adrenergic drugs

Unit X

Central Nervous System Drugs

- Drugs for epilepsy
- Analgesics and antagonists
- Local anesthetics

Unit XI

- Renal and Cardiovascular Drugs
- Diuretics
- Drug therapy of hypertension
- Drug therapy of angina pectoris
- Antiarrhythmic Drugs
- Drugs for deficiency anemia

Unit XII

- Endocrine drugs
 - Antidiabetic agents
 - Drugs for thyroid disease
 - Contraceptive agents
 - Uterine stimulants and relaxants

Unit XIII

- Respiratory Tract Drugs
 - Nasal decongestants, antitussive and related agents
 - Drugs used to treat asthma

Unit XIV

- Ophthalmic Drugs
 - Acne and its treatment
 - Miscellaneous dermatologic drugs

Unit XVI

- Essential drugs in Ethiopia

Course Title:- Obstetrics and Gynecology

Credit Hours: 32

Course Description:

This course is designed to help the student nurse acquire knowledge, skill and attitude in the care of mothers during pregnancy, labour and delivery and post-partum period.

Educational Objectives:-

At the end of the course the student will be able to:

- assess pregnant woman, give antenatal care and conduct normal deliveries
- recognize risk factors early and promptly refer cases which are beyond his/her scope
- understand about the different reproductive health problems to give appropriate nursing care

Course Content

A. Obstetrics

1. Aims of obstetrics
2. Anatomy of female pelvis, fetal skull
3. Lie
4. Position
5. Presentation
6. Normal Pregnancy
 - a. fetal development
 - b. fetal circulation
 - c. placental circulation
 1. conception
 2. physiology of pregnancy
 3. signs and symptoms of pregnancy
 4. antenatal care
 5. complication of pregnancy, high risk mother and chronic illness
7. Normal Labour and delivery - immediate care of the mother and baby
 1. Definition
 2. Causes of Labour
 3. Signs of Labour
 4. Mechanisms and stages of Labour
8. Management of normal Labour
9. Post-partum care
10. Early rupture of membrane
11. Episiotomy
12. Harmful practices
13. Multiple pregnancies
14. Family planning
15. Abortions

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74

16. Complication of Labour

- malpresentation
- post-partum hemorrhage
- prolonged Labour
- cord prolapse
- retained placenta
- ruptured uterus
- lacerations
 - a. cervical
 - b. vaginal
 - c. perineal

17. Complication of the puerperium

- breast complications
- fistula
- sub-involution

B. Gynecology

1. Abnormalities of menstruation
2. Congenital abnormalities of genital tract
3. Disorders and infections of:
 - Vulva
 - Vagina
 - Cervix
 - Uterus
 - Fallopian tubes and ovary
4. Incontinence
5. Ectopic pregnancy
6. Contraceptive
7. Infertility

Course Title: Family Health, (MCH/FP, Adolescent & aged)

Credit Hour: 32

Course Description:

The course focuses on the organization and management of maternal and child health services, in order to enable the students to establish and effectively carry on MCH activities in their area of assignment. The different components of maternal and child health are examined giving emphasis to the concept of integrated services.

Educational Objectives:

At the end of the course the students should be able to:

1. define and name the target groups in MCH
2. outline objectives of MCH programs
3. outline major components of MCH programs
outline major causes of maternal and child morbidity and mortality and their control measures
4. Outline major causes of maternal and child morbidity and mortality and their control measures
5. describe and implement school health activities
6. outline services and their delivery strategies
7. identify high risk groups among mother and children and take prompt measures

Course Content:

- Definition and target groups for maternal and child health programs
 - Historical developments of MCH services
 - Objectives and principles of MOH
 - Components of MCH programs
1. Maternal care
 - a. Family planning
 - b. Antenatal care and immunization
 - c. Delivery services
 - d. Post-natal care
 - e. Home visits
 2. Child care
 - a. Sick baby clinics
 - b. Well baby clinics
 - c. Growth monitoring and nutritional rehabilitation
 - d. Oral rehydration therapy
 - e. Expanded program on immunization

3. ~~school~~ health services
4. Patient flow pattern in MCH clinics
 - Common causes of maternal morbidity and mortality
 - Safe motherhood
 - Risk approach in maternal health
 - Primary health care and MCH services:
 - Role of community health workers in promoting MCH
 - Family planning
 1. Rationale
 2. Objectives
 3. Types ^{of} traditional and modern methods
 4. Organization and implementation of programs
 5. Evaluation of family planning programs - CPE, etc.
 6. Barriers to family planning
- Common causes of infant and childhood mortality
 1. perinatal
 2. neonatal
 3. post-neonatal
 4. infant
 5. childhood
- Childhood nutrition and growth monitoring
- School health services: objectives and components
- Expanded program on immunization
 2. epidemiology of the EPI ~~target~~ diseases
 3. objectives and targets
 4. strategies
 5. schedules
 6. coverage rates
 7. barriers
- Adolescent Health needs
 - Physical & mental hygiene
 - Reproductive health
 - Occupational safety
- Geriatrics
 - Health problems of the aged
 - Geriatric Nursing Care

Course Title:- Pediatric & Child Health

Credit Hrs.:- 32

Course Description

This unit is designed to equip students with adequate knowledge, skills, and attitude to identify and manage the normal and complicated conditions of newborns & infants, plan and implement health education in preventive pediatrics.

Course Objectives

At the end of the course the student will be able to:-

1. Evaluate and classify the newborn
2. Describe the physiological and pathological changes in the newborn
3. Demonstrate knowledge, skills and attitudes in the management of the newborn
4. Support the mother in all activities related to good care of the newborn
5. Supervise and teach the mother including demonstration of all activities related to the newborn
6. Know the normal growth and developments in nutritional psychosocial needs of children at different ages

Course Contents

1. Neonatology:

- A. Classification of newborn
- B. The normal neonate
 - Definition of normal neonate
 - Characteristic of normal neonate
 - Physiology changes after birth
 - Management and care of normal neonate
 - Immediate
 - Daily
- C. Common neonatal problems
 - Asphyxia
 - Sepsis
 - Hypothermia
 - Respiratory distress
 - Neonatal jaundice
 - Congenital malformation
 - Injuries/ Traumas
 - LBW and Preterm
 - Hemorrhagic Disorder

Management of Neonatal Problem

- a) resuscitation and its technique
- b) use of oxygen
- c) use of incubators
- d) feeding

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78

- D. Feeding
 - Breast feeding
 - GIT
 - Calorie requirement
- E. Prevention and care of hypothermia
- F. General care
 - Observation, vital sign, weight, bath etc
- G. Parental drug and fluid administration
- H. Taking laboratory samples
- I. Assisting physicians in performing diagnostic therapeutic procedures
 - eg. blood exchange transfusion
- J. Recording and reporting
- K. Supervision of work
- L. Teaching health education relating to the neonate
- 2. Preventive Pediatrics
 - a. Principles of child health
 - b. The right of the child
 - c. Child health in Ethiopia
 - d. Nutrition
 - In relation to breast and supplementary feeding
 - Prevention of nutritional disorders (rickets)
 - e. Immunization
 - f. Growth and development of (milestones) Infant
 - g. ORS therapy
 - h. Harmful traditional practice which affects infants
 - i. Health education in relation to preventive aspect

Course Title: Introduction to Epidemiology

Credit Hrs.: 16

Course Description

The course deals with basic concepts of descriptive and analytic epidemiology. It will enable students to choose appropriate study designs for collection of data and hence to identify major health problems prevailing in the communities, hence to draw up action plans.

Educational objectives

At the end of the course the student will be able to:

1. Locate and utilize the different sources of health information, hence to identify priority problems.
2. Utilize methods of descriptive and analytic epidemiology to look for associations and/or cause-effect relationship of different health and related problems.
3. Define the basic health characteristics of a community and make use of the data obtained to develop a community health profile and draw an intervention.
4. Define epidemics and the steps involved in the investigation, management and surveillance.

Course content

1. Introduction
 - . Definitions
 - . Historical developments
 - . Uses of epidemiology
 - . Ratio, proportion and rate
 - . Levels of prevention
2. Sources of data and methods of data collection in community health:
 - . Interviews
 - . Observations
 - . Health institution reports and records
 - . Census
 - . Morbidity surveys
 - . Literature review
3. Descriptive epidemiology
 - . Types of descriptive studies, definitions and uses
 - . Place, person and time
 - . Measure of disease frequency and mortality
 - prevalence rate
 - incidence rate
 - measure of mortality

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80

- . Health status indicators
 - . Methods of conducting surveys
 - . Cross-sectional vs. longitudinal surveys
 - . Community diagnosis
4. Epidemic investigation, management and surveillance
5. Principles of epidemiology of infectious diseases
- . Agent-host-environment relationship
 - . Components of infectious disease process
 - agent
 - reservoir
 - portal of exit
 - mode of transmission
 - portal of entry
 - susceptible host
 - . Spectrum and variation in severity of illness
 - . Principles of control of communicable disease.

Course Title: Communicable Diseases

Credit Hour: 48

Course Description:

This course is designed to teach the junior clinical nurse student the factors related to common communicable diseases, causes, method of transmission, diagnosis, signs and symptoms, epidemiology, prevention, treatment, vulnerability of pathogenicity.

Educational Objectives:

At the end of the course the student nurse will be able to:-

- name and define the common communicable diseases
- recognize the signs and symptoms, diagnose and treat common communicable diseases
- apply methods of prevention in nursing measures for the common communicable diseases

Course Content:-

I. Introduction

- Definition of
 - infection
 - routes of infection
 - contagiousness
 - vulnerability
 - pathogenesis
 - carrier
- Interaction between
 - man
 - causative agents
 - environment
- Introduction to epidemiology
- definition
- purpose

II. Viral Diseases

- influenza
- measles
- polio
- yellow fever
- mumps
- hepatitis
- encephalitis
 - Rabies
 - Trachoma
 - HIV

III. Bacterial Diseases

- Tetanus
- Tuberculosis
- Pneumonia
- Meningitis
- Shigellosis
- Typhoid fever
- Cholera
- Impetigo
- Erysipelas
- Leprosy
- Anthrax
- Carbuncles
- Bacterial conjunctivitis
- B. Hemolytic Street infection
- Gonorrhoea
- L.G.V.
- Chancroid
- Relapsing fever
- Syphilis

IV. Rickettsial disease

- Typhus

V. Protozoal Diseases

- Amebiasis
- Giardiasis
- Malaria
- Trichonomiasis
- Leishmaniasis
- Trypanosomiasis

VI. Helminthiasis

- Classification of helminths
- Intestinal nematodes
 - Hook worm
 - Ascaris
 - Strongyloides
 - Trichuris
- Filariae
 - Onchocerciasis
 - Calculus
 - Wuchereria bancrofti
- Tissue invading nematodes
 - Visceral & cutaneous larva migrans
 - Druncuculosis
- Fasciola Hepatica
 - Cestode
 - Tenet
 - Hydatid disease (Ichino coccus)

Course Title:- Public Health Nursing

Credit Hrs.:- 3

Course Description

This course is designed to prepare the junior public health nurses for an effective practice in community oriented nursing by providing the students with the knowledge skills and various behavioural changes.

Course Objectives:-

- At the end of the course the student will be able to:-
- Define health and public health and identify the determinant factors of health and ill health
 - Apply the principles of nursing process in public health nursing
 - Render community health activities

Course Content

1. Introduction to public health nursing
 - definition of terms
 - goal of public health nursing
 - the role and responsibility of junior public health nurse in community nursing
2. Community Involvement
 - assessment of community needs and expectations
 - cultural believes and values
 - health habits and practices
3. The Nursing Process in Public Health Nursing
 - maintaining working relationships
 - assessing the health and nursing situations
 - goal setting for health and Nursing Situations
 - implementing
 - evaluating
4. Basic Public Health Services in the Community
 - A. Nursing services int he home activities
 - antenatal visit
 - newborn visit
 - visiting people with social problems
 - visiting aged people
 - Health Education
 - curative
 - preventive
 - promotive
 - rehabilitative

- B. Nursing service in the school
 - organizing health committee in the school
 - checking cleanliness of school children (personal hygiene)
 - teaching first aid for choosen group
 - early detection of health problems /Health assessment of the school
 - immunization programme
 - health education
 - counselling

- C. Nursing Services in the prison
 - checking cleanliness of prison
 - hygiene of prisoners
 - health education
 - detection of communicable diseases
 - checking for nutrition deficiency
 - counselling

- D. Nursing services in the Industry
 - identification of nursing needs
 - teaching first aid
 - prevention of hazards or accidents
 - adequate care and rehabilitation for occupational injury and illness
 - emergency care
 - counselling

- 5. Keeping records and reports
 - functions of record and reports
 - care finding
 - recording
 - reporting
 - follow-up

Course Title: Environmental Health

Credit hours: 16

Course Description:

The course deals with general concepts related to environmental control activities relevant to health promotion and disease prevention. It focuses on the control of water supply, control of insects and rodents, food hygiene and housing. It also aims at health maintenance in the individual, family and community through proper use and application of the rules of hygiene.

Educational Objectives:

At the end of the course the student should be able to:

1. apply the basic principles of environmental control
2. instruct individuals, groups, and communities on proper human excreta and refuse disposal, water source protection and storage
3. define personal hygiene and hygiene in general
4. teach individuals, families and community the importance of personal and community hygiene

Course Content

1. Water supply (3 hrs.)
 - a. importance of water
 - b. water and related diseases
 - c. sources of water
 - d. protection of water sources
 - e. water treatment
2. Waste collection and disposal (6 hrs.)
 - a. excreta and sewage disposal
 - i. public health importance of excreta disposal
 - ii. principles of excreta disposal
 - iii. faecal-borne diseases
 - iv. disposal methods
 - b. refuse collection and disposal
3. Vector control (Arthropods and rodents) (3 hrs.)
 - a. insects
 - i. introduction to insects of public health importance
 - ii. identification of locally important insect vectors
 - iii. control methods
 - b. rodents
 - i. public health and economic importance of rodents
 - ii. identification of common rodents
 - iii. control methods

4. Food sanitation (2 hrs.)
 - a. food and diseases
 - b. sanitation of meat and milk as well as their products
 - c. sanitation of other food and beverages
 - d. inspection of eating and drinking establishments

5. Housing and sanitation of public places (2 hrs.)
 - a. location and sitting space requirements
 - b. overcrowding and diseases, ventilation
 - c. lighting, heating, sanitation facilities

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87

Course Title:- Physical Diagnosis

Teaching Hours: 16

Course Description

This course is designed to enable student midwife, acquire. Knowledge skill & attitude in assessing patients in order to reach to a diagnosis & manage cases which are with in their capacity.

Course Objectives:- At the end of the course the student will be able to:-

- Carry out interviews & obtain patients history
- Perform physical assessment, & identify patient problem & reach in diagnosis
- Recognize limitations and refer patients to the appropriate health institution on time

Course Contents

1. Lectures

- a. Introduction to clinical medicine and the ward set up
- b. History taking
- c. Techniques of physical examination
- d. Respiratory system
- e. Cardiovascular system
- f. Abdomen and Genitourinary system
- g. Central Nervous system
- h. Breast and lymphatic system
- i. Musculoskeletal system

2. Practical

- a. First Week
 - i. Patient interview demonstration
 - ii. Simulation (patient doctor role play by the students)
- b. Second and Third week ward attachment
 - i. History taking
 - ii. Physical Examination
 - iii. History writing
 - iv. Case presentation
 - v. Case report

Course Title: Health Planning & Management

Credit hours: 16

Course description:

This course is deals with the concepts and principles of health management so as to efficiently use resources, plan and implement clinical services.

Educational Objectives:

At the end of the course the learner will be able to:

1. Explain the concepts of nursing service administration
2. Observe the regulations and policies of the organization
3. Describe the functional relationship of the hospital staff
4. Explain the various levels of nursing personnel working as a team in the care of the patients
5. Organize the work according to available resources
6. Participate in teaching, guiding, supervising and evaluating of students and other staff
7. Help the nurse to develop good administrative organization through which all nursing personnel function knowing what their duties are and know how to perform

Course Content

- Nursing Administration/ Management
 1. Definition of
 2. Administration/ Management
 3. Nursing administration
 4. Organization
- Philosophy and concept of nursing administration
- Organizational chart and administration hierarchy
- Organizational structure of the hospital
 1. Definition of a hospital
 2. Types of hospitals
 3. Functions/ purposes of hospitals
 4. Organization of hospitals for quality care
- The functional relationship of hospital staff and the responsibilities of each of them:
Hospital Administrator, Director, Matron/ Assistant Matron, Supervisor, Head Nurse, Senior nurse, staff Nurse, Student Nurse, Health Assistant, Technician, Social worker, Pharmacist, Sanitarian
- The relationship between the different units of hospitals for efficient service:
 1. Definition of nursing service
 2. Scope of nursing service
 3. Purpose of nursing service
 4. Process of nursing service

89

- Two distinct lines of authority: administration and clinical
- Major function of management
 1. Planning
 2. Organizing
 3. Staffing
 4. Directing
 5. Co-ordinating
 6. Evaluating
 7. Reporting
- The relationship between the different units of hospitals for efficient service
 1. Definition of ward/unit
 2. Function of each ward/unit
 3. Relationship between units
- Managing the Health or nursing service
 1. Establishing policies
 2. Establishing communication mechanism
 3. Staffing pattern for better patient care
 4. Individual and team assignment
 5. Orientation of new staff
 6. Staff motivation
 7. Budgeting personnel/finance
- Brief introduction on principles of management and leadership styles
- Job description of nurses, supervisors, matrons
- Delegation of authority and responsibility
- Public Health Services Organization
- Factors involving in good management
- Health management systems: open versus closed systems, management of an open system, role of national and regional health policies, organization of health services
- Introduction to Health and related Socio-Economic policies
 - National Health policy
 - Health sector strategy
 - Health sector program
 - Population policy
 - Social policy
 - Education policy
 - Economic policy
- Introduction to Health and related social policies
 - " " Sector strategy
 - " " program
- Intersectoral Relation in Health
 - Health Vs Education
 - Health Vs Agriculture
 - Health Vs Trade & industry
 - Health Vs population affairs
 - Health Vs Gender

Course Title: Vital Statistics

Teaching Hours: 16

Course Objective:

- The Course is intended to give a back ground knowledge on vital statistics

Course Contents:

- Introduction to the course
(the aim of the statistical method)
- Definition of terms
- Collection of statistics information
(Questioners, house sampling)
- Presentation of statistics
(frequency distribution, statistical tables, graphs, frequency diagrams)
- Measures of central tendency
(mean, median, mode)
- Demographic methods
 - definitions, source of demographic data
 - population pyramids
 - census, definition, type
- Rates, Ratio and proportion
- Environmental health survey

Course Title: Community Based Team Training Programme

Credit hour: 320 / 8 weeks/

Course Description:

This course is designed to help the junior clinical nurse student achieve knowledge, skill and attitude at the communities field through practicing with the team, so that he/she can develop team spirit as well as exposure in the actual situation.

Contents:

Performs the following activities while at the rural field practice sites:

- community diagnoses polyclinics (health centers, health posts)
- integrated MCH/FP activities
- health institution supervision & management
- participates in epidemic control activities
- out reach activities like EPI'
- participates in the control of communicable diseases
- health education within the institutions and the communities
- participates in other intervention programmes undergoing in the catchment area
- performs case presentations, tutorials, seminars, duty emergency management, deliveries and other group discussion and assignment
- render inpatient care in health institutions
- record and report health care activities
- participates in training of lower level health professionals in the setting

Educational Strategies

Educational strategies for teaching different health professionals should be student-centered, two-way communication, problem solving, team-approach, community-based and using different teaching aids in order to change the behavior of the student.

Methods of Teaching

The whole purpose of education is to bring about a change in behavior through learning.

In order to ensure the desired changes in student behavior, it is to use a variety of teaching methods depending on the needs of the students, the nature of the subject and the ability of the teacher.

1. Lecture/ discussion
2. Group discussion
3. Demonstration & return demonstration
4. Field trip or observation visits
5. Role play
6. Assignment
7. Clinical teaching (bed-side teaching)
8. Case study
9. Using different teaching aids

Assessment of student performance

- I. Theory
 - Formative
 - short tests - written/oral
 - assignments
 - mid-semester examination
 - Summative
 - End semester
 - Written examination
 - Oral examination

2. Practical
 - Formative
 - assignments
 - discussions
 - clinical and field performances using special tools
 - oral tests
 - demonstration
 - Summative
 - assessment at the end of placement on the prescribed format
 - final nursing practical examination
3. National Examination by Ministry of Health
 - Written
 - Practical

Course Unit Evaluation Format

Course Unit _____ Date _____ Topic _____

Item	Description	Mark				Remark
		4	3	2	1	
1. Objective	Communicated					
	Understood					
	Agreed upon					
	Relevant					
	Achieved					
2. Content	Relevant					
	Useful					
	Sufficiently covered					
3. Time allocation	Too much <input type="checkbox"/>					
	Adequate <input type="checkbox"/>					
	Not enough <input type="checkbox"/>					

4. Sequencing in relation to other topic

1. too late 2. right 3. too early

Comment if your answer is 1 & 3 _____

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95

Facilitator

	Mark		
	3	2	1
Knows the subject			
Is understood (audibility, English)			
Structures the session			
Spaces information (speed, quantity)			
Uses audiovisual aids			
Stimulates group participation			
Answers question & explains			

Key: scoring marks

- 3 = Very well
2 = Sufficiently
1 = Insufficiently

		4	3	2	1	Remark
6. Methodology was	Appropriate					
	Well used					
7. Handouts were	Sufficient					
	Useful					
	Easily understood					
	Well presented					

Annex -I

Job Description of Junior Public HealthJob Title:- Junior Public HealthQualification:- Certificate in Junior Public Health Nursing
after one year of training at District HospitalJob Summary:- Conduct essential Public Health Nursing

- Maintains essential records and reports on public health nursing
- Keeps appropriate standards of individual, group and community health services
- Co-ordinates and carries out tasks related to public health activities

Duties:-A. Promotive:-

- Identifies socio-cultural backgrounds of communities for better understanding and care
- Meets the nutritional status of the community
- Participates in the training/orientation of Primary Nurse
- Participates in the development curative health programmes
- Maintain appropriate system of essential records for planning purpose

B. Preventive:-

- Maintains the cleanliness of the individual and their environment
- Ascertain the cleanliness and sterility of equipments, supplies and other facilities
- Gives health education to the individual group and community
- Assist and mobilize the community in immunization program
- Participate in institutional health services, /school, prison/.

C. Curative:-

- Takes history and vital signs
- Assists patients during clinical examination and treatment
- Handles emergencies/provides First Aid treatment
- Assist on Senior Health Workers round
- Maintains the system of records and inventory of institutional property

Annex - IICareer Structure

In order to ensure the professional dynamism and the prospect of further studies, a career ladder plays an important role.

Hence, a capable candidate can have a chance of further study towards diploma in Clinical Nursing according to the admission criteria.

Relation:- The Junior Clinical Nurse is accountable to the Senior Clinical Nurse

Appraisal:- The management team of the Institution based on activity report and records

Annex - III

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