

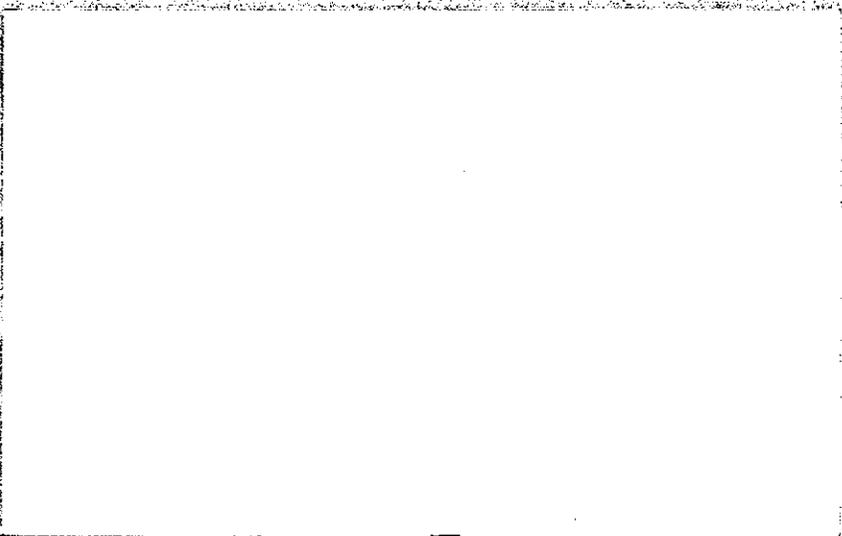
PN-ACN-392

MINISTRY OF HEALTH
MANAGEMENT SCIENCES FOR HEALTH
KABUL, AFGHANISTAN

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قیم منجمنت
وزارت صحیه
کابل - افغانستان

62
15N 72838



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CURRICULUM FOR
AFGHAN VILLAGE HEALTH WORKERS

September 1978

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VHW TEACHING PLAN - NUTRITION

Revision 1
September 1978

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>1.0 Infant Feeding</p>	<p>1.1 List three reasons why breast feeding is very important:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> Breast milk is an excellent source of good nutrition for children. Breast milk is clean (it has no microbes) while milk from a bottle is often dirty, expensive and dangerous. When a woman breast feeds, she is protected for some time from becoming pregnant again. 	<ol style="list-style-type: none"> Discusses breast feeding with the VHWs. If possible, try to have the VHWs tell of experiences of women in their family or in their village with breast feeding. Discuss difficulties and dangers of bottle feeding (such as cost, contamination, diluting too much with water, etc.). If possible, have a woman come and ask her (in front of the class) of problems and difficulties of breast feeding. Discuss with VHWs how these problems can be solved. 	<ol style="list-style-type: none"> Blackboard, erasers, chalk Baby bottle
	<p>1.2 List five important principles regarding infant feeding:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> Breast feeding should be continued as long as possible. Beginning at 6 months of age, infants should also be given solid food (including eggs, fruit, vegetables, and soft meat). Sick children must be encouraged to eat and drink as much as possible (fluids are especially important when there is diarrhea), with no "pares" (restriction). Infants should be breast fed at least 6 times per day. When eating solid food, a child should be fed 4 to 6 times per day. He should use his own cup and spoon. Malnourished infants and small children must be fed additional food in order to bring them to their normal weight. 	<ol style="list-style-type: none"> Have VHWs discuss giving babies solid food at 6 months of age. Assign some VHWs to go to the bazaar (provide them with a little money) to buy inexpensive foods & have them prepare them in front of the class and actually feed a 6-month old infant in front of the class. Discuss "pares" (food restrictions) with the VHWs and point out its dangers for sick children. Point out that an infant breast fed only 3 times per day will not stimulate the breast to secrete enough milk. 	<ol style="list-style-type: none"> Blackboard, erasers, chalk Money for weaning food Cheap, digestible weaning food (from bazaar) Bowl, spoon (for feeding) Bowl for mixing, chopping, mashing

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
2.0 Nutrition Surveillance in Children Under 5	2.1 Name three reasons why nutrition surveillance of children under 5 is very important. <u>Teaching Points</u> 1. Using the plastic armband enables a VHW to pick out malnourished children 1 year to 5 years old. 2. Health education and nutrition education for mothers and fathers of malnourished children can improve the nutritional status of children. 3. In following-up households with malnourished children, use of the plastic armband can measure the progress that is made with each child.	1. Practice use of the armband on 10-20 children aged 1-5 years (take children from bazaar, BHC, WFP, anywhere). 2. Discuss with VHWs how nutrition education is done and with whom (i.e. father or mother). 3. Have VHWs "act out" (in a drama) so that one pretends to be a VHW doing nutrition education and the other is a mother or father who believes in parez and that a baby should have only breast milk for 2 years.	1. Plastic armbands (20) 2. Blackboard, chalk, erasers
4	2.2 List the 5 steps in the correct use of the plastic armband. <u>Teaching Points</u> 1. The plastic armband is only used with children 1 year to 5 years of age (12 months to 60 months) 2. The armband is placed exactly midway between the elbow and the shoulder. 3. The black stripe on the armband is placed against the colored part of the armband. 4. If the black stripe lies against the green area, the child is adequately nourished; if against the yellow area, the child is mildly malnourished; if against the red area, the child is seriously malnourished. 5. The VHW informs the mother and/or father of the child what the armband measurement means, what should be done to improve the child's nutrition if yellow or red was found, and that he will return at a later date to measure the child again to see if progress was made.	1. Repeat practice with plastic armband on 10-20 children aged 1 to 5 years. 2. Discuss with the VHWs the significance of the different colors on the armband and what to do about red and yellow determinations. 3. Discuss with the VHWs how to use the armband to motivate parents to improve their child's nutritional status.	1. Plastic armbands (20) 2. Blackboard, chalk, erasers

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
3.0 Maternal Nutrition	<p>3.1 Name 3 important principles of maternal nutrition:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. All pregnant women and nursing mothers should receive iron and vitamins. 2. Pregnant women and nursing mothers should have yoghurt, milk, fruit, vegetables, and meat. 3. Pregnant women and nursing mothers should not restrict their diets (they should not practice "parez"). 	<ol style="list-style-type: none"> 1. Have pregnant women (who are coming for WFP) come before the class to be examined for anemia, etc. 2. Have pregnant women come before the class and discuss with them their diet, parez, etc. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, erasers.

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>4.0 Preparation of Weaning Foods</p>	<p>4.1 List the 4 steps involved in preparing cheap, digestible, and nutritious weaning food.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. From a vegetable garden or from the bazaar obtain vegetables (such as spinach, eggplant, tomatoes, etc.) and fruit (mulberries, apples, peaches, etc.) 2. Peel fruits and boil vegetables. 3. Mash fruits and vegetables until they are soft and easily digestible. 4. With a clean cup and a clean spoon feed the child (who should be at least 6 months of age). 	<ol style="list-style-type: none"> 1. Have VNWs assigned to perform the 4 steps in preparing weaning food (in front of the class). 2. Have mothers come before the class and have a VNW teach them the 4 steps. Then have the mothers actually do it in front of the class. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, erasers 2. Cheap & digestible weaning food (from bazaar) 3. Bowls, spoons (for mixing, washing & grinding). 4. Bowl & spoon for feeding babies.

6

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
5.0 Nutritional Rehabilita- tion	5.1 List 6 steps in nutritional rehab- ilitation of a malnourished child. <u>Teaching Points</u> 1. By using the plastic armband, identify children 1 year to 5 years old who are malnourished. 2. For infants less than 1 year of age, identify those who are very thin, frequently sick, or who are not getting enough breast milk. 3. Find out from the child's mother or father what the problem is. 4. Talk to the child's mother and father and explain to them the importance of special feeding to improve the child's nutritional status. 5. Teach the child's mother and father how to prepare the most appropriate foods for the child (depending on the family's income and the availa- bility of different kinds of food). 6. Make frequent visits (at least once per week) to the household to continue nutrition education and assessment (using the plastic armband) of the child's progress.	1. Have VHWs talk to mothers and fathers of malnourished children (both in front of the class and on home visits). 2. Have VHWs teach the mothers and fathers how to prepare the most appropriate foods for the malnourished child.	1. Blackboard, chalk, erasers 2. Cheap, nutritious foods bought in bazaar for teaching nutritional rehabilitation 3. Bowls, spoons, etc.

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>6.0 Nutritional Diseases</p>	<p>6.1 List 5 important points regarding nutritional diseases.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. All infants and children should be exposed to the sun at least 1 hour per day (with their clothes off). If this is done, the child will not get rickets. 2. If children eat enough vegetables (such as carrots), they will not go blind from Vitamin A deficiency. 3. If pregnant women or nursing mothers eat enough yoghurt and drink enough milk and dough, they will have enough calcium for themselves and their babies. 4. Pregnant women and nursing mothers should eat meat and other foods rich in iron so they do not become anemic. 5. It is very important to eat foods containing iodine (such as fish) so that you do not develop a goitre. 	<ol style="list-style-type: none"> 1. Locate cases of anemia, Vitamin A deficiency, osteoporosis, goitre, etc. to demonstrate before the class. 2. Discuss nutritional diseases with the VNs. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, erasers

2

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>1.3 Prenatal Care</p>	<p>1.1 List 6 questions you should ask all pregnant women (if there are no trained dais available for referral).</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. How old are you? 2. How many pregnancies have you had? 3. Have you had bleeding in this pregnancy? 4. Have you had difficult deliveries in the past? 5. Are your rings too tight? 6. Have you had a cough for more than 2 weeks or a cough with blood? <p>Note: The pregnant woman should be referred to the BHC or hospital for delivery if the answers are as follows:</p> <ol style="list-style-type: none"> 1) less than 15 or more than 40 2) none or more than 4, or if the answer to any of the four remaining questions - 3), 4), 5), 6) - is yes. 	<ol style="list-style-type: none"> 1. Discuss what is meant by "high risk" conditions, and why it is important to refer high risk pregnant women. 2. Have the VHWs practice asking these questions to pregnant women (who have come to the BHC for WFP). 3. Discuss the importance of trained dais for the care of pregnant women. Ask each VHW where the nearest trained dai is (in relation to his village). 	<ol style="list-style-type: none"> 1. Blackboard, eraser, chalk 2. Pregnant women (from BHC)
	<p>1.2 List 2 abnormal signs you should look for if you examine a pregnant woman (when there is no trained dai available).</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Observe eyes, gums, and skin for paleness. 2. Observe face and hands for swelling. <p>Note: If paleness is observed, the VHW should provide iron for the pregnant woman for the entire pregnancy. All pregnant women, even if they are not pale, should receive iron and multivitamins. If there is swelling of face or hands, patient should be referred to BHC.</p>	<ol style="list-style-type: none"> 1. Discuss the two abnormal signs and what they mean. 2. Discuss treatment for anemia in pregnancy, and the need for iron and multivitamins for all pregnant women. 3. Have pregnant women come to the class (while waiting for WFP at the BHC) and have VHWs examine them for the two abnormal signs. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Pregnant women (from BHC)

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>2.0 Prenatal Care (continued)</p>	<p>1.3 State what you would do if you found a "high risk" pregnant woman (when there is no trained dai available).</p> <p><u>Teaching Point</u></p> <p>1. Refer or take this woman to the BHC or hospital.</p>	<p>1. Review once again the importance of referral for high-risk pregnant women.</p>	<p>1. Blackboard, chalk, eraser</p>
	<p>1.4 List 5 things to teach the pregnant woman about taking care of herself during pregnancy.</p> <p><u>Teaching Points</u></p> <p>1. Don't wear tight clothes. 2. Bathe at least 2 times per week. 3. Rest frequently by lying down with feet up. 4. Don't smoke and don't take any drugs except iron and vitamins. 5. From the 7th month of pregnancy, massage breasts with vaseline each night and wash breasts (mostly for women pregnant for the first time).</p>	<p>1. Discuss each of the five things so that the VHWs clearly understand their importance. 2. Have pregnant women come to the class and have VHWs practice health education teaching using these 5 points. 3. Also, have a "dialogue" in which one VHW pretends to be a pregnant woman and another pretends to be a VHW instructing the pregnant woman.</p>	<p>1. Blackboard, eraser, chalk 2. Pregnant women (from BHC)</p>

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
1.0 Prenatal Care (continued)	1.5 List 4 foods that a pregnant woman should eat every day. <u>Teaching Points</u> 1. Drink milk or eat yoghurt. 2. Meat, liver, or eggs. 3. Vegetables and fruits. 4. Bread or cereals.	1. Discuss the importance of good nutrition during pregnancy. 2. Have pregnant women come to the class and have VHWs demonstrate nutrition education with them. Discuss the effectiveness of the VHW's method of health education.	1. Blackboard, chalk, eraser 2. Pregnant women (from BHC)

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
2.0 Labor & Delivery	<p>2.1 List 5 items the mother should prepare for delivery.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Clean, sun-dried cloth and (if possible) a plastic cloth. 2. Small cloth for wrapping baby. 3. One new razor blade. 4. One large basin for bathing the baby. 5. Thread and gauze. 	<ol style="list-style-type: none"> 1. Discuss the importance of each of the items on the list. 2. Pass around each of the objects so the VHM can understand what they are for. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. sun-dried cloth and plastic cloth 3. new razor blade 4. small cloth 5. large basin 6. thread 7. gauze
	<p>2.2 List 5 abnormal conditions of labor. (If any are present, woman should be referred immediately to a BHC or hospital).</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Contractions longer than one day. 2. Membranes broken longer than one day. 3. Something (hand, foot, cord) sticking out of vagina. 4. Bright red vaginal bleeding. 5. Baby lying crosswise in the uterus. 	<ol style="list-style-type: none"> 1. Discuss the importance of each of the five conditions. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
2.0 Labor & Delivery (continued)	<p>2.3 List 4 things a VHW should do during normal labor (when no trained dai is available).</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Check place or room of delivery for cleanliness and warmth. 2. Offer liquids (tea with sugar, juices) throughout labor (at least every hour). 3. Make sure that the woman defecates and urinates in a place separate from delivery area. 4. Refer to BHC or hospital any woman whose labor is longer than one day. 	<ol style="list-style-type: none"> 1. Discuss the importance of each of the items. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser
	<p>2.4 List 7 things the VHW should do at the time of delivery (if no trained dai available).</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. If cord is around baby's neck, get it off as quickly as possible. 2. As soon as baby is delivered, turn it upside down and allow fluids to drain out. 3. Make sure baby is breathing normally (if not, spank or pound its chest). 4. Tie the cord one finger away from the baby. 5. Clamp the cord on the side closest to the mother. 6. Cut the cord between the tie and the clamp. 7. Cover the cord with a clean cloth. 	<ol style="list-style-type: none"> 1. Discuss each of the 7 things so that the VHWs are clear about each one. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Rope (to practice tying cord) 3. String 4. Razor blade (new)

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
3.0 Post-natal Care	<p>3.1 List 5 things the VHW should do for mother & baby right after delivery (if trained dai not available).</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Have mother cleaned. 2. Give mother liquids and food. 3. Allow mother rest lying flat on the bed 4. Clean baby with warm water, including the eyes. 5. Put baby to mother's breast (first 24 hours are a <u>good</u> time for nursing). 	<ol style="list-style-type: none"> 1. Discuss each of the items on the list so the VHWs clearly understand their importance. 	<ol style="list-style-type: none"> 1. Chalk, blackboard, eraser
	<p>3.2 List 5 criteria for recognizing complications in a post-partum woman.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Fever 2. Anemia (paleness of skin, conjunctiva, nails and gums). 3. Painful swollen breasts or cracked nipples. 4. Large, soft, and tender uterus. 5. Foul smelling discharge or bright red blood from birth canal. <p>Note: VHW should treat anemia with iron and fever with aspirin and penicillin. However, if c, d, or e occur (or if woman is very sick) she should be referred immediately to the BHC or hospital.</p>	<ol style="list-style-type: none"> 1. Discuss each of these criteria, review recognition of anemia and fever (use "anemia recognition card"); review treatment of anemia and fever. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Anemia recognition card

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
3.0 Post-natal Care (continued)	<p>3.3 What should be done for a post-partum woman with complications:</p> <p><u>Teaching Point</u></p> <p>1. Make sure she goes immediately to a BHC or hospital.</p> <hr/> <p>3.4 List 5 points about what food the post-partum woman should eat every day.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Drink 8-10 glasses of fluid each day. 2. Eat for two. 3. Eat eggs or meat if possible (rice, beans, or lentile as a substitute). 4. Eat vegetables and fruit. 5. Eat bread and cereal. 	<p>1. Discuss how the VHW can persuade the post-partum woman to go to a BHC or hospital when there are complications.</p> <hr/> <p>1. Discuss ways in which the VHW can persuade post-partum women to eat these foods (such as how to convince the husband who will then convince his wife, etc.)</p>	<p>1. Blackboard, chalk, eraser</p> <hr/> <p>1. Blackboard, chalk, eraser</p>

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>4.0 Newborn Care</p>	<p>4.1 List 5 points about breastfeeding the baby.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Start breastfeeding with 5 minutes at each breast whenever baby is hungry. 2. Feed baby <u>at least</u> every 3 hours during day and night. 3. Sit up when breastfeeding (if possible) 4. Make sure baby's nose is not against mother's breast (so he can breathe). 5. Burp the baby after feeding. 	<ol style="list-style-type: none"> 1. Review the <u>critical importance</u> of breast feeding and the technique of how it is done properly. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser.
	<p>4.2 List 6 points about recognizing a sick baby.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Not sucking well. 2. Coughing and spitting up a lot. 3. Twitching and shaking. 4. Fever. 5. Crying all the time. 6. Pus or discharge from cord. <p>Note: If baby has fever or pus or discharge from cord, VHW should give penicillin. For other problems, refer to BHC or hospital.</p>	<ol style="list-style-type: none"> 1. Have babies (newborns up to 1 or 2 months) come to the class with their mothers (on WFP days) and have VHWs examine them for the 6 points. 2. VHWs should also examine newborns when with the BHC doctor on "clinical practice" days. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Newborn babies (from BHC)

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>5.0 Family Planning</p>	<p>5.1 Name 3 rules to tell each family about family planning.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The best years for a woman to bear children is between 20 and 35 years of age. 2. Births should be spaced at least 2 years apart. 3. Mothers who give birth to 5 or more children will have more health problems (complications) during pregnancy and childbirth. 	<ol style="list-style-type: none"> 1. Discuss the meaning of family planning. Have each VHW state his feelings or ideas on the subject. 2. Discuss the positive health benefits of family planning. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser
	<p>5.2 State 4 reasons why family planning helps families stay healthy.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. It gives the mother time to regain her strength and health between children. 2. It gives the babies more time to nurse. 3. It gives the mother more time to care for each child. 4. It makes it easier for the father to provide food and clothing. 	<ol style="list-style-type: none"> 1. Have a "dialogue" or drama in which one VHW pretends to be a villager opposed to family planning and another pretends to be a VHW supporting family planning. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser
	<p>5.3 Name two methods of family planning:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The "Pill" 2. Condoms 	<ol style="list-style-type: none"> 1. Pass out samples of the "Pill" and condoms and discuss their use. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Packets of the "Pill" 3. Condoms

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
5.0 Family Planning (continued)	5.4 List 7 things each woman taking the pill should know: <u>Teaching Points</u> 1. She should begin taking the pill on the 5th day of her menstrual period. 2. She must take one pill every day. 3. She should take the pill at the same time each day. 4. If she misses the pill one day, she should take two the next day. 5. Any woman can take the pill unless she is pregnant. 6. She should continue to take the pill every day until she wants to become pregnant. 7. The pill is safe.		1. Blackboard, chalk, eraser 2. Packets of the Pill

VHW TEACHING PLAN - PERSONAL HYGIENE

Revision 1
September 1978

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>1.0 Use of Soap and Water</p>	<p>1.1 List three times when it is most important to wash your hands with soap and water.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. After defecation 2. Before preparing food 3. Before eating 	<ol style="list-style-type: none"> 1. Discuss with the VHWs the importance of soap and handwashing, that soap is more important than any drug. 2. Stress the importance of setting a personal example. The VHW training team must themselves wash their hands frequently with soap. Likewise, the VHWs must set an example in their village. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser
	<p>1.2 State four reasons why soap is very important.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Soap kills germs (microbes) very effectively (it is just as effective as mercurochrome or iodine). 2. If a child can regularly be washed with soap (including all of his body - especially hair, face, hands, and around the anus), he will be protected against skin and eye diseases. 3. Since young children frequently play in the dirt and get worm eggs on their hands, washing their hands with soap and water can prevent worms. 4. Water by itself does not kill germs - soap is necessary to kill the germs contained in feces. 	<ol style="list-style-type: none"> 1. Have a baby (and its mother) come before the class. Have a VHW wash the baby thoroughly with soap, while teaching the mother how to do it (have this done in front of the class). 2. Discuss how personal hygiene can prevent the spread of worms. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Soap 3. Warm water in a large basin (for washing the baby) 4. Washcloth
<p>19</p>			

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>2.0 Principles of Personal Hygiene</p>	<p>2.1 List 3 principles of personal hygiene:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Clothes and bedding must be kept clean. 2. Brushing your teeth every day is important for keeping your teeth healthy. 3. Lice, bedbugs, scabies and ringworm can be prevented by keeping your body clean. 	<ol style="list-style-type: none"> 1. The VHW Training Team (and the VHWs) must set personal examples regarding clean bedding and clothes. 2. Tooth brushing should be demonstrated in front of the class (with maswak or a twig of a tree). How to convince villagers to change their personal hygiene habits must also be discussed. 3. Ways in which VHWs can change personal hygiene habits (such as use of soap) can be discussed as well as having 2 VHWs act out a drama -- one trying to convince the other to change personal hygiene habits. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Maswak (twig of tree) 3. Examples of clean bedding and clothes.

VHW TEACHING PLAN - ENVIRONMENTAL SANITATION

Revision 1
September 1978

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>1.0 Drinking Water</p>	<p>1.1 For four different sources of drinking water (jui, well, spring, qareez) state how the safety of each can be determined.</p> <p><u>Teaching Points</u></p> <p>1. <u>Jui water</u> is not safe because humans and animals defecate in it or near it. It is unsafe even if the water is flowing quickly, looks clean and tastes clean.</p> <p>2. <u>Well water</u> is safe only when it is deep (more than 5 meters), is well protected (so that nothing can fall in or be kicked in), is located far from any latrine or source of feces, and when the bucket used for drawing water is clean.</p> <p>3. <u>Spring water</u> is safe to drink only if the water is obtained before it reaches the pool, and the spring source is more than 3 meters below ground (so that feces on the ground cannot contaminate it).</p> <p>4. <u>Qareez water</u> is safe to drink only under the same conditions that spring water is safe to drink.</p>	<p>1. Use the UNICEF "safe water" flipbook for teaching purposes.</p> <p>2. Review chapter in Reference Manual dealing with water supply.</p> <p>3. Go to nearby village (this can be done at the same time as the home visiting exercise) and find examples of all four sources of drinking water. At each source, discuss reasons why the water is clean or contaminated. Rather than lecture, have a VHW discuss the cleanliness of each source; after he is finished, comment on his discussion.</p>	<p>1. Flipbooks (on "Clean Water")</p> <p>2. Blackboard, chalk, erasers</p> <p>3. Manuals (especially Reference Manual)</p>
<p>21</p>			

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>1.2 Drinking Water (continued)</p>	<p>1.2 List 4 principles which must be remembered about boiling drinking water.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Any drinking water known to be unsafe should be boiled before drinking. 2. If boiling is impossible because of the high cost of fuel (or for some other reason), then it is essential that drinking water for children under 5 be boiled. 3. Water should always be boiled for at least 10 minutes. 4. Since tea is boiled, it is safe to drink. 	<ol style="list-style-type: none"> 1. Discuss the importance of boiling drinking water. 2. Have 2 VHWs "act out" a drama in which one pretends to be a VHW and the other pretends to be a villager who doesn't want to boil his drinking water. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, erasers.

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
2.0 Food Preparation and Storage	<p>2.1 List four principles of food preparation and storage.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Certain foods (such as vegetables) must be thoroughly cleaned before eating (by either boiling or careful washing with clean water; fruit should always be peeled). This is because vegetables are often contaminated in the fields by human feces (night soil). 2. It is very important that food given to young children under 5 be clean (it should be cooked immediately before being given to the child). 3. Grain and water should be stored in "elevated" containers (containers off the floor) whenever possible so as to be protected from dirt, mice, rats, insects, and other pests. 4. Whenever possible, flies should be kept away from food. This can be done by covering food. Flies walk on food and contaminate it with feces. 	<ol style="list-style-type: none"> 1. Food should be bought in the bazaar and taken to class. VHWs should then be asked to demonstrate how each food can be prepared in a clean manner. 2. Discuss with the VHWs methods of food preparation and storage. 	<ol style="list-style-type: none"> 1. Food (from bazaar) 2. Water, bowls, knives, etc. for cleaning food 3. Blackboard, chalk, erasers

TOPIC	OBJECTIVES AND TEACHING PLAN	HOW TO TEACH THIS	TEACHING MATERIALS
<p>3.0 Disposal of Human Wastes</p>	<p>3.1 List four principles of disposal of human wastes.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. People should never defecate near water (which might be used for drinking), near paths (where people walk), or in areas where children play. 2. If someone defecates in the field, he should bury his feces (with dirt or rocks) so that flies cannot get to it. 3. The safest place to defecate is in a latrine which is covered, protected, and kept clean. 4. A latrine which is not covered or protected (so that flies can easily get to the feces) is worse than defecating in the field and burying the feces afterward. 	<ol style="list-style-type: none"> 1. The VHW class should visit a number of different latrines. At each latrine, a VHW should be asked to explain why or why not the latrine is safe and protected. The instructor should comment on and criticize each VHW's discussion. 2. If no proper latrine is available at the site of the VHW course, a latrine should be built (or an existing one improved) by the staff and the VHWs themselves. 3. Means by which VHWs can encourage villagers to build sanitary latrines. 4. Discuss with the VHWs the problems of disposal of human wastes. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, erasers 2. Supplies needed for building a latrine (if no sanitary latrine available)

VHW TEACHING PLAN - HOME VISIT

Revision 1
September 1978

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>1.0 Home Visits</p>	<p>1.1 List 13 steps you should take in doing a home visit</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. A "home visit" means that you visit the home of a fellow villager for the purpose of health education. It is one of the most important duties of the VHW. 2. Before going into a home, you must first get permission. 3. On the first home visit, it is a good idea to explain what your job is (as a VHW). 4. It is important to discuss only one or two ideas during one home visit (for example, better ways to feed their baby and family planning). 5. You should not do all the talking yourself. It is better to have the people say what their problems are and what they would like help with. 6. When on a home visit, walk around the house and point to things which are not healthy (like a dirty latrine, baby wrapped up tight, animal feces on the ground, etc.) 7. Try to make at least 3 home visits every day. 8. On every home visit, ask if there are any children 1 to 5 years of age. if so, use the armband to measure them. 	<ol style="list-style-type: none"> 1. The best way to teach home visits, of course, is to do them. It is best to divide the class so that no more than 4 or 5 VHWs are with an instructor in a house doing a home visit. Sometimes it is not possible to have such a small group. Always make sure the VHWs are polite. 2. It is a good idea to visit a second time (a week later) with the same VHWs those houses visited on the first home visit day. This way you can have the VHWs see for themselves what changes have occurred as a result of their first home visit. 3. Discuss with the VHWs the great importance of home visits and that changing peoples' health habits is <u>much</u> more important than curative treatment for diseases that will occur over and over again unless the health habits are changed (by home visiting and by setting a good example.). 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Village homes 3. Plastic armbands 4. VHW Manuals

25

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>1.0 Home Visits (continued)</p>	<p>9. If there are any children who are red or yellow on the armband, you should teach the mother or father about good nutrition. Return to that house at least once per week until the child's armband measurement has reached the green mark.</p> <p>10. Every home in your village should be visited once per month (except where there are children who are red or yellow on the armband - they should be visited every week).</p> <p>11. You can bring medicines on your home visits and sell them if needed.</p> <p>12. Remember, the most important part of the home visit is to teach the people to live in a healthier way.</p> <p>13. People will only listen to what you say if you "set an example" (that is, live yourself in the way you tell others to live).</p>		

VHW TEACHING PLAN - FIRST AID

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>1.0 Wounds</p>	<p>1.1 Define what is a wound:</p> <p><u>Teaching Point</u></p> <p>1. A "wound" is any break in the skin. It may be large or small, clean or dirty, and it may bleed a little or a lot.</p>	<p>1. Discuss with the class the meaning of a wound. Discuss the difference between a wound that is infected and one that is not.</p> <p>2. When you are discussing wounds, check the First Aid Room of the BHC to see if anyone with a wound is in there. Do this even before "practical" first aid work has begun. Instruct the BHC staff to send you any patient who comes in with a wound, at any time.</p>	<p>1. Blackboard, chalk, eraser</p> <p>2. Patients with wounds presented to the class and seen in the First Aid Room</p> <p>3. Dressings (including gauze), tape, mercurochrome, gentian violet, soap, warm boiled water, bowls, aspirin, penicillin.</p> <p>4. VHW Manuals</p>
	<p>1.2 List the 2 kinds of wounds that should always be referred to the BHC.</p> <p><u>Teaching Points</u></p> <p>1. Wounds that are very large or very deep (so that you cannot easily bring the skin together for bandaging).</p> <p>2. Wounds that become infected (that is, which smell bad, have pus, and become very painful, swollen and red) and which do not heal after 2 days of treatment.</p>	<p>1. Whenever a patient with a wound is presented to the class, and whenever VHWs are in the First Aid Room learning about wounds, always <u>first</u> decide whether that patient, if seen in a village by a VHW, should be seen in the village and treated or should be referred to the BHC.</p>	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
1.6 Wounds (continued)	<p>1.3 List 3 ways in which wounds can be prevented</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Anything sharp or dangerous in the house or compound should be kept out of the reach of children. 2. Small children must not be allowed to play on roofs where there is no railing. 3. Wells must be protected and covered so that children do not fall in. 	<ol style="list-style-type: none"> 1. Ask each of the VHWs if they have ever had a wound and how they could have been prevented. 2. Discuss with the VHWs what can be done to protect children from injuries (have VHWs give examples from their villages). Discuss the importance of health education in preventing accidents. 	
28	<p>1.4 List 6 principles of treating wounds:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. First, bleeding must be stopped. 2. Make sure the wound is clean - wash with soap and warm boiled water. Pick out any pieces of dirt. Then wash all the soap away and have the wound dry. 3. Put mercurochrome or gentian violet on the wound. 4. Cover the wound with a light piece of gauze and tape the gauze to the skin. Leave the dressing for 1 week unless the wound becomes infected or dirty. Then clean the wound again and put clean gauze on it. 5. Aspirin can be given for pain. 6. If the wound becomes infected, give penicillin and observe the wound for 2 days. If it is not better, send the patient to the BHC. Also, soak the infected wound in very warm boiled water for 15 minutes 3 times per day. 	<ol style="list-style-type: none"> 1. Ask each VHW to tell what he did about having his own wounds treated. What were the results? Have the VHWs show their scars. 2. Discuss the importance of keeping wounds clean. Review treatment of wounds. 3. Make certain that when the VHWs go to the First Aid room that they (the VHWs themselves) get to do the bandaging and treatment. The rule should always be "See one, Do one, Teach one." 4. Whenever the VHW course is taught at a BHC with very few first aid patients, it is the job of the VHW teachers either to find other patients (at a bonesetter's house, for example), or else make sure the VHWs have a clear understanding of how to treat first aid cases. For example, the male nurse can pretend VHWs have wounds and have them practice bandaging each other. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
2.0 Burns	<p>2.1 Explain the 3 kinds of burns</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. A First Degree, or minor, burn turns the skin red and is quite painful. 2. A Second Degree, or more serious, burn makes blisters in the skin. 3. A Third Degree, or very serious, burn turns the skin grey or black, like it is cooked. 	<ol style="list-style-type: none"> 1. Discuss the 3 major types of burns. Whenever the VHWs see a burn patient (in the classroom or in the first aid room), they should discuss whether the burn is 1st, 2nd, or 3rd degree and what should be done about it. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Patients with burns seen in the classroom or in the first aid room 3. Gantian violet, gauze, tape, mercurochrome, warm boiled water, soap, bowls, ice water (or snow), cotton, aspirin, penicillin 4. VHW Manuals
	<p>2.2 For what 2 types of burns should a patient be referred to the BHC?</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. If the burn becomes infected (smells bad, is red, painful, and there is pus and fever), treat with penicillin for 2 days and if burn is not better, send patient to the BHC. 2. If the burn is very severe (third degree) and covers a large area of skin. 	<ol style="list-style-type: none"> 1. Whenever VHWs see a burn patient (whether in the classroom or the first aid room), they should also discuss whether the patient, had they seen him in the village, should be treated by the VHW or referred to the BHC. 2. Discuss the importance of keeping burns clean. Also review the difference between infected and not infected burns. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
2.0 Burns (continued)	<p>2.3 List 2 principles for preventing burns:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Keep children away from fire, cooking pots, boiling water, hot pans, or stoves (bokhari). 2. Never let children play with matches. 	<ol style="list-style-type: none"> 1. Have the VHWs give examples of times they have gotten burned. Have each of them say how his burn(s) could have been prevented. 2. Have the VHWs give examples of practical ways they can help prevent burns in their villages. 	
	<p>2.4 List 9 principles important for the treatment of burns:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Take off clothes and pour cold water (ice or snow are better if they are available) on the burn for 5 minutes. Remove dirt and ashes (only if it can be done easily). 2. Do <u>not</u> break blisters; do <u>not</u> use oil to cover burns. Put mercurochrome or gentian violet on the burn. 3. Cover the burn with gauze, then put a thick pad of cotton over the gauze and bandage firmly (not too tight). 4. Dressing should be left on for 1 week unless infected. 5. If burn becomes infected, remove dressing gently (pour warm boiled water under the dressing as it is pulled away). Clean the burn gently with soap and boiled water. Soak the burn in warm boiled water for 15 minutes. Bandage again loosely. 	<ol style="list-style-type: none"> 1. Have each VHW tell what happened when he had his own burn treated. Discuss villager's ideas of traditional ways to treat burns and why they might be dangerous. Ask the VHWs how they can change the attitude of their fellow villagers regarding treating burns. 2. Like all other forms of first aid, treatment of burns is best taught <u>not</u> by talking about it, but by having VHWs actually treat burns. All burn cases in the First Aid Room should be demonstrated to the whole class, and the VHWs given the chance to treat it themselves (actually put the dressing on themselves). 3. If there are no burn cases (or very few) at the BHC, the male nurse can teach burn treatment by having a VHW pretend he has been burned and having other VHWs put dressings on him for practice. 4. Discuss treatment for infected burns. 5. Discuss the importance of fluids for burn patients. 6. Review the immediate treatment of burns (including use of ice-cold water or snow on the burn). 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>2.0 Burns (continued)</p>	<p>2.4 continued</p> <ol style="list-style-type: none"> 6. If burn is infected, give penicillin. If infected burn is not better in 2 days, send the patient to the BHC. 7. Give aspirin for pain. 8. For infected burns, change dressings frequently (even 3 or 4 times per day) and clean the burn each time. 9. Give any liquid the patient will drink (such as tea or water) and give it often, since burns cause a great deal of water loss for the patient. 		

3/

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
3.0 Bleeding	<p>3.1 Explain the 2 kinds of patients with bleeding who should be sent to the BHC.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The VHW must stop the bleeding himself in the village. Once the bleeding has stopped and there has been a great deal of blood lost (and the patient is very weak), the VHW should give him a great deal to drink and send him to the BHC. 2. When a pregnant woman bleeds for more than 1 hour (from her womb) she must go immediately to the BHC. 	<ol style="list-style-type: none"> 1. Have the VHWs discuss times they had bleeding and what was done about it. Stress the importance of <u>immediate</u> action to stop bleeding. 2. Review the importance of fluids for persons who have bled. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Patient with bleeding seen in classroom or in First Aid Room. 3. Tourniquet (belt, piece of cloth, etc.) 4. Watch 5. Iron packet (ferrous sulfate) 6. VHW Manuals
	<p>3.2 List 6 principles in the treatment of bleeding:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Severe bleeding <u>must</u> be stopped at once. First, try <u>firm</u> direct pressure for 5 minutes where there is bleeding. Do not take your hand off the bleeding site for the full 5 minutes. 2. If direct pressure does not stop the bleeding, tie a piece of cloth or a belt around the arm or leg that is bleeding between the wound and the heart. It should be loosened every 15 minutes. When bleeding has stopped for 5 minutes, untie the belt or cloth. 3. For mild bleeding, direct pressure over the wound for 5 minutes almost always stops it. For nose bleeds, squeeze the soft middle part of the nose very tightly for 5 minutes with the head tilted back. 	<ol style="list-style-type: none"> 1. Have the VHWs discuss the treatment of their own bleeding episodes. 2. Have the VHWs practice putting pressure on pretended bleeding sites. See if they can tell how long 5 minutes is <u>without</u> looking at their watch. 3. Have the VHWs practice putting tourniquets on each other. 4. Have the VHWs practice stopping pretended nose bleeds on each other. 5. Discuss the importance of iron for treatment after bleeding. 6. Have all patients who have been bleeding presented to the VHWs. 7. Explain to VHWs that if someone bleeds (or donates blood) the body will make more blood quickly, assuming the patient has enough iron. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING M
3.0 Bleeding (continued)	3.2 continued 4. For cuts in the skin - after the bleeding has stopped, bring the 2 edges of skin close together and bandage the cut. If the two edges of the cut are close together, it heals faster with less scar. 5. Whenever someone has been bleeding, it is very important that they drink plenty of fluids. 6. Many people (especially women) need iron after bleeding in order to replace the blood that has been lost. Treat patients who have bled with iron.		

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
4.0 Poisoning	<p>4.1 List 3 examples of poisoning:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Swallowing kerosene 2. Eating poisonous plants 3. Taking too much of a drug. 	<ol style="list-style-type: none"> 1. Discuss the problem of poisoning and how it can be prevented. Have VHWs list other examples of poisoning and stories of people who became poisoned. 2. Discuss what poisoning patients should be treated in the village and which referred to the BHC. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Patients who have been poisoned; seen either in classroom or First Aid Room 3. Glass, salt, teaspoon, water, kerosene 4. VHW Manuals
	<p>4.2 What 2 kinds of patients (who have been poisoned) should always be referred to the BHC?</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Always refer a patient to the BHC who is in a "deep sleep" (Coma) and cannot be awakened. 2. Always refer a patient to the BHC who has vomited the poison, but is still sick 6 hours later. 		
	<p>4.3 Explain 2 ways of preventing poisoning:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Keep all poisons, medicines, and kerosene out of the reach of children. 2. Always make sure that the patient takes the right amount of medicine. Too much medicine at one time can make him very sick. 	<ol style="list-style-type: none"> 1. Have VHWs discuss what can be done in their villages to prevent poisoning. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
4.0 Poisoning (continued)	<p>4.4 List 4 principles in the treatment of poisoning</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. When the poison is the kind that burns the mouth (like an acid or kerosene), do <u>not</u> make the patient vomit. Feed him a solution of flour and water. If not better soon, send him to the BHC. 2. If the patient goes into a "deep sleep" (coma) send him immediately to the BHC. 3. For all other poisoning patients, give them a glass of water with 4 teaspoons of salt. This will probably help the patient vomit and get rid of some of the poison. After vomiting, give the patient tea or bread. <u>NEVER</u> make a person vomit who is in a deep sleep or who swallowed a burning poison. 4. If 6 hours after vomiting the patient is still very sick, send him to the BHC. 	<ol style="list-style-type: none"> 1. Review the principles of the treatment of poisoning. 2. If any patient who has been poisoned comes to the BHC, make sure he is seen by all the VHWs and that the VHWs are given the chance to do the actual treatment themselves. 3. Have the VHWs practice preparing salt and water mixtures for treating poisoning. 	
35			

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
5.0 Broken Bones	<p>5.1 List 4 ways to decide whether or not a bone is broken.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. There is a great deal of pain. 2. The pain is worse when the bone is moved or pressed hard. 3. There is swelling. 4. There may be a piece of bone sticking through the skin. 	<ol style="list-style-type: none"> 1. Review the 4 ways to tell if a bone is broken. Make sure any BHC patient with a possible broken bone is taken before the class. Have a VHW talk to the patient, examine him, and decide if the bone is, in fact, broken. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Patients seen by class (with broken or possibly broken bones) Seen in class or in First Aid Room 3. Sticks (used as splints) 4. Cotton cloth for padding 5. String or belt to tie on splint. 6. VHW Manuals
	<p>5.2 List 5 things to do if you think a bone is broken.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. First of all, if there is a good bonesetter in or near your village, visit him with your patient and ask his advice. 2. If there is no good bonesetter nearby, keep the broken bone from moving by using a splint. 3. To make a splint, find a straight, firm stick long enough to go past <u>both</u> ends of the broken bone. Then tie the splint to the arm or leg on each side of where the bone is broken. 4. Two splints or two sticks can also be used - one on each side of the broken arm or leg. The splint should be padded with cotton or cloth before putting it against the broken part. 5. If the broken bone goes through the skin, do not try to fix or wash, but cover with a clean piece of gauze and bandage to hold it. 	<ol style="list-style-type: none"> 1. Discuss what to do about broken bones. Have the VHWs practice making splints and tying them on each others arms and legs. 2. Have the VHWs discuss their own experiences with broken bones and how they were treated. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
6.0 Injections	<p>6.1 List 3 reasons why tablets are just as good as injections</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The drug is exactly the same whether it is tablets or injection. 2. Injections are more expensive than tablets. 3. Tablets are safer than injections (since injections can cause infections or damage the tissue). 	<ol style="list-style-type: none"> 1. Review the importance of clean technique in giving injections 2. Review the difference between tablets and injections. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. Syringes, needles, sterilization box, spirit lamp, bowl, alcohol. 3. VHW manuals
37	<p>6.2 List 6 very important things to remember before giving an injection.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. You must be sure you are giving the right amount of medicine (mixed with the right amount of water). 2. You must be sure the medicine is the correct one for the patient (Make sure you see the prescription <u>before</u> giving the injection). 3. You must be certain that you inject the medicine in the right place (the best place is in the upper, outer quadrant of the buttocks). 4. You must <u>never</u> use the same needle for 2 different people without boiling the needle first. 5. Before injecting, you must pull back slightly on the syringe to make sure no blood comes into the syringe. If you see blood, pull the needle out and inject in a different place. 6. Whenever blood comes into the syringe, you must boil the syringe before using it again. 	<ol style="list-style-type: none"> 1. It is very important that each VHW have the chance to give several injections (under supervision) during his training. 2. The VHWs must practice boiling needles and syringes using the alcohol spirit lamp (since that is what they will have in their village). 3. Discuss the importance of clean technique to prevent spread of infection. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
1.0 Tuberculosis	<p>1.1 List 3 important features of tuberculosis.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. TB is a very serious disease caused by germs we breathe in the air or by infected cow's milk that has not been boiled. 2. TB usually infects the lungs and causes fever, cough (with sputum), weakness, and weight loss. 3. TB can be treated effectively if the patient is diagnosed soon after getting the disease, and if the patient takes the proper drugs every day for at least one year. 	<ol style="list-style-type: none"> 1. The best way to teach about TB (or about any other disease) is to have BHC patients come before the class and have the VHWs practice taking a history and examining the patient (so they can decide if he or she should be referred to the BHC as a possible TB patient for example). 2. Discuss the typical symptoms of tuberculosis, the importance of early diagnosis, and the importance of taking the TB drug every day. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients (in BHC and classroom)
	<p>1.2 What 3 kinds of patients who might have tuberculosis should be referred to the BHC?</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. All patients the VHW thinks might have TB should be sent to the BHC. 2. Anyone with a cough for 2 weeks or more (with sputum) should be sent to the BHC. 3. Anyone with continued weight loss should also be sent to the BHC and his sputum checked (under the microscope) for TB. 		

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
1.0 Tuberculo- sis (continued)	<p>1.3 List 5 steps that can be taken to prevent TB.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The best way to prevent TB is to have all children under 15 vaccinated with BCG. 2. If someone with TB takes his anti-TB medicine every day for a year, this will cure his disease and he will not spread TB to someone else. 3. Anyone with cough and sputum must always cover his mouth when he coughs and turn his head away from other people so they do not breathe in his germs. 4. Whenever anyone coughs up sputum or spits, he should bury the sputum or spit. 5. If villagers get enough rest, eat good food, and keep away from people with TB, they can avoid getting the disease. 	<ol style="list-style-type: none"> 1. Discuss with the VHws the problem of getting people who "feel well" to take medicine every day for a year. Ask the VHws for their ideas of how they can get their fellow villagers to take the drugs properly. 2. Point out to the VHws that teaching such things as covering the mouth and turning the head when coughing means nothing unless the VHw himself always covers <u>his</u> mouth and turns his head away when he coughs. 3. VHws must remember <u>not</u> to spit themselves and to bury their own sputum. 	
	<p>1.4 What 2 things should the VHw remember about treating TB?</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Treatment for TB should always be started by the BHC doctor after finding TB germs in the sputum. 2. It is the VHw's job to make sure that villagers who have TB take their medicines <u>every day</u> for 1 year. 	<ol style="list-style-type: none"> 1. Discuss with the VHws that the BHC can diagnose TB for certain (by looking at sputum under the microscope) but that VHws cannot be certain. That is why they should refer to the BHC all possible TB patients. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
2.0 Malaria	<p>2.1 List 3 things which are important to know about malaria:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Malaria is a disease which is spread by mosquitoes. 2. A person sick with malaria has high fever and shaking chills, which usually happen every day. 3. Malaria mostly occurs in summer in areas where there are many mosquitoes who bite at night. 	<ol style="list-style-type: none"> 1. Discuss how malaria is spread and how it can be prevented. Ask the VHWs what villagers can use to cover themselves at night so they are not bitten by mosquitoes. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. VHW Manuals
	<p>2.2 State the two times when the VHW should send a patient to the BHC to be checked for malaria.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Whenever a patient has high fever and chills (especially in the summer). 2. Whenever the VHW thinks malaria is possible in a patient. 		

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
2.0 Malaria (continued)	<p>2.3 List 4 steps involved in preventing malaria:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The best way to prevent malaria is to make sure you are not bitten by mosquitoes. 2. Use a mosquito net when sleeping (if it is summer and there are many mosquitoes). If a villager cannot afford a mosquito net, then have him use a cotton cloth covering to protect his skin. 3. If a patient with malaria is soon treated, he will be cured and he will help prevent the disease from spreading. 4. If insecticide is used to kill mosquitoes, this will prevent the disease. 	<ol style="list-style-type: none"> 1. Talk to the VdWs about how standing water (as in ditches) serves as a breeding area for mosquitoes. If the water is drained, the mosquitoes cannot breed. 2. Stress the importance of the VdWs cooperating with the malaria workers. 3. If there is a malaria patient at the BHC, make sure he or she comes before the class so the VdWs can practice taking a history and examining the patient. 4. Take a walk around the BHC and find pools of water where mosquitoes can breed. 	
	<p>2.4 What 3 points should the VHW remember about treating malaria:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The VHW himself should <u>not</u> treat malaria. Only the malaria microscopist at the BHC, by looking at the patient's blood with a microscope, can diagnose the disease. 2. Pregnant women with malaria must also be sent to the BHC for treatment. 3. The VHW must be sure that the malaria patient takes his malaria medicine every day. 	<ol style="list-style-type: none"> 1. As with TB, the VHW cannot diagnose malaria. Only the malaria microscopist can do that. Discuss with the VdWs the importance of their job of "screening" - finding malaria cases early and making sure they are treated properly. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
3.0 Measles	<p>3.1 List 6 features of measles.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Measles is most common in children under 5 years. 2. There is high fever. 3. There is a rash (red spots on the skin). 4. There is cough. 5. There is sometimes diarrhea. 	<ol style="list-style-type: none"> 1. Try to find measles patients at the BHC so that all the VHWs can see what measles looks like. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients (seen in BHC and classroom)
	<p>3.2 State when a child with measles should be sent to the BHC.</p> <p><u>Teaching Point</u></p> <ol style="list-style-type: none"> 1. Sometimes a child with measles gets pneumonia. This is very serious. Treat with penicillin. If child is not better in 3 days, send him to the BHC. 		
42	<p>3.3 List 3 principles important in the prevention of measles:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The best way to prevent measles is with measles vaccine. 2. If the children in your village are not vaccinated, and if there are children with measles, it is very important that children who have measles should be isolated (no other children should come in their room if possible). 3. The most important way to prevent death in measles is to make sure that the sick child has plenty to drink and eat. Even if the child does not want to eat, he must be forced to (especially yoghurt, milk, eggs, vegetables, etc.). Remember, parez is very harmful in measles. 	<ol style="list-style-type: none"> 1. Discuss the importance of measles vaccine. 2. Stress the importance of making sure that children with measles have enough to drink and eat. 3. Discuss how pneumonia following measles can be a killer and how the VHW can save many lives by treating the pneumonia early. 	

VHW TEACHING PLAN - CURATIVE

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
4.0 Aches and Pains	<p>4.1 What two kinds of patients with aches and pains should always be sent to the BHC?</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. All patients with a stiff neck and fever must be sent immediately to the BHC. 2. All patients whose pains are very severe should be sent to the BHC. 	<ol style="list-style-type: none"> 1. Discuss with the VHWs how aches and pains are part of life and usually cannot be "cured", especially in older people. 2. Find patients with aches and pains at the BHC and have them come to the class so the VHWs can talk to them. 	<ol style="list-style-type: none"> 1. Blackboard, Chalk, eraser 2. VHW Manuals 3. "Heat Packs" (warm boiled water, clean cloth, bowls) 4. Patients seen in BHC and classroom.
	<p>4.2 List 3 principles in the prevention of aches and pains.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Many aches and pains are part of life and cannot be prevented. 2. Tell villagers to rest frequently when working, to get enough sleep, to relax, and to avoid accidents. 3. Always, the VHW must set an example for others. 		
	<p>4.3 List 4 points involved in the treatment of aches and pains.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. For children less than 2 years old - give nothing. 2. For children 2 years or older, give children's aspirin. 3. For adults (over 12 years), give Adult aspirin. 4. When a muscle is sore, rest is important. Also, heat packs can be applied (cloth put in very warm, but not too hot, water, then put on the aching part of the body after squeezing out the extra water), 3 times per day. 	<ol style="list-style-type: none"> 1. Point out to the VHWs that although children under 2 should not take aspirin they can receive other drugs if needed (such as penicillin, iron, multivitamins etc.) 2. Practice making "heat packs" - do it in the class and have a VHW prepare the pack and put it on another VHWs "sore" muscle. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
5.0 Worms	<p>5.1 List 5 important points in preventing worms</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The best way to prevent worms is to be careful to only eat clean food and drink clean water. 2. Vegetables grown with the use of "night soil" must be washed very carefully before eating, since the worm eggs in feces spread the disease. 3. It is very important to always wash your hands with soap and water before preparing food, before eating, and after defecating. 4. Children who play in the dirt must avoid putting their hands in their mouths and should wash their hands frequently. 5. Since worms are spread by human feces, it is very important to defecate in a protected latrine or else bury the feces so it does not contaminate food or children's hands. 	<ol style="list-style-type: none"> 1. Always, the VHWs themselves must be careful (as a good example to others) in eating only clean food and drinking only clean water. They must also keep their own children clean as an example. 2. Try to find a child at the BHC who has worms. Have the VHWs talk to the child to find out how the child probably got worms. 3. Walk around BHC with the VHWs (this can also be done on home visits) and have the VHWs point out places where children can easily pick up worms or where vegetables are contaminated with "night soil". 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients (from BHC) seen in BHC and classroom.
	<p>5.2 List 4 things you should know about treating worms</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Give worm medicine (piperazine) to adults and children who have actually seen worms in their stool. 2. You should not give the worm medicine to children less than 1 year old. 3. If the medicine doesn't work after 2 days, you can give it again 2 weeks later. 4. For children between 1 and 5 years, if there is enough worm medicine, it is a good idea to give each of them the medicine every 3 months, even if they haven't seen worms in their stool. 	<ol style="list-style-type: none"> 1. Discuss with the VHWs the treatment of worms. Point out that a child with a big belly very likely has worms. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>6.0 Abdominal Pain ("Stomach Pain")</p>	<p>6.1 When should the VHW send a patient with abdominal pain to the BHC?</p> <p><u>Teaching Point</u></p> <p>1. Send the patient to the BHC immediately when the pain is very severe (the belly becomes hard), or when vomiting is very severe.</p>	<p>1. Discuss with the VHWs the importance of acting <u>very fast</u> in the case of severe abdominal pain (a hard belly and fever). This may require surgery and the patient <u>must</u> be sent <u>immediately</u> from the village.</p>	<p>1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients (seen in classroom and BHC)</p>
	<p>6.2 List 3 principles important in the prevention of stomach pain.</p> <p><u>Teaching Points</u></p> <p>1. The best prevention is to eat a variety of nutritious foods (such as milk, yoghurt, and dough). 2. Cigarette smoking and snuff (naswar) are bad for the stomach. 3. Alcohol is also a cause of abdominal pain, besides being against the Holy Koran.</p>	<p>1. Once again, the VHW should set a good example by <u>not</u> smoking or taking naswar. If possible, try to keep VHWs from smoking in class (as an example).</p>	

45

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
7.0 Colds, Sore Throat, Earaches	<p>7.1 List the 4 kinds of patients with colds, sore throats, and earaches who should be sent by the VHW to the BHC.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. When there is a cough for more than 2 weeks, with loss of weight (possible Tb). 2. When there is a bad cough, fever more than 38°, and the patient is not better after penicillin. 3. When there is severe pain in the chest with coughing. 4. When there is an ear that drains (pus or blood) for more than 1 week (remember that most colds, sore throats and earaches get better in a few days even without medicine). 	<ol style="list-style-type: none"> 1. Try to have several patients come to the class from the BHC with colds, sore throats, and earaches so that the VHWs can practice on them. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients seen in BHC and classroom
	<p>7.2 List 4 important points in the prevention of colds, sore throats, and earaches.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. If someone has a cold, he should not spend much time close to other people. 2. When someone with a cold coughs or sneezes, he should cover his mouth with his hand and turn his head away from other people. 3. If you keep warm and dry, get plenty of rest, and have a good diet, you are much less likely to get a cold, sore throat or earache. 4. Babies should not be wrapped up tightly or kept too warm (with too many clothes) - this actually makes them more likely to become sick. 		

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
7.3 Colds, Sore Throats, Earaches (continued)	<p>7.3 List 4 principles in the treatment of colds, sore throats, and earaches.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. For all colds and sore throats, give aspirin. 2. Take the patient's temperature - if it is over 38° and there is a cough, give penicillin. 3. If there is an earache and temperature is more than 38°, give sulfa. If you do not have sulfa, give penicillin. Give aspirin for ear pain. 4. For sore throat, have patient gargle salt and warm water. Also, give aspirin. If the throat is <u>very</u> sore and temperature is over 38°, give penicillin. 	<ol style="list-style-type: none"> 1. Discuss with the class the importance of not giving penicillin or sulfa to everyone with a cold who claims to have fever. Colds and most sore throats are <u>not</u> helped by penicillin or sulfa. In fact, if everyone gets penicillin for colds, after a while there will be no penicillin left and penicillin will no longer be effective even against pneumonia. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>8.0 Pneumonia</p>	<p>8.1 What is pneumonia?</p> <p><u>Teaching Point</u></p> <p>1. Sometimes a cold becomes worse and there is a bad cough, with sputum. If there is also a high fever, this could be pneumonia. Unless it is treated quickly, pneumonia can cause death (especially in a young child).</p>	<p>1. It is very important to find patients at the BHC who think they have pneumonia. Have them come to class and have a VHW decide if he probably has pneumonia or not and what he would do for this person if he were in n's village.</p>	<p>1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients seen in classroom and in BHC.</p>
	<p>8.2 What 2 kinds of patients with cough and fever should be sent by the VHW to the BHC?</p> <p><u>Teaching Points</u></p> <p>1. When the cough continues for more than 2 weeks (with loss of weight but no high fever) this can be tuberculosis and the patient should be sent to the BHC.</p> <p>2. If the patient has fever over 38°, severe cough, and is not better after 3 days of penicillin, send him immediately to the BHC.</p>		

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>8.0 Pneumonia (continued)</p>	<p>8.3 List 2 important points in the prevention of pneumonia.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. People with pneumonia should be kept away from other people as much as possible, so that their coughing does not spread the germs to the others. 2. It is very important that spit and sputum of people with pneumonia should be buried. 	<ol style="list-style-type: none"> 1. Discuss with the VHWs their ideas regarding how to "isolate" patients with certain communicable diseases. Is it possible? If not, what is the next best thing that <u>is</u> possible in their village? 	
	<p>8.4 List 2 principles in the treatment of pneumonia.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. In a child less than 5 years, count how many times he breathes in 1 minute. If it is more than 45 times per minute, give penicillin only if there is a temperature of over 38° and there is a cough. 2. If after the first packet of penicillin there is improvement (the patient is better) but still has cough or fever, give a second packet of penicillin. If you have no penicillin, sulfa can be used. 	<ol style="list-style-type: none"> 1. Find several children aged 1 or 2 years at the BHC whose mothers or fathers say they have pneumonia. Bring them to class and have the VHWs count how many times they breathe in one minute. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
9.0 Eye Problems	<p>9.1 List 4 features of an infected eye:</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. There is usually a watery or pussy discharge. 2. The eye is red. 3. The eye is painful. 4. Sometimes there is a sticky material in the eye. 	<ol style="list-style-type: none"> 1. Since eye infections (such as trachoma) are so common, it should be easy to find many people at the BHC with eye diseases. Discuss with the VHWs these cases (in front of the class). Particularly point out that many old people have poor vision, but no infection in their eyes. These people <u>cannot</u> be helped by VHWs and should be referred to the BHC or Noor Hospital in Kabul. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients seen in classroom and in BHC. 4. Tetracycline eye ointment tubes.
	<p>9.2 When should the VHW send a patient with an eye problem to the BHC?</p> <p><u>Teaching Point</u></p> <ol style="list-style-type: none"> 1. If the eye or eyes are not better in one week, send the patient to the BHC. 		
	<p>9.3 List 3 points in the prevention of eye problems</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Tell villagers to always keep their eyes clean (they should never touch or see them with dirty hands). 2. Mothers should wash their children's faces every day. It is very important that they wash around the eyes very carefully and thoroughly. 3. Insects (especially flies) should be kept away from eyes. 	<ol style="list-style-type: none"> 1. Have several children with dirty eyes and faces come to the class. Assign one VHW to each child. Have him get some clean water and wash each child's face - especially the eyes. Have the VHWs teach the mothers or fathers how to do this. 	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
9.0 Eye Problems (continued)	9.4 List 4 principles in the treatment of eye problems <u>Teaching Points</u> 1. First, wash the eye with boiled water, using a wad of clean cotton. Wipe toward the outer corner of the eye. Use a separate piece of cotton for each eye. Always treat <u>both</u> eyes, even if only one is red and painful. 2. Apply the eye medicine (tetracycline eye ointment as follows: a. Tip patient's head back or have patient lie down. b. Pull down lower lid. c. Squeeze a small amount of ointment into the inside corner of the lower lid - do not touch the eyeball with the ointment tube. 3. Have patient repeat this 3 times per day for 1 week (be sure you have taught him how to do it for his child). The person with an infected eye should never put the ointment in his own eye. Someone else in his family should be taught how to do it. Always watch to see the person put in the ointment to be sure he is doing it right. 4. If the eye is not better in one week, send to BHC. If eyes are not better in one month, give eye ointment for 1 week each month for 6 months	1. It is very important for VhWs to be able to diagnose and treat eye problems. <u>Each VhW</u> should have a chance to put tetracycline eye ointment in a patient's eye and teach a family member how to do it for the patient.	

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>10.0 Skin Problems</p>	<p>10.1 List 3 common types of skin problem.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Skin infection (skin becomes red, swollen, warm and painful). 2. Skin itches a great deal. 3. Rash (red spots on the skin). 	<ol style="list-style-type: none"> 1. Once again, many BHC patients have skin problems. Bring as many as you can before the class and, with the help of the BHC doctor or male nurse, teach the VHWs (by having the VHWs examine the patients) how to diagnose and treat and when to refer. 	<ol style="list-style-type: none"> 1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients seen in BHC and classroom 4. Gentian violet, soap, warm water, bowls, zinc oxide, mercuriochrome.
	<p>10.2 When should a patient with a skin problem be sent to the BHC?</p> <p><u>Teaching Point</u></p> <ol style="list-style-type: none"> 1. Send patient to the BHC when the skin infection has spread and become much worse, or if there is temperature over 38° for 3 days. 		
	<p>10.3 List 2 points in the prevention of skin disease.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. The skin should not be scratched (even when it itches) since this can lead to infection. 2. Always keep the skin clean and dry. 		

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>10.0 Skin Problems (continued)</p>	<p>10.4 List 6 important points in the treatment of skin problems.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. First, clean the skin with soap and warm water. 2. If the skin is infected (red, painful, swollen, and warm) soak the skin in very warm (boiled) water for 15 minutes 3 times a day. A clean cloth can be used for this. 3. For infected skin, use mercurochrome after cleaning the skin. 4. When skin is infected, after it is cleaned, put gauze on it to keep it clean and to keep flies away. 5. With skin infection, if temperature is more than 38°, give penicillin. Give aspirin for pain. 6. Use gentian violet and zinc oxide ointment for sores (not infected) as well as for burns. 	<ol style="list-style-type: none"> 1. It is important that the VHWs actually <u>use</u> the gentian violet, mercurochrome, and zinc oxide on patients (in the classroom or First Aid Room of the BHC) so they will later know what to do in their village. 	

53

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS	
11.0 Weakness and Tiredness (Anemia)	11.1 List 3 features of anemia: <u>Teaching Points</u> 1. When people do not have enough blood they become pale and weak. 2. The paleness can be seen by looking at their tongues, fingernail beds, and the bottom of their eyes (conjunctiva). 3. Anemia can be caused by not eating enough food which has iron in it (like green leafy vegetables and meat) or by bleeding (such as a woman who bleeds a great deal each month).	1. Discuss with the VHWs how people become anemic and how it can be prevented. Especially stress the problem in women, even if not pregnant or nursing.	1. Blackboard, chalk, eraser 2. VHW Manuals 3. Patients seen in BHC and classroom 4. Anemia Recognition Cards	
11.2 When should a patient with anemia be sent to the BHC? <u>Teaching Point</u> 1. When the patient has so little blood that he can't stand up without fainting or when there is a lot of bleeding he should be given plenty to drink and sent immediately to the BHC.				
11.3 List 2 points in the prevention of anemia. <u>Teaching Points</u> 1. The best prevention of anemia is a good diet - babies after 6 months of age must start eating vegetables and meat which contain iron, or they won't have enough blood. 2. Pregnant women and nursing mothers also must eat meat and vegetables to get enough iron. All pregnant women and nursing mothers should be sold iron and multivitamin packets.				

53

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
11.0 Weakness and Tiredness (Anemia) (continued)	11.4 List 3 principles in the treatment of anemia: <u>Teaching Points</u> 1. Whenever a child or adult is pale or weak, he or she should be given iron (blood medicine). 2. For pregnant women (and people who are very weak or pale) you can give a second iron packet after the first packet is finished. 3. You can also give multivitamins (in addition to iron, or, if you have no iron, instead of iron).	1. Try to have as many patients as possible (at the BHC or in the class- room) be examined for anemia by the VHWs. Supervise them as they examine conjunctiva, tongues and nailbeds. Use an Anemia Recognition Card if possible.	

55

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
12.0 Diarrhea	12.1 List five questions to ask every patient who complains of diarrhea. <u>Teaching Points</u> 1. How many days has there been diarrhea? 2. How many times per day? 3. What does the diarrheal stool look like (e.g. watery, black, red mucous)? 4. Is there blood in the stool? 5. Is there vomiting in addition to diarrhea?	1. Review the section on "Diarrhea" in both the VHW Reference Manual and the VHW Field Manual. 2. Have several children (and adults) with diarrhea come before the class, and have VHWs demonstrate how to take the proper history. 3. Discuss each "case" and how well the VHW did in history-taking.	1. VHW Reference Manual 2. VHW Field Manual 3. Blackboard, chalk, eraser
	12.2 When you examine a patient with diarrhea, what 4 things should be checked? <u>Teaching Points</u> 1. Check for dehydration by: a. Pinching skin to check for turgor. b. Checking dryness of eyes and tongue (no tears in child) c. In infant, checking soft spot on head (full or depressed). 2. If blood in stool, check for signs of anemia - nailbeds and conjunctiva. 3. Take temperature with thermometer. 4. In child 12 months to 60 months, check arm circumference with plastic armband.	1. Have several children come before the class (with parents present) and after demonstrating how to check for dehydration and anemia, have several VHWs demonstrate the physical examination. 2. Have several VHWs demonstrate proper use of the thermometer, first on each other and later on patients.	1. Thermometers 2. Plastic arm circumference bands

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
<p>12.0 Diarrhea (continued)</p>	<p>12.3 Tell how to diagnose the following conditions: moderate diarrhea, severe diarrhea, moderate dehydration, and severe dehydration.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Moderate diarrhea is when the stool is mostly liquid and there are 3 or more per day. 2. Severe diarrhea is when there is severe vomiting together with diarrhea so that the patient is unable to drink. 3. Moderate dehydration is when there is diarrhea and/or vomiting with a low level of fluid intake and dryness of tongue and eyes. 4. Severe dehydration is recognized in a young child when the soft spot on his head is depressed and in other patients by testing the skin. 	<ol style="list-style-type: none"> 1. Review diagnosis based on Reference and Field Manuals. 	<ol style="list-style-type: none"> 1. VHW Reference Manual 2. VHW Field Manual 3. Blackboard, chalk, eraser
	<p>12.4 State which 2 types of patients with diarrhea should be referred to the BHC.</p> <p><u>Teaching Points</u></p> <ol style="list-style-type: none"> 1. Any patient who has blood in his stool or who vomits blood. 2. Any patient (particularly a child) who is dehydrated and because of frequent vomiting is unable to drink any oral rehydration fluid. 	<ol style="list-style-type: none"> 1. Review when to refer and when to treat (when VHW is in the village). 2. Have a child (or children, if possible) come before the class (with their parents) and have the VHWs teach the parents how to prepare the oral rehydration fluid and how to feed it properly to infants and children. 	<ol style="list-style-type: none"> 1. Oralyte packets 2. One liter plastic bags 3. Boiled water 4. Cup and spoon 5. Teapot

57

TOPIC	OBJECTIVES AND TEACHING POINTS	HOW TO TEACH THIS	TEACHING MATERIALS
12.0 Diarrhea (continued)	<p data-bbox="268 282 898 409">12.5 All patients with diarrhea should receive Oralyte (Oral rehydration fluid) packages. State the 6 steps in the use of Oralyte.</p> <p data-bbox="268 442 514 475"><u>Teaching Points</u></p> <ol data-bbox="268 508 928 1268" style="list-style-type: none"> 1. Explain to the patient that the Oralyte packet must be mixed in the 1-liter plastic bag with boiled water. 2. Then, the contents of the plastic bag must be put in a teapot or other container. 3. The liquid should be drunk in 1 day - patients should not drink the fluid after 24 hours unless the fluid is thoroughly boiled again. 4. Show the mother or father how to feed the liquid to babies or children with diarrhea. For babies use a spoon and feed slowly. For children, have them use a cup and drink slowly. 5. If there is vomiting, the mother or father should give 1 teaspoon of liquid every 5 minutes. 6. The VHW must make a home visit the next day to make sure the child is drinking the liquid. At least 1 packet should be drunk in a day. If the diarrhea is severe, 2 or 3 packets should be drunk in 1 day. 	Same as 12.4	Same as 12.4

VHW TEACHING PLAN - IMMUNIZATION

Topic	Objectives and Teaching Points	How to Teach This	Teaching Materials Needed
<p>1.0 Preparation for Immunization (Prior to giving Injection)</p>	<p>1.0 List the form steps involved in preparation for giving a vaccination.</p> <p><u>Teaching Points:</u></p> <p>A. Make certain that your needles and your syringes have been recently boiled.</p> <p>B. Make certain that the bottle of vaccine has been kept cool the entire time you have had it.</p> <p>C. Make sure that you will be able to give at least 10 injections of each of your vaccines on the day you begin immunizing.</p> <p>D. Have your Immunization Register Book and the Vaccination Cards with you when you are immunizing.</p>	<p>1.0</p> <ol style="list-style-type: none"> 1. Have VHWs discuss how they will keep their needles and rings clean. 2. Demonstrate use of the alcohol spirit lamp for boiling needles and syringes. 3. Have VHWs discuss how they will organize their fellow villagers to insure at least 10 vaccinations in one day for each vaccine. 4. Demonstrate use of the record system. Have a VHW fill out (before the class) a sample patient for his Immunization Register Book and Immunization Card. 	<p>1.0</p> <ol style="list-style-type: none"> a) Alcohol lamps b) Alcohol c) Syringes d) Needles (for intra-dermal and I.M. injections) e) Immunization Register Books f) Vaccination cards g) Blackboard, chalk, eraser

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<p>1.1 DPT Vaccine</p>	<p>1.1 For DPT vaccine, state to whom the vaccine should be given, how often, and how many injections are needed.</p> <p><u>Teaching Points:</u></p> <p>A. DPT must be given to all children between the ages of 3 months and 5 years.</p> <p>B. There must be at least 1 month between shots.</p> <p>C. Each child must receive 3 injections.</p>	<p>1.1</p> <p>1. Explain the DPT vaccine and question the VHWs on target population and timing.</p>	<p>1.1</p> <p>a) DPT vaccine b) Blackboard, chalk, eraser</p>
<p>1.2 BCG Vaccine</p>	<p>1.2 For BCG vaccine, state to whom the vaccine should be given, how often, and how many injections are needed.</p> <p><u>Teaching Points:</u></p> <p>A. BCG must be given to all children from birth to 14 years of age.</p> <p>B. Only one injection is needed (given in the right upper arm). If a second injection is given, there is no problem.</p>	<p>1.2</p> <p>1. Explain the BCG vaccine and question the VHWs on target populations and timing.</p>	<p>1.2</p> <p>a) BCG vaccine b) Blackboard, chalk, eraser</p>
<p>1.3 Measles Vaccine</p>	<p>1.3 For measles vaccine, state to whom the vaccine should be given, how often, and how many injections are needed.</p> <p><u>Teaching Points:</u></p> <p>A. Measles vaccine must be given to all children 1 year (12 months) to 5 years of age unless you are <u>certain</u> they have had measles.</p> <p>B. Only one injection is needed.</p>	<p>1.3</p> <p>1. Explain the measles vaccine and question the VHWs on target populations and timing.</p>	<p>1.3</p> <p>a) Measles vaccine b) Blackboards, chalk, eraser</p>

60

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<p>1.4 Tetanus Toxoid</p>	<p>1.4 For Tetanus Toxoid vaccine, state to whom the toxoid should be given how often, and how many injections are needed.</p> <p><u>Teaching Points:</u></p> <p>A. Tetanus toxoid is given to all women 15 years to 45 years.</p> <p>B. 2 injections are required, at least 1 month apart.</p> <p>C. Avoid giving an injection to a woman expected to deliver within 1 week, but give the injection to all other pregnant women.</p>	<p>1.4</p> <p>1. Explain the tetanus toxoid and question the VHWs on target populations and timing.</p>	<p>1.4</p> <p>a) Tetanus toxoid b) Blackboard, chalk eraser</p>																				
<p>1.5 Table of Vaccine Schedule</p>	<p>1.5 List the Schedule of Vaccines:</p> <p><u>Teaching Points:</u></p> <table border="1" data-bbox="436 951 1150 1622"> <thead> <tr> <th>Vaccine</th> <th># of times given</th> <th>time between injections</th> <th>ages of persons immunized</th> </tr> </thead> <tbody> <tr> <td>DPT</td> <td>3</td> <td>---</td> <td>3 months to 5 yrs</td> </tr> <tr> <td>BCG</td> <td>1</td> <td>---</td> <td>Newborn babies to 14 years</td> </tr> <tr> <td>Measles</td> <td>1</td> <td>---</td> <td>1 yr to 5 yrs unless <u>certain</u> they had measles</td> </tr> <tr> <td>Tetanus Toxoid</td> <td>2</td> <td>at least 1 mo.</td> <td>All women 15-45 yrs Try not to give injection in last wk of pregnancy</td> </tr> </tbody> </table>	Vaccine	# of times given	time between injections	ages of persons immunized	DPT	3	---	3 months to 5 yrs	BCG	1	---	Newborn babies to 14 years	Measles	1	---	1 yr to 5 yrs unless <u>certain</u> they had measles	Tetanus Toxoid	2	at least 1 mo.	All women 15-45 yrs Try not to give injection in last wk of pregnancy	<p>1.5</p> <p>1. Same as above (1.1 - 1.4)</p>	<p>1.5</p> <p>a) Same as above (1.1 - 1.4)</p>
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61

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<p>1.6 Reasons for Immunizations</p>	<p>1.6 List four reasons why everyone should be immunized.</p> <p><u>Teaching Points:</u></p> <p>A. Immunization prevents the disease. (Prevention is better than cure-- if you are immunized against a disease you will probably not get that disease.)</p> <p>B. Some diseases which immunization prevents (like measles) cannot be treated effectively with any drug.</p> <p>C. Immunizations are safe and harmless</p> <p>D. Immunizations last for a lifetime</p>	<p>1.6</p> <ol style="list-style-type: none"> 1. HAVE VHWs discuss reasons for and importance of immunization 2. HAVE VHWs suggest ways they can convince their fellow villagers of the importance of immunization 3. Have the VHWs "act out" (drama) in which one pretends to be a VHW and the other pretends to be a villager who doesn't want his son immunized. 	<p>1.6</p> <p>a) Blackboard chalk, eraser</p>
<p>1.7 Diseases Prevented by Immunization</p>	<p>1.7 List 5 diseases which can be prevented by the vaccines that you will be using.</p> <p><u>Teaching Points</u></p> <p>A. Measles</p> <p>B. Tuberculosis</p> <p>C. Whooping Cough</p> <p>D. Diphtheria</p> <p>E. Tetanus</p>	<p>1.7</p> <ol style="list-style-type: none"> 1. Discuss each of the immunization diseases - how each can be prevented. 	<p>1.7</p> <p>a) Blackboard, chalk, eraser</p>

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<p>1.8 Side Effects and Complications of Vaccination</p>	<p>1.8 List three things that you should be concerned about regarding side effects or complications of immunization.</p> <p><u>Teaching Points:</u></p> <p>A. If the needle is not sterilised the patient can become very sick with several serious diseases.</p> <p>B. If BCG vaccine is given too deep (in the muscle) this can cause a serious problem.</p> <p>C. With many vaccines, the child develops a fever a few days after receiving the vaccine. Also, the child may not want to eat for a few days while he has fever. It is very important that the child get plenty to drink and eat during this time.</p>	<p>1.8</p> <p>1. Review side effects and complications of immunization</p>	<p>1.8</p> <p>a) Black board, chalk, eraser</p>
<p>1.9 Treatment of Side Effects and Complications</p>	<p>1.9 Recognize which treatments are important for the 4 major side effects and complications of immunization.</p> <p><u>Teaching Points:</u></p> <p>A. For fever, aspirin is effective and fluids should be drunk</p> <p>B. For jaundice (the skin and eyes become yellow) the patient should be sent to the BHC</p> <p>C. For muscle abscess (severe pain in the muscle below the point in the skin where the needle was inserted) with fever usually present --send patient to the BHC.</p> <p>D. After BCG vaccine, the "take" can become infected. Send patient to BHC</p>	<p>1.9</p> <p>1. Reinforce the importance of referral for serious complications</p>	<p>1.9</p> <p>a) Blackboard, chalk, eraser</p>

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<p>1.10 Giving Immunization Injections</p>	<p>1.10 List seven points you should remember about giving immunization injections.</p> <p><u>Teaching Points</u></p> <p>A. First write down in your Immunization Register Book the name, father's name, and age of the person vaccinated as well as the kind(s) of vaccine given and the date.</p> <p>B. Next, fill out the patient's vaccination card (to be kept by the patient or his mother or father).</p> <p>C. Take the vaccine vial and remove with a sterile syringe and needle only the amount needed for one vaccination.</p> <p>D. Choose your injection site carefully. For DPT, measles, and TT vaccines inject deep in the muscle in the upper outer section of the buttock.</p> <p>E. For BCG vaccine, be careful to inject in the skin in the upper right arm.</p> <p>F. Clean the skin where you want to inject with either alcohol or soap and warm water.</p>	<p>1.10</p> <ol style="list-style-type: none"> 1. Have each VHW perform as many immunizations as is practicable. 2. Have the VHW go through the entire procedure with each patient -- record keeping, injection, health education. 3. When a VHW is not giving an immunization he should be watching another do it and be asked what was done correctly and what was done incorrectly. 	<p>1.10 a) BCG, DPT, measles and TT vaccines. b) Immunization Register Book c) Vaccination Card</p>

64

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<p>1.10 Giving Immunization Injections</p>	<p>G. Before injecting pull back slightly on the syringe to be sure that you are not injecting in a vein. If blood comes into the syringe take the needle out and insert again. Whenever blood has entered the syringe it is important to boil the syringe before injecting another person.</p>		
<p>1.11 Health Education for Immunization</p>	<p>1.11 What 5 things should be told to every patient that you immunize?</p> <p><u>Teaching Points:</u></p> <p>A. What is the meaning of "vaccination,"</p> <p>B. Why vaccinations are so important.</p> <p>C. What kind(s) of vaccine you have given the patient that day.</p> <p>D. That the patient can expect fever and loss of appetite after a few days and that is normal.</p> <p>E. That if the patient cannot be made to drink or eat at the time of the fever he should come to the VHW for help (also if there is an abscess or jaundice or other serious problem).</p>	<p>1.11</p> <ol style="list-style-type: none"> 1. Discuss with the VHWs--ask them questions regarding health education. 2. Have the VHWs act out an immunization. Have them practice giving "health education" to each other. 	<p>1.11</p> <p>a) Blackboard, chalk, eraser</p>

65.