

**TRAINING METHODOLOGIES AND PRINCIPLES OF
ADULT LEARNING FOR TRAINERS OF
PREVENTION OF MOTHER-TO-CHILD
TRANSMISSION (PMTCT) OF HIV**

October 2004



ACKNOWLEDGMENTS

AED/ LINKAGES acknowledges the efforts of the people and institutions that developed the course on Training Methodologies and Principles of Adult Learning. This 10-day course is designed specifically for trainers who have already been trained in the prevention of mother-to-child transmission (PMTCT) of HIV and acquired the necessary knowledge and skills in this content area. The purpose of the course is to strengthen the capacity of a team of trainers by applying various training methodologies and principles of adult learning to training health service personnel, NGO staff, and community-based health workers.

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**TRAINING OF TRAINERS:
TRAINING METHODOLOGIES AND PRINCIPLES OF ADULT LEARNING
PREVENTION OF MOTHER-TO-CHILD TRANSMISSION (PMTCT) OF HIV**

PURPOSE: To strengthen the capacity of a team of trainers in principles of adult learning, steps to behavior change, training methodologies and facilitation skills, development of learning objectives and design of lesson plans, use of audiovisual materials, and training

OBJECTIVES

1. Develop participants' capacity to plan, organise, and conduct training.
2. Introduce participants to principles and concepts of adult learning.
3. Develop participants' capacity to formulate achievement based objectives.
4. Equip participants with knowledge of effective training methods and visual aids and skills to use them.
5. Identify effective ways to monitor and evaluate training sessions.
6. Help participants develop training plans.

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PREVENTION OF MOTHER-TO-CHILD TRANSMISSION (PMTCT) OF HIV**

TIMETABLE

TIME	Day 1	Day 2	Day 3	Day 4	Day 5
08:00–10:30	Session 1 <ul style="list-style-type: none"> Official opening Introductions, expectations, objectives, self and pre-course assessment Group dynamics 	Session 3 Planning a training/learning event Session 4 Developing learning objectives	Session 5 Facilitation skills Session 6 Training methods	Session 7 Audio and visual aids Session 8 Monitoring and evaluation in training	Session 10 Practice: Presentations of objectives, training methods, audio and visual aids, and lesson plans
10:30–11:00	T E A				
11:00–12:30	Session 2 Concepts and principles of learning	Session 4 Developing learning objectives	Session 6 Training methods	Session 9 Designing lesson plans	Session 11 Supervision
12:30–14:00	L U N C H				
14:00–16:00	Session 2 Concepts and principles of learning	Session 5 Facilitation skills	Session 7 Audio and visual aids	Session 9 Designing lesson plans	Technical up-dates
16:00–17:00	Technical up-dates	Technical up-dates	Technical up-dates	Technical up-dates	
17:00–17:15	DAILY EVALUATION				

TIME	Day 6	Day 7	Day 8	Day 9	Day 10
08:00– 10:30	Preparation for training practicum	Session 12 Practicum and feedback	Session 12 Practicum and feedback	Session 12 Practicum and feedback	Session 13 Presentation of training action plans Contract with self Final evaluation Recommendations
10:30– 11:00	T E A				
11:00– 12:30	Preparation for training practicum	Session 12 Practicum and feedback	Session 12 Practicum and feedback	Session 13 Final preparation of training action plans	Discussion of pre- and post-course assessments Official closing
12:30– 14:00	L U N C H				
14:00– 17:00	Technical up-dates	Session 12 Practicum and feedback	Session 12 Practicum and feedback	Session 13 Presentation of training action plans Post-course assessment	
17:00– 17:15	D A I L Y E V A L U A T I O N				

**TRAINING OF TRAINERS: TRAINING METHODOLOGIES AND PRINCIPLES OF ADULT LEARNING
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INSTRUCTIONAL PLAN

Session number/title	Time	Learning objectives	Content	Training methods	Materials
1: Introductions, Expectations, Objectives, Self and Pre-course Assessment	2 hrs	<ul style="list-style-type: none"> • Begin to name fellow participants, facilitators, and resource persons. • Develop a dynamic relationship with other participants and trainers. • Discuss expectations. • Explain course objectives and the purpose of the training. • Complete self-evaluation competency form • Take the pre-test. • Discuss administrative and housekeeping arrangements, and ground rules. 	<ul style="list-style-type: none"> • Introductions • Expectations • Group dynamics • Course objectives • Self evaluation competency • Pre-test 	<ul style="list-style-type: none"> • Cut infant feeding drawings or photos in half and give each participant half of one of the drawings or photos. Instruct participants to find the matching halves. Once this is accomplished, ask the pairs to introduce each other's names, expectations of the course, and some element of human interest (e.g., favourite food, hobbies, likes, dislikes). • Write expectations of participants on a flipchart, filling in expectation "gaps" and introducing missing course objectives. • Keep expectations and objectives in view during the rest of the course. • Present the Johari window and transactional analysis. • Ask each participant to complete the self-evaluation level of competency form. • Ask each participant to complete a self evaluation competency form • Ask each participant to complete a written pre-test. 	<ul style="list-style-type: none"> • Matching pairs of drawings or photos for presentation game • Participants' binders • Course timetable • General objectives written on flipchart • Visual of Johari window • Flipchart, markers, masking tape • Self-evaluation form • Pre-course assessment
2: Concepts and Principles of Learning	2.5 hrs	<ul style="list-style-type: none"> • Describe the steps in behavior change communication. • Explain 6 principles of adult learning. 	<ul style="list-style-type: none"> • Behavior change communication (BCC) • Definition and concepts of BCC 	<ul style="list-style-type: none"> • Show model of the stages of behavior change. Emphasize that just giving information is usually not enough to convince a person to change. Discuss each of the stages and the interventions to help people move through each stage. • In plenary ask participants to close their eyes and think about a personal behavior they are trying to change (not 	<ul style="list-style-type: none"> • 4 handouts: Stages of Change Model, Stages of Change and Interventions, Principles of Adult Learning and Experiential Learning

Session number/title	Time	Learning objectives	Content	Training methods	Materials
			<ul style="list-style-type: none"> • Principles of adult learning 	<p>an addictive behavior such as alcohol or tobacco use). Ask them to identify at what stage they are and why. Ask what they think they will need to move to the next stage.</p> <ul style="list-style-type: none"> • Divide participants into groups of four or five. <ul style="list-style-type: none"> - Ask groups to think about a time when someone told them what to do. - Ask them to think about how they felt. - Encourage group members to share their feelings. - Ask them to look for common themes or feelings. • Ask participants to think about a time when someone asked them what they wanted to do. <ul style="list-style-type: none"> - Ask them to think about how they felt in this situation. - Encourage group members to share their feelings. - Ask them to look for common themes or feelings and compare the two experiences. • In plenary discuss the difference between how it felt to be told what to do and how it felt to be asked what they wanted to do. <ul style="list-style-type: none"> - Ask a few participants to share their feelings. - Write common themes on a flipchart. - Discuss how these experiences relate to communicating with mothers and caregivers. - Ask: What is one way to get people to change their behavior? - How can we be facilitators when we counsel mothers? - Reinforce that this training focuses on facilitating behavior change. • Think about something you learned <u>as a child</u>. Answer 	<p>Cycle</p> <ul style="list-style-type: none"> • Cards for writing principles of adult learning • Flipcharts, markers, and masking tape

Session number/title	Time	Learning objectives	Content	Training methods	Materials
				<p>these questions for yourself:</p> <ul style="list-style-type: none"> - Why did you learn it (what motivated you to learn it)? - How did you learn it? - <i>Who helped you learn it and how would you describe your relationship with this person?</i> <ul style="list-style-type: none"> • Now think about something you learned <u>as an adult</u>— for example, how to drive a motorcycle, how to repair a piece of equipment, how to sew, how to use a computer, how to dance, etc. • Answer the same questions as above for yourself. • Turn to someone next to you and describe to each other the childhood and adult learning experiences. Compare them. • Form 4 small groups. Give 7 cards to each group and ask each group to write a principle of adult learning on each card • Ask the small groups to share their results on flipcharts in plenary and tape written principle on the wall. • Combine common principles. • Divide group into pairs and ask each pair to describe one learning principle (5 minutes). • Show the model of the experiential learning cycle. Go through the stages of learning: experience, describe, analyze and apply. • Facilitate discussion and summary in plenary. 	
3. Planning a Training/ Learning Event	2 hrs	<ul style="list-style-type: none"> • Describe the steps in planning a training/learning event • Describe the tasks and responsibilities of the 	<ul style="list-style-type: none"> • Steps in planning a learning event: “Who,” “Why,” “When,” 	<ul style="list-style-type: none"> • Divide participants into groups of four. Pass out sets of cards marked “Who,” “Why,” “When,” “Where,” “What,” “What for,” and “How.” Explain that participants should think about these questions when they are planning a training. Ask participants to put the cards in the order 	<ul style="list-style-type: none"> • 4 sets of cards marked: “Who,” “Why,” “When,” “Where,” “What,” “What for,” and

Session number/title	Time	Learning objectives	Content	Training methods	Materials
		<p>organisation, facilitators, and trainees before, during, and after training.</p> <ul style="list-style-type: none"> Begin to develop a training action plan in the participants' districts. 	<p>“Where,” “What,” “What for,” and “How.”</p>	<p>they would use if they were preparing a training.</p> <ul style="list-style-type: none"> As a large group, walk around to each of the areas where participants have laid out their steps. Have participants present the order they selected and why. Pass out handouts of the seven steps of planning. Ask participants to answer each of the questions based on this workshop. In plenary have participants share their responses. Ask participants to form 3 small working groups. Ask 1 group to list the tasks and responsibilities of all players before the training, the second group to list the tasks and responsibilities of all players during the training, and the third group to list the tasks and responsibilities of all players after the training. Share and discuss in plenary. Ask participants to start preparing their own training action plan using a given format with colleagues from the same working areas and present the plans in plenary at the end of the training. Facilitate feedback and discussion. 	<p>“How.”</p> <ul style="list-style-type: none"> Handout 3.1: Steps in planning a training/learning event Handout 3.2: Training Tasks and Responsibilities Handout 3.3: Training Action Plan Format National or district training plan Curricula and materials already developed
4. Developing Learning Objectives	1.5 hrs	<ul style="list-style-type: none"> Describe 4 major learning outcomes. Develop 3 learning objectives indicating the outcomes. 	<ul style="list-style-type: none"> Definition of learning objectives Outcomes of learning objectives “Learning Objectives Are Useful” (Mager 1984; Tracey 1992) Qualities of 	<ul style="list-style-type: none"> Brainstorm the definition of a learning/behavior objective. Give a list of objectives to 4 small groups and ask each group to 1) write the learning outcome of each objective, 2) underline the WHO, circle the HOW, double-underline the WHAT, block the context, and colour the criteria. Share and discuss in plenary. Have participants form pairs and choose a topic on PMTCT of HIV from a basket and develop 4 learning objectives (knowledge, thinking skills, psychomotor skills, and change in attitudes) for that topic. (Participant 	<ul style="list-style-type: none"> Handout 4.1: Action Words for Learning Outcomes Handout 4.2: List of Sample Learning Objectives Handout 4.3: List of Topics on PMTCT of HIV Basket Flipcharts, markers, and masking tape

Session number/title	Time	Learning objectives	Content	Training methods	Materials
			learning objectives <ul style="list-style-type: none"> • Formulation of learning objectives 	pairs will develop this topic throughout the training). <ul style="list-style-type: none"> • Share and discuss in small groups under supervision. • In plenary ask volunteers to share their objectives for a group evaluation based on SMART (specific, measurable, appropriate or adequate, relevant or realistic, and time-bound). 	
5. Facilitation Skills	2 hrs	<ul style="list-style-type: none"> • Outline effective facilitation skills to be applied in practicum. • Review listening and learning skills • Recall negotiation skill: ALIDRAA. 	<ul style="list-style-type: none"> • Setting up the training venue • Maintaining group cohesion • Keeping time for active training • Skills for facilitating discussion • Skills for facilitating experiential activities • Skills for ending a session • Skills for negotiation • Use of acronyms to facilitate knowledge and skills 	<ul style="list-style-type: none"> • Ask for 2 volunteers. • Ask 1 volunteer to role-play the facilitation of a group discussion on: positioning and attachment of the baby on the breast – in an inappropriate manner and ask the other volunteer to role play the group discussion in an appropriate manner. • Give checklist to the remaining participants to record their perceptions of the 2 role plays. • Ask participants to fill in their checklists to assess the facilitation skills. • Facilitate discussion and summary in plenary. • Divide participants into 4 groups and give each group a written topic to discuss using appropriate facilitation skills. A facilitator should be present in each group. Topics include: 1) Youths should have access to condoms to reduce HIV transmission, 2) Parents should discuss condoms and provide them to their children, 3) Men are usually responsible for increased HIV transmission, although women play a passive role, 4) A woman does not need to confide in her husband or partner that she plans to have an HIV test. • Review together Handout 5.2: How to Teach a Skill • Review listening and learning skills, and negotiation skill (ALIDRAA: ask, listen, identify difficulty, discuss, recommend, negotiate and agree on option, and follow up appointment). 	<ul style="list-style-type: none"> • Role play discussion topic: positioning and attachment • Doll and breast model • Handout 5.1: Observation Checklist for Role Play of Group Facilitation • Handout 5.2: How to Teach a Skill • 4 written PMTCT of HIV for discussion • Flipcharts, markers, and masking tape

Session number/title	Time	Learning objectives	Content	Training methods	Materials
6. Training Methods	2.5 hrs	<ul style="list-style-type: none"> Outline a variety of common training methods according to knowledge, thinking skills, psychomotor skills, and attitudes. Use appropriate training methods for a session on training in PMTCT of HIV. Discuss the advantages, limitations, and tips for improvement of each training method. 	<ul style="list-style-type: none"> Training methods based on the category of learning - learning through acquiring a new skill, enhancing thinking skills, acquiring a new attitude or belief, and acquiring knowledge. Training methods: Advantages, limitations, and tips for improvement Selecting training methods (instructional techniques) How to facilitate a learning skill 	<ul style="list-style-type: none"> Set up 4 flipcharts throughout the room with a training method based on a category of learning: 1) Training Methods–Knowledge, 2) Training Methods–Thinking Skills, 3) Training Methods–Psychomotor skills, and 4) Training Methods– Attitudes and Beliefs. Divide participants into 4 groups and ask each group to go to a flipchart. Give each group 5 minutes to write down the training methods that focus on the category in the title: knowledge; thinking skills; psychomotor skills; and attitudes and beliefs. After 5 minutes ask the groups to rotate to the next flipchart and write other methods that have not been written (some methods will overlap). Rotate 2 more times until each group has had a chance to add to each flipchart. Share results and discuss in plenary. Ask the same groups to use the methods from their first flipcharts to discuss the advantages, disadvantages, and tips for improvement for each method listed. Discuss and share in plenary. Brainstorm with participants factors to take into consideration when selecting a training method. Ask the participant pairs to develop a training method to facilitate the PMTCT of HIV session chosen from the basket in Session 4. Have pairs demonstrate the different training methods in plenary. Facilitate feedback and discussion. 	<ul style="list-style-type: none"> Flipcharts with titles Markers and masking tape Cards to write factors to take into consideration when selecting a training method Handout 6.1: Training Methods: Advantages, Limitations, and Tips for Improvement Handout 6.2: Training Techniques
7. Audio and Visual Aids	1 hr	<ul style="list-style-type: none"> List 5 types of audio and visual aids commonly used in training. 	<ul style="list-style-type: none"> Characteristics of good visual aids List of audio 	<ul style="list-style-type: none"> Brainstorm different kinds of audio and visual aids. In a buzz group of 3 people, write down: 1) characteristics of effective audio and visual aids, and 2) general guidelines for the use of audio and visual aids. 	<ul style="list-style-type: none"> Available audio and visual aids and materials to make them

Session number/title	Time	Learning objectives	Content	Training methods	Materials
		<ul style="list-style-type: none"> Discuss the use of appropriate audio and visual aids: ORPA - Observe, Reflect, Personalize, Act. Develop an audio or visual aid according to the chosen topic. (Session 4) 	<ul style="list-style-type: none"> and visual aids General guidelines for the use of audio and visual aids Use of counseling cards in a group or individual session (ORPA) 	<ul style="list-style-type: none"> Use of ORPA: Observe, Reflect, Personalize, Act. Ask participants to finish developing training method(s), and audio and visual aids relevant to the PMTCT of HIV session topic chosen in preparation for facilitating their training session. In plenary ask participants to explain the relevance of their audio and visual aid(s) to the class in relation to the session topic. 	<ul style="list-style-type: none"> Handout 7: How to Use a Visual: Poster, Counseling Card, a Health Booklet, etc.
8. monitoring and Evaluation in Training	2 hrs	<ul style="list-style-type: none"> Define monitoring and evaluation in training. Describe types of monitoring and evaluation in training. Discuss WHO, WHEN, WHAT, HOW, and WHY in order to monitor and evaluate a training. Discuss Performance Monitoring 	<ul style="list-style-type: none"> Definitions of “monitoring” and “evaluation” Characteristics of monitoring Characteristics of evaluation Types of evaluation for training/ learning Performance monitoring Methodology of evaluation 	<ul style="list-style-type: none"> Brainstorm definitions of “monitoring and evaluation”. Set up 5 flipcharts throughout the room with the following titles: 1) WHO, 2) WHAT, 3) WHEN, 4) HOW, and 5) WHY (for monitoring and evaluating) Divide participants into 5 groups and ask each group to go to a flipchart. Give each group 3 minutes to write both monitoring and evaluation ideas on the flipchart with regards to the heading. After 3 minutes, ask the groups to rotate to the next flipchart and write only ideas that have not already been mentioned. Have the groups rotate until each group has had a chance to contribute at each flipchart station. Share results in plenary. Ask the same groups to discuss in small groups the types of evaluation related to training. Discuss and share in plenary. 	<ul style="list-style-type: none"> Handout 8: Methodology of Monitoring and Evaluation Flipchart, markers and masking tape
9. Designing Lesson Plans	2 hrs	<ul style="list-style-type: none"> Differentiate between an instructional plan 	<ul style="list-style-type: none"> Definitions Guidelines for 	<ul style="list-style-type: none"> Brainstorm the meaning of “lesson plan” and “instructional plan”. 	<ul style="list-style-type: none"> Flipchart, markers and masking tape

Session number/title	Time	Learning objectives	Content	Training methods	Materials
		<p>and a lesson plan.</p> <ul style="list-style-type: none"> Develop a standard lesson plan according to format provided. 	<p>developing a lesson plan</p> <ul style="list-style-type: none"> Development of a lesson plan according to the session topic and audience 	<ul style="list-style-type: none"> Show examples of each. In buzz groups of 3, have participants discuss some guidelines for developing a lesson plan. Discuss and summarise in plenary. Give participants the lesson plan format and ask them to develop lesson plans for their chosen session topics. Ask them to research the topic, select the audience, and use objectives, training methods, and audio and visual aids previously developed. Discuss and share in plenary. 	<ul style="list-style-type: none"> Examples of a lesson plan and an instructional plan Handout 9.1: Determining the Relevancy of Content Handout 9.2: Lesson plan format
10. Practice - Presentations of Objectives, Training Methods, Audio and Visual Aids, and Lesson Plans	2 hrs	<ul style="list-style-type: none"> Practice facilitating with the group acquired knowledge and skills: in developing learning objectives; in selecting appropriate training methods; in using audio and visual aids; and in developing a lesson plan. 	<ul style="list-style-type: none"> Practice 	<ul style="list-style-type: none"> With their chosen topic, trainees have been developing learning objectives, training methods, audio and visual aids, and lesson plans. Ask participants to share these developments with the group. Facilitate feedback and discussion in plenary. 	<ul style="list-style-type: none"> Audio and visual aids
11. Supervision	1 hr	<ul style="list-style-type: none"> Define supervision. Define follow up. Outline supervisory tips. Describe key steps in a supervisory visit. 	<ul style="list-style-type: none"> Definitions Supervision tips Key steps in a supervisory visit 	<ul style="list-style-type: none"> Brainstorm the definitions of supervision and follow up. Ask for volunteers to role play an inappropriate (judgemental) supervisory visit, followed by an appropriate (supportive) supervisory visit. Other participants fill-out an observation checklist of the supervisory visits. Facilitate feedback and discussion in plenary. Present supervisory tips and key steps in a supervisory visit that have not been mentioned. 	<ul style="list-style-type: none"> Flipchart, markers and masking tape Handout 11.1: Observation checklist of a supervisory visit Handout 11.2: Tips for Supervisors Handout 11.3: Key Steps in a Good Supervisory Visit

Session number/title	Time	Learning objectives	Content	Training methods	Materials
12. Practicum and Feedback	14½ hrs	<ul style="list-style-type: none"> Facilitate a session on PMTCT of HIV topics (Session 4). Strengthen facilitation skills through feedback from the group. 	<ul style="list-style-type: none"> Practice 	<ul style="list-style-type: none"> Using the prepared list of PMTCT of HIV topics, (Session 4), participants (alone or in pairs) prepare and facilitate a 45-minute presentation based on a written lesson plan which includes formulated objectives, training methods, audio and visual aids, and evaluation methods. Record the practice facilitation on videotape for feedback at the end of the presentation. Facilitate discussion in plenary. Ask each participant and facilitator to fill out the form “Feedback to Practicum Session” and give it to the facilitators. 	<ul style="list-style-type: none"> List of training session topics on: PMTCT of HIV Video camera Handout 12: “Feedback to Practicum Session” for each practice session
13: Presentation of Training Action Plans	2 hrs	<ul style="list-style-type: none"> Present an action plan for the training PMTCT of HIV in their districts. 	<ul style="list-style-type: none"> Action plans 	<ul style="list-style-type: none"> Invite partners and participants’ supervisors to attend action plan presentations. Ask participants from the same working areas to present their action plans in plenary. Facilitate feedback and discussion. 	<ul style="list-style-type: none"> Audio and visual aids Training Plan Format from Session 3.
End of course evaluations and official closing		<ul style="list-style-type: none"> Compare acquirement of knowledge before and after training Compare level of competency before and after training 	<ul style="list-style-type: none"> Level of competency Post-course assessment & discussion Self contract Final evaluation Official closing 	<ul style="list-style-type: none"> While participants are completing the level of competency and self contract, facilitators will correct post assessment Return pre and post assessments to participants for comparison Return before and after training levels of competency to participants 	<ul style="list-style-type: none"> Handout: Post-course assessment Handout: level of competency Handout: Self contract Handout: Final evaluation

SESSION 1: INTRODUCTION, EXPECTATIONS, OBJECTIVES, AND PRE-COURSE ASSESSMENT

Duration: 2 hours

1.1 Introduction

This session officially welcomes participants, facilitators, and other resource people, gives a brief overview of the training and the program, and describes the approach of the course: active participation, teamwork, mutual respect, skill performance, and continuous feedback.

1.2 Learning objectives

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

- Begin to name fellow participants, facilitators, and resource persons.
- Develop a dynamic relationship with other participants and trainers.
- Discuss expectations.
- Explain course objectives and the purpose of the training.
- Complete self-evaluation competency form
- Take the pre-course assessment.
- Discuss administrative and housekeeping arrangements, and ground rules.

1.3 Training methods and content

- Cut infant feeding drawings or photos in half and give each participant one half. Instruct participants to find the matching halves. Once this is accomplished, ask the pairs to introduce each other by name, mention an expectation of the course, and some element of human interest (e.g., favourite food, hobbies, likes, dislikes).
- Write expectations of participants on a **flipchart**, filling in expectation "gaps" and introducing missing course objectives.
- Keep expectations and objectives in view during the rest of the course.
- **Present** the Johari window and transactional analysis.
- Ask each participant to complete the **self-evaluation** level of competency form.
- Ask each participant to complete a **written pre-course assessment**.

1.3.1 Expectations

As participants mention the expectations for the course, facilitator writes them on a flipchart and posts them on a wall throughout the training. Guide the participants in matching their expectations against the course objectives and discussing them.

1.3.2 Group dynamics

Ask participants to introduce their neighbours using guidelines you will provide.

Johari window. This is an illustration with 4 “windows” representing information that is known and unknown to yourself and information that is known and unknown to others. One of the goals of group dynamics is to widen the “window” of what is known to yourself and known to others to promote openness among facilitators and training participants and allow constructive, uncritical, and non-judgemental feedback.

Johari Window

	Known to self	Not known to self
Known to others	Open	Blind
Not known to others	Hidden	Unknown

Transactional analysis (TA). This theory of the different states of the ego, developed by Dr. Eric Berne, can help people communicate more effectively. TA says that a person plays three roles in all behavior:

P (PARENT)
A (ADULT)
B (CHILD)

The **Parent** represents values and authority and has two expressions:

- the **nurturing parent**, who cares, protects, supports and helps, and
- the **critical parent**, who punish and criticizes.

The **Adult** represents logic and rationality.

The **Child** represents emotions and has three expressions:

- the **natural child**, who is carefree and spontaneous,
- the **little professor**, who is thoughtful, creative and imaginative
- the **adapted child**, who is shameful, fearful, guilty and on guard.

The ego state changes continually. Every day we pass from one state to another.

A person who tries to protect someone else can be said to be in the parent state. A mother who looks with love at her daughter putting her doll to bed and her daughter are both in their parent state. A 50-year-old man watching football, jumping, and shouting after Maradona has scored a goal is in his child state.

Like the Johari window, TA can help improve our communication in training by helping us understand how an adult “travels” from one state to another and how important it is to be open and to help ourselves and colleagues facilitate communication.

1.3.3 Course objectives

- Develop participants’ capacity to plan, organise, and conduct training.
- Introduce participants to principles and concepts of learning.
- Develop participants’ capacity to formulate learning objectives.
- Equip participants with knowledge of effective training methods and visual aids and skills to use them.
- Identify effective ways to monitor and evaluate training sessions
- Help participants develop training plans.

1.3.4 Pre-course assessment objectives

- Assess participants’ knowledge of key course content.
- Identify participants’ strengths and weaknesses.

1.4 Materials

- Pictures for presentation game
- Binder for each participant
- Johari window illustration drawn on flipchart
- Handout 1.1: Self-evaluation level of competency form
- Handout 1.2: Pre-test assessment form
- Course timetable
- Transparency (overhead) or flipchart of course objectives
- Flipchart, markers, and masking tape

Indicate your level of competency BEFORE training: on a scale from 1 to 10, with 1 being the lowest competency, check appropriate box.

Area of competency	1	2	3	4	5	6	7	8	9	10
1. Helping another person change his or her behavior										
2. Putting principles of adult learning into practice										
3. Planning a training/learning event										
4. Using learning outcomes to develop objectives										
5. Facilitating a small group discussion										
6. Facilitating a plenary session										
7. Presenting a topic to a large group										
8. Using the experiential learning cycle										
9. Organizing a field visit										
10. Writing case studies										
11. Demonstrating a procedure										
12. Using a flipchart										
13. Using an overhead projector										
14. Preparing a lesson plan										
15. Planning and organising a training										
16. Developing a training plan										
17. Conducting a supervisory visit										
18. Developing monitoring and evaluation tools										
19. Monitoring and evaluating learning activities										

TRAINING OF TRAINERS: PRE-COURSE ASSESSMENT

1. Match the column on the left (numbers) with the column on the right (letters).

- | | |
|-----------------------|---|
| 1) Facilitation skill | a. Outcome of specific training activity |
| 2) Adult learning | b. Ability to conduct training activities effectively |
| 3) Learning objective | c. Qualities of objectives |
| 4) Lesson plan | d. The adult is at the center of all activities |
| 5) SMART | e. Detailed description of the training session |

2. List 3 guidelines for the proper use of visual aids.

.....

.....

.....

.....

3. List 3 steps in behavior change communication and give an accompanying support measure for each.

Step	Support measure
1.	
2.	
3.	

4. List 2 functions of a supervisor.

.....

.....

5. Develop 4 learning objectives on the Prevention of Mother-to-Child Transmission of HIV for each of the following categories of learning outcomes.

I. Acquisition of knowledge

II. Enhancement of thinking skills

III. Development of psychomotor skills

IV. Changes in attitudes, values, or feelings

6. List the 7 steps of planning a learning event.

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-
-
-
-
-

7. Describe 2 ways to evaluate learning.

.....

.....

8. List 6 principles of adult learning.

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9. Name 5 factors to consider when facilitating a discussion.

.....

.....

.....

.....

.....

10. Match the training methods on the left with the definition, advantage or limitation of the method on the right (number with letter).

1. Buzz group (2- 3 participants)	a. Allows participants to reflect on real-life work situations without work pressures
2. Brainstorming	b. Provides step-by-step process to participants
3. Case Study	c. Can allow participants to discuss their immediate reactions to information presented, give definitions, and share examples and experiences
4. Demonstration with return demonstration	d. Increases analytical and thinking skills
5. Field visit	e. Encourages open-mindedness (every idea should be acceptable, and judgement should be suspended)

TRAINING OF TRAINERS: PRE-COURSE ASSESSMENT ANSWER GUIDE

1. Match the columns.

- | | |
|----------------------------------|---|
| 1) Facilitation skill (b) | a. Outcome of specific training activity |
| 2) Adult learning (d) | b. Ability to conduct training activities effectively |
| 3) Learning objective (a) | c. Qualities of objectives |
| 4) Lesson plan (e) | d. The adult is the center of all activities |
| 3) SMART (c) | e. Detailed description of the training session |

2. List 3 guidelines for the proper use of visual aids. (Session 7)

Consider the size of your audience. Everyone must be able to see and hear clearly.

Centrally display the visual aid related to the topic.

Always practice beforehand with your audio and visual aid in the room where training will take place.

Do not stand in front of the visual aid.

3. List 3 steps in behavior change communication and give an accompanying support measure for each. (Session 2)

Step	Support measure
1. Having heard about it or knowing what it is	Encourage and discuss benefits - Group discussions or talks - Oral and printed word - Counseling cards - Support groups
2. Thinking about it	Negotiate and help to overcome obstacles - Home visits and use of visuals - Groups of activities for family and the community - Negotiation with the husband or partner to support the mother
3. Trying it out	Praise and reinforce the benefits - Congratulate mother and other family members as appropriate - Suggest support groups to visit or join to provide encouragement
4. Continuing to do it or maintaining the new behavior	Provide support at all levels - Praise

4. List 2 functions of a supervisor. (Session 11)

The best way to know whether a worker is performing well is to watch him or her perform on the job. This observation should be followed by a discussion of what was observed and the data collected and recorded on monitoring forms.

People who are praised for the work they are doing well are motivated to continue their work.

5. Develop 4 learning objectives on the Prevention of Mother-to-Child Transmission of HIV for each of the following categories of learning outcomes. (Session 4)

I. Acquisition of knowledge

Describe risk factors for mother-to-child transmission of HIV.

II. Enhancement of thinking skills

Compare the different infant feeding options of the HIV-positive mother.

III. Development of psychomotor skills

Demonstrate the preparation of cow's milk for an infant whose mother has chosen replacement feeding.

IV. Changes in attitudes, values, or feelings

Question the practice of replacement feeding for all HIV-positive mothers.

6. List the 7 steps of planning a learning event. (Session 3)

- Who
- Why
- When
- Where
- What
- What for
- How

7. Describe 2 ways to evaluate learning. (Session 8)

Pre/post course assessment/test

Peer evaluation

Self evaluation

8. List 6 principles of adult learning. (Session 2)

- **Respect**
- **Affirmation**
- **Relevance**
- **Dialogue**
- **Engagement**
- **Immediacy**
- **Think, Feeling, Acting**
- **Safety**

9. Name 5 factors to consider when facilitating a discussion. (Session 5)

Setting up training venue

Maintaining group cohesion

Time

Paraphrase

Use examples

10. Match the training methods on the left with the definition or advantage of the method on the right. (Session 6)

1. Buzz group (2– 3 participants) (c)	a. Allows participants to reflect on real-life work situations without work pressures
2. Brainstorming (e)	b. Provides step-by-step process to participants
3. Case Study (d)	c. Can allow participants to discuss their immediate reactions to information presented, give definitions, and share examples and experiences
4. Demonstration with return demonstration (b)	d. Increases analytical and thinking skills
5. Field visit (a)	5. Encourages open-mindedness (every idea should be acceptable, and judgement should be suspended)

SESSION 2: CONCEPTS AND PRINCIPLES OF LEARNING

Duration: 2½ hours

2.1 Introduction

Understanding the concept and principles of adult learning is important in order to foster the acquisition and transfer of knowledge and skills.

2.2 Learning objectives

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

- Describe the steps in behavior change communication.
- Explain 6 principles of adult learning.

2.3 Training methods and content

- Show the model of the stages of behavior change. Emphasise that information alone is usually not enough to convince a person to change behavior. Discuss each stage and interventions to help people move through each stage.
- Ask participants to close their eyes and think about a personal behavior they are trying to change (not an addictive behavior such as alcohol or tobacco). Ask them to identify at which stage they are and why. Ask what they think they will need to move to the next stage.
- Divide participants into groups of four or five.
 - Ask groups to think about a time when someone told them what to do.
 - Ask them to think about how they felt.
 - Encourage group members to share their feelings.
 - Ask them to look for common themes or feelings.
- Ask participants to think about a time when someone asked them what they wanted to do.
 - Ask them to think about how they felt in this situation.
 - Encourage group members to share their feelings.
 - Ask them to look for common themes or feelings and compare the two experiences.
- In plenary discuss the difference between how it felt to be told what do to and how it felt to be asked what they wanted to do.
 - Ask a few participants to share their feelings.
 - Write common themes on a flipchart.
 - Discuss how these experiences relate to communicating with mothers and caregivers.
 - Ask: What is one way to get people to change their behavior?
 - How can we be facilitators when we counsel mothers?
 - Reinforce that this training focuses on facilitating behavior change.

2.3.1 Definition of behavior change communication

Behavior change communication (BCC) is any communication (interpersonal, group talks, mass media, support groups, visuals and print materials, videos) that fosters a change in individual, family, or community behavior. Behavior change theories share the idea that benefits motivate people to change their behavior and barriers keep them from changing or trying to change.

Behavior = action or doing

Change = what are the motivators and obstacles to changing behavior

Communication = interpersonal, group talks, mass media, support groups, visuals and print materials, videos that fosters a change

- **Think** about something you learned as a child. **Answer** these questions for yourself:
 - Why did you learn it (what motivated you to learn it)?
 - How did you learn it?
 - *Who helped you learn it and how would you describe your relationship with this person?*
- Now **think** about something you learned as an adult—for example, how to drive a motorcycle, how to repair a piece of equipment, how to sew, how to use a computer, how to dance, etc.
- **Answer** the same questions as above for yourself.
- **Turn** to someone next to you and **describe** to each other the childhood and adult learning experiences. **Compare** them.
- Form 4 small groups. Give 7 cards to each group and ask each group to write a principle of adult learning on each card
- Ask the small groups to share their results on flipcharts in plenary and tape written principle on the wall.
- Combine common principles.
- Divide group into pairs and ask each pair to describe one learning principle (5 minutes).
- Show the model of the experiential learning cycle. Go through the stages of learning: experience, describe, analyze and apply.
- Facilitate discussion and summary in plenary.

2.3.2 Principles of adult learning

Needs assessment: Determine what learners need to learn. Learning must address their needs and interests. Adults come to learning with **personal goals and objectives**, which may not be the same as those that underlie the learning situations. Find out what they expect.

1. **Dialogue:** Adult learning is best achieved through dialogue. Adults have enough life experience to dialogue with any teacher about any subject and will learn new attitudes or skills best in relation to that life experience. Dialogue needs to be encouraged and used in formal training, informal talks, one-on-one counseling sessions, or any situation where adults learn.
2. **Safety in environment and process:** Make people feel comfortable making mistakes. Adults are more receptive to learning when they are both **physically and psychologically comfortable**.
 - Physical surroundings (temperature, ventilation, overcrowding, light) can affect learning.
 - Learning is best when there are no distractions.
3. **Respect:** Appreciate learners' contributions and life experience. Adults learn best when their experience is acknowledged and new information builds on their past knowledge and experience.
4. **Affirmation:** Learners need to receive praise for even small attempts.
 - People need to be sure they are correctly recalling or using information they have learned.
5. **Sequence and reinforcement:** Start with the easiest ideas or skills and build on them. Introduce the most important ones first. Reinforce key ideas and skills repeatedly. People learn faster when information or skills are presented in a structured way.
6. **Practice:** Practice first in a safe place and then in a real setting.
7. **Ideas, feelings, actions:** Learning takes place through thinking, feeling, and doing and is most effective when it occurs across all three.
8. **20/40/80 rule:** Learners remember more when visuals are used to support the verbal presentation and best when they practice the new skill. We remember 20 percent of what we hear, 40 percent of what we hear and see, and 80 percent of what we hear, see and do.
9. **Relevance to previous experience:** People learn faster when new information or skills are related to what they already know or can do.

Immediate relevance: learners should see how to use and apply what they have learned in their job or life immediately

Future relevance: People generally learn faster when they realise that what they're learning will be useful in the future.
10. **Teamwork:** Help people learn from each other and solve problems together. This makes learning easier to apply to real life.
11. **Engagement:** Involve learners' emotions and intellect. Adults prefer to be **active participants** in learning rather than passive recipients of knowledge.

People learn faster when they actively process information, solve problems, or practice skills.

12. **Accountability:** Ensure that learners understand and know how to put into practice what they have learned.
13. **MOTIVATION:** Wanting to learn
 - People learn faster and more thoroughly when they want to learn. The trainer's challenge is to create conditions in which people want to learn.
 - Learning is natural, as basic a function of human beings as eating or sleeping.
 - Some people are more eager to learn than others, just as some are hungrier than others. In one person there are different levels of motivation.
 - All the principles outlined will help the learner become motivated.
14. **CLARITY**
 - Messages should be clear.
 - Words and sentence structures should be familiar. Technical words should be explained and their understanding checked.
 - Messages should be VISUAL.
15. **FEEDBACK:** Feedback informs the learner in what areas s/he is strong or weak.

Source: Adapted from J. Vella. 1994. Learning to Listen, Learning to Teach.

2.4 Materials

- Flipcharts, markers, and masking tape
- Cards for writing adult learning principles
- Handout 2.1: Stages of Change Model
- Handout 2.2: Stages of Change and Interventions
- Handout 2.3: Principles of Adult Learning
- Handout 2.4: The Experiential Learning Cycle

Stages of Change Model

**Steps in
changing
practices**

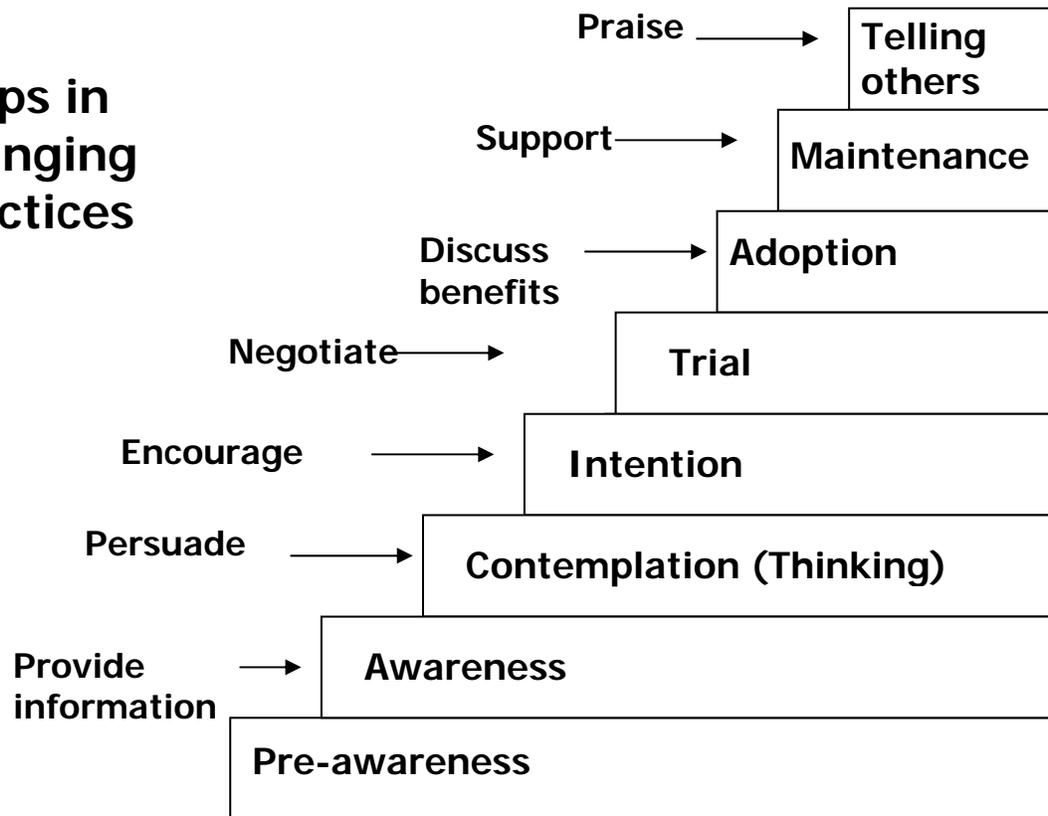


Table 1: Stages of Change and Interventions

Steps	Appropriate interventions To convince the target audience to try a new practice To support the mother's choice and change community norms
Never having heard about it	Build awareness and provide information - Drama, fairs - Community groups - Radio - Individual counseling - Mother-to-mother support groups
Having heard about it or knowing what it is	Encourage and discuss benefits - Group discussions or talks - Oral and printed word - Counseling cards - Mother-to-mother support groups
Thinking about it	Negotiate and help overcome obstacles - Home visits, visuals - Groups of activities for family and community - Negotiation with the husband and mother-in-law (or other influential family members) to support the mother
Trying it	Praise and reinforce the benefits - Congratulate the mother and other family members as appropriate - Suggest support groups to visit or join to provide encouragement - Encourage community members to provide support (radio programs)
Continuing the new behavior	Provide support at all levels - Reinforce the benefits - Praise

Principles of adult learning

1. **Dialogue:** Adult learning is best achieved through dialogue. Adults have enough life experience to dialogue with any teacher about any subject and will learn new attitudes or skills best in relation to that life experience. Dialogue needs to be encouraged and used in formal training, informal talks, one-on-one counseling sessions, or any situation where adults learn.
2. **Safety in environment and process:** Make people feel comfortable making mistakes. Adults are more receptive to learning when they are both **physically and psychologically comfortable**.
 - Physical surroundings (temperature, ventilation, overcrowding, light) can affect learning.
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- People learn faster and more thoroughly when they want to learn. The trainer's challenge is to create conditions in which people want to learn.
- Learning is natural, as basic a function of human beings as eating or sleeping.
- Some people are more eager to learn than others, just as some are hungrier than others. In one person there are different levels of motivation.
- All the principles outlined will help the learner become motivated.

14. **CLARITY**

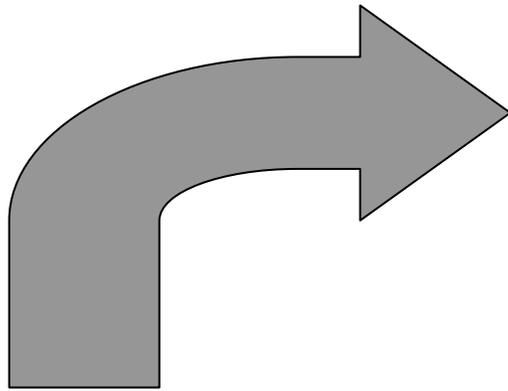
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Source: Adapted from J. Vella. 1994. Learning to Listen, Learning to Teach.

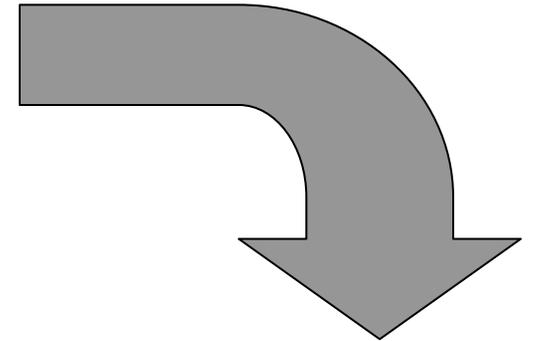
How we learn

HO 2.4



OBSERVE

The child touches the flame.

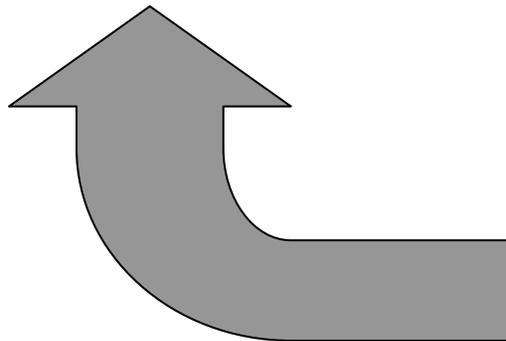


ACT

Every time I touch the flame
I get I burned.
I will never touch the flame again.

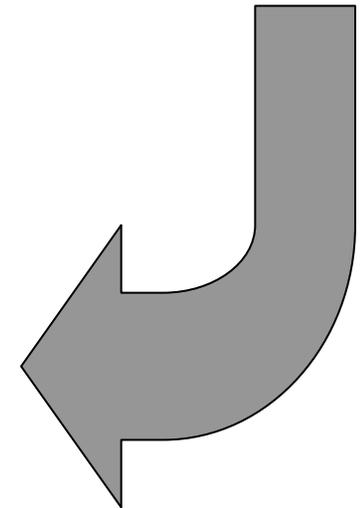
REFLECT

It hurts.
I got burned.

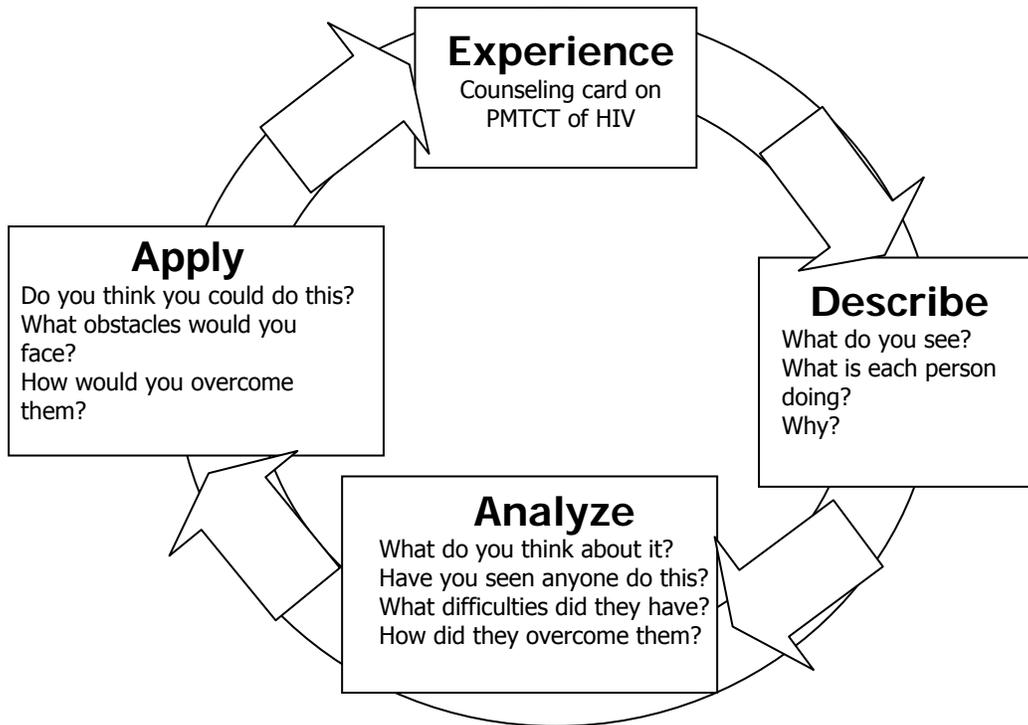


PERSONALIZE

The flame is hot. If I touch it,
it hurts me. I don't like pain.
I want to avoid pain.



The Experiential Learning Cycle



SESSION 3: PLANNING A TRAINING/LEARNING EVENT

Duration: 1 ½ hours

3.1 Introduction

This session discusses organising and planning a learning event in real situations.

3.2 Learning objective

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

- Describe the steps in planning a training/learning event
- Describe the tasks and responsibilities of the organisation, facilitators, and trainees before, during, and after training.
- Begin to develop a training action plan in the participants' districts.

3.3 Training methods and content

- Divide participants into groups of four. Pass out sets of cards marked “Who,” “Why,” “When,” “Where,” “What,” “What for,” and “How.” Explain that participants should think about these questions when they are planning a training. Ask participants to put the cards in the order they would use if they were preparing a training.
- As a large group, walk around to each of the areas where participants have laid out their steps.
- Have participants present the order they selected and why.
- Pass out handouts of the seven steps of planning. Ask participants to answer each of the questions based on this workshop. In plenary have participants share their responses.
- Ask participants to form 3 small working groups.
- Ask 1 group to list the tasks and responsibilities of all players before the training, the second group to list the tasks and responsibilities of all players during the training, and the third group to list the tasks and responsibilities of all players after the training.
- Share and discuss in plenary.
- Brainstorm with participants the characteristics of a training action plan.
- Ask participants to start preparing their own training action plans using a given format, which will vary from organisation to organisation.
- Ask participants to work on their action plans in small groups with colleagues from the same working areas and present the plans in plenary at the end of the training.
- Facilitate feedback and discussion.

3.3.1 Steps in planning a training/learning event

- **Who:** The learners (think about their skills, needs and resources) and the trainer(s).
- **Why:** Overall purpose of the training and why it is needed
- **When:** The time frame should include a precise estimate of the number of learning hours and breaks and starting and finishing times each day.
- **Where:** The location with details of available resources and equipment and how the venue will be arranged
- **What:** The skills, knowledge and attitudes that learners are expected to learn—the content of the learning event (keep in mind the length of the training when deciding on the amount of content)
- **What for:** The achievement-based objectives—what participants will be able to do after completing the training
- **How:** The learning tasks or activities that will enable participants to accomplish the “what for”.

Source: Adapted from J. Vella. *Training Through Dialogue*.

3.4 Materials

- Handout 3.1: Steps in Planning a Learning Event
- Handout 3.2: Training Tasks and Responsibilities (before, during and after training)
- Handout 3.3: Training Action Plan Format

Steps in Planning a Learning Event

Who: The learners (think about their skills, needs and resources) and the trainer(s).

Why: Overall purpose of the training and why it is needed

When: The time frame should include a precise estimate of the number of learning hours and breaks and starting and finishing times each day.

Where: The location with details of available resources and equipment and how the venue will be arranged

What: The skills, knowledge and attitudes that learners are expected to learn—the content of the learning event (keep in mind the length of the training when deciding on the amount of content)

What for: The achievement-based objectives—what participants will be able to do after completing the training

How: The learning tasks or activities that will enable participants to accomplish the “what for”.

Source: Adapted from J. Vella. *Training Through Dialogue*.

TRAINING TASKS AND RESPONSIBILITIES

Personnel	Before training	During training	After training
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Personnel	Before training	During training	After training
Manager or supervisor	<ul style="list-style-type: none"> • Identify the results wanted • Assess needs and priorities (know the problem) • Develop strategy to achieve the results • Commit resources • Collaborate with other organizations and partners • Take care of administration and logistics 	<ul style="list-style-type: none"> • Support the activity • Keep in touch • Receive feedback • Plan for later • Continuously monitor and improve quality • Motivate • Managers' presence demonstrates involvement (invest own time, effort) 	<ul style="list-style-type: none"> • Mentor trainee • Reinforce behaviors • Plan practice activities • Expect improvement • Encourage networking among trainees • Be realistic • Utilize resources • Provide supportive supervision • Motivate • Continuously monitor & improve quality
Facilitator	<ul style="list-style-type: none"> • Know audience (profile and number of trainees) • Design course content (limit content to ONLY what is ESSENTIAL to perform) • Design course content to apply to work of trainees • Develop pre- and post-assessments, guides, and checklists • Select practice activities, blend learning approaches, and materials • Prepare training agenda 	<ul style="list-style-type: none"> • Know profile of trainees • Specify the jobs and tasks to be learned • Foster trust and respect • Use many examples • Use adult learning • Create identical work situations • Monitor daily progress • Use problem-centered training • Work in a team with other facilitators • Adapt to needs 	<ul style="list-style-type: none"> • Provide follow up refresher or problem-solving sessions
Trainee	<ul style="list-style-type: none"> • Know purpose of training and roles and responsibilities after training (clear job expectations) • Expect that training will help performance • Have community volunteers "self-select" • Bring relevant materials to share 	<ul style="list-style-type: none"> • Create an action plan 	<ul style="list-style-type: none"> • Know what to expect and how to maintain improved skills • Be realistic • Practice to convert new skills into habits • Accountable for using skills

Personnel	Before training	During training	After training
Manager or supervisor and facilitator	<ul style="list-style-type: none"> • Establish selection criteria • Establish evaluation criteria • Establish criteria of adequate workspace, supplies, equipment, job aids • Specify the jobs and tasks to be learned 	<ul style="list-style-type: none"> • Provide feedback 	<ul style="list-style-type: none"> • Provide feedback • Monitor performance
Manager or supervisor and trainee	<ul style="list-style-type: none"> • Conduct situational analysis of training needs 	<ul style="list-style-type: none"> • Provide feedback 	<ul style="list-style-type: none"> • Provide feedback • Monitor performance
Manager or supervisor, facilitator, and trainee	<ul style="list-style-type: none"> • Conduct needs assessment • Establish goals • Establish objectives • Identify days, times, location (WHEN, WHERE) 	<ul style="list-style-type: none"> • Provide feedback 	<ul style="list-style-type: none"> • Provide feedback • Monitor performance
Facilitator and trainee	<ul style="list-style-type: none"> • Needs assessment feedback 	<ul style="list-style-type: none"> • Provide feedback 	<ul style="list-style-type: none"> • Provide feedback • Evaluate

Training Plan Template

HO 3.3

Region:

District:

Profile of trainees (Who)	Trainers (Who)	People responsible* (Who)	Time frame (When)	Where	Expected Outcomes (What)	Resources needed	Follow-up

*Name people responsible at district and organization levels (managers or supervisors).

SESSION 4: DEVELOPING LEARNING OBJECTIVES

Duration: 2 hours

4.1 Introduction

In any training activity the facilitator and trainees should know the expected outcome(s), written in terms of learning objectives, so they can assess progress and process.

4.2 Learning objectives

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

- Describe 4 major learning outcomes.
- Develop 4 learning objectives indicating outcomes.

4.3 Training methods and content

- Brainstorm the definition of a learning, behavioral, or achievement based objective.
- Ask participants to form 4 small groups. Give the groups lists of objectives and ask each group to 1) write the learning outcome of each objective, 2) underline the WHO, 3) circle the HOW, 4) double-underline the WHAT, 5) block the context, and 6) colour the criteria.
- Share and discuss the results in plenary.
- Have participants form pairs and choose a topic on PMTCT of HIV from a basket and develop 4 learning objectives (knowledge, thinking skills, psychomotor skills, and change in attitudes) for that topic. (Participant pairs will develop this topic throughout the training).
- Share and discuss the results in small groups under supervision.
- In plenary, ask participants to volunteer to share their objectives for a group evaluation based on the SMART criteria (specific, measurable, appropriate or adequate, relevant or realistic, and time-bound).

4.3.1 Definition of learning objectives

Learning or behavioral objectives describe the outcomes of specific training activities (Mager 1984; Tracey 1992). Learning objectives describe the **expected behavior** of trainees or doers as a result of learning experiences.

4.3.2 Outcomes of learning objectives

- **Acquisition of new knowledge**
“Participants will be able to describe risk factors for mother-to-child transmission of HIV.”
- **Enhancement of thinking skills**
“Trainees will compare the infant feeding options for the HIV-positive mother.”
“Participants will analyze each factor that contributes to the spread of HIV.”
- **Development of psychomotor skills**
“Participants will conduct a training session using information or instruction they have received on preparing replacement feeds and assessing a breastfeed.”
- **Change in attitudes, values, or feelings**
“Participants will be able to advocate HIV testing and counseling.”
“Participants will be willing to share their feelings about the decision to be tested and counseled for HIV.”

4.3.3 Learning objectives are useful (Mager 1984; Tracey 1992)

- Guidelines for choosing course content and training methods
- Basis of evaluating what participants have learned
- Guidelines for learners to help organize their own learning

4.3.4 Qualities of learning objectives

- S** Specific, well explained
- M** Measurable and based on observable behavior, such as results stated in numbers
- A** Appropriate (or adequate) within the capacity of the group, feasible, achievable (resources are there, and obstacles can be overcome)
- R** Relevant (or realistic), pertinent, related to the problem and proposed solutions
- T** Time bound, and able to be met within a stated time

4.3.5 Formulation of learning objectives (components of learning objectives)

- Because trainees should be the focus of each learning objective, objectives should be stated in terms of what trainees will be able to “know, think, do, or feel” as a result of the training. These categories of learning objectives are cognitive, thinking skills, psychomotor, and affective domains.
- A learning objective should have an opening statement, for example, “The participant will be able to (action verb)” and a content reference which describes the subject being learned.

Table 1: Formulation of learning objectives

Learner (who)	Action verb (how)	Content (what)
The participant will be able to	list	optimal breastfeeding practices.
The trainee will be able to	compare	infant feeding options for the HIV-positive mother.
The trainee will be able to	demonstrate	the correct use of a condom.
The learner will be able to	describe	how to prepare replacement feeds.
The learner will be able to	express	attitudes and feelings about talking about sexual issues to his or her children.
The counselor will be able to	explain	the risk factors for mother-to-child transmission of HIV.

- When developing learning objectives, people sometimes have difficulty finding a variety of action words to fit each category of learning outcomes. Table 2 contains a sample of action words (from Rothwell and Kazanas 1992 and Tracey 1992). The level of difficulty in each category and between categories depends on the expected level of outcome (taxonomy).
- Mager (1984) and Dick and Carey (1990) add to learning objectives the context under which the learning is to be demonstrated and criteria for acceptable performance. These two elements are appropriate only for learning objectives that can be measured quantitatively.
- Sample wording to describe context: “In an infant feeding counseling session.....”
- Sample wording to describe criteria for acceptable performance: “In an infant feeding counseling session, the counselor will be able to explain at least 4 optimal breastfeeding practices.”

4.4 Materials

- Flipcharts, markers, and masking tape
- Handout 4.1: Action Words for Learning Outcomes
- Handout 4.2: List of Sample Learning Objectives
- Handout 4.3: List of Topics on PMTCT of HIV
- Basket

Action Words for Learning Outcomes

Acquisition of knowledge	Enhancement of thinking skills	Development of psychomotor skills	Changes in attitudes, values, or feelings
to identify to list to define to describe to state to prepare to recall to express to categorize to chart to rank to distinguish to explain to outline to inform to label to specify to tell	to reflect to compare to contrast to catalogue to classify to evaluate to forecast to formulate to investigate to modify to organize to plan to research to study to translate to differentiate to analyze to compute to devise to review	to demonstrate to produce to assemble to adjust to install to operate to detect to locate to isolate to arrange to build to conduct to check to manipulate to fix to lay out to perform to sort to construct to draw	to challenge to defend to judge to question to accept to adopt to advocate to bargain to cooperate to endorse to justify to persuade to resolve to select to dispute to approve to choose to feel to care to express

Rothwell and Kazanas 1992 and Tracey 1992

Sample Learning Objectives

1. The participant will define common terms related to the HIV and AIDS.
2. In the laboratory the participant will demonstrate two methods to test for HIV.
3. The participant will describe the use of 2 antiretroviral drugs to reduce mother-to-child transmission of HIV.
4. In an antenatal educational talk the counselor will describe 4 factors that facilitate transmission of HIV from mother to child.
5. The counselor will explore interventions to reduce the risk of mother-to-child transmission of HIV in a post-test counseling session.
6. In a support group participants will share experiences of how people react when they learn that they are HIV positive.
7. The participants will discuss the reaction of communities and families when a person's HIV-positive status is made public.
8. The participant will share the experience of reproductive issues for HIV-positive young couples in the family planning clinic.
9. In the delivery room the participant will demonstrate alternative breastfeeding positions.
10. In the antenatal clinic the participant will describe breast conditions that can facilitate mother-to-child transmission of HIV.
11. The participant will describe how to store expressed breastmilk.
12. In the clinic the participant will describe correctly the essential antenatal care package in relation to breastfeeding and HIV.
13. During the monthly refresher update, the participant will describe how to manage breastfeeding and prevention of mother-to-child transmission in the first, second, and third stages of labor.
14. The participant will assess a breastfeed by observing a mother and baby.
15. In a presentation to health personnel at the district level, the participant will describe UN recommendations for infant feeding in the context of HIV.

16. In a post-test HIV counseling session, a counselor will describe 5 infant feeding options in the context of HIV & AIDS
17. The participant will demonstrate to women who want to replacement feed how to prepare 1) fresh cow's milk, 2) infant formula, and 3) full-cream powdered milk.
18. In a presentation at the nursing school, the participant will define terms used in the Code of Marketing of Breast-Milk Substitutes.
19. The participant will identify 3 types of support needed for infant and young child feeding in the context of HIV.
20. In a refresher workshop, the participant will identify appropriate steps in problem solving and decision making counseling.
21. The participant will list at least 4 common HIV prevention measures and discuss how they are used in PMTCT programs.
22. The participant will observe implementation of the integrated PMTCT program at 3 or 4 clinics.
23. During a post-test counseling session, the participant will practice counseling a mother on infant feeding options in the context of HIV.
24. Participants will explore attitudes about HIV and AIDS and their impact on provision of services.

List of Topics of PMTCT of HIV

1. Factors contributing to the spread of HIV
2. Prevention of mother-to-child transmission of HIV
3. Breast conditions in relation to HIV and infant feeding
4. Composition of breastmilk
5. Preparation for breastfeeding in antenatal, labor and delivery, and post-natal periods
6. Baby-Friendly Hospital Initiative in the context of HIV
7. Management of breastfeeding—positioning and attachment in relation to HIV
8. Infant feeding options in the context of HIV and AIDS
9. Techniques of replacement feeding preparation
10. Role of men in infant feeding and HIV and reproductive health
11. Common sexually transmitted infections in relation to HIV
12. Opportunistic infections and their management
13. Expression and storage of breastmilk
14. Code of Marketing of Breast-Milk Substitutes
15. Complementary feeding in the context of HIV
16. Women's nutrition in the context of HIV
17. Impact of HIV and AIDS in the country
18. Basic facts of HIV
19. Exclusive breastfeeding in relation to HIV
20. Voluntary counseling and testing
21. HIV testing and related issues
22. Optimal breastfeeding practices
23. How to counsel mothers, caregivers, fathers, grandmothers
24. How to assess a breastfeed

SESSION 5: FACILITATION SKILLS

Duration: 2 hours

5.1 Introduction

This section enables participants to improve training in PMTCT of HIV. Ideally, in experiential active training there is a facilitator for every 5–7 participants. These facilitators form a team of **facilitators**. The most important facilitation skill is the ability to listen actively. Participants feel valued when others listen to their comments, feelings, and beliefs.

5.2 Learning objectives

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

- Outline effective facilitation skills to apply in the practicum.
- Recall the negotiation skill: ALIDRAA.

5.3 Training methods and content

- Ask for 2 volunteers.
- Ask 1 volunteer to role-play the facilitation of a group discussion on: positioning and attachment of the baby on the breast – in an inappropriate manner and ask the other volunteer to role play the group discussion in an appropriate manner.
- Give checklist to the remaining participants to record their perceptions of the 2 role plays.
- Ask participants to fill in their checklists to assess the facilitation skills.
- Facilitate discussion and summary in plenary.
- Divide participants into 4 groups and give each group a written topic to discuss using appropriate facilitation skills. A facilitator should be present in each group. Topics include: 1) Youths should have access to condoms to reduce HIV transmission, 2) Parents should discuss condoms and provide them to their children, 3) Men are usually responsible for increased HIV transmission; women play a passive role, 4) A woman does not need to confide in her husband or partner that she plans to have an HIV test.
- Review together Handout 5.2: How to Teach a Skill
- Review listening and learning skills, and negotiation skills (ALIDRAA: ask, listen, identify difficulty, discuss, recommend, negotiate and agree on option, and follow up appointment).

5.3.1 Setting up the training venue

- An open setting is better for adult learning. A circle is ideal if there are no tables to act as barriers.
- Tables can be arranged outside the circle in different parts of the room for small group work.

- If tables are needed, they should be arranged so that all participants face each other.

5.3.2 Maintaining group cohesion

- Observe what goes on in the groups.
- Identify and deal with group needs.
- Be flexible.
- Deal with side comments.
- Agree on ground rules.

5.3.3 Keeping time for active training

- Active training takes time, so no time should be wasted.
- How to avoid wasting time (adapted from Silberman, M. 1995. *101 Ways to Make Training Active*)
 - **Start on time.** This sends a message to latecomers that you are serious.
 - **Give clear instructions.** Don't start an activity when participants are confused about what to do. If directions are complicated, put them in writing.
 - **Prepare visual information ahead of time.** Don't write lecture points on flipcharts or a blackboard while participants are watching. Have the notes pre-recorded. If you do record participant input, don't write down every word. Instead, use "headlines" or bullets to capture what participants are saying.
 - **Distribute handouts quickly.** Prepare handouts before the session and give them to several people to distribute.
 - **Expedite sub-group reporting.** Ask sub-groups to list their ideas on flipchart paper and post their lists on the walls. Sub-group lists should not repeat what has really been said.
 - **Do not let discussions go on too long.**
 - **Get volunteers quickly.** Don't wait endlessly for participants to volunteer.
 - **Be prepared for tired or lethargic groups.** Provide a list of ideas, questions, or energizers.
 - **Speed up the pace of activities from time to time.**

- **Get the participants' prompt attention.** Use a variety of cues or attention-getting devices.

5.3.4 Skills for facilitating discussion

- The role of a trainer during a group discussion is to facilitate the flow of participants' comments and experience. The facilitator need not comment after each participant speaks, but periodic comments and open-ended questions can be helpful.
- The following skills can help facilitate a discussion (adapted from Silberman)
 - **Paraphrase** what a participant says so he or she feels understood and the other participants can hear a concise summary.
 - **Check your understanding** of a participant's statement or ask the participant to clarify what he or she is saying.
 - **Give thanks** for comments.
 - Elaborate on a participant's comments with **examples**, or suggest a new way to think about the topic.
 - **Energize a discussion** by quickening the pace, using humour or prodding the group for more contributions.
 - Disagree (gently) with a participant's comments to **stimulate further discussion**.
 - **Mediate differences** of opinion between participants and relieve tensions that may be brewing.
 - **Pull together ideas**, showing their relationship to each other.
 - **Change the group process** by breaking the group into smaller groups or asking the group to evaluate ideas that have been presented.
 - **Summarize** (and record, if desired) the group's main views.

5.3.5 Skills for facilitating experiential activities

- Experience is the richest resource for adult learning. Experiential (or hands-on) activities help make training active. It is often far more effective to experience something than to hear about it.

- Experiential activities usually involve role playing, games, simulations, field practice, and problem-solving. The following steps help make these activities successful (adapted from Silberman)
 - **Explain your objectives.** Participants like to know what is going to happen and why.
 - **Speak slowly when giving directions.** Make sure the instructions are understood. You might also provide visual backup.
 - **Demonstrate the activity if the directions are complicated.** Let the participants see the activity in action before they do it.
 - **If necessary, divide the participants into small groups before giving further instructions.**
 - **Challenge the participants.** A moderate level of tension creates more energy.
 - **Always discuss the activity.** When an activity has ended, invite participants to process their feelings and share their insights and learning.

5.3.6 Skills for ending a session

- Each session needs a conclusion so that participants don't become frustrated by loose ends.
- The following steps will help end a session successfully:
 - **Summarize the key points.**
 - **Emphasize the main message(s).**
 - **Propose a challenge from the issues discussed:**
 - “Discuss with other health personnel the optimal breastfeeding practices”
 - “Talk to your partner about using LAM”
 - **Pose a question that can also be a challenge:**
 - “Would you ever consider exclusive breastfeeding?”
 - “Have we achieved the session objectives?”
 - **Offer a personal conclusion.**

5.3.7 Listening and learning skills

Listening and learning skills

1. Use helpful non-verbal communication
 - Keep your head level with mother/parent/caregiver
 - Pay attention
 - Remove barriers (tables)
 - Take time
 - Appropriate touch
2. Ask open questions
3. Use responses and gestures that show interest
4. Reflect back what the mother says
5. Empathize – show that you understand how she feels
6. Avoid using words that sound judging

5.3.8 Skills for negotiation

- Negotiation is important because information alone is usually not enough to change behavior.
- Using negotiation during a clinic consultation, growth monitoring, or a home visits means:
 - Helping mothers or other family members understand how to optimally feed their infant
 - Asking them to try a new practice (eliminating the giving of water to the baby, for example). Once they have tried the new practice, they usually see the benefits and will maintain them.
 - Helping them overcome barriers to trying and or adopting a new practice
- Two contacts with the mother or family are recommended:
 - Contact #1: Identify one practice that would enhance optimal breastfeeding. Ask whether the mother is willing to try the new practice.
 - Contact #2: Follow up the first visit(s) to see how the new practice is going and, if needed, make a new recommendation.

5.3.9 Use of acronym to facilitate knowledge and skills

➤ Use of negotiation skills: ALIDRAA

- A** Ask a woman about how she feels about exclusive breastfeeding.
- L** Listen to what she says.
- I** Identify the difficulty or problem.
- D** Discuss various options with her.
- R** Recommend options or encourage or congratulate the woman based on the information she gives you.
- A** Negotiate with the woman to agree to try one of the options that was recommended
- A** Make a follow-up appointment.

5.4 Materials

- Flipcharts, markers, and masking tape
- Doll and breast model
- Handout 5.1: Observation Checklist for Role-Play of Group Facilitation
- Handout 5.2: How to Teach a Skill

Observation Checklist for Role Play of Group Facilitation

1. Setting up the training venue

- Group facilitation takes place in an open-setting without tables.
- All participants can face each other.

2. Maintaining group cohesion

- Facilitator observes what goes on in the group.
- Facilitator is flexible.

3. Keeping time for active training

- Facilitator gives clear instructions.
- Visuals were prepared ahead of time.
- Handouts are distributed quickly.
- Discussion is not too long.

4. Skills for facilitating discussion or experiential activities

- Facilitator speaks slowly when giving directions.
- Facilitator challenges the participants.
- Facilitator paraphrases what participants say.
- Facilitator praises.
- Facilitator uses examples.

5. Skills for ending a session

- Facilitator or volunteer summarizes key points.
- Facilitator emphasizes the main message(s).

How to Teach a Skill

1. Discuss the skill and the reason to do it.
2. Demonstrate (perfect model).
4. Discuss.
5. Practice in class (everyone practices with the same case).
6. Discuss.
7. Practice in class (everyone practices with different cases).
8. Discuss.
9. Practice in a real situation in the field.
10. Discuss.

SESSION 6: TRAINING METHODS

Duration: 2½ hours

6.1 Introduction

Given the principles of adult learning, training methods play an important role in transferring knowledge and skills and changing attitudes. Appropriate training methods cut across knowledge, thinking, doing, and feeling.

6.2 Learning objectives

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

- Outline various common training methods according to knowledge, thinking skills, psychomotor skills, and attitudes.
- Use appropriate training methods for a session on training in PMTCT of HIV.
- Discuss the advantages, limitations, and tips for improvement of each training method.

6.3 Training methods and content

- Set-up 4 flipcharts throughout the room with a training method based on a category of learning: 1) Training Methods—Knowledge, 2) Training Methods—Thinking Skills, 3) Training Methods—Psychomotor Skills, and 4) Training Methods—Attitudes and Beliefs.
- Divide participants into 4 groups and ask each group to go to a flipchart.
- Give each group 5 minutes to write down the training methods that focus on the category in the title: knowledge; thinking skills; psychomotor skills; and attitudes and beliefs.
- After 5 minutes have the groups rotate to the next flipcharts and write other methods that have not been written (some methods will overlap).
- Rotate again until each group has had a chance to add to each flipchart.
- Share results and discuss in plenary.
- Ask the same groups to discuss the advantages and disadvantages of each method listed on their first flipcharts and tips for improvement.
- Discuss and share in plenary.
- Brainstorm the factors to take into consideration when selecting a training method
- Ask the participant pairs to develop a training method to facilitate the PMTCT of HIV session chosen from the basket in session 4.
- Have pairs demonstrate the different training methods in plenary.
- Facilitate feedback and discussion.

6.3.1 Training methods based on the category of learning

Learning through acquiring a new skill	Learning through enhancing thinking skills	Learning through acquiring a new attitude or belief	Learning through acquiring knowledge
Demonstration with return demonstration			Talk or presentation
Role-play	Role-play	Role-play	Buzz group
	Case study	Group discussion	Plenary discussion
Field visit	Brainstorming		
		Drama	Drama
	Action plan		
	VIPP	VIPP	VIPP

6.3.2 Selecting training methods (instructional techniques)

- There is no best way to help people learn.
- Take these 8 factors into consideration when choosing instructional techniques (Robinson 1979; Apps 1991; Rothwell and Kanzas 1992; Tracey 1992):

1. Learning objectives

- Acquiring new knowledge?
- Enhancing thinking skills?
- Developing psychomotor skills?
- Or changing attitudes, values and/or feelings?

2. Trainers (instructors)

- Are they capable of using the method?
- Are they comfortable doing so?

3. Content

- Is the content abstract or concrete?
- How complex and comprehensive is the material?

4. Participants

- How many participants are there?
- What are their characteristics?
- Are they capable of learning through those techniques?

5. Training techniques

- What can realistically be done with the techniques?
- How difficult are the techniques to use?

6. Time

- What time period is available?

7. Cost

- Are the costs associated with the techniques realistic?

8. Space, equipment, and materials

- Are these all readily available?

6.4 Materials

- Flipcharts with titles
- Markers and masking tape
- Cards to write factors to take into consideration when selecting a training method
- Handout 6.1: Training Methods: Advantages, Limitations, and Tips to Improve
- Handout 6.2: Training Techniques

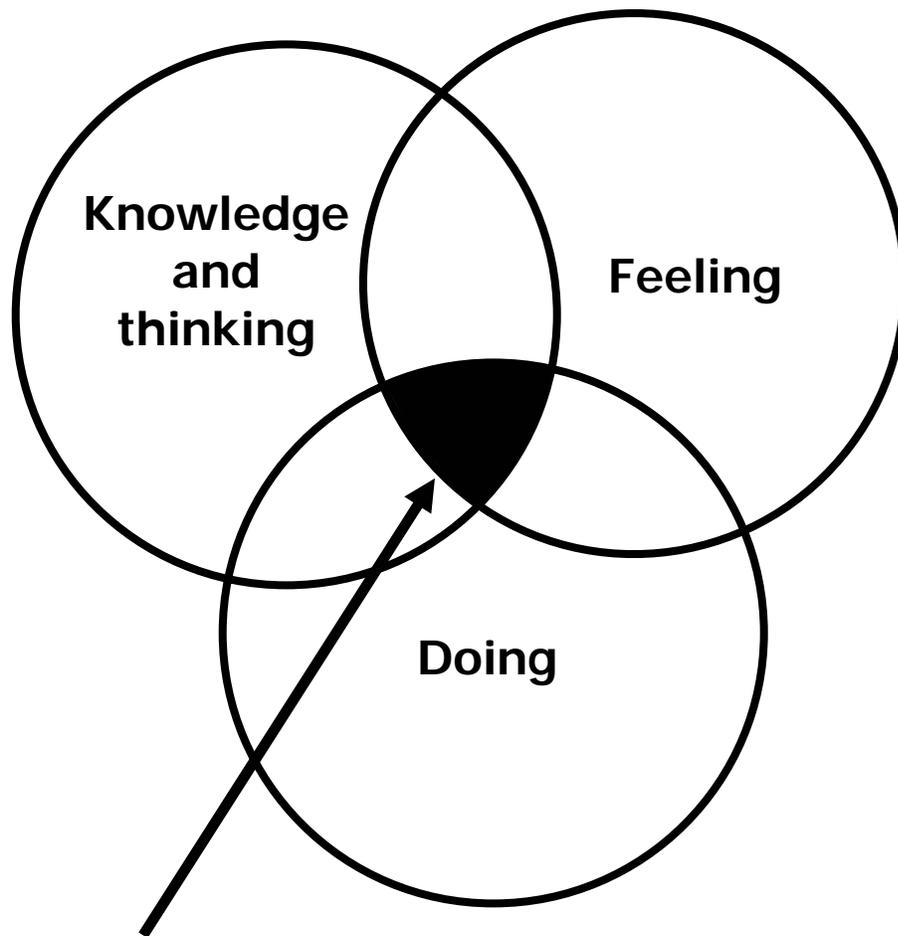
Training Methods: Advantages, Limitations, and Tips for Improvement

Training method	Advantages	Limitations	Tips for Improvement
<p>Small group discussion in a group of no more than 7 participants who discuss and summarise a given subject or theme. The group selects a chairperson, a recorder, and/or someone to report to plenary.</p>	<ul style="list-style-type: none"> • Can be done any time and anywhere • Allows two-way communication • Lets group members learn each other's views and sometimes makes consensus easier • Allows group members to take on different roles (e.g., leader, recorder) to practice facilitation techniques • Involves active participation • Lets participants ask and learn about unclear aspects • Often lets people who feel inhibited share • Can produce a strong sense of sharing or camaraderie • Challenges participants to think, learn, and solve problems 	<ul style="list-style-type: none"> • Strong personalities can dominate the group. • Some group members can divert the group from its goals. • Some participants may try to pursue their own agendas. • Conflicts can arise and be left unresolved. • Ideas can be limited by participants' experience and prejudices. 	<ul style="list-style-type: none"> • Outline the purpose of the discussion and write questions and tasks clearly to provide focus and structure. • Establish ground rules (e.g., courtesy, speaking in turn, ensuring everyone agrees with conclusions) at the beginning. • Allow enough time for all groups to finish the task and give feedback. • Announce remaining time at regular intervals. • Ensure that participants share or rotate roles. • Be aware of possible conflicts and anticipate their effect on the group's contribution in plenary. • Reach conclusions but avoid repeating points already presented in plenary.
<p>Buzz group (2– 3 participants) can allow participants to discuss their immediate reactions to information presented, give definitions, and share examples and experiences</p>	<ul style="list-style-type: none"> • Gives everyone a chance and time to participate • Makes it easier to share opinions, experiences, and information • Often creates a relaxed atmosphere that allows trust to develop and helps participants express opinions freely • Can raise energy level by getting participants to talk after listening to information • Does not waste time moving participants 	<ul style="list-style-type: none"> • Discussion is limited. • Opinions and ideas are limited by participants' experience. • Participants may be intimidated by more educated participants or find it difficult to challenge views. 	<ul style="list-style-type: none"> • Clearly state the topic or question to be discussed along with the objectives. • Encourage exchange of information and beliefs among different levels of participants.
<p>Brainstorming: A spontaneous process through which group members' ideas and opinions on a subject are voiced and written for selection, discussion, and agreement. All opinions and ideas are valid.</p>	<ul style="list-style-type: none"> • Allows many ideas to be expressed quickly • Encourages open-mindedness (every idea should be acceptable, and judgement should be suspended) • Gives everyone an opportunity to contribute • Helps stimulate creativity and imagination • Can help make connections not previously seen • Is a good basis for further reflection • Helps build individual and group confidence by finding solutions within the group 	<ul style="list-style-type: none"> • The ideas suggested may be limited by participants' experiences and prejudices. • People may feel embarrassed or if they have nothing to contribute. • Some group members may dominate, and others may withdraw. 	<ul style="list-style-type: none"> • State clearly the brainstorming rule that there is no wrong or bad idea. • Ensure a threat-free, non-judgemental atmosphere so that everyone feels he or she can contribute. • Ask for a volunteer to record brainstorming ideas. • Record ideas in the speaker's own words. • State that the whole group has ownership of brainstorming ideas. • Give participants who haven't spoken a chance to contribute.
<p>Plenary or whole group discussion: The entire group comes together to share ideas</p>	<ul style="list-style-type: none"> • Allows people to contribute to the whole group • Enables participants to respond and react to contributions • Allows facilitators to assess group needs • Enables people to see what other group members think about an issue • Allows individuals or groups to 	<ul style="list-style-type: none"> • Can be time consuming • Doesn't give each participant a chance to contribute • Some individuals may dominate the discussion. • Consensus can be difficult if decisions are required. • Some group members may lose interest and become bored. 	<ul style="list-style-type: none"> • Appoint someone to record the main points of the discussion. • Appoint a timekeeper. • Pose a few questions for group discussion. • Use buzz groups to explore a topic in depth. • Ask for contributions from participants who haven't shared their views.

Training method	Advantages	Limitations	Tips for Improvement
	summarise contents	<ul style="list-style-type: none"> Contribution from a limited number of participants can give a false picture of the majority's understanding of an issue. 	
Role play: imitation of a specific life situation that involves giving participants with details of the "person" they are asked to play	<ul style="list-style-type: none"> Helps start a discussion Is lively and participatory, breaking down barriers and encouraging interaction Can help participants improve skills, attitudes, and perceptions in real situations Is informal and flexible and requires few resources Is creative Can be used with all kinds of groups, regardless of their education levels 	<ul style="list-style-type: none"> Possibility of misinterpretation Reliance on goodwill and trust among group members Tendency to oversimplify or complicate situations 	<ul style="list-style-type: none"> Structure the role-play well, keeping it brief and clear in focus. Give clear and concise instructions to participants. Carefully facilitate to deal with emotions that arise in the follow-up discussion. Make participation voluntary.
Drama: Unlike role-play in that the actors are briefed in advance on what to say and do and can rehearse. As a result, the outcome is more predictable. Drama is often used to illustrate a point.	<ul style="list-style-type: none"> Commands attention and interest Clearly shows actions and relationships and makes them easy to understand Is suitable for people who cannot read or write Involves the audience by letting them empathise with actors' feelings and emotions Does not require a lot of facilities Can bring people together almost anywhere 	<ul style="list-style-type: none"> Audience cannot stop the drama in the middle to question what is going on Can be drawn out and time consuming Tends to simplify or complicate situations 	<ul style="list-style-type: none"> Encourage actors to include the audience in the drama. Follow the drama by discussion and analysis to make it an effective learning tool. Keep it short, clear, and simple.
Case study: Pairs or small groups are given orally or in writing a specific situation, event, or incident and asked to analyse and solve it.	<ul style="list-style-type: none"> Allows rapid evaluation of trainees' knowledge and skills Provides immediate feedback Increases analytical and thinking skills Is the best realistic alternative to field practice 	<ul style="list-style-type: none"> Sometimes not all trainees participate. 	<ul style="list-style-type: none"> Make the situation, event or incident real and focused on the topic. Initiate with simple case studies and gradually add more complex situations. Speak or write simply.
Demonstration with return demonstration: A resource person performs a specific operation or job, showing others how to do it. The participants then practice the same task.	<ul style="list-style-type: none"> Provides step-by-step process to participants Allows immediate practice and feedback Checklist can be developed to observe participants' progress in acquiring the skill 		<ul style="list-style-type: none"> Explain different steps of the procedure. Demonstrate an inappropriate skill, then an appropriate skill, and discuss the differences. Return appropriate demonstration by participants and give feedback. Practice.
Game: A person or group performs an activity characterised by structured competition that allows people to practice specific skills or recall knowledge.	<ul style="list-style-type: none"> Entertains Competition stimulates interest and alertness Is a good energizer Helps recall of information and skills 	<ul style="list-style-type: none"> Some participants feel that playing games doesn't have a solid scientific or knowledge base. Facilitators should participate in the game. 	<ul style="list-style-type: none"> Be prepared for "on the spot" questions because there is no script. Give clear directions and adhere to allotted time.
Field visit: Participants and facilitators visit a health facility or community setting to observe a task or	<ul style="list-style-type: none"> Puts training participants in real-life work situations Allows participants to reflect on real-life work situations without work pressures 	<ul style="list-style-type: none"> Time consuming Needs more resources 	<ul style="list-style-type: none"> Before the visit, coordinate with site, give clear directions before arrival, divide participants into small groups accompanied by the facilitator Provide reliable transportation

Training method	Advantages	Limitations	Tips for Improvement
procedure and practice.	<ul style="list-style-type: none"> Best format to use knowledge and practice skills 		<ul style="list-style-type: none"> Meet with those responsible on arrival Provide opportunity to share experiences and give and receive feedback
VIPP (visualization in participatory programming): Coloured cards varying in shape and size allow participants to quickly classify problems to find solutions which every participant decides on.	<ul style="list-style-type: none"> Allows visualisation of problems, ideas and concerns in a simple way Allows everyone to participate Gives participants who tend to dominate a discussion equal time with quieter participants 	<ul style="list-style-type: none"> Used more by members of the same organization to evaluate progress and revise objectives and strategies Time consuming Needs more resources 	<ul style="list-style-type: none"> Apply modified version of VIPP if problems arise in training that can be dealt with quickly.
Action plan preparation: Allows participants to synthesise knowledge, skills, attitudes, and beliefs into a doable plan; bridges classroom activities with practical application at work site	<ul style="list-style-type: none"> Team building for participants from the same site, district, or region Two-way commitment between trainers and institutions Basis for follow up, action and supervision 	<ul style="list-style-type: none"> Time consuming Requires work on action plan after hours to support action plan development 	
Talk or presentation: Involves imparting information through the spoken word, sometimes supplemented with audio or visual aids	<ul style="list-style-type: none"> Is time-efficient for addressing a subject and imparting a large amount of information quickly Facilitates structuring the presentation of ideas and information Allows the facilitator to control the classroom by directing timing of questions Is ideal for factual topics (e.g., steps on conducting HIV testing) Stimulates ideas for informed group discussion 	<ul style="list-style-type: none"> Lack of active participation Facilitation and curriculum centered, essentially one-way learning No way to use experience of group members Can be limited by facilitators' perception or experience Can sometimes cause frustration, discontent, and alienation within the group, especially when participants cannot express their own experience 	<p>Build interest</p> <ul style="list-style-type: none"> Use a lead-off story or interesting visual that captures audience's attention. Present an initial case problem around which the lecture will be structured. Ask participants test questions even if they have little prior knowledge to motivate them to listen to the lecture for the answer. <p>Maximise understanding and retention</p> <ul style="list-style-type: none"> Reduce the major points in the lecture to headlines that act as verbal subheadings or memory aids and arrange in logical order. Give examples and analogies, using real-life illustrations of the ideas in the lecture and, if possible, comparing the material and the participants' knowledge and experience. Use visual backup (flipcharts, transparencies, brief handouts, and demonstrations) to enable participants to see as well as hear what you are saying. Set a time limit. <p>Involve participants during the lecture</p> <ul style="list-style-type: none"> Interrupt the lecture periodically to challenge participants to give examples of the concepts presented or answer spot quiz questions. Illustrate activities throughout the presentation to focus on the points you are making. <p>Reinforce the lecture</p> <ul style="list-style-type: none"> Allow time for feedback, comments, and questions Apply the problem by posing a problem or question for participants to solve based on the information in the lecture. Ask participants to review the contents of the lecture together or give them a self-scoring test. Avoid distracting gestures or mannerisms such as playing with the chalk, ruler, or watch or adjusting clothing.

Training Techniques



**We learn best when learning
occurs
across all three areas**

SESSION 7: AUDIO AND VISUAL AIDS

Duration: 1 ½ hours

7.1 Introduction

Audio and visual aids help clarify concepts and ideas, save time, and make learning more interesting and retention easier. Effective learning takes place through all the senses.

7.2 Learning objectives

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

- List 5 types of audio and visual aids commonly used in training.
- Discuss general guidelines for using appropriate audio and visual aids: ORPA - Observe, Reflect, Personalize, and Act.
- Develop an audio and visual aid according to the topic chosen (Session 4).

7.3 Training methods and content

- Brainstorm different kinds of audio and visual aids.
- Have participants form a buzz group of 3 people to write down 1) characteristics of effective audio and visual aids and 2) general guidelines for the use of audio and visual aids.
- Use of ORPA: Observe, Reflect, Personalize and Act
- Ask participants to finish developing training method(s) and audio and visual aids relevant to the PMTCT of HIV session topic chosen in preparation for facilitating their training session (Session 4)
- In plenary ask participants to explain the relevance of their audio and visual aid(s) in relation to the session topic.

7.3.1 Characteristics of good visual aids

- **20/40/80 rule:** We remember 20 % of what we hear, 40 % of what we hear and see, and 80 % of what we hear, see, and do.
- Simplicity
- Attractiveness
- Clarity
- Concise language

7.3.2 Kinds of audio and visual aids

- **Non-projected**
 - Chalkboard
 - Flipchart
 - Printed materials
 - Models
 - Handouts

- **Projected**
 - Overhead projector
 - Slides

- **Audio**
 - Tape recorder or deck
 - Radio
 - Loudspeaker

- **Audiovisual**
 - TV
 - Video

7.3.3 General guidelines for the use of audio and visual aids

- Consider the size of the audience. Everyone must be able to see and hear clearly.
- Consider the level of the audience.
- Centrally display at one time the aid related to the topic.
- Always practice beforehand with your audio or visual aid in the room where training will take place.
- Do not stand in front of the visual aid.
- Address the audience, not the visual aid, when you speak.
- Avoid overcrowding visual aids or putting too many messages in audio aids.
- Title and number handouts.

7.3.4 Use of counseling cards in a group or individual session (ORPA)

O Observe

- What happened in the picture, story (drama)?
- What are the characters in the picture, story doing?
- How did the character feel about what he or she was doing?
- Why did he or she do that?

R Reflect

- Whom do you agree with? Why?
- Whom do you disagree with? Why?
- What is the advantage of adopting the practice described in the story (drama)?
- What are the key messages of today's topic?

P Personalize

- What would people in this community do in the same situation? Why?
- What would you do in the same situation? Why?
- What difficulties might you experience?
- Would you be able to overcome them? How?

A Act

- Repeat the key messages.
- If you were the mother, would you be willing to try the new practice?
- How would you overcome any barriers to trying the new practice?
- Set a time for the next meeting.

7.4 Materials

- Available audio and visual aids
- Materials to make audio and visual aids
- Handout 7: How to Use a Visual: Poster, Counseling Card, a Health Booklet, etc.

How to Use a Visual: Poster, Counseling Card, a Health Booklet, etc.

1. OBSERVE

- Ask the client:
 - What is happening in the picture?
 - What are the characters in the picture doing?
 - How did the character feel about what s/he was doing?
 - Why did s/he do that?

2. REFLECT

- Whom do you agree with? Why?
- Whom do you disagree with? Why?
- What is the advantage of adopting the practice described in the picture?

3. PERSONALIZE

- What would people in this community do in the same situation? Why?
- What would you do in the same situation? Why?
- What difficulties might you experience?
- Would you be able to overcome them? How?

4. ACT

Repeat the key messages.

- If you were the mother (or another character), would you be willing to try the new practice?
- How would you overcome any barriers to trying the new practice?
- Together identify doable actions that the mother can try

SESSION 8: MONITORING AND EVALUATION IN TRAINING

Duration: 1 ½ hours

8.1 Introduction

Learning and transfer of skills should be assessed during and after training to modify or maintain program strategy and improve outcomes.

8.2 Learning objectives

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

- Define monitoring and evaluation in training.
- Describe types of monitoring and evaluation in training.
- Discuss the WHO, WHEN, WHAT, HOW, and WHY to monitor and evaluate a training.
- Discuss performance monitoring.

8.3 Training methods and content

- Brainstorm definitions of “monitoring and evaluation”.
- Set up 5 flipcharts throughout the room with the following titles: 1) WHO, 2) WHAT, 3) WHEN, 4) HOW, and 5) WHY - for monitoring and evaluating
- On each flipchart make 2 columns: one for monitoring, the other for evaluation.
- Divide participants into 5 groups and ask each group to go to a flipchart.
- Give each group 3 minutes to write both monitoring and evaluation ideas on the flipchart with regards to the heading.
- After 3 minutes, ask the groups to rotate to the next flipchart and write only ideas that have not already been mentioned.
- Have the groups rotate until each group has had a chance to contribute at each flipchart station.
- Share results in plenary.
- Ask the same groups to discuss in small groups the types of evaluation related to training.
- Discuss and share in plenary.

8.3.1 Definitions

- **Monitoring in training:** tracking the key elements of individual performance in terms of knowledge, skills, and attitudes during and after training
- **Evaluation in training:** determining whether a training has achieved the course objectives, individual improvement, and development of the training processes

8.3.2 Characteristics of monitoring

- Occurs on a regular basis during and after training
- Provides early indication of progress or lack of progress
- Provides periodic oversight of activity implementation
- Can be done by any staff, not only specific evaluation staff
- Informs a program about strengths and weaknesses to decide whether and how to refine the strategy
- Determines whether activities are performed correctly
- Determines to what extent planned interventions are being implemented, what services are provided to who, when, how often, how long, and in what context

8.3.3 Characteristics of evaluation

- Is time bound
- Is systematic and objective
- Assesses performance and impact
- If carried out selectively, can be costly and time consuming
- Can focus on **process** (organization and management)
- Can focus on **impact** (effects on beneficiaries)

8.3.4 Types of evaluation for training

- Self-evaluation
 - Pre-test assessment (initial evaluation)
 - Evaluation of the process during training
 - Peer evaluation
 - Mood meter
 - Post-test assessment or evaluation of the results
 - Personal contract on skills (accountability)
-
- Performance monitoring

- Measures knowledge and skill levels of trainees in the field through administering the same pre- and post-test during training and using an observation checklist and exit interviews
- Uses results to refine training strategy and define future training needs
- Uses results for better supervisory visits

Note: Training evaluations are not necessary if an effective supervisory system includes on-going evaluation of field workers' knowledge and skills in counseling and methodologies after training.

8.3.5 Performance monitoring

- Demonstrates learning, transfer of the desired performance to the trainee's workplace, and impact on the program through pre- and post-tests, follow-up surveys, action plans, observations, and interviews
- Carried out for a sample of providers at the work site
- Objective: to assess knowledge and counseling skills of the service care providers within 6 months of training
- Goals:
 1. To assess the provider's knowledge by administering the same pre- and post-test 3 - 6 months after training
 2. To evaluate through observation of the client-provider interaction the provider's knowledge of the material and the use of counseling skills included in the training
 3. To assess the client's knowledge and satisfaction with the counseling through a client exit interview
- Two people should do the observation and exit interview, one to observe the interaction (applying the same observational checklist used in the training) and the other to interview the client.
- Analysis of the 3 components shows the effectiveness of the training in transferring the needed information and counseling skills
- Report should include the numbers of:
 - Trainees who mastered the relevant knowledge
 - Trainees who imparted the knowledge to the client using appropriate counseling techniques
 - Clients who know the correct information

8.4 Materials

- Handout 8: Methodology of monitoring and evaluation

- Flipchart, markers, and masking tape

Methodology of monitoring and evaluation

- **WHO?**
 - Learner/trainee
 - Trainer
 - Organizer, support personnel

- **WHAT?**
 - Achievement of objectives
 - Relevancy of the training
 - Knowledge of content
 - Performance of skills
 - Change in attitudes

- **WHEN?**
 - At the beginning of the training: pre-test assessment, initial evaluation
 - During the training: process evaluation
 - At the end of the training: evaluation of the results
 - After the training: performance monitoring at 3 - 6 months after training and impact evaluation

- **HOW?**
 - **Knowledge**
 - Oral examination
 - Written examination
 - Multiple choice questions
 - Essay
 - Short answer question
 - Open book

 - **Attitudes**
 - Observation
 - Response to counseling
 - Sharing ideas
 - Values clarification (agree – disagree)

 - **Skills**
 - Observation checklist
 - Checking records

- **WHY**
 - Improve the training facilitation, methodologies, audio and visual aids, organisation, and planning
 - Revise educational objectives
 - Orient decision making

SESSION 9: DESIGNING LESSON PLANS

Duration: 2 hours

9.1 Introduction

A written lesson plan incorporates all the necessary elements of training: objectives, content, time, training methods, activities, audio and visual aids, materials, and evaluation methods. Even experienced facilitators need to write lesson plans and review them before training.

9.2 Learning objectives

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

- Differentiate between an instructional plan and a lesson plan.
- Develop a standard lesson plan according to the format provided.

9.3 Training methods and content

- Brainstorm the meaning of “lesson plan” and “instructional plan”.
- Show examples of each.
- In buzz groups of 3, have participants discuss some guidelines for developing a lesson plan.
- Discuss and summarise in plenary.
- Give participants the lesson plan format and ask them to develop lesson plans for their chosen session topics. Ask them to research the topic, select the audience, and use objectives, training methods, and audio and visual aids previously developed.
- Discuss and share in plenary.

9.3.1 Definitions

- **Instructional plan:** Outline of sessions in the curriculum which includes the title and number of sessions, duration, objectives, content, training methodologies, activities, and evaluation
- **Lesson plan:** In-depth write-up of a training session which develops all aspects of the session and includes the name of the session, objectives, timing for each part of the content, and specific instructions for methodologies and activities

9.3.2 Guidelines for developing a lesson plan

- Always identify the audience.
- Begin with an introduction.
- Include questions to be asked.
- Include examples.
- Include stories.
- Include activities to be carried out.
- Prioritize the content in terms of importance and relevance (see illustration 9.1)
- Allocate and balance specific time to each part of the content.
- Bring the session to a conclusion.
- Evaluate knowledge and skills learnt.
- Be familiar with the lesson plan before the session.

9.3.3 Development of a lesson plan according to session topic and audience

- What do I want the participants to learn about PMTCT of HIV?
- What are the learning objectives?
- What is the most appropriate sequence of topics and tasks?
- What are the most appropriate training methods and strategies?
- How should the training and learning be evaluated?

9.4 Materials

- Flipchart, markers, and masking tape
- Examples of a lesson plan and an instructional plan
- Handout 9.1: Determining the Relevancy of Content
- Handout 9.2: Sample Lesson Plan Format

Determining the relevance of content

Could KNOW

Should KNOW

**Must know
(essential)**

Supplements the essential

(Interesting and relevant but not essential)

Sample Lesson Plan Format

Course:

Institution:

Topic:

Target:

Facilitator:

Duration	Objective	Content: Introduction, Development & Conclusion	Teaching Methodology	Trainer/Trainee Activities	Learning/Visual Aids	Evaluation Methods

SESSION 10: PRACTICE - PRESENTATIONS OF OBJECTIVES, TRAINING METHODS, AUDIO AND VISUAL AIDS, AND LESSON PLANS

Duration: 2 hours

10.1 Introduction

Practicing the elements of a training session fine-tunes knowledge and skills.

10.2 Learning objectives

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

- Practice facilitating learned knowledge and skills in:
 - developing objectives
 - selecting appropriate training methods
 - using audio and visual aids
 - developing a lesson plan

10.3 Training methods and content

- Ask participants to share the learning objectives, training methods, audio and visual aids, and lesson plans they have developed for their chosen topics.
- Facilitate feedback and discussion in plenary.

10.4 Materials

- Audio and visual aids

SESSION 11: SUPERVISION

Duration: 1 hour

11.1 Introduction

After training the trainees need support in their work sites for the knowledge and skills they have learned.

11.2 Learning objectives

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

- Define supervision.
- Define follow up.
- Outline supervisory tips.
- Describe key steps in a supervisory visit.

11.3 Training methods and content

- Brainstorm the definitions of supervision and follow up.
- Ask for volunteers to role play an inappropriate (judgemental) supervisory visit followed by an appropriate (supportive) supervisory visit.
- Other participants fill-out an observation checklist of the supervisory visits.
- Facilitate feedback and discussion in plenary.
- Present supervisory tips and key steps in a supervisory visit that were not mentioned.

11.3.1 Definitions:

Supervision: Continuous support with the purpose of improving performance

- Supervisory visits are made to help health workers improve their work. They should be seen as an ongoing part of the training strategy and motivation of the health worker.
- The best way to know whether a health worker is performing well is to watch performance on the job. This **observation** should be followed by a **discussion** of what was observed.
- This is the time to **identify an important area** in which the health worker can improve before the next visit.

Follow up: The trainer, trainee, and manager or supervisor all play a role in monitoring and assessing performance skills, providing feedback, and motivating service providers.

11.3.2 Supervision tips

- **Praise** people for the work they are doing well to motivate them to continue their work.
- If supervisor finds something that can be improved, **show** the health worker how to do it better and then give him/her a **chance to try it** with you observing.
- When you identify something to work on for the next visit, **choose something that will make the biggest difference** if improved. Leave less important improvements for later, when the first recommendation has been mastered.

11.3.3 Key steps in a supervisory visit

1. Let the health worker know when you will arrive and ask courteously to accompany him or her on a regular home visit, group discussion on PMTCT of HIV or other activity.
2. When you arrive, ask the health worker about the situation you will encounter. If it is a home visit, ask what recommendations were made previously to the mother, and the next advice (if any) to be given to the mother.
3. Stay in the background during the home visit or event. Do not interfere or give feedback until the event is finished. Use a checklist that corresponds to the counseling observed.
4. Find a private time after the event to go over the event with the health worker. Point out all the positive points of the performance. Mention one or two practices that could be improved. Mutually choose an area for the health worker to work on before the next visit.

11.4 Materials

- Flipchart, markers, and masking tape
- Handout 11.1: Checklist
- Handout 11.2: Tips for Supervisors
- Handout 11.3: Key Steps in a Good Supervisory Visit

Observation Checklist of Supervisory Visit

- On the pre-arranged visit, supervisor asks courteously to accompany service provider on a regular home visit, group discussion or other activity
- Asks the service provider about the situation that you will both encounter
- Observes job performance of service provider
- Stays in the background during the home visit or event. Does not interfere or give feedback until the event is finished.
- Discusses job performance with service provider in private
- Provides feedback
- Praises service provider for the work s/he is doing well to motivate her/him to continue to work
- With the service provider, identifies an important area to improve
- Shows the service provider what has worked well in her/his experience and then gives service provider a chance to try it while observing
- Plays the role of mentor
- Makes an appointment for the follow-up visit

Tips for Supervisors

- Supervisory visits are to help health workers improve their work. They should be seen as an ongoing part of the training strategy and motivation of the health worker.
- The best way to know whether a worker is performing well is to watch him/her perform on the job. This observation should be followed by a discussion of what was observed and the data collected and recorded on monitoring forms.
- This is the time to identify an important area in which the worker can improve before the next visit.
- People who are praised for the work they are doing well are motivated to continue their work.
- If you find something the worker can improve, show him/her how to do it better. Then give him/her a chance to try it, with you observing.
- When you identify something to work on for the next visit, choose something that will make the biggest difference if improved. Leave less important improvements for later, when the first recommendation has been mastered.

Key Steps in a Good Supervisory Visit

1. Let the health worker know when you will arrive and tell him/her that you would like to accompany him/her on a regular home visit, group discussion, or other BCC activity.
2. When you arrive, ask the health worker about the situation of the family you will visit, including the health and nutrition status of the child, recommendations made to the mother, and the next advice to be given to the mother (if any).
3. Stay in the background during the home visit or event. Do not interfere or give advice until the event is finished. Use a checklist that corresponds to the BCC technique observed: negotiation at a home visit, consultation at a facility, consultation at a growth monitoring station, facilitation of a mother-to-mother support group, or facilitation of an action group, drama, or story. Take notes on the appropriate observation form and fill out the lines at the bottom.
4. Find a private time after the event and go over the event. Point out all the positive points of the health worker's performance. Mention one or two practices that could be improved. Mutually choose an area for the health worker to work on before the next visit.

SESSION 12: PRACTICUM AND FEEDBACK

Duration: 14½ hours

12.1 Introduction

The practicum allows participants to use lessons learned in previous sessions to conduct a short training session. Feedback from facilitators and peers enriches their performance.

12.2 Learning objectives

By the end of this session, the participants should be able to:

- Facilitate a training session on PMTCT of HIV.
- Strengthen facilitation skills through feedback from the group.

12.3 Training methods and content

- Using the prepared list of PMTCT of HIV topics (Session 4): participants (alone or in pairs) prepare and facilitate a 45-minute presentation based on a written lesson plan which includes formulated objectives, training methods, audio and visual aids, and evaluation methods.
- Record the practice facilitation on videotape for feedback at the end of the presentation.
- Facilitate discussion in plenary.
- Ask each participant and facilitator to fill out the “Feedback on Practicum Session” form and give it to the facilitators.

12.4 Materials

- List of training session topics on PMTCT of HIV
- Video camera
- Handout 12: Feedback on Practicum Session

Feedback on Practicum Session

Session Topic: _____

Facilitator(s): _____

Questions/Observations	Comments
1. Was the session well prepared? a. Content b. Methodologies c. Environment	a
	b
	c
2. Was the session lively?	
3. Was the session clear?	
4. Comment on facilitation skills.	
5. Comment on the use of visuals.	
6. Comment on the following: a. Eye contact b. Gestures c. Pace of delivery	a
	b
	c
7. Comment on training methodologies.	
8. Did the session allow for practice?	
9. Did the facilitator allow time for questions?	
10. Were individual questions addressed?	
11. Did the facilitator evaluate the knowledge and skills acquired?	
12. Were the objectives met?	

SESSION 13: PRESENTATION OF TRAINING ACTION PLANS

Duration: 2 hours

13.1 Introduction

This session brings together not only the knowledge and skills acquired in the training, but also the participants' commitment to training. District health directors and supervisors of the new trainers are invited to the presentation to endorse the training plans.

13.2 Learning objective

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

- Present an action plan for training in PMTCT of HIV in their districts.

13.3 Training methods and content

- Invite partners and participants' supervisors to attend action plan presentations.
- Ask participants from the same working areas to present their action plans in plenary.
- Facilitate feedback and discussion.

13.4 Materials

- Audio and visual aids

Indicate your level of competency AFTER training: on a scale from 1 to 10, with 1 being the lowest competency, check appropriate box.

Area of competency	1	2	3	4	5	6	7	8	9	10
1. Helping another person change his or her behavior										
2. Putting principles of adult learning into practice										
3. Planning a training/learning event										
4. Using learning outcomes to develop objectives										
5. Facilitating a small group discussion										
6. Facilitating a plenary session										
7. Presenting a topic to a large group										
8. Using the experiential learning cycle										
9. Organizing a field visit										
10. Writing case studies										
11. Demonstrating a procedure										
12. Using a flipchart										
13. Using an overhead projector										
14. Preparing a lesson plan										
15. Planning and organising a training										
16. Developing a training plan										
17. Conducting a supervisory visit										
18. Developing monitoring and evaluation tools										
19. Monitoring and evaluating activities										

TRAINING OF TRAINERS: POST-COURSE ASSESSMENT

1. Match the column on the left (numbers) with the column on the right (letters).

- | | |
|-----------------------|---|
| 1) Facilitation skill | a. Outcome of specific training activity |
| 2) Adult learning | b. Ability to conduct training activities effectively |
| 3) Learning objective | c. Qualities of objectives |
| 4) Lesson plan | d. The adult is at the center of all activities |
| 5) SMART | e. Detailed description of the training session |

2. List 3 guidelines for the proper use of visual aids.

.....

.....

.....

.....

3. List 3 steps in behavior change communication and give an accompanying support measure for each.

Step	Support measure
1.	
2.	
3.	

4. List 2 functions of a supervisor.

.....

.....

5. Develop 4 learning objectives on PMTCT of HIV for each of the following categories of learning outcomes.

I. Acquisition of knowledge

II. Enhancement of thinking skills

III. Development of psychomotor skills

IV. Changes in attitudes, values, or feelings

6. List the 7 steps of planning a learning event.

-
-
-
-
-
-
-

7. Describe 2 ways to evaluate learning.

.....

.....

8. List 6 principles of adult learning.

.....

.....

.....

.....

.....

.....

9. Name 5 factors to consider when facilitating a discussion.

.....

.....

.....

.....

.....

10. Match the training methods on the left with the definition, advantage or limitation of the method on the right (number with letter).

1. Buzz group (2- 3 participants)	a. Allows participants to reflect on real-life work situations without work pressures
2. Brainstorming	b. Provides step-by-step process to participants
3. Case Study	c. Can allow participants to discuss their immediate reactions to information presented, give definitions, and share examples and experiences
4. Demonstration with return demonstration	d. Increases analytical and thinking skills
5. Field visit	e. Encourages open-mindedness (every idea should be acceptable, and judgement should be suspended)

Contract with Self

In the first column, write some content of this training that made an impression on you. Then write briefly in the second column 1 or 2 new pieces of knowledge or skills you have acquired. Finally, write in the third column 1 or 2 actions that you intend to take.

Be specific. For example, "Prepare a written lesson plan."

Keep 1 copy. Give 1 copy to the facilitator and 1 copy to your supervisor.

Content	New knowledge and skills	Actions (what and when)

Final Evaluation

Please answer the questions as honestly as you can to help improve future training. Write “X” in the box that reflects your feeling about the question.

	Excellent	Very good	Good	Fair	Poor
1. I would rate this training overall as ...					
2. The content was					
3. The materials and visual aids were...					
4. The amount of information was ...					
5. The sequence of information was ...					
6. The trainer facilitation was...					
7. The training methodology was					
8. The practicum was.....					
9. The organization was...					

1. The length of the training was:

- a. Too long
- b. Too short
- c. Just right

2. What could have made this training better?

3. Other comments: