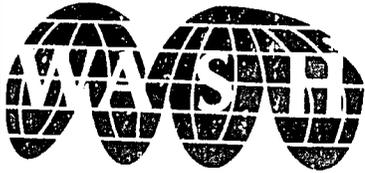


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**TRAINING OF TRAINERS' WORKSHOP
FOR LATRINE CONSTRUCTION IN
EL RAHAD, N. KORDOFAN, SUDAN
JANUARY 18-30, 1986**



**WATER AND SANITATION
FOR HEALTH PROJECT**

Operated by
CDM and Associates

Sponsored by the U.S. Agency
for International Development

1611 N. Kent Street, Room 1.02
Arlington, Virginia 22209 USA

Telephone: (703) 243-8200
Telex No. WUI 64552
Cable Address WASHAID

WASH FIELD REPORT NO. 173

MARCH 1986

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**Prepared for
the USAID Mission in Sudan
WASH Activity No. 207**

PN-AAU-672

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IN EL RAHAD, N. KORDOFAN SUDAN
JANUARY 18 TO 30, 1986**

Prepared for the USAID Mission in Sudan
under WASH Activity No. 207

by

Margaret McLaughlin, Ed.D.

March 1986

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ACKNOWLEDGEMENTS

This training of trainers (TOT) could not have occurred and been so successful without the interest and commitment of the 15 participants representing their respective communities. They worked extremely hard and continuously questioned and challenged themselves throughout the TOT, efforts without which learning could not have been achieved. They had excellent role models, too, in the form of Taha Sid Ahmed (the Public Health Inspector who acted as co-trainer in the TOT) and Frank Carroll (the WASH Technical Advisor to the TOT).

Logistical and moral support came from two medical officers consulting the RHSP in El Rahad: Dr. Ahmed Ziem and Dr. Haroon. Despite their daily demands in being the only doctors for the 35,000 residents of Er Rahad and its environs, either or both managed to visit the TOT site regularly with words of praise and encouragement for all.

Not to be forgotten are the regional RHSP staff located in El Obeid. Mr. Bobby Dean, the RHSP Logistics Coordinators, stayed at the TOT site in Er Rahad throughout the training and offered logistical assistance and resource funding information when needed by either TOT trainers or participants. Dr. James Sonnemann, the RHSP Regional Coordinator, gave immeasurable support in briefing the WASH consultants and in assisting in the major and minor details of planning. His philosophy of development, in which clients are helped to be self-sufficient, complemented the theory and practice of adult learning and, so, had already established an environment of open communication between TOT participants and development workers. The TOT, therefore, was simply a continuation of this open communication of ideas appropriate for development practices in the Sudan.

The support of Washington-based individuals must also be acknowledged. The WASH staff needs to be thanked for its thoroughness in the predeparture briefing of the WASH consultants to this project. Craig Hafner, in particular, was extremely helpful as the activity manager who had been involved with the initial negotiations between AID and One-America, the contractor for the RHSP. Also, in Washington, were Wilma Gormley and John Petit from Training Resources Group who gave feedback on the TOT design and provided the essential handouts which participants appreciated greatly. Dr. Bud Prince, an advisor to One-America, Inc. gave much insight to the consultants into, first, the health conditions in the Sudan and, secondly, the RHSP.

EXECUTIVE SUMMARY

A training-of-trainers' (TOT) workshop was held in El Rahad, the Sudan, from January 18 to 30, 1986 for the purpose of preparing Ministry of Health and Ministry of Housing officials as trainers of community health workers involved in latrine construction projects to be sponsored by the USAID Rural Health Support Project. Twelve public health inspectors, two civil engineers, and one health education officer from the North Kordofan Region were trained in the theory and practices of adult and experiential learning as well as in the content of the WASH manual entitled A Workshop Design for Latrine Construction: A Training Guide.

These TOT participants would be using this guide to train community health workers who would actually implement the latrine construction projects. Thus, the content of the TOT was comprised of training theory and techniques as well as steps in project planning, such as community mobilization, latrine construction, resource identification, and user education. The method of training within the TOT included small group discussions, site surveys, practice training activities, role-plays, self-assessments, and feedback.

The training was facilitated by a Sudanese trainer from the Ministry of Health (MOH), Taha Sid Ahmed; a WASH training consultant, Margaret McLaughlin; and a WASH technical advisor, Frank Carroll. Material and logistical support was provided by the Ministry of Health through the USAID Rural Health Support Project.

Conclusions

The final evaluation by participants indicated that the TOT workshop achieved its goals. Participants became familiar with and practiced adult and experiential learning theories and techniques as demonstrated in the WASH training guide. They also were enthusiastic about conducting subsequent workshops using the guide.

The scope of work for a training unit and the job description of a training director for this unit were developed. Further, evaluation techniques for training programs were presented but not in as much depth as had been hoped.

Recommendations

Numerous questions concerning the priority of latrines, staffing, costs, materials, supplies, equipment, logistics, and development philosophies need to be answered before this project's training and community-based efforts continue. Concerning future TOTs for latrine construction projects, it is recommended that the schedule be extended, that the content include more depth in various training design areas, and that the language of instruction be the host country national language. Regarding the extended latrine construction projects which should follow the TOT, it is recommended that the projects become community-based as soon as possible so that the decision-making, training, mobilization, health education, and construction efforts may be institutionalized with the minimal amount of external support.

Chapter 1

SCOPE OF WORK

1.1 Background

Officials in the Sudanese Ministry of Health and in the USAID Rural Health Support Project in the North Kordofan region of the Sudan recognized a need to improve the training and project implementation skills of upper-level management staff in the area of sanitation, particularly in latrine construction projects. WASH was requested to provide: (a) an experiential learning trainer to work with a Sudanese co-trainer from the Ministry of Health working part time with the Rural Health Support Project (RHSP) and (b) a technical trainer. All three would plan and implement the TOT, and then the Sudanese trainer and the WASH technical trainer, with three participants from the TOT, would plan and implement a subsequent workshop for 20 community health workers using the WASH guide.

These two workshops were the result of extensive talks in 1984 between the AID mission; One-America Inc., which is the contractor for the Rural Health Support Project; WASH; and the Ministry of Health. The final decision to conduct these workshops was made in 1985, and Margaret McLaughlin and Frank Carroll were chosen as the two trainers for the project.

1.2 Training of Trainers Overview

The first workshop (TOT) was held from January 18 to 30, 1986 in the town of El Rahad, about two hours from El Obeid. The names and positions of participants may be found in Appendix A. Unfortunately, as a result of a strike by engineers, only two of the six invited came to the TOT. Appendices B and C describe the TOT schedule and design sessions, respectively. The handouts given to participants in the TOT, which focus on adult theory and practices, are in the WASH library. Handouts on latrine construction may be found within the training guide.

The goals of the TOT were that, by its completion, participants would be able to:

- Understand and be able to apply the principles and methods of adult learning, as demonstrated in the WASH training guide for latrine construction.
- Build skills and knowledge in the experiential learning cycle and describe training activities appropriate to each stage of this cycle, as demonstrated in the WASH training guide.
- Practice training using experiential methodologies such as role plays, case studies, group discussions, and processing field work as demonstrated in the WASH training guide.

- be familiar with the goals, content of and strategies for using the WASH training guide.
- Understand the principles of training design and describe how to adapt or revise training sessions using the principles, as demonstrated in the WASH training guide for latrine construction.

The staff of the TOT included the three co-trainers previously named: Taha Sid Ahmed, Frank Carroll, and Margaret McLaughlin.

Chapter 2

PLANNING

2.1 Initial Phases - Washington

Individually, Margaret McLaughlin and Frank Carroll discussed with Craig Hafner, the WASH activity manager for this project, various aspects of the tasks ahead. Ms. McLaughlin spent December 9 to 11 reviewing the TOT design with Wilma Gormley and John Pettit of Training Resources Group and determining questions or tasks for the RHSP staff in El Obeid that needed to be answered or prescribed before the consultants arrived in the Sudan. Such questions and tasks focused on the materials available for training and for constructing a latrine within the actual TOT.

On January 6, Ms. McLaughlin, Mr. Carroll, and Mr. Hafner met in the WASH offices in Washington, D.C., for a briefing on the AID/RHSP's request for this TOT and its subsequent workshop activity. Mr. Hafner facilitated a two-and-one-half day staff preparation, which included a review of the RHSP history, the consultants' scope of work, their end product, and their working relationship. A briefing in which the consultants presented their work plan to particular WASH, AID/Washington, and One-America staff was also held.

2.2 Clarification Phase - Khartoum

The consultants arrived in Khartoum on January 9 at 10:30 p.m. and met with Dr. James Sonnemann, the RHSP-North Kordofan regional coordinator, on January 10. Unfortunately, because Friday was the Muslim holy day, no official appointments were made. Nonetheless, Dr. Sonnemann answered the consultants' questions regarding the proposed TOT and workshop and construction plans within each for some latrines. He also brought them up-to-date on personnel, supplies, timeframes, and participant needs. The content and procedures for meetings to be held the following day were discussed. The consultants were also introduced to Mr. Bobby Dean, logistics advisor for the RHSP-North.

On Saturday, January 11, the two consultants and Dr. Sonnemann met with numerous Khartoum-based officials from the Ministry of Health, USAID, and the Khartoum staff for the RHSP. The first meeting was attended by Dr. Abdel Hamid, Director General of Primary Health Care; Dr. Taj El Sir, Chief of Training; and Mr. Richard Greene, AID health project officer. Discussions included an overview of the TOT content and methods of training, follow-up activities by the RHSP and WASH, and types of latrines.

A second meeting was held with Mr. Mohie el-din, RHSP administrator, to determine what had been the previous training in latrine construction given to participants of the TOT. Frank Carroll and Mr. Mohie el-din then visited the School of Environmental Health for Sanitary Overseers to discuss such training with Mohammed Hassan Salih, the principal of the school. It was evident that most health inspectors' training combined the theory of latrine construction with practice. It was doubted, however, that many, if any, of the TOT participants had actually built a latrine on their jobs after this training.

2.3 Final Design Phase - El Obeid (January 12 to 17)

On January 12 the consultants, Dr. James Sonnemann and Mr. Dean, flew to El Obeid, the capital of North Kordofan where the RHSP regional office is located. Upon arriving, the consultants met with Dr. Amal, the Maternal and Child Health Officer for the RHSP and Mr. Taha Sid Ahmed, a Regional Public Health Inspector, working part time for the RHSP, who was the co-trainer for the TOT.

Taha Sid Ahmed met separately with the consultants to report on the plan already taken for the TOT and the workshop and to identify the next steps in preparing for the TOT. These steps included:

1. The material and logistical needs for the TOT identifying and meeting them
2. A meeting with Dr. Taha, the Assistant Director of Health Services for Kordofan, and with Mr. Awad Mouktar, Senior Health Inspector for North Kordofan and a TOT participant
3. Twelve hours of staff training to review the philosophy, methods, roles, and schedule for the TOT (see Appendix D for the staff training outline)
4. A visit to El Rahad to meet with responsible officials there
5. A follow-up meeting with Dr. Sonnemann and Mr. Dean to determine how the RHSP support could be approached in the TOT.

All of these steps were taken during the five-day period, January 12 to 17.

On January 14, Taha Sid Ahmed, Dr. Sonnemann, and the consultants visited El Rahad to be updated on the TOT preparations and the first steps of the subsequent workshop arrangements. As a result of the immediacy of the TOT, most of the discussion revolved around the logistics for constructing two latrines during it, a single-pit Ventilated Improved Pit (VIP) latrine at a girls' primary school for the teachers, and a doublepit VIP at the Health Center. The first decision concerning sites was made by the local Community Council after it held a meeting, and the second was made by the TOT training staff as a gift back to the Health Center which had volunteered its offices as classrooms for the training.

While in El Rahad, the training staff met with Dr. Ahmed Ziem, District Medical Officer, who had previously been coordinating the local arrangements for the TOT and subsequent workshop. They completed plans and contacted local workers regarding the labor needed in beginning the construction steps which would subsequently be completed by the participants. The sites of the actual latrine pits for further construction were visited and contact was made with the headmistress of the girls' school. On January 17, the training team, with a caravan of supplies and 11 of the participants, departed for El Rahad.

Chapter 3

IMPLEMENTATION

3.1 Institutional Support

Numerous organizations provided institutional support for the Training of Trainers' workshop. The Sudanese Ministry of Health through its offices in Khartoum, El Obeid, and El Rahad offered:

- Release time for its personnel to attend the TOT
- Meeting rooms at the El Rahad Health Center
- Two logistics coordinators to assist in procuring materials, equipment, and labor necessary for constructing the sample TOT latrines
- Release time for the co-trainer, Taha Sid Ahmed
- Housing for the female trainer
- Exemplary moral support and encouragement from Dr. Abdel Hamid, Dr. Ahmed Ziem, and Dr. Harroon (medical doctor in El Rahad who was in the process of replacing Dr. Ziem).

Financial support for all TOT housing, transportation, material, equipment, and labor necessary; release time of Mr. Bobby Dean as a logistics advisor, and consulting support in providing information or access to that when needed in planning the TOT were provided by USAID/RHSP staff in El Obeid. WASH staff furnished training guides and consultant salaries and expenses.

3.2 Participant Sessions

3.2.1 Methods

Both the training guide and the TOT were based on experiential learning theory and practices. In other words, individual activities in the TOT followed four steps, as follows:

1. The participation by trainees in an experience (small group discussion, role plays, site surveys, field work, and practice training activities)
2. An analysis step
3. A generalization step
4. An application step.

Participants chose to follow six norms of behavior in the TOT, as follows:

1. Act as a team.
2. Be on time.
3. Be honest.
4. Be useful.
5. Participate and question.
6. Try to help each other.

They faithfully followed these norms and participated in each training session -- asking questions, debating answers, and providing feedback. No session was ever quiet or passive, and, as the TOT progressed, the adult learning techniques of participation, questioning, and two-way communication became increasingly apparent. The hope that topics of training and latrine construction projects would continue to be discussed outside structured activities was realized as many meal times and rest periods became forums for continued debate concerning types of latrines, user education, or the value of latrines themselves.

3.2.2 Overall Goals

During staff training, the following TOT goal and objectives were written as simpler guides for the participants than those that appeared in the consultants' scope of work. These were to:

Goal: Develop abilities to train health staff in planning, designing, and constructing VIPs in villages and in initiating and training the community to participate in expanding the activities.

Objectives: Be able to increase our training capabilities. To become familiar with the parts of a latrine construction project, including community survey and mobilization. To practice training through sessions from the latrine construction training guide.

3.2.3 Activity Titles (See Appendices B and C.)

The 15 TOT activities involved the following:

1. Introductions/Goals
2. Adult Learning
3. Demonstration of Training Techniques and Guide Session #2
4. Second Overview of Training Guide
5. Experiential Learning and Guide Session #4
6. Preparation for Round #1 Practice Training Activities and Round #1
7. Construction of a Ventilated Improved Pit latrine
8. Latrine Slab Construction Session #8
9. Evaluation of the TOT -- Week 1
10. Preparation for Round #2 Practice Training Activities and Round #2
11. Project Planning
12. Problem-Solving in Training
13. Adapting/Revising Training Designs
14. Evaluation in Training
15. Closure.

3.3 Evaluation by Participants

Participants were able to evaluate the TOT during four activities.

3.3.1 Evaluation #1

After Round #1 - Practice Training Activities, participants stated that they learned the following:

- How to prepare sessions
- How to cooperate with one other
- How to involve others
- How to be patient in preparing and in running sessions
- How to work as a team
- How to be convincing
- How to "up front" (stand in front of groups and train)
- How to deal with others' opinions politely
- How to keep strictly on time
- How to discuss without interrupting
- How to conduct surveys
- How to gain a sense of humor
- How adults learn and how to be a trainer
- The timing of the guide
- How to answer unnecessary questions politely
- New terminology about training and the learning cycle
- How to give ourselves feedback

3.3.2 Evaluation #2

At the end of the first week, the TOT participants and trainers were asked to identify the pluses and minuses of the training thus far. Following are the direct quotes from their evaluation:

a. Pluses: Participants felt that:

1. "Adult learning methodology was useful and of great value."
2. They were "gaining useful knowledge about sanitation and civil engineering."
3. "The TOT program was well organized and convincing."
4. "The trainers are helpful, dynamic, energetic, kind, expert, and honest."

b. Pluses: Trainers felt that:

1. "Participants were too kind."
2. "Participants really participate."
3. "Participants show a lot of interest and patience."

c. Minuses: Participants felt that:

1. "English language seemed difficult to some extent for some people."

2. Working hours were "too long."
 3. "A session concerning the disposal of human excreta in relation to 'communicable diseases' was supposed to be introduced."
- d. Minuses: Trainers felt that
1. "More participation in construction activities was needed."
 2. "We need more thought on workshop handouts, drawings, and questionnaires."
 3. "We need models of VIPs."
- e. Solutions to minuses:
1. English language -- Participants reported that they would convince each other to speak in Arabic despite the fact that some did not wish to do so. Trainers had encouraged participants to train in Arabic, but several wanted to practice their English and to receive direct feedback from the training consultant (who spoke only English).
 2. Too long working hours -- Participants said they would work long as they needed to but would prefer 7:30 a.m. to 9:30 a.m., 10:30 a.m. to 3:00 p.m. Trainers said they would encourage participants in shortening the length of time spent in PTAs. It was also recommended that a TOT be three weeks long, not two.
 3. A session on excreta -- one of Round #2's PTAs was changed to the Guide Session #2, Steps 6 and 7 on this topic.
 4. More participation in construction activities: trainees who did not have a lot of "up-front" time in Round #1 said they would do so in Round #2.
 5. Workshop handouts: Trainees were reminded that on Wednesday they would participate in a session on adapting training designs in which they would help in editing and translating guide materials.
 6. VIP models: This suggestion was viewed as being helpful, but it was too late for either this or the subsequent workshop.

3.3.3 Evaluation #3

During the debriefing of Round #2, participants were asked the following questions:

- o Did I improve the skills I wanted to work on during Round #2?
- o What skills would I like to work in still?
- o Which ones may I receive help on before the end of the TOT?

The answers to these were as follows:

- Ten said yes; five said no.
- The skills which the group wanted to work on during the remainder of the TOT involved the following:
 - Defining strategies for the development of projects
 - Estimating and calculating the cost and quantity of materials from the engineering point of view
 - Building an improved wooden slab and base
 - Developing a fly trap.

It was decided that during Activity 11 (to follow on this same day) strategies for developing projects would be covered in detail. As for the estimating of materials and quantities, the two engineers in the TOT participant group said they would hold a session on Thursday morning from 7:30 to 8:30, to answer questions from the other participants. Following their session would be one by Frank Carroll and another of the engineers on building a wooden slab and a fly trap.

3.3.4 Evaluation #4

The final TOT evaluation by the 15 participants included eight questions regarding:

- What they had learned and intended to apply on their jobs concerning latrine construction projects and training practices
- What they thought of the training schedule and facilities
- Feedback for the three trainers.

Without exception, the participants felt they had learned a considerable amount about construction latrines "economically and with local materials," about "mobilizing communities;" and about "all the steps in the theory of (training) experience, analyzing, generalizing and application." Most (except one) found the schedule to be "very crowded," and some suggested that it be "three weeks instead of 14 days." Finally, each participant described the trainers as qualified, skillful, helpful, and kind.

Chapter 4

COMMENTS ON THE WASH TRAINING GUIDE

4.1 Participants' Views

Reactions to the WASH training guide varied according to the technical background, English language facility, and training experience of each of the 15 participants. On the whole, participants initially found the guide to be intimidating both in terms of volume and language terminology (both technical and training). After the first week of the TOT, however, all of the participants indicated that they were comfortable with the training terms and skills necessary for implementing the workshop. Unfortunately, the participants expressed concern about their capabilities in actually constructing a latrine or in guiding others in such construction. As for the community education and mobilization aspects of the guide, most participants felt confident.

It must be noted that these reactions varied according to the professional background of the participants. The two civil engineers enjoyed the technical hands-on activities but feared those that focused on health; for the public health officers, it was the reverse. All suggested that the most effective training team for facilitating the follow-up workshops would include a public health officer paired with a civil engineer.

Concerning the actual technical content of the guide demonstrated in drawings of various slab constructions, and so forth, most participants felt that some drawings and assessment inventories were too complicated for the health workers who would participate in the follow-up workshops. They edited and translated many handouts so that these participants could more easily comprehend the content.

4.2 Trainer's Views

From a training perspective, the training guide appeared at first to be difficult for those participants who were not at an FSI 3 or above level in English. Through the assistance of their peers, however, an adequate understanding of the basic elements and steps within each session was eventually attained -- or so it appeared through the practice training activities during which participants successfully trained other participants in sessions focusing on the training guide.

The ability of nontechnical participants (the public sanitation officers) to attain a level of comfort in building latrines was certainly increased, although not to a level of independent sufficiency. The levels of comfort of the technical participants (the civil engineers) in educating and mobilizing communities around health issues was also discussed. Both groups felt they were only able to facilitate a workshop most effectively only if a member of each profession were present. It would appear that this is a perceptive assessment by both groups, and one cannot emphasize enough the hope that training pairs (as recommended in the guide) include both a trainer and a technical person.

Participants are now capable of conducting the workshop proposed in the training guide as adjusted for language, timing, and technical content. Some participants are stronger than others in their training skills and in their abilities to mobilize technical assistants to help them in areas where the participants feel weak. If such mobilization of resources can occur and participants can adapt the training guide to their own level of implementation, then the guide will serve them well.

Chapter 5

TRAINING COORDINATOR AND EVALUATION METHODOLOGY

5.1 Training Coordinator

To support the initial implementation and eventual institutionalization of this latrine construction effort, it has been suggested that a training unit within the Ministry of Health be established and directed by a MOH Regional Health Inspector who has had considerable experience and training in developing, delivering, and evaluating training programs related to health and sanitation. After considerable discussion with this regional health inspector (Taha Sid Ahmed, the TOT co-trainer), the following descriptions of the unit's scope of work and the role of the director are proposed.

5.1.1 Training and Information Resource Unit

The scope of work of this unit would be to:

- Identify the in-service needs of the MOH, particularly those within new or innovative projects initiated by the MOH and/or development agencies, such as the RHSP, UNICEF, and Save the Children.
- Design training curricula and appropriate supporting materials which respond to identified training needs.
- Conduct training of trainers' (TOTs) workshops for personnel involved in health education projects.
- Provide methods for monitoring and evaluating the training skills of personnel during the duration of health projects.
- Provide any management information or technical assistance in the form of documents, visual aids, or personnel/consultants on the planning, implementation, and evaluation of training programs.
- Collaborate with the training units in other ministries.
- Advise the major health institutions about new and innovative training content.

5.1.2 Training and Resource Information Unit Director

It must be noted that this position is full time within the Ministry of Health and, therefore, cannot function without at least one, full-time assistant during the first year and many more after the unit has proved its usefulness. It is also recommended that this individual participate in a study tour of similar training units in Africa and attend a training management course given by training specialists in either England (Coverdale) or Washington, D.C. (Training Resources Group).

The tasks to be taken on by the director include:

- Developing and monitoring the methods for identifying MOH in-service training needs
- Managing the unit's efforts in designing curricula and appropriate support materials by serving as a training design and materials development specialist and consultant
- Initially conducting and, then monitoring all training of trainers
- Designing and administering personnel responsible for the monitoring and evaluation strategies for all training programs
- Contracting and supervising a librarian to establish a materials' library as a training resource center
- Developing and implementing a strategy for the dissemination of training information which can effectively serve a region the size of the North Kordofan
- Serving as a liaison for the MOH Training and Resource Information Unit with similar units in other ministries
- Informing the major health institutions about new and innovative training procedures and content.

5.2 Evaluation Methodology

This aspect of the scope of work was not thoroughly carried out due to time constraints. Although it was presented to trainees within the TOT sessions (two particularly), the discussions about which evaluation strategies were appropriate to the latrine construction projects or to the Sudan, in general, did not occur to the extent they should have.

What can be stated is that the TOT co-trainer from the MOH and RHSP, as well as the TOT participants, were exposed to the theory and practices of some evaluation skills through feedback and evaluating the TOT for themselves. The rationale, methods, and concerns about evaluation were briefly discussed and included:

- A differentiation between formative and summative evaluations
- An identification of whom and what should be evaluated
- Various written techniques for evaluating, such as using a plus/minus system to review how a training program was going and using direct questions regarding learnings, schedules, and trainer behaviors.

Chapter 6

RECOMMENDATIONS

6.1 General Recommendation

Before any implementation of training workshops or communitywide latrine construction projects can be undertaken, the following questions must be answered by MOH, RHSP, and the AID mission officers responsible for supporting both efforts. These answers should come after using the input of the health staff closest to the project output, that is, the senior health staff (master trainers from the TOT who will implement the workshops) and the junior health staff whom they will train to coordinate the communitywide latrine projects.

These essential questions are as follows:

1. Which TOT participants should become (and can spend the time in addition to their regular jobs) the master trainers who conduct subsequent workshops, and what should their roles be in monitoring the communitywide projects?
2. Who should supervise the overall training which begins with the conducting of the initial workshops and should entail follow-up training for master trainers and workshop participants once projects begin?
3. Who are the decision-makers in these training and project implementation efforts, and how can they incorporate the opinions and needs of health officers directly carrying out the training project's implementation steps, that is, the master trainers and workshop trainees?
4. How can the communication among all individuals responsible for this training and project be efficient and effective? Who needs to know what information, when? For example, who needs to know when, where, and how workshops will be conducted and funded?
5. Which junior health workers should be recruited to attend workshops and, then, to coordinate such projects?
6. Which communities see latrine construction as a sanitation priority and do not hold water as the sole development priority?
7. When in a calendar year, which includes national elections would community residents be most likely to participate in a latrine construction project?
8. What development philosophy will the MOH and RHSP follow in institutionalizing the training for and implementation of latrine construction projects, that is, a self-sufficiency or dependency approach?

9. Depending upon this choice of philosophy, what will be the support provided by the MOH through the RHSP and how will it be initially determined, distributed, and monitored? Exactly how much financial support for these efforts should come from donor agencies, as opposed to communities in which the projects are taking place?
10. How can the goal of institutionalizing latrine construction projects be met through training Sudanese nationals and promoting the sufficiency of community efforts?

6.2 Training Recommendations

Regardless of the answers to these questions, the following recommendations concerning training in both the workshop and community-based projects may be proposed:

- Follow-up workshops led by the TOT participants for health staff identified to train and monitor communitywide latrine construction projects should be conducted as soon as possible to retain motivation and training skills.
- Support for these follow-up workshops should include a minimal, yet sufficient amount, of financial aid from the MOH for training resources, as identified by the TOT and workshop participants themselves.
- A follow-up meeting of the TOT participants should be held after all have conducted at least one workshop to reassess their training skills and to assess other problems in delivering the training programs.
- A cadre of TOT master trainers should be trained in project evaluation and training supervisory skills.
- Supervisory support for upgrading trainers' skills and for deliberating training program concerns should be produced throughout the workshop and community-based phases of this project.
- The immediate development, translation into Arabic, and compilation of workshop handouts based on the technical comprehension level and learning needs of workshop participants should be conducted.
- The establishment of a centralized training and resource information unit within the MOH should be seriously considered in order to institutionalize training support.
- The selection and necessary training of a training director for this unit should be conducted as soon as possible.

6.3 Programmatic Recommendations

The following programmatic recommendations are offered in view of participant and administration concerns stated during the TOT:

- The overall latrine construction project must attain a level of self-sufficiency within the target communities so that their efforts need not depend on external funding.
- Thus, decisions about this project should not be made without the input of those individuals at the local level, such as the TOT master trainers and workshop participants who will implement these community-based efforts.
- Ideally then, the formal decision-makers of this overall project should be those health workers closest to the community level at which the project is implemented, not MOH or USAID officials in Khartoum.
- The collaboration of this project with water supply projects would strengthen the connection between health, water, and sanitation and, therefore, minimize the rejection of latrines in water-needy villages.
- Depending on the duration and needs of this project, a formative evaluation should be conducted by an "renovation specialist" and latrine technician approximately three months after the first community-based latrines are built.
- An assessment of the time commitment TOT master trainers and workshop health workers are able to make to this overall project should be conducted and considered in any long-term planning.

APPENDIX A

Training of Trainers' Participants, Positions, and Regions

<u>Name</u>	<u>Title</u>	<u>Region</u>
Mohmad Omer A. ElRahim	Public Health Inspector	El Nahaad
Yousif Ahmed Elbashien	Public Health Inspector	El Obeid
Mohamed Toum Aboushanab	Public Health Officer	M. Corps
Abdul Fadil Eissa	Public Health Officer	Bara
Hassan Bagadi Hamid	Chief Public Health Inspector	Kadugli
Mekki Ahmed ElTigani	Public Health Inspector	Kadugli
Awad Mukhtar	Chief Public Health Inspector	El Obeid
Khalid Hassaci Baldo	District Engineer	El Obeid
Taha Sid Ahmed	TOT Trainer/Public Health Inspector	El Obeid
Hammad Ali Mohammed	Public Health Officer	Abuzabad
Daffalla Ahmed Mohamed	Public Health Inspector	Sodafi
Abdel Moneim Gamadel Din	Public Health Inspector	Diling
Mustafa Babo Nawai	Health Education Officer/UNICEF	Kadugli
Mohammed Ahmed Mohanda Hassan	Public Health Inspector	Umrawaba
Omer El Sharief Al Satir	Public Health Inspector/EPID Unit	El Obeid
Salah Eldeen Abbaker Muzzmil	Rahad Town Council, Engineer	Rahad

APPENDIX B
Activity Calendar

Training of Trainers - Latrine Construction Guide
January 18 - 30, 1986

SATURDAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
17 <u>Time</u> - <u>Activity</u>	18 <u>Time</u> - <u>Activity</u>	19 <u>Time</u> - <u>Activity</u>	20 <u>Time</u> - <u>Activity</u>	21 <u>Time</u> - <u>Activity</u>	22 <u>Time</u> - <u>Activity</u>	23
7:30 - Introduction TOT Goals 1st Overview of Training Guide	7:30 - 2nd Overview of Guide 8:30 - Experiential Learning and Guide Session #4 "Conducting A Sanitary Survey" 11:00 - Preparation for Practice Training Round #1 and Supervisory Feedback Preparation Time	Preparation time ROUND #1 9:30 - #1 PTA* Session 3-6 Community Group 12:00 - #2 PTA Session 14 #7-10 "User Education"	Preparation time 10:30 - #3 PTA Session 5 #1-7 "Types of Latrines" 13:15 - #4 PTA Session 6 #1, 2, 5 "Planning Construction"	7:30 - #5 PTA Session 7 #1-3 "Site Evaluation" 10:00 - #6 PTA Session 7 #5 "Site Evaluation" 11:15 - #7 PTA Session 7 #6-11 "Estimating Cost"	7:30 - Field Demonstration Session 8 "Latrine Slab Construction"	Free
12:00 - Adult Learning				Debriefing Round #1		
17:00 - Demonstration of Training Techniques and Guide Session #2					17:00 - TOT Evaluation of Week 1	
24 <u>Time</u> - <u>Activity</u>	25 <u>Time</u> - <u>Activity</u>	26 <u>Time</u> - <u>Activity</u>	27 <u>Time</u> - <u>Activity</u>	28 <u>Time</u> - <u>Activity</u>	29 <u>Time</u> - <u>Activity</u>	30
7:30 - Preparation Meeting for ROUND #2	Preparation Time ROUND #2 7:30 - #8 PTA Session 10 "Lining a Pit"	7:30 - #10 PTA Session 2 #7-8 "Sanitation and Health"	7:30 - #12 PTA Session 13 "Installation of Latrine Slabs" 11:00 - #13 PTA Session 15 #1-3 "Latrine Shelter" Debriefing Round #2	7:30 - Problem-Solving in Training	7:30 - Loose Ends 12:00 - Evaluation of TOT 13:00 - Closure of TOT	Problem-Solving
Preparation Time	12:00 - #9 PTA "Constructing a Base"	11:30 - #11 PTA Session 12 "Community Decision-Making"	17:30 - Session 18 #1-4, 7-11 Session 19 #4-5 "Project Planning"	17:30 - Adapting Training Guide Designs for Workshop	Decision-Making	

* PTA = Practice Training Activity

APPENDIX C
Daily Design

Daily Design

Training of Trainers\Latrine Project Workshop

RHSP-Sudan January 18 to 30, 1986

Day 1 (Saturday morning)

Activity 1 - Introductions

Goals: Participants will;

- a. Become familiar with each other.
- b. Identify and clarify their expectations of the TOT.
- c. Identify the strengths they bring to the TOT.
- d. Check their expectations with the intended goals of the TOT.
- e. Set norms for the TOT.
- f. Review the latrine construction project guide for initial reactions and a first overview.
- g. Participate in the first session of the guide.

Activities:

1. Welcome by officials
2. Goals of Activity I
3. Icebreaker - Margaret (This will be the paired interview activity from the latrine guide, Session 1, Step 2, p. 19)
4. Expectations and Strengths - Taha
 - a. Climate Setting and Goal of Activity plus instructions
 - i. Explain that in any training program it is best to ask participants what they expect to learn and do in a training program right at the start so that any misconceptions of the program may be surfaced and dealt with immediately. Also, it's beneficial to share all the strengths that people bring to a program so that throughout the program all of the participants and staff can rely on those strengths when necessary.
 - ii. State that for the next hour, we shall all (facilitators, too) be:
 - a. Spending 15 minutes alone listing on paper the expectations we have of the TOT and our individual strengths
 - b. Taking those lists into four groups of five members each
 - c. In these same groups, writing on newsprint a composite list of those expectations and strengths
 - d. Each group will be ready to explain its list before the whole group.
 - iii. Have a newsprint example of the finished product and list the steps:
 1. List individually.
 2. Join a group of five and discuss lists.
 3. Make a composite list of expectations and strengths.

4. Choose someone to report out for whole group.
- iv. Report-out
 - a. During the report-out, facilitate it by asking which group wants to go next.
 - b. At the end of report-out, state that we in the TOT will certainly be trying to meet those expectations and building up those strengths.
 - c. Turn to the topic of the TOT goals and how they match these expectations and build on the strength (Margaret takes next activity)
5. TOT Goals - Margaret
 - a. Facilitator summarizes the purpose of the TOT goal and objectives (as written on newsprint)
 - b. Explain from the diagram which follows how the TOT fits the Latrine Training Guide
 - c. Hand out schedule and relate back to the expectations and strengths lists from previous activity
6. Norms - Margaret
 - a. Facilitator presents the idea of "norms" or promises all of the members of the TOT will keep during the TOT.
 - b. Share those identified by facilitators (staff) and then solicit others from participants.
 - c. Remind participants that we will be functioning under these norms during the training and can change them as we see fit. For the time being, we need to respect them.
7. First overview of the Latrine Guide - Taha and Prankeel
 - a. Facilitators introduce this as the first overview of the guide and that this activity will be very brief and respond to the participants' first impressions of it.
 - b. Remind participants that a very thorough overview will be done after they go through two of the sessions themselves today.
 - c. Begin the participant discussion of their impressions by asking participants to think about what they thought when they first saw the guide last night and this morning
 - i. Write first impressions on newsprint.
 - ii. Let all impressions go up first before leading a brief discussion on how the TOT will respond to those concerns and impressions.
 - iii. Give out the handout on "Organization of Training Guide Sessions" and discuss with participants Appendix E.
8. Needs Assessment Inventory handed out and explained - Margaret - Guide Handout 1.3 p. 1-3.
 - a. Participants are asked to complete it by 16:00 today.

Day 1 (Saturday afternoon) - (hopefully before lunch)

Activity 2 - Adult Learning - Margaret

Goals: Participants will:

- a. Reflect back on their own learning experiences as adults
- b. Identify the most effective way by which adults learn.

Activities:

1. Facilitator asks participants to remember a time in their adult lives when they felt they really learned something.
2. Once they have thought of a time, each participant should write down what they as a learner were doing or feeling and what the teacher or trainer (if one was present) was doing.
3. Participants then pair up with another participant to share their situations.
4. Facilitator stops the conversations and asks participants to share their own characteristics and those of their trainers/teachers. Facilitator writes these on newsprint and leads a brief discussion.
5. Generalizations are made about "Adults learn best when...". This phrase is written on newsprint and generalizations are recorded.
6. Participants are asked to apply these learnings about how adults learn to the TOT and to their implementation of the training guide.
7. Closure -- Participants are told that tonight they will actually be experiencing an activity which demonstrates the methods used in adult training.

Day 1 (Saturday Night)

Activity 3 - Latrine Guide Demonstration - Taha and Margaret

Goals: Participants will:

- a. Observe or participate in a training session from the latrine guide.
- b. Prepare a critique of the training session in view of the trainer's actions.

Activities:

1. Taha introduces goals of session and clarifies steps in session and roles
 - a. This is an activity of the TOT within which some of us participants will be participating in a guide session while other participants are observing what the trainer/facilitator (Margaret) is doing. Roles of all are proposed.

- b. After the guide training session, the observer group will report back to the whole group what the training steps Margaret employed were.
2. Margaret begins guide session #2: Steps 1-5 with ten participants.
3. After guide session is completed, Taha asks the observers to report on what training steps they saw Margaret do.
 - a. What did Margaret do first, next...?
 - b. Did she ask a lot of questions at any particular step more than at any other?
 - c. Looking back at our list of "How adults learn best...", did Margaret do any of those?
4. Taha closes this session saying that this was an example of the training techniques used in the training guide and which we as participants will be using in the TOT during our practice training activities in Round #1 and #2.
5. State that tomorrow we shall meet to look over the training guide in more detail as well as to discuss the theory upon which these training techniques are based.
6. Remind participants that we shall meet in the Guest/Rest House tomorrow morning at 7:30 a.m.

Day 2 - (Sunday Morning)

Activity 4 - Second Manual Overview - Taha and Margaret and Frank (if able)

Goals: Participants will:

- a. Be able to identify and clarify their roles in implementing a Latrine Construction Project Workshop
- b. Become familiar with the workshop schedule.

Activities:

1. Introduction of goals - Margaret
2. Taha asks participants to refer to the latrine workshop cycle: page 12 in their guide.
 - a. Participants are given five minutes to review the cycle.
 - b. Taha asks if there are any questions and then responds to them. Here we must not have long discussions of the details of each step, but rather the raising of immediate concerns and referring participants to other activities in the TOT which deal directly with their questions.
3. Margaret then leads a short presentation on the workshop schedule and how the TOT fits with the schedule.

4. Closure should include a reassuring statement that all will seem clear by the end of the TOT.

Day 2 - (Sunday morning)

Activity 5 - Experiential Learning and Guide Session (Sanitary Survey)

Goals: Participants will:

- a. Be introduced to the experiential learning cycle
- b. Identify various training techniques within each of the four steps of the cycle
- c. Conduct a sanitary survey while participating in a workshop session.

Activities:

1. Introduction of experiential theory and cycle
2. Introduction of Session #4 - Sanitary Survey
 - a. Follow steps in guide
 - b. Divide participants into four groups of five. In each group, four should complete the survey -- or as much as they can within one hour -- and the fifth should be watching how the other four are learning to use the survey and how Margaret facilitates the discussion after all come back.
3. Upon returning to the TOT portion of this activity, Margaret asks:
 - a. How did this activity (guide session) demonstrate the four steps of the experiential cycle? What activities fit in each step?
 - b. Did Margaret respect your status as adults in facilitating this session?
 - c. What generalizations can you now make about training adults?
 - d. How can you apply that learning(s) to this TOT?
4. Closure
 - a. State that this is the end of the introduction to adult learning and the last time a lecture will be given on the topic.
 - b. Move into the next activity by saying how participants will have the chance to practice training techniques themselves in the Round 1 to be explained next.

Activity 6 - Preparation for Round #1 - Margaret, Taha and Frank (as technical advisor)

Goals: Participants will:

- a. Identify the reasons for, goals of, and procedures used in Practice Training Activity Round #1. (PTA)
- b. Become familiar with the methods for giving and receiving supervisory feedback.
- c. Have individual planning time for their PTAs.

Activities:

1. Introduction of activity - Margaret
2. Participants are asked to look over their expectations' list from the first day and see where the practicing of training techniques is evidenced.
 - a. Ask participants to state what they would like to learn within a practice opportunity and set as their goals for the PTA. List these on newsprint to be checked at the end of the Round #1.
3. Go through the procedures of the PTA:
 - a. Division of groups and guide sessions
 - b. Explain the process of activity and feedback: after each activity there will be a half-hour for feedback.
4. Introduce the topic of supervisory feedback:
 - a. What is the first thing that comes to your mind when you hear the word feedback?
 - b. Think of a time when you as an adult receive feedback which was helpful. What made it helpful?
 - c. List on newsprint the generalizations one can make about helpful feedback.
 - d. Taha and Margaret demonstrate feedback and participants identify what they saw which helped or hindered. Refer to generalization list.
 - e. Ask participants how they believe they can use these steps in both the TOT and the workshop. Handout feedback sheet.
 - f. Close activity by thanking participants for their cooperation in this activity and remind them that the TOT facilitators (us) will be available during the rest of the preparation period.

Day 2 (Sunday afternoon and evening)

Preparation for Round #1

Day 3 - (Monday morning)

Day 5 - (Wednesday night)

Practice Training Activities (PTAs)

1. Participants choose to divide into two groups from which they would identify which pair of participants would facilitate which guide session. One group consisted of eight trainees and the other consisted of six.
2. The following guide sessions were conducted:
 - Day 3: Session 3 - Steps 4-6 "Community Groups"
Session 14- Steps 7-10 "User Education"
 - Day 4: Session 5 - Steps 1-7 "Types of Latrines"
Session 6 - Steps 1,2,5 "Planning Construction"

Day 5: Session 7 - Steps 1-3 "Site Evaluation and Construction"
Session 7 - Steps 4-5 "Site Evaluation and Construction"
Session 7 - Steps 6-11 "Site Evaluation and Construction"

*Frank Carroll gave a brief lecture on the construction of a VIP latrine.

3. A debriefing exercise is held to generalize the learnings about training and about the training guide. This is introduced as the third step in the experiential learning cycle as it pertains to the practice training activities: first, participants experienced training then they analyzed through their own and others' feedback. Now, they would generalize and later, in the first week's evaluation session to be held the next day, they would apply what they learned (or didn't learn) to the final week of the TOT.

Day 6 (Thursday morning) Activity 7 - Description of a Double Pit VIP - Frank Carroll

Goals: Participants will:

- a. Be able to identify the parts of a double-pit VIP
- b. Be exposed to the types of materials and costs of such a latrine.

Activities:

1. Participants visit the health center where the construction of the double VIP is underway
2. Frank presents a brief and visual aid oriented session on the parts, costs, and equipment needed for this type of latrine
3. Questions are taken from participants and the actual site used for explanations.

Activity 8 - Guide Session 8 "Latrine Slab Construction" (See training guide)

Activity 9 - Evaluation of TOT/Week 1

Goals: To understand why, what, and how to evaluate
To evaluate the first week of the TOT

Activities:

1. Trainer presents a brief overview of the why's and what's of evaluation
2. Participants are asked to identify the +'s and -'s of the past week; what has gone well and what needs to be changed. Trainers leave the training room so that participants can speak freely. These comments are then written on a flipchart for discussion when the trainers return.
3. Solutions are discussed so that the minuses can be eliminated during the next week.

Day 7 - Free day

Day 8 (Saturday) - Activity 10 - Preparation for Round #2

Goals: To review the schedule for Round #2
To identify three skills upon which we would like to work in Round #2
To discuss the way feedback is going

Activities:

1. Participants are given the schedule for the next three days which are practice training activities.
2. Discussion follows on how many participants should facilitate which sessions, how long the sessions will be, and which deal with which subject.
3. Participants then are asked to identify three skills which they would like to work on during this Round #2. The trainees are asked to refer to one of the handouts (Guidelines for Experiential Training Design by TRG) to help them review the steps within a session. These skills indicated by the trainees as concern areas will then be the focus of their efforts during Round #2.
4. A discussion follows on how feedback worked during Round #1.
5. Participants are given the rest of the day to prepare their sessions.

Practice Training Activities

The following guide sessions were conducted by participants:

- Day 9: Session 10 - Lining the Base
Session 9 - Constructing the Base
Day 10: Session 2 - Steps 7-8 - Sanitation and Health
Session 12 - Community Decision-making
Day 11: Session 13 - Installation of Latrine Slabs
Session 15 - Latrine Slabs
Round #2 - Debriefing

Day 11 (Tuesday afternoon) Project Planning

Goals: To develop plans for latrine construction workshops and a community-wide latrine construction project
To identify overall time frames, budgets, and needed resources for a workshop and a project
To identify personnel and funding resources for the workshops and project.

Activities:

1. Introduction to session/goals
2. Participants are asked to identify the major planning steps they see in planning projects, be they a series of workshops or major, communitywide projects. These are listed on newsprint.

3. Participants are divided into two groups; the first reviews plan 6, for a series of workshops, the second reviews plans for a communitywide latrine construction project.
 - a. Group #1 answers the following questions:
 1. Who are you going to invite as participants to your workshops?
 2. How many participants?
 3. What personnel and material resources will you need for these workshops?
 4. Where will you hold these workshops? What are your lodging needs?
 5. How do you foresee financing these workshops?
 6. What will your training budget be?
 - b. Group #2 answers the following questions:
 1. How will you choose the community for your latrine project?
 2. How will you choose the houses within the community which will take part in this project?
 3. What resources (personnel and material) will you need? How will you determine local material support such as for supplies, equipment, and labor?
 4. How are you going to include community involvement and local councils?
 5. Over what length of time do you propose for this communitywide project?
 6. How do you foresee financing your projects?
 7. What will your project budget look like?
 - c. Groups should be ready to report-out their answers from/on newsprint.
4. Report-out
 - a. Each group presents its ideas and then both analyze each others' reports. Trainer asks:
 1. Does everyone understand each others' reports? Any questions for each other?
 2. What steps in the planning may be missing from these reports?

5. Generalization

a. Trainer then leads a discussion on the following summarizing questions:

1. What plans/ideas may we present to the responsible officials about what we want to do in this effort?
2. What are our project/training needs for which we would like their assistance?

6. Closure

Day 12 - (Wednesday) Problem-Solving in Training - Activity 12

Goals: To present the plans on workshops and latrine construction projects to program officials (Dr. Taha and Dr. Jim Sonnemann)
To discuss potential funding resources from the Rural Health Support Project

Activities:

1. Participants present their ideas to Dr. Taha and Dr. Jim Sonnemann and a discussion follows.

(Wednesday) Adapting/Revising Training Designs - Activity 13

Goals: To learn how to revise training designs
To revise particular handouts, sessions, drawings from the training guide

Activities:

1. Trainees are given a brief lecturette on the principles of training design (handout in Appendix D)
2. Various groups are then formed to revise certain handouts from the training guide.
3. Participants then generalize how to revise designs and what would cause them to decide to revise.
4. Closure.

Day 13 - (Thursday) Evaluation in Training

Goals: To identify for ourselves why training evaluations are important
To discuss what should be evaluated in an evaluation
To create our own training evaluation for this TOT

Activities:

1. Participants are asked to decide why evaluations are important. These are listed on board or newsprint.
2. Participants are asked about what should be evaluated in an evaluation.
3. Three groups are formed to develop their own training evaluation form for this TOT.
 - a. Groups write their questions on flipchart and report back to the whole group.
 - b. Trainer attempts to summarize these group suggestions on one newsprint which serves as an example for an evaluation of this TOT.
4. Participants fill out their own evaluations of the TOT on their own paper to hand in to trainers.
5. Participants are also reminded to go back to their Self-Assessment Inventories from the training guide to see what they have learned from the TOT.
6. Closure

Day 13 - (Thursday morning before the evaluation) - Loose Ends

Goals: To tie up loose ends in our learnings
To review estimating and calculating quantities and costs
To learn how to build a wooden base and slab
to learn how to build a fly trap

Activities:

Individual sessions run by trainers with workshop participants who volunteered to assist.

DATES: January 13, 15, 16

PLACE: El Obied

PARTICIPANTS: Taha Sid Ahmed, Frank Carroll, Margaret McLaughlin

DAY 1

Welcome

Ice Breaker

Expectations of Staff Training

Goals of Staff Training

Schedule of Proposed Staff Training

Adult Learning Exercise: How the Training Guide and TOT expect to treat
Adults

Training Guide Session: Session #2 - Steps 1-5 "Sanitation"

Experiential Training Cycle: As determined from the previous exercise

DAY 2

TOT Schedule and Design

Training Teams Roles and Responsibilities in TOT

DAY 3

Review of next preparatory steps

Feedback

Review of Expectations

APPENDIX E

Organization of Training Guide Sessions for
Latrine Construction Projects

TOT DATE

- 18/1
20/1 & 27/1
- A. BACKGROUND AND RATIONALE
Session 1 - Workshop Introduction
Session 2 - Health Aspects
- B. PLANNING
20/1 Session 3 - Project Cycle
19/1 Session 4 - Sanitary Survey
27/1 Session 12 - Community Participation
28/1 Session 18 - Communitywide Projects; Case Study
28/1 Session 19 - Communitywide Projects: Plan Your Own
- C. DESIGN
27/1 Session 5 - Types of Latrines
21/1 Session 6 - Construction Scheduling
22/1 Session 7 - Site Evaluation and Construction Details
- Session 17 - Latrine Upgrading
- D. CONSTRUCTION
23/1 Session 8 - Slab Construction
26/1 Session 9 - Base Construction
26/1 Session 10 - Pit Lining
28/1 Session 13 - Slab Installation
28/1 Session 15 - Superstructure Construction
- Session 16 (part - Completion and Assessment
- E. REPAIR AND MAINTENANCE
- Session 14 (part) - Household and Public Latrines
- F. EDUCATION AND MOTIVATION
- Session 11 - Community Sanitation
28/1 Session 14 (part) - VIP Latrine User Education
- Session 16 (part) - VIP Latrine User Education
- G. EVALUATION OF TRAINING PROGRAM
30/1 Session 20 - Participant Feedback

APPENDIX F

Workshop and Communitywide Project Resource Needs

These needs were presented by the TOT participants to RHSP officials in the TOT session entitled "Problem-solving in Training" in hopes that RHSP could meet such needs.

Workshop Needs

Full financing of the workshop, including:

1. Participant and trainer per diem
2. Food and lodging
3. Materials, equipment, and labor to build and supervise at least two latrines, both VIP with one being made from local materials and the other made from delivered materials (cement, asbestos vent pipes, and so forth)
4. Transportation needed for constructing the latrines by workshop participants and trainers.

Communitywide Project Needs

Minimally, participants stated that they needed:

1. Concrete slabs and brick bases
2. Vent pipes.

Ideally, participants stated that they needed:

1. Kits of materials, including equipment such as hammers, levels, measuring tapes, shovels, and so forth.
2. Cement
3. Vent pipes
4. Vehicles and fuel for transportation of materials, supervisory personnel and labor
5. Funds to pay labor and additional materials.

APPENDIX G

List of Handouts for the Training of Trainers

LIST OF HANDOUTS*

1. 10/10/85 Letter - From Tom Ateka Nyangena (American Medical and Research Foundation) to Craig Hafner (WASH Project)
2. Time Frame of the Refresher Course on VIP Latrine Demonstration Project
3. Curriculum for the Refresher Course on VIP Latrines to the Community Health Workers at the CHW Training School, Lirya -- March 19 to April 11, 1984.
4. Preamble
5. Community Health Workers Refresher Course on VIP Pit Latrines Design, Construction, Use and Maintenance
6. How a Ventilated Improved Pit (VIP) Latrine Works
7. Common Faecal Borne Diseases, by Aropi Tiondi
8. Poliomyelitis (Infantile Paralysis)
9. Infantile Diarrhoea (Infantile Gastro-Enteritis)
10. Common Faecal Borne Diseases - Hookworm Disease (Ankylostomiasis)
11. Common Faecal Borne Diseases (Roundworms - Ascariasis)
12. Common Faecal Borne Diseases Schistosomiasis (Bilharzia)
13. Interviewing Techniques
14. Counselling
15. Twenty Principles of Planning Health Education
16. Planning and Conducting Effective Individual and Family Contacts
17. Guidelines to Make the Small-Group Approach Highly Productive
18. Environmental Survey
19. Course Evaluation
20. Pre-Test

* Available at the WASH Library