

Regional Office for the Eastern Mediterranean

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UNFPA AND WHO COLLABORATION IN TRAINING TEACHERS OF MCH IN BARAKAT, SUDAN, 1977 - TODATE WHO EMRO

This project was funded todate by WHO from its inter-regional funds but as UNFPA are now ready taking over the costs we may consider it to be an example of WHO/UNFPA collaboration at present. Of course in the field the project owes most to the firm support of the Government and the keen and competent contribution of the director of the programme, Dr Awad Mohammed Ahmed, who had been Head of Obstetric Department at Wad Medani Hospital.

This programme is conducted not even in a provincial capital, but in a small town and some nearby villages.

In 1977 the objectives of the programme were defined as follows:

"to train teachers of VMW, CHW, HV and teachers of medical assistants, community nurses and other personnel already in service positions in the community so that they will be able to plan, implement and evaluate an effective and efficient training programme resulting in effective MCH care by those trained".

Although not part of the original explicit objectives of the programme, several additional originally implicit intentions can now be made explicit, namely.

- that the activities of the trainees during the course would generate in selected communities health care actions, and community participation in health services;
- 2) that the health status, particularly of mothers and children, would be improved in these communities by community action and by services provided, such as vaccinations, family planning,
- 3) that the activities of the programme would generate improvements in related education and service programmes.

The principal features of the programme have been:

1. The first course for 11 trainees was held March-May 1978. The second intake (12) started training in October 1978. Todate (December 1979) 51 persons have been trained including those from Syria and one from Yemen.

Preliminary meetings with community leaders of participating villages (six) were held prior to and during each of the courses.

The present staff of the programme consists of the programme director (parttime), a programme coordinator (Sister Batoul) (full-time), and a full-time tutor (Sister Zahra). Additional instructors are drawn from the Wad Medani Hospital, the Ministry of Health, and the Gezira Social Development Scheme.

Mr Nelson (Consultant) participated during February-June and during three weeks in October 1978.

2. A detailed curriculum has been prepared on the basis of objectives defined for the programme and an analysis of MCH tasks of CHW, rural midwives, health volunteers and medical assistants. Activities of students and teachers are planned in the form of daily lesson plans.

- 3. The training activities have taken the following form:
 - class-work primarily group discussions, group work, demonstration, role play, lectures;
 - village practice, i.e. community survey involving development of information gathering instruments, and analysis of these; training of village volunteers; assisting local health personnel and providing a variety of health services, such as vaccinations, nutrition advice, family planning activities.
- 4. The learning activities attempt to maximize the trainees' experience of:
 - involving village communities in health related activities,
 - actively participating in the teaching/ learning process,
 - production of teaching/learning materials.

5. The six villages are actively involved in the surveys, discussion of health problems, actions to be taken to improve health, the selection and training of village colunteers for self-help activities in the communities.

6. Following the initial plan for the programme by the Steering Committee in which the national and provincial Ministry of Health is represented, as well as representation of the community health department of the University of Khartoum, the MCH/FP project, the Wad Medani Hospital, further advice to the Programme Director was provided by an Advisory Committee.

WHO's evaluation is that the course has been rather unusually successful. Some of the outcomes, besides the fact that the programme has progressed at a brisk pace as planned, have included.

(a) the principle of experiential learning and the derivation of educational objectives from task analysis have guided the programme as can be seen from its content and process. These principles enthusiastic response from the trainees themselves;

(b) the programme is evaluated regularly,

(c) the one spin-off of the programme was the translation into Arabic evaluation through use, and amendment accordingly of a manual on obstetric emergencies outside hospital, which is now being published by EMRO for wider use,

(d) the trainees seem to have achieved considerably greater ability to train health workers, judging from their performance in the course in involving students in learning and in relating content to practical problems. (Of course only direct observation of the trainees in their own training positions which they have taken up in the various provinces will show whether they really make use of this ability). (e) One of the most noticeable outcomes, however is the actual response of the villages who have been closely involved as the teaching area in this whole programme. The communities have taken action (improving sanitation, having all children immunized, for example) to improve their own health status, and the identification and training (as practice) of the village instructors gave much support to this community action and demonstrated the potential of such volunteers.

The training in MCH of teachers of village midwives, community health workers, health visitors, medical assistants and community nurses will continue at Barakat and will serve all the Sudan except the Southern Region. There another similar centre will be opened in Juba for that region. It also offers some potential to serve other centres, partly by being able to accept a limited number of trainees from other Arab countries, but more as one example from which UNFPA and WHO (or UNFPA, UNICEF and WHO) could develop similar programmes with other countries. As a step towards this, WHO will be conveying an inter-country workshop in Barakat in December 1980 to review the programme with this end in mind, and those participating will include WHO Medical Officers from UNFPA-funded MCH/FP projects in the region and national Directors of MCH programmes. UNICEF participation would be also welcome, if desired.

In short, this does seem to have been one of those programmes where newer concepts have been put into actual practice in relation to MCH training in a context of primary health care. Such concepts as "community participation", "experiential learning", "task analysis" are shown to be not just plous jargon, but actually practicable and worthwhile principles which can be carried out at village level.