منظمة الصحة العالمية

المكتب الإقليمي

لشرق البحر المتوسط

INTERREGIONAL WORKSHOP ON STRENGTHENING TEACHING
HEALTH EDUCATION/COMMUNICATION SCIENCES AT THE
PROFESSIONAL LEVEL, FACULTY OF MEDICINE, SUDAN
6 - 11 December, 1986

LEARNING OBJECTIVES IN COMMUNICATION/EDUCATION FOR HEALTH

1. The attached document gives examples of learning objectives of the course in communication and education for health:

- in a national health manpower training institute (Congo);

- in an intercountry public health training institute (Lome Centre, Togo).

2. Its purpose is to assist the formulation of teaching objectives in relation to the themes and areas of communication and education for health selected by the participants.

CONTENTS

HEALTH EDUCATION COURSE AT THE HIGHER INSTITUTE
FOR HEALTH SCIENCES[1]

MARIEN N'GOUABI UNIVERSITY, BRAZZAVILLE, CONGO

Sections: The following sections all attend this course.

Second year of Medicine
Second year of Bachelor's Degree in Public Health
Second year of Bachelor's Degree in Nursing

Duration: 30-35 hours.

Aim of the course

Equip students with the knowledge, attitudes and skills needed to:

- analyse individual and community health behaviour patterns;
- organize within the community, health education activities such as will improve the citizens' health behaviour;
- promote community involvement in health development.

General educational objectives of the course

By the end of this course, students should be able to:

(1) explain the definition, objectives and basic principles of health education (Module 1);

(2) show the fundamental role of human communication in health education work and define the necessary conditions for effective communication with others (Module 2);

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[1] This course was given each year from 1977 to 1982 by Mr H. Ben Aziza Hamadi, Regional Officer, Education for Health, WHO Regional Office for Africa, Brazzaville, Congo.

(3) identify and distinguish between the main educational approaches, methods and techniques used in health education (Module 3);

(4) plan, execute and evaluate health education activities in a community and in a health or social facility (Module 4);

(5) organize the community so as to foster its involvement in PHC activities as a facet of integrated development (Module 5).

SPECIFIC EDUCATIONAL OBJECTIVES OF THE HEALTH EDUCATION COURSE

Module 1: OBJECTIVES AND PRINCIPLES OF HEALTH EDUCATION

By the end of the module, students should be able to:

1.1 Give an operational definition of health education placing emphasis on the fact that health is a way of behaving.

1.2 Distinguish between health information and health education.

1.3 Identify the psychological, psychosocial and sociocultural factors determining individual health behaviour.

1.4 Define at least six notions in the human sciences which enable the principles of health education to be better understood and analyzed.

1.5 Define the scope of health education.

Module 2: COMMUNICATION PROCESS

By the end of this module, students should be able to:

2.1 Identify the components of all human communcation.

2.2 Identify:

(a) the characteristics of health message should possess in order to be understood;

(b) the qualities the "transmitter" should have in order to win the confidence of the person addressed;

(c) the conditions the "receiver" should fulfil in order to pick up and assimilate the health message properly.

2.3 Choose the most favourable situations and times for the transmission and assimilation of health messages.

2.4 List the means of communication most commonly used in health education stressing traditional means.

2.5 Discover and analyze:

- the psychological, social and cultural obstacles preventing the population from applying the health advice received;

- the psychological, social and cultural factors which encourage the public to improve their health attitudes and practices.

Module 3: APPROACHES, METHODS AND TECHNIQUES IN HEALTH EDUCATION

By the end of this module, students should be able to:

3.1 Identify the main approaches to health education.

3.2 Describe the main advantages of each of the approaches to health education (HE).

3.3 Choose the appropriate social and health context for using each of these approaches to health education.

3.4 Identify and memorize the essential rules for:

3.4.1 conducting person-to-person discussion on a health problem so as to help the individual concerned take a personal decision to apply the advice received;

3.4.2 in a community or health centre, conduct a group discussion on a health subject in a way that will give rise to practical action among the group members.

3.5 Describe the successive steps to be taken for effectively organizing a nutrition demonstration.

3.6 Describe the main educational values and how to use the four educational aids most often employed in health education.

3.7 Describe the successive steps to be taken in producing an educational aid.

Module 4: PLANNING HEALTH EDUCATION PROJECTS

By the end of this module, students should be able to:

4.1 Set forth the advantages of planning health education activities.

4.2 Describe and analyze the basic steps to be taken in planning a health education programme in a community and in a health centre.

4.3 Formulate precise educational diagnoses in the light of a situation analysis.

4.4 Prepare relevant, attainable, observable and as far as possible measurable behaviour objectives.

4.5 Specify the criteria for evaluation of objectives and activities.

4.6 Plan a health education project to help solve a health problem prevalent in the community.

Module 5: COMMUNITY PARTICIPATION

By the end of this module, students should be able to:

5.1 Analyze the economic, sociocultural, political and administrative, and psychosocial structures in a community and select from among those structures the components which have implications for health education tasks.

5.2 Identify the main factors (psychological, sociocultural and economic) likely to stimulate or hinder community participation in the planning and implementation of local activities.

EDUCATIONAL OBJECTIVES OF THE RETRAINING COURSE
ON EDUCATION FOR HEALTH

LOME PUBLIC HEALTH TRAINING CENTRE, TOGO
(WHO INTERCOUNTRY PROJECT ICP/HMD/012)

Trainees: This is a course for medium-level health personnel and for lecturers
from teacher training colleges teaching health-related courses.

Duration: An annual seven week course.

Module 1: ORGANIZATION OF INDIVIDUAL AND GROUP WORK

By the end of the course a participant should be able to:

1. Personally take responsibility for his or her own learning by
intensive reading and systematically considering: What is the
subject in matter? What will I do with what I have read? Why am I
reading this? What is important to remember? What is new to me?
What is not new but presented differently?

2. After reading, draw up information sheets for the purpose of
retrieving important data.

3. In documents, select useful passages for conceptual work.

4. Describe interaction observed during group work.

5. Look for reasons which explain the atmosphere within the group.

6. ˙Propose solutions for improving the output of a group in trouble.

7. Within a working group, show:

    - attentiveness towards colleagues;
    - open mindedness (maturity) during discussion;
    - availability (cooperation) for tasks to be carried out.

8. Follow a simplified method (systematic questioning attitude) in organizing a work group (distribution of tasks), and by systematically answering the questions: Who and why? What and why? Where and why? When and why? How and why?

9. In speaking and writing, use simple language with simple words appropriate to the message as well as to the listener.

10. Go back to operational definitions whenever the expression of an idea is open to more than one interpretation (for example education for health, information for health, etc.).

Module 2: DEVELOPING AN EDUCATION FOR HEALTH PROJECT

By the end of the course and when called upon to produce an education or information for health project, the learner should be able to:

1. Select health problems for which information and education for health are the basic solutions.

In practical terms this means being able:

1.1 Using survey techniques involving direct observation, questionnaires and interviews, to gather data to locate community within its physical, sociocultural, demographic and socioeconomic context.

1.2 Using the same techniques, to gather data to identify health problems relying on essential epidemiological concepts for communicable and noncommunicable diseases such as means of transmission, contagiousness, duration of incubation, lethality, control methods, extent.

1.3 Using the same techniques, to gather data on the community's attitude towards health in general and its own specific health problems (what it knows, what it thinks, what it does).

1.4 To classify health problems in order of priority, on the basis of criteria such as extent, seriousness, vulnerability, target population, socioeconomic consequences and sources of identification.

1.5 To select problems for which IEH would largely provide the solution.

1.6 To classify these problems in order of priority.

2. Identify the main factors which need to be changed in order to solve the problem.

In other words, the ability to:

2.1 Identify behaviour which promotes these problems.

2.2 Select behaviour to be given special attention in education for health activities.

2.3 Apply the principles which help identify the causes of this behaviour (sociocultural factors).

2.4 Analyze the forces influencing each kind of behaviour selected for action to obtain the desired change.

3. Formulate objectives.

In other words, the ability to:

3.1 Give the components of an objective, be it a health services management objective, training objective or education for health objective.

3.2 Give the qualities of an objective.

3.3 Give objectives of health services management.

3.4 Formulate the objectives for an education for health project.

4. Select the techniques for obtaining the education for health objectives.

In other words, the ability to:

4.1 Determine the target population for action.

4.2 Come to a decision about the way in which the community should be approached to solve the problem (strategy).

4.3 Select the most relevant techniques for each strategy.

4.4 Compare the techniques having regard to the social cultural context, to whether they are applicable and to their probable degree of effectiveness.

5. Determine resources to be mobilized to attain objectives.

In other words, the ability to:

5.1 Recapitulate activities which should be carried out in relation to the objectives of an education for health project.

5.2 Analyze resources in manpower (category and number), equipment (transport, audiovisual aids) in finance and time.

6. Organize concrete activities.

In other words, the ability to:

6.1 Arrange in a logical sequence the different operations or activities involved in carrying out the project.

6.2 Allocate appropriate resources to each operation.

6.3 Estimate the likely duration of each operation.

6.4 Construct a graph of the progress of operations.

7. Develop control criteria for activities.

That is to say, the ability to:

7.1 Select appropriate indicators for measuring the results of action carried out in the field:

   (a) impact indicators;
   (b) community participation indicators;
   (c) health coverage indicators.

7.2 Specify the limits for interpretation of the results.

Module 3: IMPLEMENTING AN EDUCATION FOR HEALTH PROJECT

1. Improve the communication process with the community and between members of the community.

   Practically speaking, this means the ability to:

1.1 Define the seven stages of the communication process.

1.2 Give for each stage the distortion potential.

1.3 Give for each stage the attitudes and techniques which would solve these distortions.

1.4 Develop a feedback mechanism for correcting the distortions.

1.5 Create an atmosphere of confidence between members of the community and between himself or herself and the community.

2. Use proper audiovisual aids to help perception and understanding in members of the community during the education for health sessions.

   Practically speaking this means the ability to:

2.1 Operate:

    (a) a flanellograph;

    (b) a slide projector;

    (c) a 16 mm film projector;

    (d) a tape recorder.

2.2 Distinguish the principles used in:

    (a) rapid sketching;

    (b) preparing posters.

2.3 Prepare messages using simple principles and in everyday language.

2.4 Select audiovisual aids appropriate to the message to be put across.

3.   Obtain active participation of the community in solving its own problems.

    In practical terms, the ability to:

3.1 Conduct education for health sessions or information for health sessions in a community using the following techniques:

    (a) presentation;

    (b) discussion;

    (c) meeting;

    (d) demonstration.

3.2 Indicate when to use each of these techniques, and state their advantages and limits.

3.3 In speaking and writing, use simple language with simple words appropriate to the message and to the listener.

Module 4: EDUCATION FOR HEALTH AND PRIMARY HEALTH CARE

    By the end of the course the participant should be able to:

1.   Define the activities of an educator for health within a primary health care team.

In practical terms, this means the ability to:

1.1 Give an operational definition of "primary health care".

1.2 Specify the IEH contribution to the primary health care strategy.

1.3 In a community select behaviour which the primary health care worker should change in order to prevent conditions harmful to health.

1.4 Identify the most suitable period for education for health activities to produce the desired effect.

1.5 Identify the target populations for messages.

1.6 Prepare the message content to be given to the primary health care workers.

1.7 Develop a control mechanism for assessing the effect of the message.

2. Determine the training needs of primary health care workers in information and education for health activities.

Practically speaking, this means the ability to:

2.1 Select tasks to be given to primary health care workers in the information and education for health field.

2.2 Analyze tasks to be given to the primary health worker specifying the logical sequence of actions the frequency of each, and forseeable learning difficulties.

2.3 Determine points on which primary health care worker should receive training.

3. Supervise the information and education for health activities carried out by primary health workers.

In practical terms this means the ability to:

3.1 Prepare a check list of information and education for health activities for primary health care workers.

3.2 Verify the information and education for health activities.

3.3 Propose measures to improve the performance of primary health care workers.

4. Measure the impact and coverage of primary health care activity.

In practical terms this means the ability to:

4.1 Develop a system for gathering data.

4.2 Collect information which could be used to measure impact and coverage.

4.3 Analyze information collected.

4.4 Determine to what extent activities have produced the desired results.

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A PLAN OF A TEACHING-LEARNING UNIT IN
COMMUNICATION/EDUCATION FOR HEALTH: AN EXAMPLE

This document is prepared to help participants formulate
detailed plans of teaching-learning units in Communication/Education
for Health, based on pertinent and relevant educational objectives

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Content

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*Adapted from document AFR/HE/70: "Training of Nurses in Health
Education" — Report of a Workshop — University of Ibadan, Nigeria — 1975.

A PLAN OF A TEACHING - LEARNING UNIT IN
COMMUNICATION/EDUCATION FOR HEALTH: AN EXAMPLE

I. EXAMPLE OF AND EDUCATIONAL OBJECTIVE DIVIDED INTO TEACHING/LEARNING UNITS

1. The following education objective concerns the Nurses.

"To acquire knowledge of the principles of education for health and skills in methods and techniques of communication for application to specific hospital and communicaty health situation:"

Content

i) Principles of health education

ii) Community organization.

iii) Community diagnosis.

iv) Factors influencing human behaviour.

v) Communication; principles, process and techniques.

vi) Scope and practive of health education in hospitals and community.

vii) Group dynamics

viii) Interpersonal relationships.

2. One teaching-learning unit: COMMUNICATION

2.1 Specific learning objectives

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

2.1.1 Describe orally and in writing, the components of communication.

2.1.2 Analyse factors influencing the communication process.

2.1.3 List and explain criteria for formulating clear, concise, understandable message.

2.1.4 Analyse the factors that affect the interpretation of a message.

2.1.5 Describe communication channels existing in the health service settings.

2.1.6 Identify/describe the barriers to effective communication process.

2.1.7 Conduct an effective evaluation procedure.

2.2 Content

i) Definition of communication.

ii) Types of communication.

iii) Process of communication

iv) Understending human behaviour

v) Criteria for effective communication:

- sender

- message

- receiver

    vi)   Factors influencing effective communication.

    - facililators

    - barriers

   vii)   Group dynamics

  viii)   Interpersonal relations

    ix)   Preparation of sample materials

    x)   Development of evaluation instruments.

2.3 Skills

(i) Teaching
(ii) Interviewing techniques
(iii) Observing

(iv) Recording

(v) Reporting

(vi) Interacting/relating

(vii) Participanting
(viii) Conducting a discussion
(ix) Problem solving

2.4 Attitudes/values

(i) Examplary action
(ii) Flexibility
(iii) Understanding/receptivity
(iv) Objectivity

(v) Interest in and respect for others
(vi) Sociability

2.5 Methods

(i) Demonstration
(ii) Lecture
(iii) Group discussions

(iv) Project presentation (written/oral)

(v) Role playing

(iv) Case studies
(vii) Supervised and structured field Work.

2.6. Materials

(1) Literature, e.g. relevant and documents oral and practical

  (ii) Visual aids, e.g. modules journals, posters, flannel-graphs, etc.

  (iii) Audiovisual aids, e.g. films, assessment. slids, etc...

2.7 Resources

(1) Human resources.

- teachers,
- families,

- groups,

- health and

community workers.

2.8 Evaluation

(1) Tests - written,

(ii) Progress reports
(iii) Field assignment

(iv) Self-evaluation

(ii) Health care resources   rating scales.
and facilities:

                       (v) Anecdotal records
   - hospitals,   by supervisors.
   - health centres,
   - dispensaries, etc.
(iii) Mass media.

IIA. PLAN OF THE COURSES RELATED TO SPECFIC LEARNING OBJECTIVE № 2.1.1. OF THE UNIT COMMUNICATION

"COMPONENTS OF COMMUNICATION" (SUB-UNIT)

Unit on Communication: lesson plan

Sub-unit: The components of communications

Learner level: First year

Duration: One hour

Setting: Classroom

Prerequisites to this lesson: (i) definition of communication

                                 (ii) types of communication

Objective	Content	Teaching/learning activities		Evaluation
		Learner	Teacher	
1. To define the components of communication	Introduction (i) Definition of communication (ii) Types of communication. Step 1 (10 minutes) Definition of the terme component	(i) The student will Define communication. (ii) The student name the two main types of communication as: - verbal - non verbal (iii)The student will give examples for each type of communication (iv) The student will describe the term component in his/her own words	(i) The teacher will ask the students to define the term communication Method: Lecture/discussion (i) The teacher will give the accepted definition of the term "component"	Written or/and Oral Test
	Step 2 Components of communication	(v) From the definition of com-munication and the definition of component, the student then be asked to identify the components of communication.	Method Lecture/discussion. (ii)The teacher will write/list on the components of communica-tion, namely: - the message - the sender - the receiver - the situation - the channels. Time:(20 minutes)	

| Objective | Content | Teaching/learning activities | | Evaluation |
		Learner	Teacher	
2. To identify the Channels of communication.		(i) The student will describe the term "channel" in her own words.	The teacher will describe the term "channel" in the context of communication.	Written essay
	Conclusion: The importance of the presence ponents in communication	The student will give examples of communication of all five com-to-day life. To illustrate direct and indirect channels of communication, e.g. situation depicting - feedback mechanism - types of channels of messages: human, radio, television, Posters. The student will be asked to identify which component is either lacking or defective.	Method: Lecture/ discussion. channels in day-will ask then to state whether this is direct or indirect. Time: (20 mins) Method: Lecture/ discussion The teacher will use the overhead projector to illustrate a series of situations depicting the effect on communication when any of the components is either lacking or defective. Aids: 1. Blackboard and chalk. 2. Overhead projector Time: 10 mins	Oral test The teacher Individual project

II B. Plan of the Course related to Specific Learning Objective No. 2.1.2. of
the Unit "COMMUNICATION"

Factors influencing the Communication Process" (Sub-Unit)

- i) Learner level: First year (with reinformation and evaluation of
knowledge, skills and attitudes through the second and thord year)

- ii) Duration: two hours

-iii) Setting: Class-room

- iv) Prerequisite to this lessow: component of communication

a. Objectives: At the end of the unit the student should be able to:

i) demonstrate that by participating in group discussion, she can
pass on and receive messages using specific language;

ii) identify the socioeconomic/cultural factors influencing
communication;

iii)demonstrate ability to adapt a message to different situations;

iv) communicate effectively with a group by motivating members to
modify/change their health behaviour;

v) assess effectiveness of a message by utilizing evaluation
instruments.

b. Content

- The components of communication: the sender, the message, the receiver
and the situation.
- The factors common to all the components:
- Environmental factors
- Sociocultural, economic, political factors

- Language
- Needs and wants
- Relevance
- Perception.
- Factors common to receiver and sender: frame of reference.
- Factors common to the message and the situation: appropriateness, timing.
- Factors related to the message: clarity, consciseness, accuracy.

c. Skills and attitudes: See those mentioned for the whole unit on "Communication" (page 2)

d. Methods
- Demonstration
- Lecture/discussion
- Group discussions
- Role playing
- Script writing
- Socio-drama
- Micro-teaching

e. Learning experiences, Teaching/Learning Activities:

f. Instructional materials and Sources

- Literature and appropriate documents
- Adudiovisual materials (which affect communication).

g. Practical learning experiences

- Teaching families, individuals, groups in and out of hospital.
- Elaboration of a health message and evaluation of its impact on target group
- Talking with people.
- Interviewing people.
- Preparing reports.
- Recording data.
- Relating, cooperating, coordinating, collaborating with professional and other community groups.

h. Evaluation

- Tests - written, oral and practical.
- Progress reports, field assignment assessment.
- Self evaluation rating scales.
- Anecdotal records.
- Peer group evaluation.
- Student's diary/record of activities.

III. Basic Elements on Course Evaluation in C/EH

1. What to evaluate   2. How to evaluate

a Outcome

b Total instructional process

c Evaluation
   procedure
all in terms of
knowledge, skills
and attitudes.

d Impact on per-
   formance

a Examinations
   written or oral

b Observation -
   e.g. during
   field expe-
   rience
   or practical
   teaching

c Discussion
d Experiment
e Written essay
f Individual or
   group project
g Interview
- Others.