HELP & SHELTER
TRAINING & CAPACITY BUILDING TO ENHANCE SERVICE DELIVERY PROJECT

Activity Report: WHO Guide to Family Planning for Health Care Workers & Clients Training Workshop –13 &14 April 2011

1. Introduction/ Background

The content and programme for this workshop was based on the '*WHO Workshop Guide to Family Planning for Health Care Workers and Clients'* which is being implemented as the model training programme for health care workers in Guyana. Recognizing the nexus between family planning, reproductive rights and the well being and health of women, men and children; the strategy is to develop a cadre of persons who have scientific knowledge on FP issues and who can impart this knowledge correctly. Using this strategy, this workshop aimed to (i) sensitize and train members of NGOs and CBOs to promote family planning in their respective outreach activities (ii) to provide a cadre of facilitators with the knowledge and skill to advocate for family planning and emergency contraceptives in collaboration with community health centres, family planning clinics and regional hospitals.

2. Methodology

A combination of formal presentations on programme topics, small group and plenary discussions, role plays and hands on demonstrations on the correct use of contraceptives using models of male and female reproductive organs and diagrams were methodologies used.

3. Topics and Participant Feedback

Topics:

- The importance of family planning in improving maternal, child and community health in Guyana
- Contraceptive technology – types of contraceptives and their use
- Importance of socio-cultural factors in family planning
- Counselling in family planning- knowledge, skills and attitudes
- Introduction to" *A Guide to Family Planning for Health Care Workers and Clients'*
- Referrals
- Training tips for '*A Guide to Family Planning for Health Care Workers and Clients'*

Participants Feedback

The importance of family planning in improving maternal, child and community health in Guyana

Participants identified FP as important in; reducing the economic burden on families, reducing the number of abortions and teenage pregnancies, improving the lives of children, controlling population growth, improving maternal health and avoiding maternal deaths, promoting responsible sexual behaviour and healthy relationships in the family through joint FP decision making, gaining knowledge about the various FP methods so as to choose the most suitable type

In discussing the importance of FP to the community, participants felt that this could lead to the empowerment of both sexes and reduce peer pressure on teenager to engage in risky behaviour. It was recognized that there were cultural and religious beliefs as well as a lack of correct information which would have to be taken note of in promoting and advocating for FP in the community.

In respect to children, it was agreed that FP was an important tool in reducing child neglect, illiteracy, educational neglect, and school drop out rates, malnutrition, child abuse, sibling abuse, teenage pregnancy, incest and the spread of STIs and HIV among children. It was also felt that FP would reduce poverty and overcrowding in homes, provide better and improved health care, and lead to a reduction in the number of children to a sizeable level which families could provide for adequately.

Participants also identified the importance of FP to maternal health and identified the benefits as healthier pregnancies, appropriate treatment for difficult and high risk births and anemia among pregnant mothers, safer and less terminations of unwanted pregnancies, early detection of complications during pregnancy, mothers better physically prepared for pregnancy and delivery.

Benefits of FP for women were identified as;

- Protection from unplanned pregnancies

- Reduction of maternal deaths

Benefits of FP for children were identified as;

- Saving lives
- Promoting growth and development

Benefits of FP for men were identified as;

- Helping them to care for their families
- providing a better life for themselves and their families

Benefits of FP for families were identified as;

- Improving family well being
- Better able to provide for the needs of the family

Benefits of FP for the nation were identified as

- Helps national development
- Improves economic situation of the country
- Ensures better opportunities for a good life

Contraceptive technology – types of contraceptives and their use

An interactive discussion on the menstrual cycle, length, body changes, ovulation etc and how contraceptives work to prevent fertilization preceded the introduction of different types of contraceptives. Participants in small groups through role plays demonstrated the correct use of different types of contraceptive. The role plays and demonstrations by groups included the female and male condom, IUD, injectables and birth control pills. All the groups did very good to excellent jobs of demonstrating the correct use of these FP methods.

Counselling in family planning- knowledge, skills and attitudes

The following were identified as guides for service providers in discussion FP with clients:

- Service providers must not impose their own values on clients
- Services providers job is to give information
- Refer clients to the nearest health centre for further information and types of contraceptive
- In providing information ensure you know methods, and the possible side effects of contraceptives
- Provide correct information on all methods – use the manual for reference
- Help persons make correct choices
- Clarify all misconceptions and correct myths
- Promote FP counselling to help clients understand and maintain correct use of contraceptives
- Confidentiality must be observed at all times
- Appropriate mode of dress is important for service providers
- Document the visit and client's information
- Refer client to health centre

Effective counsellors were identified as being good listeners, well informed, empathetic, non judgemental, friendly, skilled in questioning and listening skills, and interested in the well being of the client. The use of different questioning techniques to be used in counselling such as open, closed, checking and leading were identified as well as the GATHER counselling process i.e. Greet, Ask, Tell, Help, Evaluate, Record. In conduction counselling sessions it was recommended that the 5As be used- Assess, Assist, Advice, Agree Arrange.

Participant's evaluation of the workshop

An evaluation of the overall workshop programme by participant indicated that 96% felt that information was presented in a way they understood and their knowledge and understanding of FP was definitely increased. Facilitation was assessed as definitely good by 92% of all participants and 92% also felt that the Guide to Family Planning would be a very useful tool in working with clients, groups and community members. In assessing time allocated for discussion and group work 54% felt there was adequate time, 42% felt there was somewhat enough time and 3% felt that there was not enough time.

What participants found most useful

In assessing what was most useful about the workshop, participants identified being able to have practical demonstrations and pictures to drive home FP messages. Many of the participants found the explanations of different contraceptive methods, their advantages and disadvantages, availability, suitability and guidance on how and when to use them particularly useful. The methodologies used by the facilitators were also praised such as the role plays, interactive discussions and sharing of experiences in an open manner, the use of teaching aids to present information, handouts, display of pills, injectables and models of male and female sexual reproductive organs etc. This integrated approach was found to be very useful and informative. Participants also felt that the workshop was well planned and executed with each facilitator doing an excellent job of presenting topics. Acquiring the knowledge to go out into the community and share factual and correct information on contraceptive methods recognizing that knowledge is power and one is never too old to learn was also highlighted as beneficial. Another useful learning point identified was the integration of cross cutting issues such as STIs, HIV/AIDS and domestic violence in FP discussions stressing that such an this integrated approach provided a lot of useful information. Participants also commented on the need for spacing of pregnancies and the importance of FP to the overall health of the family as important issues.

What participants learnt

Participants said they learnt that only condoms can prevent STIs or HIV/AIDS, that FP was not only about spacing children and pregnancies but is connected to the social, economic and environmental situation in the family, community and society as a whole, that domestic violence, religion and cultural values impact approaches to FP, that the benefits of FP need to be looked at holistically and FP begins before marriage or involvement in intimate relationships. Additionally participants also gained new knowledge such as learning that exclusive breastfeeding can be used as a FP method, anemia can cause death in pregnant women, the availability, purpose and use of the emergency contraceptive pill, how to use the female condom, that sterilization and vasectomy are irreversible and that the effectiveness of any contraceptive is dependent on its proper use. Participants also learnt how to impart FP knowledge effectively using skills such as active listening, how to work in communities with different types of people, how to go about educating persons about the different types of contraceptives understanding that in sharing factual and correct knowledge persons will be able to make more informed and better choices. Some participants learnt for the first time about the length of time that IUDs and injectables can be used for safely and effectively. Role plays were seen as a learning activity as they highlighted myths, misconceptions and traditional ways of approaching contraception.

How participants will use information gained

Participants committed to use the information gained to educate themselves, family members, church members, peers, co-workers, and community members on FP. To use their newly acquired knowledge to help families in the National Investment in Families programs in the community. To use knowledge gained to help persons make the right choices and encourage them to visit their health centres to access suitable contraceptives. Information gained will also be used in facilitating awareness and workshop sessions to teach others so they can become educated about FP.

General comments and recommendations

Participants identified the need for more such workshops especially in rural and depressed areas using a simplified format for those communities where there is a high levels of illiteracy. It was recommended that FP information needs to be featured in the media- TV, newspapers, magazines etc and information on medical eligibility i.e. FP wheel should be incorporated into the manual. Participants also said that the workshop fulfilled its mandate but there was a definite need for follow up. Participants were also full of praise for the facilitators and H&S for a well planned programme. Congratulations were also expressed to USAID & H&S for arranging such a workshop and the hope was expressed that other workshops with similar topics be organized.

4. Follow-up sessions

No follow up sessions were envisioned in the original project proposal

5. Qualitative reporting techniques

Qualitative information was gathered through the use of open ended questions on the H&S participant evaluation forms which participants answered giving their opinions and views. Forms were anonymous so opinions expressed could not be traced to any one individual. Qualitative information was also gathered during the course of the workshop from feedback sessions, small group reports, role plays and discussions involving participants.

6. Quantitative reporting techniques/methodologies

Quantitative information was gathered through the use of tools such as:

- ARD required attendance sheets and registration forms.
- Participant evaluation forms developed by Help & Shelter which assessed quantitative information on delivery and grasp of information, increased knowledge and understanding of SOA and assistance to person who are sexually abused, workshop facilitation and adequacy of venue and food.

Participants were given registration forms in their file folders to fill out and return by the end of the workshop. These forms were filled and returned to the M&E Officer. As participants arrived they were directed to fill out required information on the attendance sheet.