

Innovative Training in Family Planning for Health Attendants



The Situation

In the last decade, Tanzania has committed to a national strategy of increasing access to reproductive and child health services by improving the policy environment, strengthening support systems and training service providers. With this background, the overall contraceptive prevalence rate doubled, rising in five years from 6% in 1991/92 to 12% in 1996.

Even with these advances, the unmet need for family planning remains high. To address this need, the 1994-99 national family planning strategy recommended expansion of the pool of family planning service providers by including the cadre of health attendants. These health attendants comprise the lowest eschalon of the government's health-sector employees and represent a considerable percentage of the work force, especially in rural areas.

Unfortunately, little documented information about health attendants and their capabilities was available; little was known beyond the fact that some had one year of formal training. In particular, questions were unanswered concerning their current knowledge levels in family planning and reproductive health, the environments in which they work, and perceptions of their abilities held by their communities and supervisors.

The Assessment

Before undertaking to train health attendants as a new cadre of family planning providers, PRIME designed and conducted a Diagnostic Assessment for Performance Potential (DAPP). This assessment found that the majority of health attendants surveyed had up to seven years of education, were literate in Kiswahili, preferred attending courses close to their work sites, and demonstrated an ability to learn by application. Working

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Key to the successful training of Tanzanian health attendants in family planning, solar-powered cassette players place appropriate technology in the hands of rural, community-based health workers.

from these DAPP findings, PRIME planned a training strategy for effectively adding family planning abilities to the health attendants' repertoire.

The Training

As a result of its assessment and strategic planning, PRIME designed a multimedia, modular training program to meet the specific needs of health attendants throughout Tanzania. The program relied largely on the transfer of skills at the trainee's work location, with the help and participation of other staff members on-site. To enhance this distance learning and training on-site, short and centralized group training sessions were designed using low-technology materials. Training support – a simple handbook and series of audiotapes – was developed in Kiswahili, and a solar-powered cassette player was recommended for the course. Methods were built into the overall strategy for ensuring that the desired learning occurred and that once learned, the skills were used. When the program got underway, cold chain contractors were trained to maintain the solar-powered cassette players.

The Results

The health attendants who participated in PRIME's program clearly increased their family planning knowledge over the course of the training. They gained skills in assessing antenatal clients, conducting growth monitoring, and counseling family planning clients for informed choice. At facilities with trained health attendants, the number of clients served with Depo-Provera® and condoms doubled, while little changed during the same period of time at comparison sites. The stakeholders' consensus was that the training approach and materials were both effective and appropriate for the cadre of Tanzanian health attendants.

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