

A guide for Trainers of VHTs
- a participatory approach to improve child health through
Village Health Clubs



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draft for approval

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Abbreviations

CDO	Community Development Officer
DHE	District Health Educator
DHO	District Health Officer
DHT	District Health Team
HA	Health Assistant
ICCM	Integrated community case management
inSCALE	Innovations at Scale for Community Access and Lasting Effects
LC1	Local Council 1
LHG	Local Health Group
LSHTM	London School of Hygiene and Tropical Medicine
MoH	Ministry of Health
ToT	Training of Trainers
VHT	Village Health Team
UCL	University College London

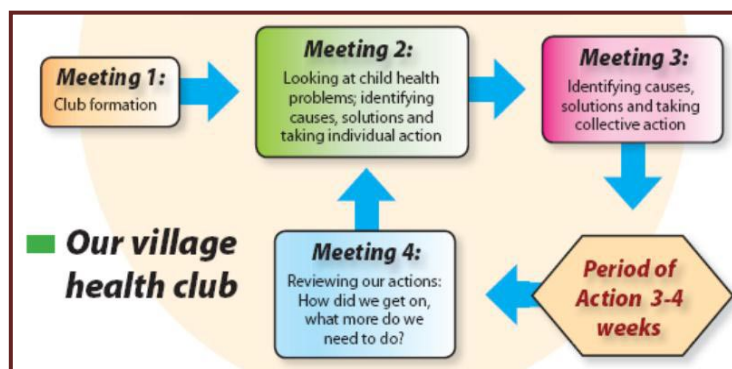
1. Introduction for Trainers

VHTs can play an important role in reducing the number of child deaths in Ugandan communities. In order to achieve this, they need to be properly trained, supported and motivated. VHT performance and motivation is influenced by the community’s appreciation of the VHT’s role and responsibilities. Even though the VHT strategy promotes community ownership, VHTs often feel misunderstood and unappreciated by their community, sometimes causing VHTs to drop out completely. In order to address the challenge of VHT motivation, retention, and performance, inSCALE has designed a community engagement innovation: Village Health Clubs.

The goal of the inSCALE project is to develop new activities based on research which will have a positive impact on VHT motivation, performance and retention in order to increase the quality and coverage of ICCM in Uganda. This will lead to an increase in the number of children receiving the right treatment in their community or being referred to health facilities.

Village Health Clubs aim to improve child health through a community led forum with the VHT as the main focus point. Village Health Club meetings will provide a forum where VHTs and community members who are part of the club can work together to identify child health and VHT problems, using village networks, skills, knowledge, and other assets to find solutions to address these challenges. Through collective problem solving, communities will come to understand the full extent of the VHT’s role and responsibilities, facilitating solutions to VHT problems, enabling the VHT to carry out their work more effectively. This is hoped to positively influence VHT motivation, retention and performance. By strengthening the role of the VHT and with VHTs working as a team alongside their community to address key child health issues the clubs aim to reduce morbidity and mortality.

Village Health Clubs will be implemented through a **4 step** learning, planning and action **cycle facilitated by the VHT**. The time between each step is 1, 2 or 4 weeks depending on the decision taken by the club members.



The **4 step cycle** in more detail:

- **Identifying child health problems and causes:** health club members will rank child health challenges faced by their community using **picture cards**;

- **Finding solutions:** through sharing experiences and guided discussion they will discuss solutions, which include supporting the functioning of VHT services;
- **Taking action:** health club members will come to group decisions and choose appropriate and feasible actions in order to solve problems related to child health and VHT services;
- **Reviewing actions:** Throughout the cycle the health clubs will monitor and report on their progress, and re-engage with steps 2, 3, and 4 to continue actions or choose new child health problems to tackle.

5 guiding principles and empowerment approach:

Village Health Clubs are **open to all members** of the village and designed to be **fun** while focusing on the VHT as the main village health asset. There are 5 key elements will make sure that health clubs are set up and run in a truly participatory way. These are known as the guiding principles of the health club approach:

1. **Open to all.**
2. **Village owned.**
3. **Supports VHT work.**
4. **Strength based.**
5. **Fun and focused.**

In respecting these guiding principles health club members can take the health club in any direction it chooses, while remaining truly participatory, so that:

- Each member feels they are an equal partner in the club;
- Each member has the right to give their opinion and have their opinion listened to and taken seriously;
- Decisions are taken as a group - in agreement with all club members;
- The club is used for the purpose it is intended for – owned by the community, for the community to improve health for our children.

In order to respect local political structures the LC1 is recognised as 'patron' of the health club. The LC1 will work with the VHT to: mobilise community members to attend the first meeting; lend moral support to the VHT; and facilitate problem solving with his / her contacts and networks (see page 76 for more detailed description of LC1 roles).

A **participatory empowerment approach** will be adopted where the VHT (as facilitator) encourages members to take responsibility for health, in planning and carrying out club activities. VHTs will promote **group decision-making** and **ownership** and through this process gain tangible results, as well as keeping members interested and actively involved.

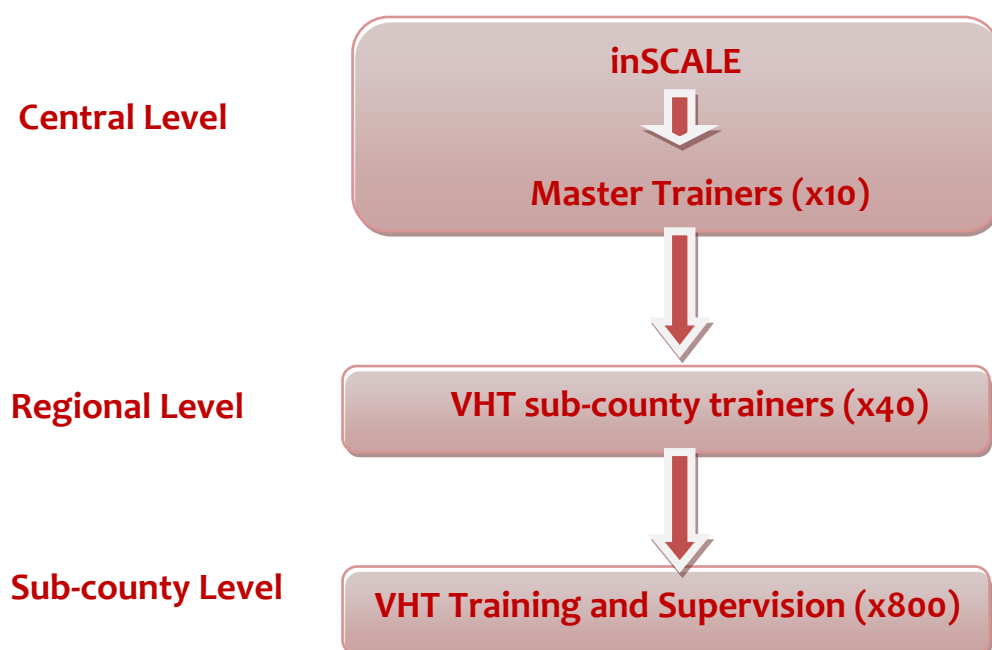
Village Health Club sustainability and scalability:

A key aspect of the Village Health Club approach is that clubs become a valued village forum. **Village ownership** of the club process and meeting content are therefore both important for the sustainability of the approach. Sustainability and the potential for implementation at scale are increased by using established VHTs who, following short purposeful training, act as health club facilitators. The **training of VHTs in participatory facilitation skills** will reinforce the empowerment approach and add to the sustainability and ownership of the club by all members.

2. Training Cascade

The VHT training forms part of the cascade model of training, (see diagram below), whereby InSCALE team will train 10 master trainers who will go onto train selected staff at sub-county level, (including Health Assistants, VHT Supervisors, and CDOs), who will then train VHTs.

Village Health Club Cascade Training:



Master ToT:

A total of 10 Master trainers will participate in a Master training of trainers. Master trainers include: four members of the inSCALE team; a member of MoH central level staff, as well as 5 district health educators (DHEs).

Sub-county ToT:

These 10 master trainers will go on to train 40 sub-county trainers (VHT supervisors, Health assistants, and a Community Development officer (CDO) from each district) in two regional trainings, with 20 participants per training. The sub-county trainers will then go on to train 2 VHT facilitators per village. The sub-county training of trainers is a 3 day ToT where trainers will learn about:

- what is a Village Health Club and why is one needed?
- following the 4 steps and 5 guiding principles;
- Using and demonstrating to the VHTs how to use the **Flipbook of Child Cards** to generate participatory discussion and decision making;
- participatory facilitation skills, such as: how to facilitate a participatory discussion; how to build group consensus and decision making; resolving and managing conflicts; planning group action; and how to review and report on activities using the tools provided.

After the sub-county ToT, each trainer will be responsible for delivering at least one 4-day training to the VHTs selected to participate in the community intervention arm. Each sub-county trainer will be provided with a copy of the Trainer's Guide and flipbook of child cards in order to effectively train around 20 VHTs at a time.

Sensitisation:

Before the VHTs are trained, key stakeholders at district, sub-county and community level will be sensitized to the community health club approach. There is a separate sensitisation brief that has been developed for this purpose (see page 85).

VHT Facilitator Training:

Two ICCM VHTs per village (approximately 800 VHTs in total) will participate in a 4 day training, to be trained as health club facilitators in order to establish health clubs at village level. Sub-county trainers will write a **VHT Training Report** and submit this to their line manager after each VHT training (see report format on page 88.)

Trained VHTs are expected to return to their villages and encourage the other VHT members to get involved in setting up health clubs in their village. Each Village Health Club will receive a 'starter kit' consisting of: Flipbook of child cards with its own carry bag; 100 membership cards; 50 certificates; 2 facilitator t-shirts; and an ink pad to stamp membership cards.

Supportive Supervision:

After the initial 4 day VHT training, sub-county trainers should carry out a follow up visit after 1-2 months to see how VHTs are getting on in setting up their own Village Health Clubs. Further supportive supervision visits should be carried out every 6 months to offer group / individual support on participatory facilitation skills and to help with any problems that have arisen that may threaten the sustainability of the club. The sub-county trainer/supervisor uses a VHT Competency Checklist to conduct supportive supervision (which can be found in the Supervising the Supervisor Guide).

Training Schedule:

Each day of the training (ToT and VHT training) will last approximately 8 hours, with 1 hour for lunch, and a 15 minute tea break in the morning. Daily ending times will be dependent on the time the participants arrive in the morning and back from lunch. In order to ensure the quality of the inSCALE Village Health Club training, it is important that all VHTs participate fully in all the scheduled training activities and learn the required content. Time has been allocated for VHTs to participate in practice sessions, which is essential to build their competencies. Therefore, the ToT and VHT training schedules cannot be amended or shortened to accommodate participants arriving late to training.

3. VHT Facilitator Role

The VHTs you train will need to acquire the knowledge and develop the skills and attitudes in order to make the Village Health Clubs successful and sustainable. VHTs will facilitate and support health club members to follow the 4 steps to:

- learn about the health issues that affect them, their families and community;
- actively engage in identifying child health and VHT successes and challenges;
- plan, organise, and take action to promote a collective responsibility for community health;
- review progress on action taken, report back to village members, and identify further action to be taken.

Knowledge: A VHT Facilitator will need to know about:

- The child health situation in the community – child health successes and challenges;
- A Village Health Club– its purpose / mandate, the 5 guiding principles, and 4 step cycle;
- Benefits for all stakeholders, membership, and rewards;
- VHT role, responsibilities and the extent of their work in child health (ICCM& basic trained – malaria, pneumonia, diarrhoea, malnutrition, danger signs, and newborn care);
- The content of the Flipbook of child cards and the tools to identify, solve problems and plan and review action.

Attitudes: The VHT Facilitator needs to:

- Be committed to community mobilisation and participatory approaches;
- Be flexible and adapt to community / child health priorities;
- Be respectful and value the views of all group members equally;
- Be non-judgemental and accepting;
- Be positive and enthusiastic;
- Take a ‘problem posing’ approach.

Skills: The VHT Facilitator:

- Can motivate people to participate;
- Builds trust and good relationships with club members and the wider community;
- Communicates ideas and information;
- Helps club members find out about and understand child health issues;
- Can use the tools and guide to help club members identify problems, find solutions and plan action;
- Listens to, and learns from health club members;
- Can facilitate group decision-making and build consensus;
- Encourages discussion, uses local words and asks questions in a sensitive way;
- Resolves disagreements and conflict.

4. Training materials and tools

The table below gives details of training materials, evaluation, and supervision tools that exist to train and support VHTs in setting up and running health clubs:

Materials / Tools	Used by who?
Flipbook of child cards and starter kit	Sub-county trainers to train VHTs / for VHTs to run health clubs
Trainer's Guide	Sub-county trainers to train VHTs (this guide)
Peer Observation handout (p.83)	Trainers & VHTs for practice sessions during the training
Sensitisation brief (p.85)	Sub-county trainers, LCs, sub-county administrative staff
VHT Workshop Evaluation form (p.87)	VHTs to evaluate their training
VHT Training Report (p.88)	Sub-county trainers fill this in after each VHT training they deliver

This Trainer's Guide has been developed for sub-county trainers to train and support **VHTs** in successfully setting up and running of Village Health Clubs.

This **Guide for Trainers of VHTs** is to be used in conjunction with the **flipbook of child cards**, with the aim of giving the VHTs step by step guidance on how to form a health club following the 4 steps and guiding principles. VHTs will use the **flipbook of child cards** to engage community members in participatory discussions, (ideally in the form of question and answer sessions) in order to set up and run a village health club.

6. Your role as a VHT Trainer

As VHTs will be returning to their villages to set up health clubs and sensitise community members, it is important that the trainees have maximum opportunity to **practice** their new skills and receive feedback and support, so that they can carry out their job effectively.

Preparation, preparation, preparation!

The VHT training runs over 4 days, meaning that you will need to be a **well-prepared** and **well-organised**, and a **strong facilitator** who is able to guide, motivate, and give clear explanations. This means spending time in the **days before** the training **preparing fully**. It usually takes around 2-hours to prepare for the for each day of training.

- Remind yourself about the **key concepts** of Village Health Clubs (membership, benefits, 5 guiding principles, 4 steps);
- Read the sessions you have been allocated in this Trainer's Guide and gather the materials you will need;
- Find the child cards in the flipbook you will use to facilitate the session;

- Practice using the child cards before you deliver the session to VHTs to ‘test out’ your participatory facilitation skills;

Participatory training methods

As a VHT trainer you will need to have an excellent understanding of **participatory facilitation skills** and have the enthusiasm, drive and passion to coach and encourage VHTs to learn about the steps and the skills in how to facilitate the successful set up and smooth running of Village Health Clubs. You will need to use adult learning methods so that VHTs can feel confident about content, have the skills, and feel enthusiastic about facilitating their own Village Health Club by the end of the 4 day training. This means you will need to:

- **demonstrate** excellent **participatory facilitation skills** using the child cards to engage participants in lively participatory discussion;
- Try to demonstrate how you are using the cards to the VHTs so that they can pick up the different tricks you use (eg: point to the picture, asking questions about what they can see, using the questions in the yellow text box to guide the discussion);
- provide the VHTs with plenty of opportunity to **observe** these skills in action, through clear demonstrations from the trainer;
- provide the VHTs with **plenty of practice** in using the child cards and following the 4 steps;
- support, encourage, and coach VHTs during the practice sessions, providing them with **constructive feedback** in order for them to improve and master their skills.

In ‘learning by doing’ and mastering these participatory facilitation methods, VHTs will feel confident in their role as health club facilitator, and be able to encourage health club members to organise themselves to take responsibility for child health and the health of their families and community. This is essential for the success and sustainability of health clubs.

Use local language and make the materials relevant

The guides, tools and materials are all in English. It is important to note that if facilitators prepare and delivery the activities well, the materials are perfectly usable and effective, even if the participants’ first language is not English. You as a trainer will need to prepare each activity well and may need to translate the key concepts and terms in the local language appropriate for the region where you are training to give maximum support to participants.

Be prepared to support VHTs after the training

You will need to carry out periodic supervision visits to Village Health Clubs using the **supervision checklist** (page **Error! Bookmark not defined.** of this guide) to help the VHT reflect on their abilities to follow the 4 steps, guiding principles, use participatory facilitation skills, and to deal with any internal conflicts that may threaten the sustainability of the club.

Get the most out of the training!

By the end of this course, you should feel fully prepared to carry out a training of VHT health club facilitators and to sensitise others to the health club approach. In order to get the most out your sub-county training of trainers course:

- ✓ **commit your full attention** to the course, and not have any other focus of work going on at the same time;
- ✓ Learn as much as possible about the health club approach: 4 step cycle, thinking behind the approach, and change in mindset.
- ✓ Be aware and take note of *how* the approach is being introduced to the VHTs;
- ✓ Observe your peers, pick up good tips and ‘tricks’ and use them when you facilitate your practice sessions / in the VHT training.
- ✓ **Plan** thoroughly: know the material, practice the exercises for yourself, prepare the materials, including flipcharts so that the session runs as smoothly as possible. The practice sessions and feedback are there for you to help you learn how to be a better participatory trainer and try out your new skills.
- ✓ Finally, **enjoy the training** and spread the word! This is a rare opportunity to be involved in something new, exciting, and a different approach to supporting our communities. If we all have a ‘can do’ attitude, we can really encourage our villages to be excited by the idea and run active and sustainable health clubs.

5. Workshop Overview




Day 1:

- Overview of the Health Club Approach;
- Review of VHT Training Materials, Programme & Ground Rules;
- Introduction to Village Health Clubs and key concepts;
- Overview of VHT Facilitator role and responsibilities;
- Learn how to be a participatory facilitator.

Days 2, 3, and 4:

- Participants prepare to facilitate Village Health Club meeting sessions using the child cards;
- Participants practice facilitation skills during practice sessions;
- Participants are observed by peers and trainers, and are given constructive feedback;
- Next steps in organising the first health club meeting and setting up health clubs;
- Evaluating the learner / evaluating the training.

6. Key to symbols in this Trainer's Guide

 <p>Interactive Presentation</p>	 <p>Pair work</p>	 <p>Group work</p>
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SYMBOLS: In the flipbook of Child Cards



Questions for the VHT Facilitator to ask health club members in leading a participatory discussion



Risks or dangers related to the child health problem



Benefits for health club members of carrying out health action



Benefits for the health club members of using the VHT's services

7. Programme for VHT Training

Training of VHT Facilitators

Day / Time	Duration	Session #	Activity	Facilitator	Materials
Day 1: VHT Programme					
08.40	15-20 mins		Registration of participants		Register / database format
09.00	15-20 mins	Session 1	Official opening of the VHT Training	Main Trainer	Trainer's Guide Facilitator's Note
09.20	15 mins	Session 2	Names of the participants	Main Trainer	Page 17 this guide
09.35	40 mins	Session 3	Expectations of the training	Main Trainer	Page 18 this guide; Flipchart paper
10.15	15 mins	Session 4	Background to Village Health Clubs (game)	Main Trainer	P. 15; Bag of 120 small stones, 40 small sticks
Tea Break 10.30					
10.45	30 mins	Session 4	Objectives, Orientation on VHT Flipbook, Programme, and Ground Rules (continued)	Main Trainer	p. 19-24; Prepared flipchart paper, 25 copies of programme, 25 copies of VHT flipbook
11.15	1 hour 45 mins	Session 5	Introduction of Village Health Clubs	Main Trainer	Flipbook: Health Club cards 1&2; Pages 25-35 this guide.
1.00pm Lunch Break					
2.00	10 minutes		Energising Activity		
2.10	1 hour	Session 5	Introduction of Village Health Clubs (continued)	Main Trainer	Health Club cards 1&2
3.10	50 mins	Session 6	Whole Group Practice Session: Introducing health clubs to our village	Main Trainer	Pages page 36 this guide. Flipbook: Health Club cards 1 & 2
4.00	30 mins	Session 7	Introduction to VHT facilitated sessions	Main Trainer	Pages 38-40; Flipbook of child cards Peer observation form x 20 copies
4.30	15 mins	Evaluation	Recap / Evaluation of the Day – mood chart	Main Trainer	Page 41; Blank chart with ☺ ☹ ☹
4.45 End of Day 1: homework – participants prepare their activity using Flipbook of child cards					

Day 2					
09.00	15 mins		Review of Day 1	Main Trainer	
09.15	1 hour	Session 8	Roles and Responsibilities of the VHT Facilitator	Main Trainer	Flipbook of child cards, Pages 42-49 this guide
Tea break 10.15					
10.30	1 hour	Session 8	Roles and Responsibilities of the VHT Facilitator	Main Trainer	Flipbook of child cards, Pages 42-49 this guide
11.30	1 hour	Session 9	Demonstration 1: Prioritising Child Health Problems & Identifying Causes (Skills: problem ranking)	Main Trainer	Pages 50-53 this guide; 120 small stones.
12.30 – 1.30pm Lunch Break					
1.30			Energising activity		
1.40	1 hour	Session 10	Orientation on using the flipbook of child cards		Pages 54-55 this guide; flipbook of child cards
2.40	1 hour 15 mins	Practice session	Practice Session 1: Group 1 and Group 2 Prioritising child problems and identifying causes	Groups 1 & 2 Main Trainer	Tools listed pages 50-53 this guide; Peer Observation form (page 83)
3.55	1 hour	Session 11	Demonstration 2: Understanding what we can do about the problem (Skills: guiding a discussion)	Main Trainer	Pages 56-58 this guide
4.55	15 mins	Evaluation	Recap / Evaluation of the Day – mood chart	Main Trainer	Blank chart with ☺ ☹ ☹ Throw a ball – what did you learn today?
5.10 End of Day 2 : Participants refine the preparation of their sessions					
Day 3					
09.00	10 minutes		Recap of the day before		
09.10	1 hour 15 mins	Practice Session	Practice Session 2: Groups 3 and 4 Understanding what we can do about the problem	Groups 3& 4	Pages 56-58 this guide Peer Observation form (p. 83)

Tea Break 10.25 – 10.40					
10.40	1 hour 15 mins	Session 12	How to manage and resolve conflicts (Skills: how to manage / resolve conflicts)	Main Trainer	Pages 59-62 this guide
11.55	45 mins	Session 13	Demonstration 3: Identifying Solutions (individual) (Skills: Group decision making)	Main Trainer	Pages 63-66 this guide Peer Observation form (p. 83)
12.40 – 1.40pm Lunch break					
1.40	10 mins		Energising activity		
1.50	1 hour 15 mins	Practice Session	Practice Session 3: Groups 5 and 6: Identifying collective solutions (Skills: Group decision making)	Groups 5 & 6	Pages 63-66 this guide Peer Observation form (p. 83)
3.05	50 mins	Session 14	Demonstration 4: Planning Action	Main Trainer	Pages 67-69 this guide
3.55	1 hour 15 mins	Practice Session	Practice Session 4: Groups 7 and 8 Planning Action (Skills: Group decision making)	Groups 7 & 8	Pages 67-69 this guide Peer Observation form (p. 83)
5.10pm End of Day 3					
Day 4:					
09.00	15 minutes		Recap of the day before		
09.15	1 hour 15 mins	Session 15	Demonstration 5: Reviewing our actions	Main Trainer	Page 70-71 this guide
Tea break: 10.30 – 10.45am					
10.45	1 hour 15 mins	Practice Session	Practice Session 5: Groups 9 and 10: Reviewing our actions (Skills: Group discussion)	Groups 9 & 10	Pages 70-71 this guide Peer Observation form (p. 83)
12.00	1 hour 15 mins	Session 16	Next Steps: Planning to set up health clubs	Main Trainer	Pages 72 – 77; Health Club starter kit
1.15	30 mins	Session 17	Evaluation of the VHT Training & certificates	Main Trainer	VHT Evaluation form (p.87) / certificates
1.45 pm End of VHT Training					

8. List of materials needed for the training

Each participant should have a full set of Village Health Club training materials which they will use as job aids after the training. This set includes:

- **Flipbook of child cards and carry bag**
- **Health Club start up kit (eg: 100 membership cards, 50 certificates, ink pad, T-shirt, stationery kit, ink pad.)**
- **Note pad / Pen / pencil / eraser / clear bag**

Equipment and Supplies

The following is a list of workshop materials. A lot of preparation is needed to ensure that all material is available.

Item	Number	Comments
20-25 copies of VHT Flipbook of child cards	20 - 25	
20-25 copies peer observation forms	20 - 25	
Flipchart stand	1	If available in training space
Flipchart pads	4	
White tape (for posting on wall & names)	3	
Marker pens—various colours	2 boxes	
Clear bags to fit A4 materials	1 / person	For guides and stationery for each person
Pens/pencils	2 / person	PLUS some extra pencils for the group
Notebook	1 / person	
Packets of A4 white paper	1 per/room	
Pencil sharpener, stapler, staples	1 set	
Materials		
Workshop Programme	1 / person	
Certificates	1 / person	For VHTs, signed by district
Membership cards	100 /village	
Health club achievement certificates	50 /village	
Ink pad	1/village	
Carry bag for flipbook & materials	1/village	
T-shirts	1/person	

3. Setting up a participatory learning climate

Before you start your training of VHT Facilitators of Village Health Clubs, you need to ensure that truly participatory approach is taken, which includes the set up of the room and setting of the learning climate.

- Arrive at least 30 minutes before the training begins.
- Check you have all the materials from the checklist (page 14)

i) Check the layout of the room and set up a safe, relaxed meeting space:

- Are the chairs / benches / mats laid out in a circle?
- Is everyone sitting on an equal level (eg: all have chairs, nobody is standing or sitting on the floor)?
- Is the facilitator included in the circle (and not standing at the front, 'like a teacher')
- Has everyone been made to feel comfortable and welcomed?
- Does everyone have a copy of the programme and the training materials they will need (in an A4 clear bag)?

ii) Trainer preparation checklist:

- Are all trainers present and ready to deliver their sessions?
- Have you gathered all the materials for your session?
- Have you pre-prepared all the necessary flip charts, so as not to waste time / lose motivation during training time?
- Do you have enough copies of materials for each participant?
- Is there enough time to deliver all of your session? Will you have to re-calculate the timing due to other trainers over/under-running?
- Do you have the objectives of your session written up on flipchart paper?

Session 1: Opening of the VHT Training

Materials:	None
Duration:	15-20 minutes
Training Method:	Informal presentation by the relevant district health staff member

Steps:



1. A brief introduction by the relevant district health staff member on the importance and efforts put into the training.
2. Brief introduction by the Trainer on the background to health clubs, and role and nature of health clubs in support of VHTs and MoH VHT programme.
 - See below for background to inSCALE.

Session 1: Facilitator's Note: Background to InSCALE:

Recently, Malaria Consortium received a grant from Bill & Melinda Gates Foundation to do some research in order to understand health issues in communities and the difficulties VHTs have in doing their work. From the research, the aim is to find solutions to enable VHTs to continue their work and improve their performance.

The team interviewed many people such as: community members, heads of households, mothers, VHTs, LCs, health staff at health facility, district and sub-county, VHT Supervisors, and Parish Coordinators. The inSCALE team found out that communities are worried about health in their community, and would like to be involved in something to improve community health. Having VHTs in our village is a great resource for health, and very important for the treatment of children under 5 years.

The team from Malaria Consortium designed an innovation that will help to improve community health and help VHTs in their work: Village Health Clubs.

Session 2: Names of Participants

Objectives:	By the end of this session, participants will: <ol style="list-style-type: none"> 1. Be introduced to their facilitators and to each other 2. Know how to do an ice-breaker to set good learning climate
Duration:	15 minutes
Materials:	Flip chart paper, markers
Training Method:	Pair work, presentation of your partner
Prepare in advance:	Questions on flipchart paper

Steps:



- 1. Introduce** yourself (and the other facilitators).
- 2. Tell** participants they will now do an ice-breaker to get to know each other better. You may use the following short exercise or one of your own. If you use your own, make sure by the end of the exercise everyone know each other's name.
- 3. Ask** participants to get into pairs. Explain that each participant will present themselves in their pair with the following information:
 - Their name
 - Where they were born
 - Where they live
 - Something about them that most people do not know (that they are willing to share)
 - Give everyone 2 minutes to interview their partners.
 - Clap your hands after 2 minutes and ask the pairs to stop.
 - Ask each pair to introduce a person they spoke to the rest of the group.
 - Finally, go around the group asking each person to remember everyone's name.

Session 3: Expectations of the VHT Training

Objectives: For participants to set realistic learning expectations

Materials: Flipchart paper, markers

Duration: 40 minutes

Training Method: Discussion in plenary about the different expectations of the group

Steps:



1. Ask VHTs to discuss in pairs what they expect to learn during the training.
2. Encourage VHTs to share their expectations.
 - Ask a volunteer to write them up on the flip chart.
3. Facilitator compares the expectations and clarifies expectations that are not in line with what will be learned.

Session 3: Facilitator's Note:

This 4 day training of VHTs as health club facilitators will prepare 2 VHTs per village in the health club approach in order to establish health clubs at village level to support communities to find solutions to community health challenges and make significant and positive changes to community health. We will learn more about health clubs and the VHT's role over the course of the training.

You may have to manage many VHT expectations related to the ICCM training, eg: need for refresher training, problems related to provision of equipment, drug supplies, distribution of bicycles etc. It is important not to ignore these issues, but manage VHT expectations on the nature of the training, and reassure VHTs that the necessary steps will be taken to follow up their questions on equipment needs.

Session 4: Objectives of the VHT Training, Orientation on Child Cards, Programme & Ground Rules

Objectives:	By the end of this session participants will be able to: <ol style="list-style-type: none"> 1. Explain the purpose of the VHT Training through an interactive game 2. Review training objectives and the programme 3. Agree on a set of ground rules for the training 4. List the key VHT facilitator materials needed to run Village Health Clubs.
Duration:	50 minutes
Materials:	Flipchart paper, markers, materials for the game, flipbook of child cards, facilitator's note page 21.
Prepare in advance:	Flipchart with Workshop Objectives; Copies of Programme (1 per participant), 120 small stones (split into 4 piles – 30 per pile), 40 small sticks (split into 4 piles – 10 per pile).
Training method:	Game & group discussion, mini-presentation, group brainstorm

Steps:



1. **Tell** participants that they are going to play a game.
 - Say that VHTs can play this game with community members in the first meeting.
 - See Facilitator's Note for instructions for game and analysis.
 - You may take a break after the game before carrying on with the rest of the session.
2. **Use** the key messages of the game to introduce the objectives of the workshop:
 - **Ask** participants to look at the **Workshop Objectives** (on pre-prepared flipchart paper). Review these together.
 - Clarify that the workshop will enable VHTs to set up and run Village Health Clubs. Say VHTs will learn important concepts and facilitation skills needed to run health clubs in the village.

- **Answer** any questions they may have.
 - Draw comparison between the expectations of the participants and the objectives – ‘marking off’ the training content participants raised in their expectations.
- 3. Review** the training programme together. Clarify that on Days 2, 3 and VHTs will be facilitating health club practice sessions.
- Assure participants that they will be doing this in a supportive environment.
 - Invite them to look forward to the opportunity to practice their facilitation skills while learning about the Village Health Club approach.
 - Explain that once participants have completed the VHT training they will be able to return to their village and set up health clubs using these objectives.
- 4. Share** with participants the set training materials that will be used during the Workshop. These include:
- **VHT Flipbook of child cards**
 - **Health Club start up kit (100 copies of membership cards, 50 copies of certificate templates)**
 - **Note pad / Pen / pencil / eraser / clear bag**
- 5. Explain** that the workshop is a shared responsibility between trainers and VHTs.
- **Ask** participants to suggest some ‘ground rules’ they would like to guide their workshop. *See Facilitator’s note (page 24) for examples of ground rules that can be used during health club meetings.*
 - **Write** these up on the flip chart. These should remain in view for the duration of the training.
 - **Time keeping** should be included in the rules - the group / facilitator **nominate a time keeper for the day** – in accordance with the programme for the day.
 - Impress the importance of **TIME** – **participants need to arrive on time, so that**

they can leave on time, and the allocated time can be given to each activity.

- Conclude saying that these are our rules which will help us to work together as a team.
- The rules can be added or revised to at any time, if the situation arises.
- The group could introduce fun ‘punishments’ or fines for breaking the norms

⇒ **Thank** participants for their contributions. Tell them: *Now let’s get started!*

Session 4: Facilitator’s Note:

1. Interactive Game:

- **Ask** participants to get into 4 teams (try to make sure that there are the same number of people to each team).
- ⇒ Explain that the group will be constructing pit latrines in their group using the materials to hand. They will be given 30 stones and 10 twigs. The aim is to build **1 pit latrine in 10 minutes**.
- ⇒ Give a demonstration of how to ‘construct’ a pit latrine using the materials you have with you.
- ⇒ Give the groups 3 minutes for planning. Groups should allocate roles for coordination and fitting the construction materials together. **DO NOT LET ANY GROUP CONSTRUCT** during this planning stage!
- ⇒ Stop the planning phase after 3 minutes. Explain that the groups will now have 5 minutes construction time. Start the teams off and time 5 minutes.
- ⇒ Stop the construction phase after 5 minutes, and gain quick feedback on how it’s all going. Facilitate a discussion on how the groups could work better together.
- ⇒ Time 3 minutes for the next planning phase. After 3 minutes, give the teams another period of 5 minutes construction time. This should be enough time to construct their latrine.
- ⇒ Stop the teams after the 5 minutes (or let time run on for another 2-3 minutes to enable the teams to finish all construction.)

- ⇒ Ask each team to feed back on what they achieved, and their experience of working together in their teams and sharing the resources.
- ⇒ Vote for which team worked the best together and the best structure that looks the most durable.

Analysis of the game – how can we work together to make changes to our village?

- **Ask** VHTs to sit down as before. **Ask:** *What did you think of the game?*

These meetings should be seen as a forum for learning, group decision-making, social contact and fun, with a positive attitude towards what we CAN do together!

- *What was easy?*
- *What was difficult?*
- *How did groups work together?*
- *Which group built the best latrine?*
- *What helped them be successful?*
- *What could the groups do better next time?*
- Give 10 or so minutes for the teams to feed back.
- **Explain** to the participants that the game was an example of how our community can work together to improve the situation for child health.
- Use the **key messages** in the box below. These messages can be passed on at the 1st health club meeting to motivate people and give the reason why people have been called:

Key messages:

- With a small amount of organisation we can come together and achieve a lot to improve the health of our children and our families.
- Through good communication and organisation we can pool our resources and achieve much more together, rather than staying quiet and waiting for the

government or other organisations to help us.

- We have everything we need in our community (people with skills, local resources, social contacts) to be able to make big improvements by pulling together and contributing what we can.
- The good will and motivation of people is key to successful and sustainable action.
- Anything and everything is possible, if people are willing to pull together, organise themselves, and take action to improve child health in our village.

2. VHT Training Objectives

The following are the *learning objectives* that describe what participants should be able to know, do, and understand as a result of participating in the workshop activities.

By the end of the Village Health Club Training, VHTs should be able to:

1. Explain the Village Health Club approach, the guiding principles, and the 4 step cycle;
2. Understand and explain the roles and responsibilities of VHTs and other key stakeholders in implementing Village Health Clubs;
3. Use the VHT Flipbook of child cards to plan, set up and run a Village Health Club using participatory facilitation methods;
4. Recap on key health education messages for community members in the treatment, management and prevention of malaria, diarrhoea, pneumonia, malnutrition and what to do when a child or newborn has a danger sign.
5. Carry out the following training tasks:
 - Establish a participatory learning climate;
 - Prepare, plan and facilitate a Village Health Club session;
 - Observe peers and give feedback on facilitation.


5. Examples of health club ground rules:

- Each member has the right to be respected
- No one person's opinion is more important than another person's opinion
- One person speaks at one time;
- Each member feels they are an equal partner in the club;
- We do not support gossip about health club members – we work together to support each other to become a healthier village;
- Decisions are taken as a group - in agreement with all club members;
- If we cannot agree, then we take the decision to a vote, where the majority wins;
- In the actions that we take, we should remember to respect the 'thinking behind health clubs'
- The collective actions that we take should be in the interests of the health of the community and to help our VHTs.

Session 5: Introduction to Village Health Clubs

Objectives:	By the end of this session participants will be able to: <ol style="list-style-type: none"> 1. Understand and explain the Village Health Club approach, the guiding principles, and the 4 step cycle; 2. To demonstrate to the VHTs how to use the health club cards (1&2) in guiding a question and answer session to find out about health clubs.
Duration:	2 hours 45 minutes
Materials:	Flipchart paper, markers, Health Club cards 1&2, Facilitator’s Note below
Prepare in advance:	Read up on key messages – health club cards. Practice demonstrating how to use the cards in a question and answer session with the VHTs.
Training method:	Guided group discussion, and question and answer session.

Steps:

	<ol style="list-style-type: none"> 1. Say to participants: “Imagine you are a member of your village attending the first health club meeting. The LC1 and VHTs have publicised this meeting around the village and you have gone along to see what the meeting is all about.” 2. Introduce the problem: <ul style="list-style-type: none"> • Ask: What kind of child health problems do we face in our village? • Get the whole group to brainstorm on child health problems. • You can use the 6 (moveable) child problem cards to bring out the most common and serious problems, using the questions on the back of the cards. • Spend 5-10 minutes on this brainstorm. 3. Introduce the solution – Village Health Clubs: <ol style="list-style-type: none"> a. Point to the image of the health club on Health Club card 1. Use the questions in the yellow box to guide a participatory discussion on what kind of interventions have
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happened before. Introduce the Health Club approach as something different that can be more sustainable and useful to the community.

b. **The 'what':** Point to the step cycle on Health Club Card 1. Ask VHTs to describe what they see. Use the **blue box** on Health Club card 1 to explain about the **4 steps**.



c. **The 'how':** Explain that this is a club with a difference. Go over the **5 guiding principles** (in the **green box** - Health Club Card 1). *Also see the facilitator's note on pages 29-31 of this guide.*



d. Now ask VHTs to look at **Health Club Card 2**. Explain the difference between a **Committee Approach Vs Health club approach**. *(See facilitator's note, page 28).*

- **Ask the VHTs:** *What is the purpose of a village health club?* Use the **blue box** (Health club card 2) to gently guide their understanding.

e. **The results of the health club:** Point to the pictures around the edge of Health Club Card 2, showing the possible results if members get together to solve child health problems.

⇒ Start with the picture of the mother breastfeeding, and follow the pictures around to speak about how we can prevent our children from being very sick and risking death if we take them quickly to the VHT when we see a problem with the child.



f. **Benefits of a health club:** Point to the **certificate** and the health club **membership card**.

- **Explain** that these are 2 benefits for members to join the health club.
- **Explain** that there are many other benefits of the health club for many stakeholders (check VHTs' understanding of 'stakeholders')
- Ask VHTs to get into small groups of 4-5 and think about what the benefits of the health club is for 1) the VHTs 2) Community members.

4. How could Village Health Clubs work?

- To check VHTs have understood the main concepts of Village Health Clubs ask the following questions:
 - ⇒ **How do you think Village Health Clubs can help with the child problems you thought about at the beginning of the meeting?** Ask VHTs to think of stories from their communities where a health club could have helped a sick child.
 - ⇒ **How could a health club work in your village?**
 - ⇒ **What is the role of club members?**
 - ⇒ **How can community members be motivated to join?** (*See examples of motivating messages in Facilitator's Note below*).
 - ⇒ **Can you think of any barriers that could be a risk to Village Health Clubs running according to the 5 guiding principles?**
 - ⇒ **How can we as VHTs overcome these problems?**

5. Questions: At the end of the discussion, give the VHTs an opportunity to clarify any doubts, answer any questions they may have.

- ⇒ **Now go through the *Key take home messages*.**

Facilitator's Note:

Health Club Card 1: Checklist of key concepts:

- a. Self-help approach – what has worked / not worked in our communities before **(red box)**
- b. 4 steps/Meetings **(blue box)**
- c. 5 guiding principles **(green box)** (more details on guiding principles below)

Health Club Card 2:

d. Committee Approach	Vs	Health Club Approach:
<ul style="list-style-type: none"> • top down; • usually reliant on funding from MoH / outside organisations; • participants selected by most powerful; • committee participants usually act on the agenda dictated by the most powerful / opinion leaders. 		<ul style="list-style-type: none"> • bottom up; • self-sufficient using local networks, contacts, skills, and strengths of the community; • open to all to villagers to participate; • health club participants active in the process of problem solving, based on group decisions.
<p>⇒ Purpose of a Village Health Club <i>(blue box)</i></p>		

e. **Results of the health club** and taking individual and collective action (pictures around the edge of Health club card 2.)

f. **Benefits of a health club** for VHTs and community members *(green box)*.

- **Other benefits: Membership Card:** Point to pictures of certificates and membership card. Pass around the copies of the membership card at this point and give a brief orientation on the concepts for membership (per household). This may generate a lot of discussion on what constitutes a household, how many people etc. Guide the discussion towards the VHT's role as facilitator: the membership card can be used in many ways – the club members decide on what a household is, and who the members of the household are.
- If the issue of age limits comes up, try guide the discussion towards leaving the club open to all, and having children under a suggested decision making age, eg: 15 years to be accompanied by an adult. **See page 32 for more details on benefits.**
- **Certificates:** Point to the picture of the certificates – a certificate can be awarded for good attendance and participation. Ask the VHTs how and when a certificate might

be awarded to a household member. Again, the VHTs may have their own opinions, but the final decision should be made by the members of the health club.

Guiding principles

There are five guiding principles that will help Village Health Club members understand the thinking behind the **participatory empowerment approach** which will enable them to feel inspired to pull together and act.

They are:

1. open to all;
2. village owned;
3. supports VHT work;
4. strength based
5. fun and focused.

These 5 key elements will make sure that health clubs are set up and run in a truly participatory way, so that:

- each member feels they are an equal partner in the club;
- each member has the right to give their opinion and have their opinion listened to and taken seriously;
- decisions are taken as a group - in agreement with all club members;
- the club is used for the purpose it is intended for – owned by the community, for the community to improve health for everyone.

In respecting these guiding principles health club members are able to take the health club in any direction it chooses, while remaining truly participatory.

1: Open to all

- ✓ Everyone in the community can join – it does not depend on: their job, education, social status, how much money they have, religion, tribe, age, if they are male or female, their political beliefs, or if they have a physical or mental disability;

- ✓ Health club members are equal partners - no one is above or below anyone else;
- ✓ Discussions and debates are based on what is best everyone's health, not just for the person speaking;
- ✓ Village Health Clubs can be supported by a committee elected by health club members, if the majority choose this.

2: Village owned

- ✓ It is seen as 'our village health club';
- ✓ Members are inspired and motivated to join together in collective health action to improve their own health and the health of their village;
- ✓ Members have the power to make group decisions to decide on how the club is run and what club activities are;
- ✓ Viewing community health in a positive way where local resources can be mobilised locally for benefit to the village, not looking outside to external organisations to provide the solution;
- ✓ The health club is a safe and creative space that is used for the purpose it was intended, not for gains by other individuals or groups.

3: Supports VHT work

- ✓ Sees VHT as essential to community health and the focal point for village health activities;
- ✓ Sees the VHTs as vital in the assessment and treatment of children under 5 years;
- ✓ Raises awareness about VHTs and their work;
- ✓ Sensitises the community to increase levels of community support for VHTs;
- ✓ Eases VHT workload by conducting sensitisation and mobilization activities;
- ✓ Discusses VHT challenges and find solutions to VHT challenges and advocates for VHT needs.

4: A strength based approach

- ✓ Health club members understand and focus on the community's strengths (local resources, people, skills, and networks) - what is rich and good about the community, rather than looking at what is missing, the needs, and challenges;
- ✓ Where solutions are needed from outside the village, health club members look to use local networks to influence change at higher levels;

5: Fun and focused / productive

- ✓ Providing a safe, fun, supportive place to learn. A place where members can improve their knowledge and skills about health to change negative practices for healthy behaviour, and help their neighbours to do so and inspire them to join;
- ✓ Using many different and interesting ways of delivering health topics and holding discussions and debates;
- ✓ Keeping a positive attitude that will motivate and drive health club members to participate in club activities, **be productive and get quick results.**

Previous success of health clubs and their proven benefits:

The inSCALE team chose the Village Health Club approach, because of extremely successful experiences of community health clubs seen in many African countries, including Namibia, South Africa, Sierra Leone, Guinea Bissau, Rwanda, Zimbabwe, and the north of Uganda. The health clubs in Zimbabwe (set up in 1994), South Africa (set up in 2005), and Rwanda (set up in 2008) have been so successful that they are still active today.

There are many benefits to health clubs, where the health of the whole community can be improved by:

- ✓ Addressing limited:
 - Health information and education;
 - Knowledge about how to make best use of local resources;
 - Organisational capacity.
- ✓ Creating 'common unity' around health;
- ✓ Helping people to apply health knowledge to improve health issues individually and collectively:
 - Private behaviour becomes a public concern;
 - A collective approach with peer support ensures individuals are discouraged from poor health behaviour;
- ✓ Building collective health knowledge and skills gives members the confidence to change behaviour.

Research and pre-testing findings carried out with VHTs, LCs, community members, and sub-county and district health personnel showed that a health club approach holds great and tangible **benefits** for **all stakeholders** involved.

For VHTs health clubs will:

- ✓ Create avenues for discussing health related problems;
- ✓ Reduce VHTs' workload due to shared information during delivery of health education topics;
- ✓ Support VHTs in finding solutions to some of the challenges faced by the VHTs, for example, if health club members help VHTs in collecting drugs from the facility, saving on transport costs.

For community health clubs will:

- ✓ Offer a way of identifying the real issues communities face and getting them involved in tackling their own health issues and finding solutions;
- ✓ Bring unity in the community across different persons since the health club is non-political and it is based on the people's initiative;
- ✓ Help the community become healthier through learning about health issues to improve their individual and collective behaviour;
- ✓ Have health benefits for families and community;
- ✓ Protect the community from disease;
- ✓ Help the community appreciate the importance of sustaining the work of the VHTs, as they find out more about the health education topics, and continue to treat sick children.

For LCs a Village Health Club will:

- ✓ Help to address ignorance and superstitions around health matters to have a healthier community;
- ✓ Support the VHTs in doing their work;
- ✓ Act as entry point for other community development initiatives.

For sub-county and district health personnel health clubs will:

- ✓ Strengthen the link between the health system and community;

- ✓ Offers sustainability to the VHT programme;
- ✓ Help to identify the health needs and service gaps for each village;
- ✓ Builds on already-existing structures and easy to implement at village level;
- ✓ Be useful in health sector planning;
- ✓ Create a great opportunity to bring community members together for development work, which has always been a challenge.

Self-help Approach:

Village Health Clubs present a practical and workable ‘self help’ approach to improve community health using local resources and networks.

For health clubs to be successful and sustainable, we need to make sure that Village Health Club members fully understand that they have the power to work together to make significant changes to their own health and community health in general. And by carefully seeking out the local skills, resources and contacts that exist in the village that can be used for health club activities, the club members can make a real and positive difference to their lives and the lives of their neighbours.

Role of health club members

- **VHTs** could ask new club members to discuss what they see as their role as members of the health club. Some examples include:
 - ⇒ Attend all meetings voluntarily;
 - ⇒ Be active in meetings, participating in discussions and giving my opinion;
 - ⇒ Encourage my family to carry out individual action;
 - ⇒ Help and support my neighbours to carry out their action as well;
 - ⇒ Feed back and support each other on the individual action and see how we can improve for next time;
 - ⇒ Encourage my family to participate in collective action, and contribute what I can (social contacts, skills, ideas, time, effort, drive, enthusiasm).

Motivating messages to encourage members to join:

- **VHTs** could use **motivating messages** to encourage people to join, for example:
 - ⇒ Each one of you is a valued member of the community and your work will add great value to the health club to improve the situation for our children;
 - ⇒ Each health club member is part of a team where all have equal power, and each member has a right to their own opinion, to put forward their ideas and be listened to, and each person's opinion shall be respected;
 - ⇒ A successful and sustainable Village Health Club makes group decisions, puts planning into action and obtains results quickly and efficiently;
 - ⇒ Let's not seek glory for ourselves, but let's think about the real reason we are here – to ensure that the VHTs have a safe and productive working environment, where they can carry out their work to improve our children's health;
 - ⇒ We would like to encourage a culture of kind gestures, respect and recognition at every opportunity for the VHTs' work and also our own actions towards each other in the Village Health Club and to others we work with.

Key take home messages:

1. **Village Health Clubs represent a 'new way of thinking' where everyone's opinion is equal and group decision making governs everything the club does;**
2. **It is essential for those implementing the approach to follow the 4 steps and respect the guiding principles to ensure village ownership and sustainability of health clubs.**
3. **A 'change in mindset' is needed where all involved see health clubs as a valuable opportunity to take responsibility for child health in their village and not rely on outside help to come to solve our own problems.**

Recap: Village Health Clubs

1. What is a village health club? Why are Village Health Clubs needed?
2. What are the 4 steps? How can the VHT Faciliator use the 4 steps to help community members sovlе child health problems?
3. What are the 5 guiding principles of the health club approach, and why are they important?
4. What are some of the benefits of health clubs for VHTs and community members?
5. What is the purpose of a village health club?

Now review the **key take home messages.**

Session 6: Practice Session: introducing health clubs to our village

- Objectives:** By the end of this session participants will be able to:
1. Demonstrate understanding of the key concepts covered in session 5;
 2. Enable VHTs to practice their participatory facilitation skills and use the VHT materials for the first time.
- Duration:** 50 minutes
- Materials:** Flipchart paper, markers, Health Club cards 1&2
- Prepare in advance:** read up on key messages on health club cards and in VHT Guide
- Training method:** role play simulation in small groups

Steps:



1. **Explain** to participants that they are going to put into practice everything they have learnt about health clubs and participatory facilitation methods so far.
 - Divide the group into small groups of 4-6 people in each group. **Ask** half of the small groups to be 'A' and the other half to be 'B'. **Ask A's** to sit together and **B's** to sit together.
 - **Group A:** will guide a question and answer session on the key messages on **Health Club card 1:**
 - 4 Steps
 - Guiding principles
 - How a health club can work (Committee vs Health club)
 - **Group B:** will guide a question and answer session on the key messages on **Health Club Card 2:**
 - Results of health club actions
 - Purpose of the health club
 - Benefits of the health club
 - Membership & certificates

- **Explain:** Each group will have 5 minutes preparation time, and 10-15 minutes facilitation time.
 - Before teams start to facilitate, brainstorm a checklist with the whole group on points to remember. These could include:
 - ⇒ Use the questions in the yellow box on the back of the cards to guide the discussion;
 - ⇒ Let your participants answer the questions freely;
 - ⇒ Use the information in the green, red, and blue boxes to help your participants find out about health clubs;
 - ⇒ Show the images on the card so that all your partner can see.
 - As the teams facilitate their sessions, circulate the room and write down points where individuals facilitated well, and points that people need to improve on.
- 3. Feedback:** After each team has facilitated their session, gain general feedback from the group:
- ⇒ What went well for team A / team B?
 - ⇒ What could they have done better?
 - ⇒ Did the team lecture, or did they use questions?
 - ⇒ How did the participants feel about the session? Was the information clearly explained? Are there any doubts about the purpose of health clubs and how they function?
 - ⇒ Trainer feeds back on the key points (positive points and things to work on)
- 4. Wrap up:** Answer any questions the VHTs may have. Praise the VHTs for their first efforts at facilitation.

Session 7: Introduction to VHT Facilitated Sessions

- Objectives:** By the end of this session participants will be able to:
1. Understand and explain what practice facilitation sessions are and how they are useful in learning to follow the 4 step cycle;
 2. Plan and facilitate a session using the flipbook of child cards;
 3. Gain practice in implementing Village Health Clubs using participatory facilitation skills in a realistic context;
 4. Give and receive constructive and supportive feedback after practice sessions.

Duration: 30 minutes

Materials: Flipchart paper, markers, Flipbook of child cards

Prepare in advance: Schedule on flipchart paper (page 41)

Training method: short presentation & giving instructions

Steps:



1. **Explain** to participants that over the next 2 days they are going to practice planning and facilitating sessions using the flipbook of child cards. VHTs will receive helpful and supportive feedback from their peers and the trainer to help them improve their skills.
 - VHT will facilitate in pairs or 3s, depending on numbers
 - There will be 5 practice sessions, lasting up to 45 minutes, with 15 minutes for feedback.
 - Each VHT will need to facilitate for a minimum time of 15 minutes.
2. **Explain** the procedure for VHT facilitated sessions:
 - Ask the VHTs to get into pairs or 3s
 - Give each pair / 3 a number. Tell VHTs that this will be their group number.
 - Tell VHTs that the groups with an odd number (1, 3, 5, 7, 9) will be team A. The

groups with even numbers (2, 4, 6, 8, 10) will be team B.

- Explain that when it is time for the groups to deliver, 2 groups will facilitate the same session at the same time eg: groups 1 and 2 will facilitate the same session, at the same time, on different sides of the room.
- Explain that this is the fairest system that will enable everyone to facilitate a session over the 3 days.
- Explain that during the session the facilitators will be observed by a trainer and the other VHTs. They will receive supportive feedback after their session has finished.

3. Now they will be given the session they are to facilitate.

⇒ **Go** through the timetable (page 41), allocating each pair with their session.

4. Facilitate a brainstorm on the steps they think are involved in preparing to facilitate a training session. Write these steps on the flipchart.

Review the list ensuring that the following is mentioned (in their own words):

- ⇒ Read the points needed to be covered on the meeting summary card (card 4 in the flipbook of child cards);
- ⇒ Read the questions in the yellow text box, and find the answers in the red, green and blue text boxes;
- ⇒ When facilitating with your co-facilitator decide which steps each person will lead;
- ⇒ Make a note of titles on the cards (eg: Child problem; Treatment and management; Prevention; Solutions we can carry out at home; Solutions we can carry out together; Planning Action) to make sure you cover the main focus of the session.
- ⇒ Each group will facilitate for 45 minutes. Pairs will divide the session, where each person must facilitate for at least 15 minutes.

5. Giving supportive Feedback: Explain that while each group is facilitating their

session, the people watching are going to observe, learn from their peers and give supportive and constructive feedback when the session is over.

- ⇒ You can decide to introduce VHTs to the **Peer Observation form** (on p. 83) if you think VHTs will be able to cope with the level of English on the form.
- ⇒ Explain that one volunteer observes a group while they deliver their session. The observation form is a checklist that the observer quietly reads and ticks according to the skills they see being demonstrated during the session.
- After each group has facilitated their session, gain general feedback from the whole group:
 - ⇒ What went well? What could they have done better?
 - ⇒ Did the facilitator use the child cards well? Did they ask questions about the pictures?
 - ⇒ How did those facilitating feel about their session?
 - ⇒ Gain feedback from the peer observer (positive points & things to work on).
 - ⇒ Finally trainer gives feeds back on the key points
- Answer any questions the VHTs may have about VHT facilitated sessions.

Facilitator's Note: Schedule for VHT facilitated sessions.

- Groups are based on 20 participants. If there is an odd or larger number, ask 3 participants to deliver 15 minutes each (45 mins together), with 15 minute's feedback.
- The observing VHTs will pretend to be Village Health Club members (ie: members of the community).


Group #	Session Allocated from VHT Facilitator's Guide	Day / Time
1 and 2	Meeting 2: Prioritising child problems and identifying causes Materials: 6 loose problem cards, 1 st child problem card for chosen problem.	Day 2: 2.40pm
3 and 4	Meeting 2: Understanding what we can do about the problem Materials: Treatment, management, prevention cards for chosen problem	Day 3: 09.10am

5 and 6	Meeting 3: Identifying collective solutions Materials: Solutions card: What can we do about this problem together?	Day 3: 1.50pm
7 and 8	Meeting 3: Planning Action Materials: How do we solve the problem (card with the bridge)	Day 3: 3.55pm
9 and 10	Meeting 4: Reviewing our Actions Materials: Meeting 4 cards (last 2 cards in the flipbook)	Day 4: 10.45am

Recap / Evaluation of the Day (for all 3 days)

Objective:	At the end of this exercise, participants will be able to: <ol style="list-style-type: none"> 1. Recall content learned 2. Feel confident about building on their existing knowledge and skills. 3. Express their opinion on how the sessions went for each day of training.
Duration:	15 minutes
Materials:	Large sheets of paper, markers;



Steps:

	<ol style="list-style-type: none"> 1. Mood Chart: Ask participants as they leave to room to express how they feel about the training at the end of the day by putting an 'x' next to 😊 😐 😞. The chart will be reviewed the morning of the next day in order to transparently monitor the group's motivational levels as the course goes on. 2. Review and close of each day: Gather the whole group together and throw a ball at random to participants, asking them to say one thing that they have learnt today. Review the objectives for the day. You could make up some questions from the key take home messages to 'test' participants' knowledge.
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Session 8: Roles and Responsibilities of the VHT Facilitator

Objectives:	By the end of this session participants will be able to: <ol style="list-style-type: none"> 1. Understand and explain the roles and responsibilities of VHTs and other key stakeholders in implementing Village Health Clubs; 2. Understand and explain the what participatory facilitation skills are and why they are important when facilitating health clubs.
Duration:	2 hours
Materials:	Flipchart paper, markers, Health Club cards 1&2
Prepare in advance:	read up on key messages – VHT messages, prepare 2 demonstrations: one introducing health clubs in a participatory way using picture cards & problem posing, and one lecture on health clubs.
Training method:	Brainstorming / group discussion, role play simulation, and question and answer session.

Steps:

	<p>1. Explain to participants: VHTs are health club FACILITATORS - not TEACHERS or HEALTH WORKERS. It is very important for the club members to understand the difference between <i>teaching</i> and <i>facilitating</i>.</p> <p>⇒ Ask participants to get into pairs - discuss the difference between a facilitator and a teacher. Gain some feedback from each pair.</p>
	<p>2. Group brainstorm: Now join the pairs into small groups of 4-6 people. Ask groups to discuss: When setting up and running a health club:</p> <ol style="list-style-type: none"> a) What are the roles and responsibilities of the VHT Village Health Club facilitator? b) What makes a good facilitator? c) What skills, attitudes and knowledge does the VHT need to be a good facilitator?

- **Feedback:** Ask groups for feedback after 10-15 minutes.
- **Ask** VHTs to agree on key points. Divide a piece of flipchart paper into 2 sections: on one write up roles and responsibilities, on the other write up qualities of a good facilitator.
- **Ask** a VHT to summarise what they key points they have discussed are. *(See facilitator's note below (p.44) for possible answers. Also refer to pages 5 & 6 on VHT Knowledge, Skills and Attitudes.)*

3. Role Play Demonstration:

- Explain that the VHTs will **observe** 2 different ways of introducing the idea of health clubs to community members: 1 will use participatory methods, the other will use non-participatory methods / lecturing . As the participants observe, they have to say which way is participatory and which is lecturing. Perform the 2 demonstrations, one after the other *(see Facilitator's Note, page 46 for role cards)*.
- **After the demonstrations** use the table in the *Facilitator's Note* below to help you explain the merits of participatory facilitation methods.

Participatory Facilitation skills: Wrap up the session by explaining that:

- ⇒ By using a participatory empowerment approach, using participatory facilitation and group decision making, people will understand the concepts of a health club and experience a **change in mindset** and take on the responsibility for health as a group.
- ⇒ Lecturing is not a method recommended to facilitate health clubs, because it stops people from making their own decisions and owning those decisions. This section is important, as it will help VHTs fully understand how participatory facilitation helps to build a sustainable health club. *(See facilitator's note on these points)*

5. Questions and review:

- ⇒ Give the VHTs an opportunity to have any questions they have answered.

- ⇒ **Review the *Key take home messages*.**
- ⇒ Tell participants that next session they will have the opportunity to practice their participatory facilitation skills.

Facilitator's Note: Feedback on the questions:

1. a) Role and responsibilities of the VHT Facilitator:

VHTs will facilitate and support health club members to follow the 4 steps to:

- learn about the health issues that affect them, their families and community;
- actively engage in identifying child health and VHT successes and challenges;
- plan, organise, and take action to promote a collective responsibility for community health;
- review progress on action taken, report back to village members, and identify further action to be taken.

The VHTs you train will need to acquire the knowledge and develop the skills and attitudes needed in order to make the Village Health Clubs successful and sustainable.

1. b) A good facilitator: VHTs may mention things like: knowledgeable, a good listener, a good example, not proud etc. However, try to get them to think about their role as facilitator of the village health club.

A good Village Health Club facilitator should:

- ⇒ Have a good relationship with all participants
- ⇒ Encourage all members to participate in discussions, do not just let a few people dominate the discussion
- ⇒ Be able to listen and learn from the club members
- ⇒ Use local language and words with which the participants are familiar and understand
- ⇒ Have a good knowledge of local culture
- ⇒ Know how to get the group to agree on a decision and be happy with the decision they have made, for example, by voting.

- ⇒ Know how to manage conflict and resolve difficult situations in a fair and independent way (without judgement or creating gossip).
- ⇒ Follow the guidelines on how to run a health club, and adapt the 4 steps to the local context.
- ⇒ Make sure that the health club is set up and run for the purpose it was intended in the spirit it was intended– to improve child health through a health club that is open to all, that uses the resources available in the community, that is productive and actively engages in problem solving, and that helps the VHTs carry out their work to serve the children in the community.

3. Participatory Facilitation and Active Learning:

In order to effectively set up and run health clubs, we need to participatory in everything that we do. This means we need to facilitate in a participatory way and use activities in the health clubs that encourage participation and active learning, rather than dictating and telling people what to do and think.

Role Play Instructions: The demonstration is probably better done with 2 different co-facilitators demonstrating a good example and a bad example of participatory facilitation techniques.

- Before the session brief the facilitator(s) on their role.
- Volunteers will facilitate the introduction to a session on ‘what health problems do we have in our community?’

Facilitator A:

- You are a dominating facilitator who likes to lecture to get your point across.
- You stand in front of the participants like ‘a teacher’.
- You ask the participants questions, but you tend to answer your own questions and provide the participants with the answers. Part of the reason for this is because you think that if the participants do not answer immediately, they do not know the answer.
- You make many good points, your manner of communication is clear and confident, but you dominate the ‘speaking space’, and treat your participants as ‘ignorant subjects’ who need to be filled with knowledge.

Facilitator B:

- You are a good participatory facilitator.
- You make sure that you sit among the participants as part of the circle.
- You create an atmosphere so that people feel comfortable to participate and speak up.
- You find out what they already know about 'what makes a healthy community' by using group discussions and interactive questions with the participants (you ask a question, and wait for a participant to give the answer).
- You use a 'problem posing' approach (eg: you present an example or image to the group and ask what they think about the example, giving their ideas)
- You do not lecture or tell participants what to think, you build on their ideas and give extra information only if they need it.
- You let participants find out the information for themselves.
- Your speaking is kept to a minimum, and the participants are encouraged to lead the discussion.
- You are confident and do not let participants 'run away' with the direction the session takes, you cleverly direct their discussion so that all the points you want to make are covered by asking questions.
- At the end of the session you ask a volunteer to summarise what they have learned.

Feedback after the role play:

In the table below are some good techniques that promote active learning, and some fun activities that encourage participation. You see these techniques in action during your training, and you will need try very hard to put them into practice, so that when you start facilitating the health club activities, you will do an excellent job in getting everyone to participate.

Good active learning techniques	Activities that encourage participation
Interactive questioning (ask members questions, don't lecture them or tell the answers!)	Group and pair work
Use picture cards with questions (guided discovery) – letting the participants find the answers for themselves, Eg: what can you see? (show child cards, images, or giving 'real life' examples)	Facilitated discussion (using interactive questioning)
	Brainstorming
Have very clear learning outcomes of what you want the learner to know when they walk out of the room. Refer back to the objectives of a session so that learners can see the progress they have made;	Ordering, ranking, prioritising (eg: using stones for voting)
	Role Play: do a demonstration role play, then get participants to repeat the role play for themselves
Create an environment of trust to help people learn in a relaxed way;	Storytelling / giving examples from the participants' own experience
Giving clear instructions and checking that participants have understood (getting a volunteer to repeat your instructions to you)	Case scenarios, real life examples
Be imaginative and provide variety! Make learning fun using different group / pair dynamics, games, quizzes..	Games: eg: Stand in a circle. Spin the bottle / throw the ball for recapping / revising content.
Create sufficient opportunities for learners to practice their new skills;	Practical demonstrations (eg: showing what good / bad facilitation techniques are, how to mix ORS)

4. Change in mindset and communicating about the health club approach

In following the guiding principles and using the participatory empowerment approach (eg: participatory facilitation skills and letting the group decide), health club members should experience a **change in mindset**. This ‘change in mindset’ means looking things in a new light – so that health club members learn to lead the decision making in how the club is formed, how it operates and how members plan, organise, implement, monitor and review their own activities.

Key take home messages:

1. Village Health Clubs represent a ‘new way of thinking’. This means we need to make sure that health clubs are run in a different way to committees, where everyone’s opinion is equal and group decision making governs everything the club does;
2. To help us ‘change our mindset’, we should respect the guiding principles to ensure a participatory empowerment approach is used;
3. In order for health clubs to be successful and sustainable, we need to understand what ‘true’ participation is and make sure we facilitate and act in a participatory way.

Session 9: Demonstration 1: Prioritising Child Health Problems and Identifying Causes

(Skills: Guiding a participatory discussion & Ranking problems)

Objectives: By the end of this session participants will be able to:

1. Recognise and understand the skills involved in facilitating the prioritisation of child health problems and identifying the causes;
2. Understand how to use the picture cards showing child health problems and guide a discussion on how common club members think these problems are in their community, and what they are called locally;
3. Understand the facilitation skills involved in club members identifying the **medical** and **social** causes of the problems.

Duration: 1 hour

Materials: Flipchart paper, markers, Flipbook of child cards

Prepare in advance: Practice demonstrations of skills

Training method: Interactive questioning, problem posing, participatory discussion & Ranking, building on what participants already know.

Steps:



1. **Explain** to participants that they are going to pretend to be health club members during this session.

- Explain they going to experience the first session of the demonstration sessions, led by their trainer. This is where the trainer will demonstrate how to use the Flipbook of child cards and participatory facilitation skills involved in the meetings.
- The session will be facilitated as VHTs should facilitate it, so it is important to observe what the trainer does, and try and learn and use these skills in your own sessions.



2. Facilitate the session as it is described below: Prioritising and choosing our child



health problem.

3. At the end of the session, ask participants work in pairs: discuss which skills you saw the trainer use during the session.
 - **Feedback:** gather feedback from the participants, and answer any questions they have.
 - **Recap** on the objectives of the session, encouraging participants to try to repeat these skills when they facilitate their sessions.

1: Prioritising and choosing our child health problem

- 1.1 Take the 6 loose child problem cards and pass them around the circle so that all club members get a good look at each card. If there are many people, you can divide people into smaller groups.
- 1.2 Then place the cards on the floor, explain that you are going to discuss each of these cards and ask the club members to select the card they would like to discuss first. Use the questions (**yellow box**) on the back of the card to help you .
 - a. Ask members to describe the problem they see in the picture, encourage the group to discuss until they agree what they think the problem is.
 - b. Ask what the problem is called locally.
 - c. Ask the members: Have you ever known about anyone who has experienced this problem / how many children / how long ago / how common / serious is this problem here?
- 1.3 Repeat this process (a-c) for each of the child problem cards
- 1.4 **Ask** the members if there are any other health problems children in their community face other than what is shown in the picture cards. Add the name of any other problem and then discuss as above (2a –c).
- 1.5 **Recap:** Take each child health problem picture card in turn: Ask members to remind the group what the problem is (using their local name for it), then place the card on the ground, picture facing upwards, in the middle of the circle.

1.6 Prioritising problems: Once you have laid all of the child problem cards out – explain that today, as a group, you are going to choose which problems you would like to try to tackle. “You may want to consider a problem that is both common and serious to children’s health”.

1.7 Give each of the participants 6 stones or 6 soda bottle tops.

- Ask the participants to place **3 stones** on the problem card they consider to be the **most important**, **2** on the **next most important**, and **1** on the **third most important** problem.
- Ask members to **think carefully** about their decision - they should put stones on the ones they believe in, and not be guided by others in the group.
- Add up the stones on each card and write down the number on the blackboard next to each problem card. The card with the maximum number of stones is the first priority, and so on.
- Inform the group about the order of the problems they prioritised.

2: identifying the causes of our chosen health problem

i. Now move from using the loose card to using the first (Child Problem) card for the illness voted for by the group. “Now that we have chosen our child health problem we will look at it in more detail”. Use the questions in the **yellow box** and ask VHTs to give **examples** stories / people who have experienced this kind of problem.

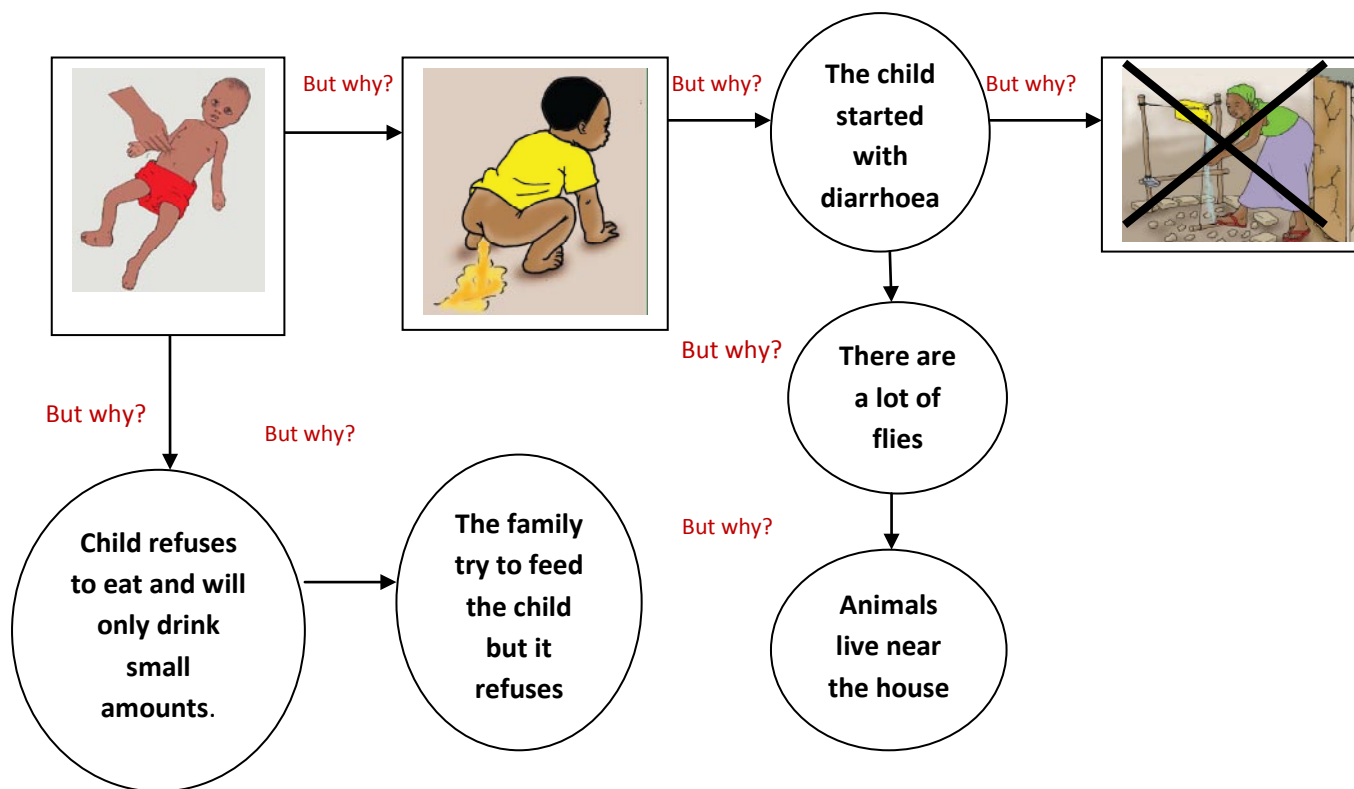
ii. Ask members what they think is the **cause** of the problem – these are the **medical** causes and **social** causes.

- Use the next yellow box to ask about the **causes of the problem**.
- Draw pictures / use local words to mark the causes on flipchart paper. **Use** the back of the problem card to guide you through the examples using the ‘but why’ question. See the picture (next page) as an example.
- For example: sick children suffering from diarrhoea – but why?
 - Children often eat mangoes with dirty hands. **(social cause)**
 - Children do not know when to wash their hands. **(social cause)**
 - People do not wash their hands because they think they look clean. **(social cause)**
 - There is no water outside the latrine to wash our hands. **(social cause)**

- A child who does not wash his/her hands passes the germs from hands to mouth. These germs get inside the stomach and cause diarrhoea. **(medical cause)**

🗣️ Gently correct any incorrect beliefs that come out. You can do this by asking the group if they agree that the belief is true or not, and try to come to a group agreement on what the correct facts about the causes of the health problem.

Example: diarrhoea - Use the 'but why' question to find out about local causes of the problem.



Session 10: Orientation on using the Child Cards

Objectives: By the end of this session participants will be able to:

1. Understand and explain the VHT child cards:
 - each of the 6 illnesses that affect children;
 - the process of identifying causes of the illness (medical / social);
 - finding solutions to carry out at home;
 - finding solutions to carry out as a village health club;
 - and planning action through the process on the cards;
 - the symbols and order the VHT should follow the text boxes;

Duration: 1 hour

Materials: Flipchart paper, markers, Flipbook of child cards

Prepare in advance: full sets of flipbook of child cards for each group.

Training method: Participatory discussion, group information sharing.

Steps:



20 mins

1. **Explain** that participants are going to have an orientation on using the flipbook of child cards.
 - **Go through** the set of cards in this order: Health club cards, 6 loose problem cards, Malaria, Pneumonia, Diarrhoea, Malnutrition, General Danger Signs, Newborn Danger signs.
 - **Give a short demonstration** on the first card of one set (eg: Pneumonia) – using a question and answer approach.
2. **Explain** that participants are going to work in **6 small groups** (eg: Group 1: Malaria, Group 2: Pneumonia, Group 3: Diarrhoea, Group 4: General Danger Signs, Group 5: Newborn Danger Signs, Group 6: Malnutrition) to answer the following questions while looking at the flipbook of cards:
 - **What does each symbol mean?**
 - **How should VHTs use the blue and green boxes?** (encourage them to ask questions about the messages, not just read out the messages)

- **Which of the 4 steps / meetings does each card correspond with?**

- Meeting 1: Health club cards 1 and 2
- Meeting 2: Child problem card, Treatment, Management Prevention
- Meeting 3: Solution cards: What can we do about these problems at home / together? Planning action card (image of the bridge)
- Meeting 4: the last 2 cards

NB: Meetings 2 and 3 may be quite long, so the treatment, management and prevention cards may be used in one or the other of these meetings.

4. Feedback: Gain feedback from each of the groups.

- Get participants to notice how the cards follow the 4 step process in identifying problems, the causes, looking at solutions to carry out at home, solutions to carry out together as a health club, and the card to help plan action.

5. One final practice: Now get participants into pairs. Name one person A, and the other B. Person 'A' will present one card to their partner, using participatory question and answer techniques. Person 'B' will pretend to be the health club member. Give 5 minutes, then ask pairs to change over.

- After both A and B have facilitated using one card, they give feedback on what they did well and what they could do better.

6. Ask participants to summarise how the child cards can be best used, and how we would like VHTs to use the cards. ***What helpful advice can we give the VHTs on how to use the cards?***

- Make sure all participants can see the cards
- Point to specific pictures and ask: 'What can you see in this picture?'
- Advise VHTs to really know the cards well, and read them – translating key words into local language
- Make sure VHTs ask questions from all text boxes (eg: blue and green boxes) and do not just 'read out' the messages.

Session 11: Demonstration 2: Understanding what we can do about the problem (Skills: guiding a discussion)

Objectives: By the end of this session participants will be able to:

1. Recognise and understand the skills involved in facilitating the 'Understanding of what we can do about the problem' (laid out on pages 56-57 below).
2. Understand and explain how to use the picture cards in order to facilitate understanding for club members on the best course of treatment / management / prevention for the child health problem.
3. Recognise and understand the facilitation skills involved in guiding a participatory discussion.

Duration: 1 hour

Materials: Flipchart paper, markers, Flipbook of child cards

Prepare in advance: Practice demonstrations of skills

Training method: Guiding a participatory discussion & building on what participants already know.

Steps:



1. **Explain** to participants that they are going to pretend to be health club members during this session.
 - Explain they going to experience another demonstration session, led by their trainer.
 - The trainer will demonstrate how to use the materials (treatment / management / prevention cards) in guiding a participatory discussion. Explain that guiding discussions is an essential skill used to facilitate health club meetings.
 - Ask the VHTs to observe carefully so that they can learn and use these skills in their own sessions.
2. **Before** you start the session say that you are going to see a quick demonstration of skills the VHT will need using the treatment/management /prevention cards.



- Choose the child health problem that the participants prioritised in the previous session.
 - Indicate the different colour coded messages, and get the VHTs to tell you how you might use the cards to facilitate a discussion to understand what can be done about the problem.
 - Indicate the parts of the card which will:
 - ⇒ guide a discussion using interactive questioning (show the questions in the yellow box)
 - ⇒ Build on the information club members give, and feed in other key messages, by asking questions (from red, green, and blue text boxes)
- 3.** Facilitate the session as it is described below on page 57-58.
- 4.** At the end of the session, ask participants work in pairs: discuss which skills you saw the trainer use during the session.
- **Feedback:** gather feedback from the participants, and answer any questions they have.
 - Recap on the objectives of the session, encouraging participants to try to repeat these skills when they facilitate their sessions.

3: Understanding what we can do about the problem

- i. Ask** if the club members know how to treat / manage / prevent the health problem.
- Use the questions on the back of the card to guide the discussion, for example:
 - **What do people usually do when they have this problem?**
 - **Is this the best treatment for the child?**
 - Allow members to tell their stories of their experiences in healing their child, and say if the type of treatment actually helped to treat / prevent the problem. For example:
 - Does taking the child to the traditional healer work?
 - Does keeping the child at home for a few days work?
 - Does taking the child to the VHT work best?

- ii. Familiarise the club members with the **treatment, management, prevention cards**. Guide club members through the questions on the back of the cards.
- Ask members to **describe** what they see in the **picture**. Use the pictures to give an example of what has worked in ‘other communities’. Help the group come to understand what the pictures show.
 - Ask if there are other methods that members know about which have not been mentioned on the card. See if the members can agree which methods are effective in preventing / treating / or managing the problem.
 - Make sure that you highlight what the **VHT** can do to help.
 - Highlight the key messages on the card *using the pictures* and asking questions in the **yellow box**. Pass from each symbol in this order:



Ask questions to facilitate a participatory discussion



Talk about risks of the health problem / signs and symptoms of the illness



Talk about the benefits of what club member can do to help with the problem



Talk about the benefits of what the VHT can do to help

- ① Remember to ask questions, and try not to lecture.

- iii. Answer any questions the club members may have about treatment, management or prevention of the child health problem.



idea! You could do a quick recap of the messages by playing a game: ask club members to stand in a circle. Spin an empty bottle in the middle of the circle, whoever it lands on must answer a question about the key messages.

Session 12: Skills Development: How to manage & resolve conflicts

Objectives:	By the end of this session participants will be able to:
	<ol style="list-style-type: none"> 1. Recognise and understand the kinds of difficult situations VHT may encounter with club members and the skills they will need to develop in resolving conflicts. 2. Understand and explain the process involved in resolving conflicts and put negotiation and conflict resolution skills into practice.
Duration:	1 hour 15 minutes
Materials:	Flipchart paper, markers, Flipbook of child cards.
Prepare in advance:	conflict resolution steps on flipchart paper; role play instructions
Training method:	Group brainstorm, Interactive questioning, problem posing, & participatory discussion, through a role play

Steps:



1. Explain to participants that their role as VHT Facilitator will not always go smoothly. Sometimes they may be faced with difficulties where people do not always agree with each other. Go over the objectives for the session.



2. Ask the group to brainstorm possible difficulties or conflicts where people may not see eye to eye during a health club meeting. Some examples to help start the brainstorm are:

- ⇒ strong differences in opinion between ‘strong characters’
- ⇒ ethnic / cultural differences in coming up with solutions to problems
- ⇒ existing feuds between neighbours / family

3. Ask participants if they have every been in a situation where two people are having an argument / conflict and you have been ‘caught in the middle’. How does it feel? How was the conflict resolved? Who stepped in? Has anyone ever had to mediate or resolve a conflict? Has anyone seen any good examples where conflicts have been resolved successfully? Gather examples from participants.

4. **Role Play: Explain** to participants that they are going to pretend to be health club members during this session.
 - Ask participants to choose one of the situations of conflict from the list they brainstormed.
 - Ask 2 volunteers to play the role of the conflicting parties.
 - Assess the situation to make sure that this exercise does not cause real conflict!

5. **Before** you start the role play explain that participants are going to learn about the process involved in resolving conflicts, and the different stages that happen when 2 people have a conflict. Highlight these on a piece of flipchart paper (*see Facilitator's Note on process for managing a conflict – p.61*).

6. **Now** begin the role play by starting off a discussion about solutions to the child health problem. Use the process to help you resolve the conflict and bring the 2 parties to agreement and resolution. Let the role play go on for about 10-15 minutes.
 - If the argument is not successfully resolved by the end of 15 minutes, stop the activity and analyse what happened during the activity.
 - It is important for participants to think about the **process** rather than who was right or wrong in the argument!

7. At the end of the role play, ask participants to work in pairs:
 - Discuss which skills you saw the trainer use during the session.
 - Did the trainer use all the steps in the process?
 - Was it necessary to use all the steps in the process?
 - What would have been the quickest and easiest way to resolve that particular conflict?
 - When should the VHT involve the LC1 in resolving conflicts?
 - Feedback: gather feedback from the participants, and answer any questions they have.
 - Ask participants to brainstorm the options they have in helping them to resolve certain types of conflicts. You could go back to your original list and see which kind of other help the VHT could use.



8. Role play practice in small groups:

- **Explain** that participants are now going to practice these skills in groups of 4. Ask the larger group to get into small groups. Ask the group to choose 2 people are going to be in conflict. 1 person will take the VHT role of facilitator and facilitate the 2 people out of the conflict to resolve it. The other person will be the observer, observing whether the VHT followed the steps in the process to resolve the conflict.
- **Ask** the groups to choose the theme of the conflict
- Allow 15 minutes for the role play
- At the end of the role play gain feedback from each observer from each group to see how the VHTs got on. How can we improve our conflict resolution skills? How can we overcome the difficulties we faced during the role play?

Summary and recap:

- Recap on the objectives of the session, encouraging participants to try to repeat these skills when they facilitate their sessions.

Facilitator's Note:

Create a safe space for discussion. Your job is to remain objective and not take any sides!
a. calm the situation so that the difference in opinion does not blow up into aggression or violence.
b. remind participants of the ground rules and suggest the group uses the ground rules in order to resolve the conflict.
c. create a 'safe space' for discussing differences in opinion and set an aim for resolving the conflict peacefully and productively.
d. make a good and rational judgement on how to deal with the conflict, eg: deal with issue here and now with the whole group, or in private with the 2 individuals involved.

Understand the issues
e. use active listening skills in order to understand the issues clearly.
f. allow both parties to express their opinion freely.
g. actively listen to both sides of the argument and summarise what you have heard.

Move towards solutions:

- h.** ask both parties how they would like the conflict to be resolved.
- i.** listen to both parties' suggestions for solutions.
- j.** generate options (brainstorm) solutions.
- k.** make sure both parties understand that 'their solution' may not be possible, and a compromise may be necessary.

Coming to an agreement and resolution:

- l.** build an agreement that works, and clarify feelings of both parties that this is something they can live with and accept.
- m.** summarise what has been agreed upon, and check both parties understand the implications of the solution.

Returning to 'normal life'

- n.** praise both parties for their efforts, and summarise the positive points that have come out of the discussion.

Session 13: Demonstration 3: Identifying Solutions: individual action (Skills Development: group decision making)

Objectives: By the end of this session participants will be able to:

1. Recognise and understand the skills involved in facilitating the identification of solutions to the problem and what individuals can do at home;
2. Understand and explain how to use the picture cards in order to facilitate a participatory discussion and come to common understanding and group decisions.
3. Recognise and understand the facilitation skills involved in guiding a participatory discussion and group decision making.

Duration: 45 mins

Materials: Flipchart paper, markers, Flipbook of child cards, Facilitator's note.

Prepare in advance: Practice demonstrations of skills

Training method: Interactive questioning, participatory discussion & building on what participants already know, building consensus and group decisions.

Steps:



1. **Explain** to participants that they are going to pretend to be health club members during this session.
 - Explain they going to experience another demonstration session, led by their trainer.
 - The trainer will demonstrate how to use the child cards to guide a participatory discussion about solutions to the problem, and seek to encourage members to commit to carrying out individual action to address the problem at home. Explain that group decision making is another essential skill used to facilitate health club meetings.
 - Ask the VHTs to observe carefully so that they can learn and use these skills in their own sessions.
2. **Before** you start the session say that you are going to see a quick demonstration of



the child cards to be used.

- ① **Explain** that there are two types of solutions and actions that can be taken to address the problem: individual actions and collective actions. Explain the differences and the effectiveness of carrying out both types of actions as part of health club activities (*see Facilitator's Note*).

 - Use the child problem from the previous sessions. Use the pictures on the solution card to help guide the discussion.
3. Facilitate the session as it is described on pages 65 & 66.
4. At the end of the session, ask participants work in pairs: discuss which skills you saw the trainer use during the session.
 - Feedback: gather feedback from the participants, and answer any questions they have.
 - Recap on the objectives of the session, encouraging participants to try to repeat these skills when they facilitate their sessions.

Facilitator's Note: Individual and Collective actions:

One of the main aims of health clubs is for health club members to come to understand and appreciate what can be done in the village, and focus on finding solutions to child health with the help of the VHT.

From experience with health clubs run in other countries the two most effective ways of addressing child health problems is:

- 1) **Individual actions:** carry out small actions to change behaviour at home – by individuals and families in the same household
- 2) **Collective action:** carry out bigger actions that will make a real difference in groups – collectively with other members of the health club.

How to decide on collective actions:

When facilitating group decision making, emphasise that decisions the group makes are based on what is best for child health, not just for benefit of the individuals involved.

- a. make sure that all participants understand the issue to be decided upon
- b. identify all the different options available
- c. give their opinion on the different options available
- d. give participants the chance to weigh up each option's advantages and disadvantages
- e. take an objective position and balance the various options against each other
- f. give all participants the opportunity to vote for their desired option
- g. ensure that voting is democratic
- h. listen to participants' answers and explore other possible options

4: identifying solutions to take individual (and collective) action

- i. **Ask** members to think of **general solutions** the problems.
 - You or a volunteer who can write may want to write these on a piece of flipchart paper.
- ii. From these general solutions, ask members to think about what actions (from the solutions) are possible for families to carry out at home (individual) and which actions can be carried out together (collective action).
 - Ask VHT which ones should be individual (I) and which should be collective (C) and mark these on the general list of solutions.
- iii. Ask each club member to choose **1-3 actions** that are doable for them to carry out at home.
 - Before club members choose what to do, get them to think about what they have at home (people, skills, resources, eg: self discipline, family support) that can help them be successful in achieving their action.
 - **Ask** each member to tell the group what they promise to do before the next meeting.
 - Next meeting we will discuss how we got on and review our actions – what went well, and what did not work so well.
 - Ask the group how they would like their VHT to help them achieve their action.

For the trainer's demonstration, your session ends here. However, the VHTs' practice session will cover collective actions. The instructions for this session are detailed below.

4: (This is part of Meeting 3): identifying solutions to take collective action

- i. **Ask** volunteers to remind the group of some of the *general solutions* to the health problem they identified in the last meeting. Use the questions on the solution card to guide the discussion.
- ii. From these general solutions, ask members to think about which solutions are possible for the health club to carry out as a group – **collective action**.
 - **Ask** club members to think about solutions that they are doable, realistic, and can have a BIG impact.
- iii. **Ask** members to choose **1-3 solutions** that they would like to carry out as a group in order to address the child health problem they chose.



Homework! Remind club members that from now until next meeting they should try to carry out their individual actions.

Session 14: Demonstration 4: Planning Action (Skills development: Group decision making)

Objectives:	By the end of this session participants will be able to: <ol style="list-style-type: none"> 1. Recognise and understand the skills involved in facilitating group action planning; 2. Understand and explain how to use the picture cards in order to facilitate a participatory decision making in planning collective actions. 3. Recognise and understand the facilitation skills involved in guiding group decision making and action planning.
Duration:	50 mins
Materials:	Flipchart paper, markers, Flipbook of child cards
Prepare in advance:	Practice demonstrations of skills
Training method:	Interactive questioning, participatory discussion, building consensus and group decisions, group planning.

Steps:



1. **Explain** to participants that they are going to pretend to be health club members during this session.
 - Explain they going to experience another demonstration session, led by their trainer. The trainer will demonstrate how to use the child cards to guide a plan collective action as a health club.
 - **Explain** that group decision making is another essential skill used to facilitate health club meetings.
 - Ask the VHTs to observe carefully so that they can learn and use these skills in their own sessions.



2. **Before** you start the session say that you are going to see a quick demonstration of the child cards to be used.
3. Facilitate the session as it is described on pages 68-69 below.



4. At the end of the session, ask participants work in pairs: discuss which skills you saw the trainer use during the session.
- **Feedback:** gather feedback from the participants, and answer any questions they have.
 - Recap on the objectives of the session, encouraging participants to try to repeat these skills when they facilitate their sessions.

5: Planning collective action (use the Planning Action card)

- i. Now that we have our chosen solutions we are going to play the ‘bridge game’ to help us achieve our goal together.
 - Use the messages in the **blue box** to explain how we can come up with an action plan that will help us solve the problem.
- ii. Before club members make final decisions on what collective actions to take, get them to think about what they have at in their village that could help them to be successful (networks, contacts, people, skills, resources) that can help them be successful in achieving their action.
- iii. Ask the group how they can involve the VHT to help them achieve their action.
- iv. Discuss how the whole group can implement all the different actions in the plan.
 - You could suggest that the large group break into smaller groups with one person as the leader of the small group.
- v. Write up the actions in a table, like the one below, or see if a volunteer who can write can do this for you.

Problem	What needs to be done?	Persons responsible	When?
Children dying of malaria	1. set up an emergency fund for urgent referrals to the health facility	2 members (names xx, xx)	Next 2 weeks

- vi. Involve the LC1 at the end of the meeting to present the action plan.
 - This is important, because the LC1 is a key person who can help club members carry out their collective action and connect them to other key people who can help.
- vii. Discuss how the group are going to keep a record (logbook) of their progress.

- The facilitator should try to let someone else take responsibility for this.
- If no one in the group is literate they could consider having assistance from other members of the community, e.g. school children, or consider other methods of measuring their progress.
- They may wish to complete a table like the one below, or if there are people who are willing to write in the group(s) you may prefer to give them the responsibility to keep this record.

Log book: For recording progress of activities a school exercise book can be used.

List of Actions	Persons responsible	Done ✓ Not done ✗
1. Eg: bring poles, cement, for pit latrines	John & friends	✓
2. Dig pits	Magumba & colleagues	✓
3. Bring water and grass	Miriam & friends	✗

- viii. At the end of the meeting thank club members for their participation.
- Say that the next meeting will be in 4 weeks. During that period, members should do their best to implement the actions they have promised to carry out in that time.
 - Say that the group will feed back on the collective action in the next meeting.
 - Tell them what they will cover next meeting (Reviewing our actions: how did we get on and what more do we need to do?)



Idea! Invite the LC1 to the meeting, go through the plan, and each person responsible for an action stands up, and says what they will do.

Session 15: Demonstration 5: Taking Action / Reviewing our Actions (Skills development: Guiding a participatory review & further planning)

Objectives: By the end of this session participants will be able to:

1. Recognise and understand the skills involved in facilitating a group review on actions carried out.
2. Understand and explain how to use the action plan, log book, and report format in order to facilitate a participatory discussion in reviewing actions, and coming to a group consensus on how to communicate progress.
3. Recognise and understand the facilitation skills involved in guiding a group discussion / review.

Duration: 1 hour 15 minutes

Materials: Flipchart paper, markers, Flipbook of child cards

Prepare in advance: Practice demonstrations of skills

Training method: Interactive questioning, participatory discussion, building consensus and group decisions, group planning.

Steps:



1. Explain to participants that they are going to pretend to be health club members during this session.

- Explain they going to experience another demonstration session, led by their trainer.
- Explain that group reviewing is another essential skill used to facilitate health club meetings.
- Ask the VHTs to observe carefully so that they can learn and use these skills in their own sessions.



2. Now facilitate the session as it is described on the last 2 cards of the flipbook of child cards (**Meeting 4: Reviewing our actions**).

- When getting the VHTs to think about the questions: ***What helped us be successful? / What could we do better next time?*** Use the example of the



interactive game that was played on day 1, in building pit latrines with sticks and stones. Ask VHTs to remember what worked well, and what caused barriers / problems, and how these can be overcome.

- Concentrate on developing skills in reviewing actions carried out and progress made, then how to transfer this information into some kind of report or poster, which can be communicated to the local community.
- There is an example of the report format on the last child card.

3. At the end of the session, ask participants work in pairs: discuss which skills you saw the trainer use during the session.

- **Feedback:** gather feedback from the participants, and answer any questions they have.
- Recap on the objectives of the session, encouraging participants to try to repeat these skills when they facilitate their sessions.

Facilitator's Note:

- Emphasise that VHTs need to keep a regular record of actions carried out, by who, and progress achieved by health club members.
- Remind VHTs that there is a need to review individual actions and also display this in the report.

Session 16: Next steps and planning to implement health clubs

Objectives: By the end of this session participants will be able to:

1. Understand and explain the steps involved in planning the implementation of health clubs in their village;
2. Come away with a useful and practical checklist that will help them start the process of implementing health clubs in their village;
3. Feel confident and competent in their capabilities to set up and run a successful and sustainable health club in their village;
4. Feel confident, enthusiastic and motivated about embarking on a new innovation that will make positive differences to their role as VHTs and child health.

Duration: 1 hour

Materials: Flipchart paper, markers, Flipbook of child cards, VHT Facilitator Guide

Prepare in advance: example checklist on flipchart paper, a motivational speech to help VHTs feel confident about their new skills and abilities to set up and run successful and sustainable health clubs.

Training method: Participatory discussion, building consensus and group decisions, group Planning, motivational speaking.

Steps:



30 mins

1. **Explain** that in this last session the VHTs will look towards taking their training forward and planning and organising to set up their own village health club.
2. **Ask** VHTs to get in to small groups of 4-5 people to brainstorm on these questions:
 - *What you think the next steps are in setting up your village health club?*
 - *Which people will you need to speak to, which people can help you?*
 - *How will you advertise the Village Health Club to members of the community?*
 - *How can you get as many people as possible to attend the first health club meeting?*
 - *How can you generate excitement and motivation around health clubs a) for community members b) for local authorities?*
 - *What possible barriers might you come across in setting up the health club?*

How could you overcome those barriers?

Feedback: As groups feed back their ideas, write them on flipchart paper in the form of a checklist. **Review** the list together. **Say** that an example list can be found on pages 74-75.



30 mins

3. VHT support and supportive supervision:

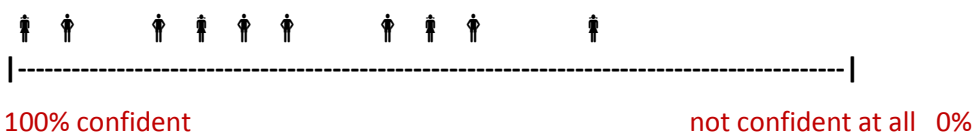
- **Ask** VHTs to get into pairs.
- **Ask:** *Which people do you have to support you as VHT facilitator after this training?*
- **Ask** VHTs to spend 5-10 minutes thinking about the different resource persons they can call on to help them (*see table in facilitator's note, page 75*).
- Feedback from the discussion and ask a volunteer to note key resource persons and the support that they can provide for the VHT.
- Make sure that VHTs understand that the Health Assistant / Community Development Officer / In-Charge is going to support them in the setting up and running of the health clubs, through periodic supportive supervision visits. The suggested period for supervision visits is 1) 1-2 months after VHT training, 2) then every 6 months after training.



15 mins

4. Summary and motivational speech:

- **Ask** VHTs to stand up in the middle of the training space.
- **Ask** the VHTs to think about the last 3 days of the training, the content they have covered and the skills they have practiced during the practice sessions. **Ask:** How confident do you feel about your role as health club facilitator in your village?
- Point to the opposite sides of the training space – one side is very confident (100%) and the other side is not confident at all (0%). Invite the VHTs to stand where they feel they are at the moment in terms of confidence. For example:



- **Ask** individual VHTs why they are standing where they are.
- It is important to give praise to all the VHTs for being honest about their level of



15 mins

confidence in this new and exciting role.

- Ask VHTs how we can help people who feel less confident about their role, to feel more confident (*see Facilitator's Note for ideas on peer support / peer supervising*).

4. Summarise by giving a motivational speech to VHTs on the importance of their work, how their work is appreciated by the community, and how this training and setting up a health club is a real opportunity to work in unity together with villagers to improve the health of children and facilitate the VHTs' work. (*See Facilitator's Note for motivational messages – page 76*).

- **Now** ask VHTs to reposition themselves on the line of confidence if they feel they would like to move position or stay where they are.
- Congratulate the VHTs on their progress during the training and reassure them that they are now ready to set up their own Village Health Clubs!

Facilitator's Note:

You are now at the start of your journey in setting up a health club in your village. This requires the participation and collaboration from a few people at village level, including the LC1, VHT Supervisor, parish coordinator, and community members. We refer to all these people key resource persons.

The following activities will need to be completed before Meeting 1:

- 1. Building a sensitisation plan to publicise the first Health Club meeting.**
- 2. Implementing the plan to publicise the 1st Village Health Club meeting.**

Checklist for setting up health clubs

- 1. A sensitisation plan:** A sensitisation plan is simple list with details of people who need to know about the health club, and *how* you will let them know about it.
 - You will need to have a meeting with key resource persons to come up with the sensitisation plan.

- a) Gather the following people together: **LC1 Chairperson, Parish coordinator, VHT Supervisor, other VHTs.**

- b) Make sure that everyone has received sensitisation training and is fully informed about what Village Health Clubs are. It may be useful to have a recap on the key elements of a health club (you can use the Health Club cards 1 and 2 from the flipbook to help you).

- c) Introduce the idea of a sensitisation plan. You can use the following questions to help you:

Question	Guidelines
1. Who needs to know about the health club?	Everybody
2. We know that there are communities within our community. Which different groups are there? <i>(there may be more examples from your village)</i>	Mothers with young children Male heads of households Elders Opinion leaders Religious groups Other associations and committees
3. What means of communication can we use? <i>(think of more examples from your village)</i>	Whole community meetings Village megaphone Drumming Mobile phones 'Town crier' Announcements in places of worship Schools Health facility Posters / messages in the health facility Posters on the LC1's message board
4. What other resources do we have to help us publicise the 1 st meeting?	VHTs who can announce the meeting when they do house to house visits Volunteers from the community Teachers at school

Sensitisation Plan: You could use the following format to help you plan:

Which group do we need to inform? How do we communicate to them? Who will do this?

Group	Means of Communication	Person responsible	When?
Mothers	VHTs / volunteers carry out a walk about to the borehole	VHTs / volunteers	10am 3 days this week
Male Heads of households	VHTs / volunteers carry out house to house visits	VHTs / volunteers	3-5pm 3 days this week
Elders	Meeting (same meeting as leaders)	LC1	Sunday
Opinion leaders	Meeting (same meeting)	LC1	Sunday
Children	Teacher announcement in school	Parish coordinator to visit school	Monday and Friday morning
Market traders	A 'town crier' announcement on market day	VHT / Volunteer	Market days this week
All	Megaphone	LC1 / secretary	3 days before and on the day

d. **Sensitisation brief:** In order to carry out the sensitisation plan we need to communicate some key messages about what the Village Health Club is and its benefits for community members.

- You can use **the sensitisation brief** (page 85) to help you do this.

2. VHT support and supportive supervision

Remind VHTs that they will have a number of people who can support them in the set up and running of health clubs. Different resource persons and provide different kinds of support depending on what kind of support the VHT Facilitator needs.

Resource Person	Type of support they can offer
Parish Coordinator	<ul style="list-style-type: none"> • Can visit the different health clubs in the village and share lessons learned from other clubs on which approaches work to finding and implementing solutions, and on networks, resources and assets.
Health Assistant / Community Development Officer / Health In-Charge	<ul style="list-style-type: none"> • Liaises with the parish coordinator to be updated on the progress, success, sustainability of the health clubs in the parish. • Carries out periodic supervision visits to Village Health Clubs. Use the checklist (page Error! Bookmark not defined.) to help the VHT reflect on their abilities to follow the 4 steps, guiding principles, and use participatory facilitation skills. • Supervision meetings can be in the form of group support meetings with the VHTs in one parish, and/or one-to-one support, depending on the staff member's time and other work commitments. • Provide the VHT with technical support in the question and answer sessions to cover the health topics. • Carry out 'morale boosting' visits if necessary, giving advice on how to deal with problems or barriers.
LC1	<ul style="list-style-type: none"> • Endorses the action plan (of collective action) and signs off on the report. • Communicates the report and the club's success during the LC's community meetings. • Can also share lessons learned with other villages • Lends moral support to the VHT and facilitates problem solving with his / her contacts and networks.
Other VHTs	<ul style="list-style-type: none"> • Help with sensitisation of the community members to attend meetings. • Help with facilitation of small group work during health club meetings • Helps the VHT facilitator organise the materials and administrative tasks to prepare for health club meetings (until a secretary is chosen by members

to do this).

3. Motivational messages

Use **motivating messages** to encourage VHTs to believe in themselves that they are fit for the role, and with practice can set up and run successful and sustainable health clubs.

<p>Build VHTs' confidence</p>	<ol style="list-style-type: none"> 1. Each one of you is a valued asset for the community and your work add enormous value to the community's assets for child health. 2. Your noble spirit of volunteerism and service are highly recognised and appreciated in serving your community. 3. You have been reliable and committed in the work you are already doing and the community appreciate this, thus the community looks forward to what you will continue to do. 4. You have been helpful and generous towards the health cause in the community and you have the recognised skills, influence, contacts and drive to help identify and address challenges to child health.
<p>Sustaining VHTs' commitment</p>	<ol style="list-style-type: none"> 5. We need to sustain our efforts for the good of the community and respect each other for their responsible and admirable actions. 6. Let's not seek glory for ourselves, but let's think about the real reason we are here – to ensure that you, the VHTs have a safe and productive working environment, where you can carry out your work to improve our children's health.

Session 17: Evaluation of the VHT Training & Close

Objectives: By the end of this session participants will be able to:

1. Have had the opportunity to review content and skills covered on the course.
2. Feel confident and competent in their capabilities to set up and run a successful and sustainable health club in their village.
3. Feel confident, enthusiastic and motivated about embarking on a new innovation that will make positive differences to their role as VHTs and child health.

Duration: 30 minutes

Materials: Flipchart paper, markers, Health Club starter kits for each VHT, certificates, VHT Workshop Evaluation forms.

Training Method: Throw the ball game, filling in evaluation form, 'pat on the back'.

Steps:



1. **Review of Village Health Club Approach:** Ask VHTs to get into pairs. Say that they are going to reflect on what they have learned about participatory facilitation, the 4 Steps, 5 guiding principles, and the key elements of the health club approach.
 - **Ask** VHTs to discuss 3 things they have learned to make sure that the health clubs they facilitate engage the participation of all members in meetings. Give 10 minutes for this discussion.
 - **Feedback:** Ask pairs to stand in a circle. Throw a ball randomly at each participant to gain their feed back, requesting they do not repeat any of the points that other participants have made. Ensure that main points are covered (*see Facilitator's note below for list of main points*).
2. **Explain** to VHTs that they will now work together to evaluate their own understanding and skills covered during the training. Explain that there are **2 types of evaluation** they are going to look at a) **evaluate their progress against the objectives** b) **evaluate the VHT training to improve for next time**.
 - a) **Evaluating our progress on the training objectives:**
 - **Ask** VHTs will go back to the objectives and give a mark between 1-5 as to where they feel they have achieved (1 is not achieved at all / 5 is fully achieved).
 - **Ask** VHT to stand in a circle. Feedback briefly on 1 thing each VHT has achieved

and 1 thing they would like to work on.

- Finally, ask each person to turn to their right side and stand behind their partner in the circle. Tell VHTs to put their right hand on the back of the person in front of them and give their partner a pat on the back. Each person congratulates their peers on completing the course.
- b) Evaluate the 3 day training, and give useful feedback to the trainers and designers, so that it can be improved for next time. For this evaluation the VHT will fill in the **VHT Training Evaluation** form, (page 87).
- Hand out the copies of the training evaluation and ask VHTs to fill in questions in a language they are most comfortable with writing. To help VHTs do this, go through each question by translating it and giving time for the VHTs to write their answers.
- 3. Closing of the training:** Thank everyone for their hard work and participation. Close with some motivating and encouraging words wishing the VHTs every success in setting up and running their village health club. If a member of the local council or health staff member is present, ask them to close the training formally.
- Give out certificates
 - Make sure all VHTs have the following items before they leave: Per village:
 - Flipbook of child cards and carry bags
 - 2 T-shirts
 - 100 copies of membership cards
 - 50 copies of certificates
 - Ink pad
 - Agree on an approximate time when you will meet the VHTs again to see how they are getting on with setting up health clubs.

Facilitator's Note: Tips for smooth running of health clubs:

Go over the main key concepts of the health club approach. You could bring back suggestions from earlier sessions and give key reminders to VHTs on how to run their clubs successfully.

For example:

- ⇒ Members can leave their membership cards for stamping with the LC1 at the beginning of meetings. There could be registration book with names / details of all member households.
- ⇒ VHTs need to be organised and keep good records of health club activities and results / decisions made in health club meetings;
- ⇒ By-laws: try to discourage any punishing or prohibitive by-laws that will restrict membership or discriminate against any minority group.

- 1. Programme for VHTs**
- 2. Peer Observation Handout**
- 3. Sensitisation brief**
- 4. Workshop evaluation form for VHTs**
- 5. VHT Training Report for sub-county trainers**

Village Health Clubs: Programme for Training of VHTs

August – September 2012

Day	Time	Duration	Activity
Day 1	08.40	15-20 mins	Registration of participants
	09.00	15-20 mins	Opening of the ToT
	09.20	15 mins	Names of the participants
	09.35	40 mins	Expectations of the training
	10.15	15 mins	Background to Village Health Clubs (game)
	10.30 Tea break – 15 minutes		
	10.45	30 mins	Objectives, Orientation on VHT Flipbook, Programme, and ground rules
	11.15	1 hour 45 mins	Introduction to Village Health Clubs
	1pm - Lunch break		
	2.00	10 mins	Energising Activity
	2.10	1 hour	Introduction to Village Health Clubs (continued)
	3.10	50 mins	Whole Group Practice Session: Introducing health clubs to our village
	4.00	30 mins	Introduction to VHT facilitated sessions
4.30	15 mins	Evaluation of the Day Supported preparation of trainee sessions in groups.	
Day 2	09.00	15 mins	Review of Day 1
	09.15	1 hour	Roles and responsibilities of the VHT Facilitator
	10.15 Tea break – 15 minutes		
	10.30	1 hour	Roles and responsibilities of the VHT Facilitator
	11.30	1 hour 15 mins	Demonstration 1: Prioritising child health problems and identifying causes
	12.30 – 1.30pm Lunch break		
	1.30	10 mins	Energising activity
	1.40	1 hour	Orientation on using the flipbook of child cards

	2.40	1 hour 15 mins	Practice Session 1: Prioritising child problems and identifying causes
	3.55	1 hour	Demonstration 2: Understanding what we can do about the problem (Skills: Guiding a participatory discussion)
	4.55	15 mins	Recap / Evaluation of the day
Day 3	09.00	10 mins	Recap of Day 2
	09.10	1 hour 15 mins	Practice Session 2: Understanding what we can do about the problem
	Tea break 10.25 – 10.40		
	10.40	1 hour 15 mins	How to manage and resolve conflicts (skills development)
	11.55	45 mins	Demonstration 3: Identifying individual solutions (Skills Development: brainstorming / group decision making)
	12.40 – 1.40pm Lunch break		
	1.40	10 mins	Energising activity
	1.50	1 hour 15 mins	Practice Session 3: Identifying collective solutions (Skills: group decision making)
	3.05	50 mins	Demonstration 4: Planning Action
3.55	1 hour 15 mins	Practice Session 4: Planning Action (Skills Development: group decision making)	
Day 4	09.00	15 mins	Recap of Day 3
	09.15	1 hour 15 mins	Demonstration 5: Taking action and reviewing our actions
	Tea Break: 10.30-10.45am		
	10.45	1 hour 15 mins	Practice Session 5: Group 5: Reviewing our actions (Skills: Group discussion and reflection)
	12.00	1 hour 15 mins	Next Steps: Planning to set up health clubs
	1.15	30 mins	Evaluation of the VHT Training and certificates

HANDOUT

PEER OBSERVATION FORM

Use the following Peer Observation Form with your team members to practice the skills and methods needed to become a participatory and effective facilitator and to provide feedback to each other.

Group Number: _____

Peer Observer's Name: _____

✓ Tick if you observe can say 'YES' to the following as you observe

1. Introduction and Main Learning points:

Yes?

- a. _____ Is the facilitator sitting in the circle with the participants?
- b. _____ Do participants people look relaxed and ready to start?
- c. _____ Do the facilitators introduce themselves?
- d. _____ Does the facilitator present the main learning points for the session?

2. Participatory Facilitation Methods using child cards

Yes? Does the facilitator:

- a. _____ use pictures to guide a participatory discussion
- b. _____ create discussion by asking questions?
- c. _____ build on the information club members give, and feed in other key messages, by asking questions (from red, green, and blue text boxes)?
- d. _____ ask questions in a way that participants understand?
- e. _____ let participants answer freely?
- f. _____ listen to participants' answers?
- g. _____ encourage participation from all of the participants, or only the loud ones?
- h. _____ make sure that all participants contribute, not just the vocal ones?
- i. _____ 'ask' or 'tell' participants?

- j. ____ help participants find out answers for themselves?
- k. ____ do group work / pair work?
- l. ____ get participants to summarise the main points of the discussion?
- m. ____ lecture / talk a lot?
- n. ____ ask volunteers to get involved?

3. Verbal communication skills

Yes? Does the facilitator:

- ____ speak clearly for all to hear?
- ____ use local language, or language easy to understand for everybody?
- ____ raise and encourage participants for their contributions?

4. Non-verbal communication skills

Yes? Does the facilitator

- ____ have good eye contact with participants?
- ____ use other gestures to engage participants (smiles, etc.)
- ____ show interest in participants' answers?
- ____ Is the facilitator enthusiastic and motivated?

5. Close and summary

Yes? Does the facilitator:

- ____ summarise main learning points / or ask a volunteer to summarise?
- ____ Does the facilitator return to the main learning points and check what participants have learned?

Modified from materials developed by Peace Corps (*Promoting Powerful People*), USAID, and the Academy for Educational Development.

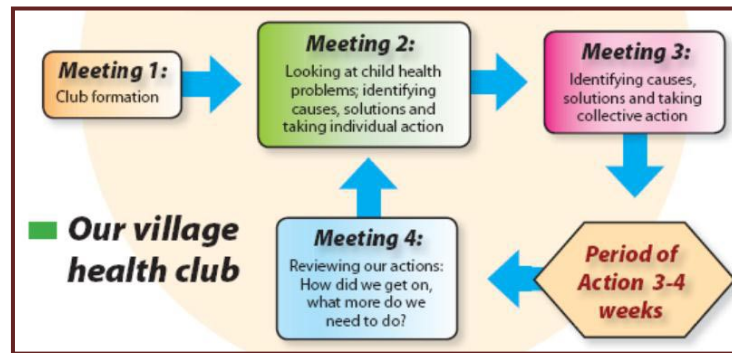
Introducing Village Health Clubs

The challenge: VHTs are playing an important role in reducing the number of children getting sick and dying from treatable and preventable diseases in Ugandan communities. In order to achieve this, they need to be properly trained, supported and motivated. VHT performance and motivation are influenced by appreciation of the VHT role and responsibilities by their communities. Despite the VHT strategy being one of community ownership, VHTs often feel misunderstood and unappreciated by their communities.

inSCALE: The goal of the inSCALE project is to develop new activities/innovations based on research which will have a positive impact on VHT motivation, performance and retention in order to increase the quality and coverage of ICCM in Uganda. This will eventually lead to an increase in the number of children receiving the right treatment in their communities or being referred to health facilities.

inSCALE community engagement innovation: Village Health Clubs: Village Health Clubs aim to improve child health through a community led forum with the VHT as the facilitator (main focus point). Village Health Club meetings will provide a forum where VHTs and community members who are part of the club can work together to identify child health and VHT challenges. They will use village networks, knowledge, creativity and other assets to find solutions to address these challenges.

The 4 Steps: Village Health Clubs will use a four-step learning, planning and action cycle facilitated by the VHT. The time between each meeting is 1, 2 or 4 weeks depending on the decision taken by the club members.



The meetings will focus on identifying child health problems and causes through: ranking child health challenges in their community using picture cards; finding solutions through experience sharing and guided discussions; taking action individually or as a group; and finally reviewing actions through monitoring and reporting.

5 Guiding Principles: Village Health Clubs will be open to all members of the village and designed to be fun and promote group participation, decision-making and ownership while focusing on the VHT as the main village health asset. Members will be encouraged to plan and carry out the club's activities. Village Health Clubs are guided by five principles which will both ensure the clubs are run in the spirit and purpose intended, and inspire club members to pull together and act. These are:

1. Open to all
2. Village owned
3. Support VHT work
4. Strength based
5. Fun and focused

Village Health Clubs as a solution: Village Health Clubs will increase understanding of the VHT role and their potential to improve child health in the village. In doing so Village Health Clubs will improve the status and standing of VHTs as key village health assets and, it is hoped, increase VHT motivation and performance. By strengthening the role of the VHT and having all VHTs working as a team alongside the community to address key child health issues village health clubs aim to reduce morbidity and mortality.

By identifying practical solutions to child health challenges with a focus on what VHTs can and cannot do, club members will understand the challenges that the VHTs face that impact on their work. Increased understanding could lead to increased demand for VHT services and number of children accessing treatment services provided by VHTs. In addition, greater communication about health club successes, communicated by the LC (the Village Health Club Patron), to the rest of the community members through avenues like churches, mosques, schools, market places, could increase health club membership, thus encouraging the whole community's involvement in improving child health. This will help in making the community members value and appreciate VHT work and take an active role in the health of their community.

VHT Facilitator Training: VHTs will receive Village Health Club facilitator training which will reinforce the skills they acquired during ICCM training to improve quality of care and enhance their health education skills that will encourage club members to take greater responsibility for their children's health.

Village Health Club sustainability and scalability: A key aspect of the Village Health Club approach is that clubs become a valued village forum. Village ownership of the club's meeting content and process are very important. Village Health Clubs can also seen as an entry point for other developmental activities for the village such as the groups that benefit from NAADS and NUSAF.

What we have done so far: So far we have conducted a **Master training** in Kampala over 3 days; this included 5 district trainers (Buliisa, Hoima, Kyegegwa, Masindi, Kyryadongo) one Ministry of Health trainer and two Malaria Consortium staff. The 8 master trainers conducted a VHT pilot training in Buhimba sub county, in Hoima district with 17 VHTs. Following this, there were two **Sub county- TOT for over** 3 days in Hoima (15 sub-county trainees) and Masindi (24 sub county trainees). The participants were the CDOs, the Health In-charges and Health Assistants for each of the sub-counties. These trainers will in turn train the 2 ICCM VHTS from each of the villages as the Village Health Club Facilitators. These VHTs will return to their villages to work with the other VHT members to mobilise members to join and set up and run health clubs in their village.

Local leadership: Your support is critical for the success of Village Health Clubs . With your support we will be able to mobilise the communities and empower the VHTs and the Village Health Clubs. Your involvement in the process would be a huge benefit as the community will take charge of their own health challenges and practices.




What next: With your support, the next step will be to train VHTs in their villages to become Village Health Club facilitators. Villages will be from 13 sub-counties and 800 VHTs will be trained in groups of 20 by 2-3 sub-county trainers. Sub-county trainers will roll out the VHT training, with initial practical guidance and support of the master trainers. After the rollout of the VHT trainings, sub-county trainers will carry out follow up and supportive supervision visits to VHTs to ensure the smooth set up and running of the Village Health Clubs.

For more information, please contact inSCALE Project Coordinator Edmund Kertho e.kertho@malariaconsortium.org

Workshop Evaluation Questionnaire for VHTs: VHT Facilitator Training

Date: _____ Facilitator: _____ Location: _____

Tell us what you learnt from the 4 day Village Health Club workshop.

Mark with a ✓	YES 	SOMEWHAT 	NO 
1. I can explain what a Village Health Club is to community members.			
2. I can explain the 4 steps;			
3. I can explain the 5 guiding principles;			
4. I can explain what the benefits and rewards of a health club are for club members;			
5. I can help members decide how we can set up our health club to work well eg: membership.			
6. I can use my new skills to facilitate a health club without needing much help.			
7. I can use the Flipbook of child cards to lead a question and answer session with club members.			
8. The training fully prepares me to carry out my work as Village Health Club facilitator.			
9. The training was at the right level.			
10. I feel motivated by the VHT Facilitator training.			

11. List 3 things you will use in your work from this course:

12. What did you like about this training?

13. What did you not like about this training?

14. What was easy for you to learn?

15. What did you find difficult?

Training Report: Village Health Club Training

The purpose of this form is for sub-county trainers (Health Assistants / In-Charges / CDOs) to give their observations and comments on the quality of delivery of the VHT Facilitator training (Village Health Clubs).

- ⇒ **CDOs:** Please return this form to your Sub-county Chief to eventually reach the Community Services Manager.
- ⇒ **HAs / In-Charges:** Please return this form to your District Health Educator to eventually reach the DHO.

Location of training:		
District / sub-county:	Training venue:	
Dates of training:	From:	To:
Total number sub-county trainers: _____		
# CDOs: _____	# Health Assistants: _____	# In-Charges: _____
Total number of VHT participants:		
	# Males:	# Females:
Copy of attendance register attached? (circle)		YES / NO
Language the training was conducted in:		
Language spoken by participants:		
Community was sensitised before the VHT training: (circle)		YES / NO
Health Facility was sensitised before the VHT training: (circle)		YES / NO

✓ Tick the appropriate box according to your opinion on how the training was delivered:

1. The VHT training objectives were met: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None </div>
2. Sessions were conducted according to the Trainer's Guide: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None </div>
3. There was active participation by the participants: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None </div>
4. There was sufficient time to complete the training activities each day: <div style="display: flex; justify-content: space-around; margin-top: 10px;"> <input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None </div>
5. Summary of participant responses on final evaluation questions: <div style="height: 40px;"></div>

<p>6. List 3 major achievements during the VHT training:</p> <p>1.</p> <p>2.</p> <p>3.</p>
<p>7. Did all participants attend for 100% of the time? If not, why not?</p>
<p>8. Did sessions generally run to time? If not, why not? Which sessions took longer? Why?</p>
<p>9. To what extent do you feel VHTs can competently do the following? ✓ Tick the box according to your opinion:</p> <p>a. VHTs can explain what a Village Health Club is and why one is needed.</p> <p><input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None</p>
<p>b. VHTs can explain the benefits (for all stakeholders), membership, and rewards of health clubs.</p> <p><input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None</p>
<p>c. VHTs can explain the 4 steps and how to follow the steps using the 5 guiding principles.</p> <p><input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None</p>
<p>d. VHTs can use the flipbook of child cards to guide a participatory question & answer session.</p> <p><input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None</p>
<p>e. VHTs are able to set up and run health clubs in their village with minimal support.</p> <p><input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Half <input type="checkbox"/> Few <input type="checkbox"/> None</p>
<p>10. What kind of follow up support will these VHTs need in order to set up successful Village Health Clubs?</p>
<p>11. Challenges encountered during the training: (eg: training materials, finances, transport)</p>
<p>12. Recommendations for future trainings:</p>

Report completed by (list all names): _____

Date of report: _____