



Training Resource Package for Family Planning: Strengthening Family Planning Training in Pre-Service Education for Nurses and Midwives in Tanzania and Uganda



The Evidence to Action Project (E2A)—with a mandate to strengthen family planning and reproductive health service delivery globally—supported adaptation of the Training Resource Package for Family Planning (TRP) to improve the quality of pre-service education in Tanzania and Uganda. By adapting this global tool to the contexts for pre-service education in the two countries, E2A sought to produce competent frontline health workers with the knowledge, attitudes, and skills to strengthen family planning service delivery. E2A worked with several partners on this effort including the East, Central and Southern Africa Health Community (ECSA) and its college of nursing (ECSACON), Pathfinder International, the IBP Initiative, as well professional associations, regulatory councils, and national ministries of health and education, and nursing and midwifery schools in the two countries—influencing policies and decision-making at both regional and country levels.

About E2A

The Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls Project (E2A) is USAID’s global flagship for strengthening family planning and reproductive health service delivery. The project aims to address the reproductive healthcare needs of girls, women, and underserved communities around the world by increasing support, building evidence, and facilitating the scale-up of best practices that improve family planning services.

Awarded in September 2011, this project will continue for eight years until 2019. E2A is led by Pathfinder International, in partnership with ExpandNet, IntraHealth International, Management Sciences for Health, and PATH.

A documentation report with details on the process, outcomes, and lessons learned based on the experiences described in this fact sheet will available on the E2A website in March.

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Selection of Tanzania & Uganda

E2A and Pathfinder International conducted a half-day pre-conference workshop at ECSA’s 5th Quadrennial general meeting and the 11th Scientific Conference in Harare, Zimbabwe, in 2014. At the workshop, participants were oriented on the organization, content, and uses of the TRP. They learned how to access the TRP modules and examples of how the TRP can be used for in-service training. They then participated in a role-play demonstration of the TRP using the counseling module. Immediately after the workshop, representatives of South Africa, Lesotho, Zimbabwe, Uganda, and Tanzania approached E2A with requests to support in-country application of the TRP to strengthen family planning/reproductive health in both in-service and pre-service education curricula.

Following the pre-conference workshop, E2A adapted WHO’s *Core Competencies in Adolescent Health and Development for Primary Care Providers* to develop a questionnaire for all ECSA countries. The questionnaire was used to gauge the extent to which family planning/reproductive health, including adolescent and youth

Training Resource Package for Family Planning

The Training Resource Package for Family Planning (TRP) is a comprehensive set of materials designed to support up-to-date training on family planning and reproductive health. The TRP was developed by a group of organizations and donors using evidence-based technical information from World Health Organization publications: *Family Planning: A Global Handbook for Providers*; the latest *WHO Medical Eligibility Criteria for Contraceptive Use*; and *Selected Practice Recommendations for Contraceptive Use*. The TRP contains curriculum components and tools needed to design, implement, and evaluate training.

sexual reproductive health and gender, are taught in pre-service education schools in the ECSA region.

Responses showed gaps across countries in topics taught, time allocated for family planning/reproductive health and for each topic, and the extent of practicum training. Based on this information, E2A identified country needs, and with guidance from ECSACON, selected Tanzania and Uganda—the two countries are among the 24 USAID priority countries that cumulatively represent more than 70 percent of maternal and child deaths. Both Tanzania and Uganda face significant human resources shortages that hinder progress toward national and international family planning goals. Also, Uganda had previously been supported by ECSA in collaboration with E2A to build capacity of a limited number of educators and supervisors on health timing and spacing of pregnancy.

Adaptation of the TRP for Pre-Service Education

After selecting the two countries, E2A and ECSA initiated a process to better understand the current situation of family planning/reproductive health training in pre-service education, which included:

- Dialogue with ECSA, the local ECSACON chapter, nursing and midwifery councils, and nursing leadership to better understand the policy environment, challenges the countries needed to address through application of the TRP, and to clarify expectations.
- Review of curricula, training resources, and capacities.
- Facilitation of three-day workshops in each country to better understand how the TRP could be applied to address gaps in training, and to give participants training and curricula resources that could be used with the TRP to improve pre-service education. Participants included national policymakers, representatives of ECSA and ECSACON, regulatory councils, professional associations, and nursing and midwifery educators.

Five-Day Workshops

Based on findings from the three-day workshops, E2A and ECSA designed five-day workshops in each country, which

Findings from three-day workshops in Tanzania and Uganda included:

- Lack of evidence-based and up-to-date family planning content in curricula
- Outdated teaching methodologies, with minimal capacity in use of competency-based teaching methods
- Educators' limited knowledge and skills on family planning/reproductive health
- Little uniformity in terms of content, time allocation, and teaching methods

were attended by participants from the three-day workshops as well as groups of around 30 educators from nursing and midwifery schools in each Tanzania and Uganda. Participants heard background information and the rationale for family planning training. They took pre-post knowledge assessment tests on contraceptive technology. Participants learned about the TRP and how it could be used. They went through a detailed demonstration of the select modules (Counseling module in Tanzania and Emergency Contraceptive Pills and Standard Days Method in Uganda) and WHO's Medical Eligibility Criteria. They then participated in a session on competency-based training methods.

Tanzania had just revised the learning outcomes, and these were updated, and approved by the National Council for Technical Education after the workshop. At the end of the workshop, participants developed plans for how they will use their knowledge from the TRP, indicating intentions to share with fellow educators at their schools.

In Uganda, curricula were long past due for review (the last review was 2003). The TRP workshop was therefore perceived to be a major step toward review of pre-service education curricula.

Following the workshops, the IBP Initiative helped each country to set up a commu-

nity of practice platform on the Knowledge Gateway. The platform includes training materials, the training report, and other resources. Trainers and the trainees can also interact and share knowledge and experiences.

How the TRP Has Been Used in Tanzania and Uganda Since the Workshops

Tanzania

Six months after the workshops, the TRP was being used to develop post-training family planning tasks to be included in curricula for the newly established community health worker cadre. From the schools that participated in the five-day workshop, a number of the educators had started to use the TRP, mostly the session plans and PowerPoint presentations. Educators expressed the common challenge of reducing the content they adapt from the TRP enough to align with the time allotted for family planning in their reproductive health course module. Most of the educators had shared the TRP and what they learned from the workshop with colleagues.

Uganda

In Uganda, six months after the workshops, educators from faith-based schools who had started using the TRP found the session plans and flash drives with the content of the TRP very useful. E2A conducted a two-week follow-up workshop for the same group of educators from the five-day workshop, where the TRP was adapted to develop a *Trainers Reference Guide*. The reference guide includes session plans that reflect the updated and approved family planning objectives and content outline developed at the five-day workshop and is designed to guide educators on how to teach the new content in the time allotted to family planning in the reproductive health course unit.

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