



**Family Health International (FHI) and Ghana
Social Marketing Foundation (GSMF**

International)

in collaboration with

Pfizer, Inc.



Mobilize Against Malaria
Pfizer Investments in Health

**Licensed Chemical Sellers Trainers Manual for
Managing Malaria In The Community**

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Licensed Chemical Sellers Trainers Manual for Managing Malaria In The Community

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Abbreviations and Acronyms

ACT	Artemisinin-based Combination Therapy
AL	Arthemether-Lumefantrine
AQ	Amodiaquine
AS	Artesunate
AS/AQ	Artesunate AND Amodiaquine
CBO	Community-based Organization
CHPS	Community Health Based Planning Services
DP	Dihydroartemisinin-Piperaquine
FHI	Family Health International
GHS	Ghana Health Service
GMAG	Ghana Malaria Advocacy Guide
GSMF	Ghana Social Marketing Foundation
HPG	Health Partners Ghana
IPT	Intermittent Preventive Treatment
ITM	Insecticide Treated Material
ITN	Insecticide Treated Net
LCS	Licensed Chemical Seller
MAM	Mobilize Against Malaria
NGO	Non-governmental Organization
NMCP	National Malaria Control Program
PF	Plasmodium Falciparum
SP	Sulfadoxine Pyrimethamine
W-WHAM	Protocol for Dispensing Medicines
WHO	World Health Organization

Introduction

The key objective of the Mobilize Against Malaria (MAM) Training Program for Licensed Chemical Sellers (LCSs) is to implement a **behaviour change** in LCSs and shop assistants from passive “sellers” of medicine to active “recognition, treatment and referral” of malaria cases leading to an overall reduction of malaria-related morbidity and mortality in Ghana. The key elements in implementing this behaviour change are: (1) Essential skills and knowledge of LCSs for early recognition of malaria symptoms in patients; (2) Promoting Artemisinin based Combination Therapy (ACT) compliance through Licensed Chemical Seller (LCS) shops; and (3) Referral of severe cases and high risk patients, particularly- pregnant women and children under five years of age- to community health centres.

To achieve these objectives, this manual is intended to provide guidance to trainers on how to present the information and getting the message across effectively to LCS and shop assistants. It is important that the trainer is intimately familiar with the content and principles espoused in the LCS Training Modules. This ensures that every presentation in the training course embodies the principles and in itself is a demonstration of the application of these principles: the trainees are not only taught what to know, but to see how the information is to be used and applied in practice.

The development of the LCS Training Program was prefaced by a Training Needs Assessment Survey of LCSs which confirmed the unmet need around the objectives for the training mentioned above. The training will initially target LCS and shop assistants in the Ashanti Region. The training class size will be between 25-30 persons and sessions will be one-and-a-half days in duration. An active teaching training methodology will be adopted based on lectures and discussions, along with role plays to involve learners in the learning as much as possible. The training aids will include a comprehensive slide deck, demonstration materials, evaluation tools and hand-outs.

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Chapter 1

TRAINER INSTRUCTIONS AND TRAINING SESSION

OUTLINE

General Instructions

1. Getting Started:

The first step is to get to know the people you want to train and what they already know about malaria and malaria treatment. The Needs Assessment survey indicated that the LCS and shop assistants comprise a diverse group in terms of age, experience and educational level. You need to consider this in your training plan. Introduce yourself and share with the class something about yourself that will help to build rapport with the class. It is important that learners like and trust the instructor. Make your learners feel comfortable- smile and thank them for attending the training.

Spending a few minutes just “chatting” will let you learn more about how you can approach your learners. Start with asking. When a learner tries to find an answer he usually learns better. Most people are not used to talking in a group, or being asked questions, but usually someone will be ready to give an answer if you ask:

- What are the most common sicknesses for which clients come to your shop to buy medicines?
- How many of you have had malaria in the last year?
- What symptoms did you have when you got malaria?
- What medicines did you take for it?

Try to get different people involved in the discussion and manage the discussions so that one or two persons are not dominating the session. When people are commenting answers may be right or wrong. Avoid rushing to correct but ask others in the class as to whether they agree with the answer. At last you say the answer and then ask one or two persons to repeat the answer. If you want to explain something, speak for a very

short time, not more than 3-4 minutes, and get back to asking questions and involving the learners.

2. Effective Communication:

Communication specialists compare the way people communicate to the way a radio communication takes place. That is to say: Transmitter (Speaker/writer) → Message → Receiver (Listener/reader). Successful communication depends on the message being received by the receiver intact and interpreted by the receiver to have the same meaning as when transmitted. At least 40% of the full meaning of messages transmitted by speech is conveyed by body language (gestures).

Show that you as a trainer is genuinely interested and enthusiastic about the material that you are teaching. Be passionate and emphasize why the material that is being taught is important and how it will help the learner do his/her job better and help others. Show energy, speak clearly and audibly. Do not stand in one place and speak in a monotone. Use audiovisual aids as appropriate to demonstrate or illustrate a point. Sum up the main points after the presentation and what the learners should have learnt in that session/module. Ask the learners if they have any questions before proceeding into the next module.

To be a successful communicator:

- ✓ Use your voice effectively
- ✓ Know your learners
- ✓ Know what you want to say
- ✓ Prepare your message carefully
- ✓ Arrange your points logically
- ✓ Display interest and enthusiasm
- ✓ Sound convincing and sincere

3. Essential Elements of Effective Oral Communication:

As a trainer much of your effectiveness is measured by your ability to speak with clarity and conviction in getting your message across. How you present can make a difference between whether or not anyone listens to you.

State the purpose of and main point of your message to capture your listeners' attention. Use introductory phrases to make your purpose clear at the start, such as:

- It is important that I discuss with you...
- My purpose for speaking to you is...
- As a result of new malaria control policies adopted by the National Malaria Control Program you should know that...

After the main point has been made, highlight the impact with expressions like:

- Now, what this means is...
- Put in another way, this means...
- The point that I wish to emphasize in this module is...

Strengthen your main point with supporting points and real life examples using simple language. Avoid jargons and abbreviations. Check to see whether you got your message across and to help listeners feel involved. The best way of checking is asking questions. For example:

- What actions will you take to comply with the new malaria policies?
- Which of the points I have made do you think is the most important?

Your listeners will probably not be able to remember everything you have said, especially if you have presented several ideas. A short, simple restatement of the essential message(s) helps the listener to remember and respond. Close the loop- start with the message and come back to it in the end.

4. Communication Hazards and Pitfalls:

Familiarize yourself well with the message you are presenting. Let the slide that you are presenting not be a surprise to you. Use notes and rehearse the presentation of

your message. If questioned, stay calm and retain your objectivity. Do not become frazzled or defensive. This signals to your listeners that you are not sure of yourself or your facts, and they will assume that what you are saying is unreliable. This can lead to loss of your credibility.

Handle critical statements or probing questions from the audience with tact and diplomacy using responses such as:

- I am very glad that you brought that up. It is an interesting question.
- Perhaps you can explain a little more before we have a look at it.
- I can appreciate your concern. Let's try to come up with some alternatives.

5. Obtaining and Holding the Learner's Attention:

The good trainer tries to gain and maintain voluntary attention in every session he presents.

- Begin with a good story to which the trainees can relate.
- Connect what you aim to teach to those subjects in which you know the trainees are interested or are concerned about. For example, when you are telling the LCSs about ACT, address difficult questions they may get from clients regarding their use.
- Talk in short segments and supplement the information that you taught with questions, discussions and exercises that engage the learners in the learning process

6. Active Listening:

When your listener is speaking follow the following steps:

- Try looking at him and showing him you are listening
- Reassure him by nodding and using encouraging words, such as, "yes", "very good"
- Do not interrupt unless to ask a clarifying question

- Do not correct or refute

If the question is too long or off-track, then remind the participant that the time is short and request him to shorten the question

7. Teaching through Questioning:

The message that you are delivering and trying to teach will be geared to affecting a change in:

- Knowledge: what the learner knows about malaria and treatment
- Attitude: what the learner feels about malaria
- Behavior: what the learner does about malaria

Based on which category the message falls in, you can use questioning techniques to determine if the message was correctly received and processed by the learner. You should do this often during your presentation.

Ask open-ended questions that require more than a yes/no answer. For example, after talking about malaria transmission, a question such as: "What are the three things we said malaria is carried between people?" will need an explanation so that the learner to express their knowledge.

To assess impact of the information provided on the attitude and behavior of the learner, you may ask questions such as: "What concerns do you have about ACT use?" And, "Based on what we just discussed, what would you do if you see signs of malaria?"

8. Important Points in a Group Discussion:

- The instructor/trainer plays the role of a conductor and lets the participants to come to a correct agreement by commenting on the topic
- Summarize the discussion when needed

- Do not let the discussion be between only two persons; make it inclusive
- Encourage participants who are quiet and shy to give their opinions
- Allow sufficient time for the discussion to evolve

9. Useful Teaching Methods to Change Behavior:

Research shows that most people learn 10% of what they read, 20% of what they hear, 30% of what they say, 50% of what they see and hear, 70% of what they talk over with others, 80% of what they use and do in real life, 95% of what they teach to someone else.

Some of the teaching techniques that have proven to be useful to change behavior are:

- Demonstrations: where the instructor show how to do something by displaying pictures, posters or manipulation; for example; how to split a tablet or grind up a tablet for mixing to dose children
- Role Play: where the learners get an opportunity to practice a new behavior
- Small Group Discussions: where the class is divided into groups of 4 to 6 persons and they are given as assignment to discuss amongst themselves and report back

Some of these techniques are included in the Exercises provided in the LCS Training Manual. The trainer is encouraged to improvise or incorporate supplementary methods based on his experience, judgment and discretion.

10. Planning and Delivering a Presentation:

The most important part of the presentation is preparation. The first step in preparation is a plan.

For each module that you will be presenting during the training, determine what the trainees need to learn. Select the objective to be reached in satisfying the trainees'

needs. Select it on the basis of what you expect the trainees will know or be able to do at the end of the training session. Consider:

- Time available to conduct the module
- Facilities available
- Prior knowledge and abilities of the trainees

Prioritize your presentation based on:

- What the trainees **MUST** know
- What the trainees **SHOULD** know
- What the trainees **COULD** know

Finally, practice the presentation in real time and know the “punch lines” for every slide. Do not just throw up a slide and try to *ad hoc* your way through it. Be keenly aware of the message that you are trying to get across, stay focused and follow a logical flow that builds concepts from known to unknown, simple to complex, and concrete to abstract. Frequently confirm that the message that you delivered was registered and processed in the correct way by the learner/trainee.

LCS Training Session Outline

The trainer will have at his/her disposal the following training resources:

- A **Trainer Manual** which highlights the message that MAM is trying to get across to LCS and shop assistants and guidance on how to get the message across in a manner that will lead to the desired behavior change
- A **LCS Training Manual** that contains the information that comprises and supports the messages; this will be used as a training aid and will be handed out to the Trainees
- A **Power Point LCS Training Slide Deck** that will be used by the Trainer for presentation; copies of the slides will be handed out to Trainees, either as separate modules, or, together in one packet

- **Training Aids**, including posters, information cards, LCS Referral Form booklet, drug samples for demonstration, hand-outs

The LCS Training Manual is divided into seven modules. The Training Manual and the Training Slide Deck are complementary; the slides contain illustrations and pictures that may not be included in the training manual and the training manual contains text that is not reproduced in the slides. The Trainer should use them together in the training session to reinforce the core messages. Each module is prefaced with a set of Learning Objectives and includes one or more interactive Exercises.

A suggested presentation plan for each module is provided in Chapter 2 of the Trainers Manual. Each plan outline is as follows:

- Objective
- Suggested method of instruction
- Training aids
- Time frame
- Content
- Presentation suggestion/Approach
- Exercise
- Learning outcome

The Trainer should pay particular attention to the main points and key messages that need to be gotten across and reinforced to the learners/trainees. The Trainer is encouraged to adapt the presentation to the style that best fits the needs of the particular group of trainees and with which the trainer is most comfortable within the guidelines of the GENERAL INSTRUCTIONS provided above.

Chapter 2

SUGGESTED PRESENTATION PLAN

Module 1: Mobilize Against Malaria	
Objective	To introduce the MAM learning objectives, highlight what is new and different about this training, and reinforce the importance of role of the LCS in the fight against malaria
Method of Instruction	<ul style="list-style-type: none">• Lecture/Discussion• A Group Exercise
Aids	<ul style="list-style-type: none">• Power Point Slide Deck• LCS Training Manual• Hand out
Time Frame	<ul style="list-style-type: none">• One hour lecture/discussion + 30 minutes exercise
Content	<ul style="list-style-type: none">• National Malaria Overview• Mobilize Against Malaria Program Principles• LCS Training Program Learning Objectives
Presentation Suggestions/Approaches	<ul style="list-style-type: none">• Spend the first 15-20 minutes on introductions and discussions based on a series of questions carefully devised to learn more about the learners• Make the fight against malaria personal by drawing out suffering and hardship it has caused to the trainees and their families• Drive home the message that malaria kills and is particularly dangerous to pregnant women and small children

	<ul style="list-style-type: none"> • Emphasize that the MAM program will teach the LCS skills and tools to treat malaria, bring recognition within the health care sector, build trust with the community, and improve service to clients (<i>WHIIFM</i>¹ statement- use as talking points to the picture slide) • Point out what elements of the MAM training are new and different from other malaria training they may have received in the past • Spend sufficient time to describe and clarify the Recognize-Treat-Refer-Inform as the key learning objectives from this training session
Exercise	Hold a Group Discussion where you ask the trainees to list specific things that they would like to do differently as LCS or shop assistants in the fight against malaria; list the ideas on a flip chart. This exercise should help the learner to translate the Recognize-Treat-Refer-Inform learning paradigm to behaviours, attitudes and actions (verified through the exercise)
Learning Outcome(s)	At the end of this module, the trainee should have an exquisitely clear picture in his/her mind as to “Why am I here?”, “What do I need to walk away with from this training?”, and, “What is in it for me?”

¹ Whats In It For Me

Module 2: Malaria Basics

Objective	To provide the trainees with basic knowledge on malaria disease cause, transmission and risk to patients -particularly pregnant women and children under five years of age
Method of Instruction	<ul style="list-style-type: none"> • Lecture/discussion • Group Exercise
Aids	<ul style="list-style-type: none"> • Power Point Slide Deck • LCS Training Manual • Hand-out
Time Frame	<ul style="list-style-type: none"> • One hour
Content	<ul style="list-style-type: none"> • Cause of Malaria and transmission of Malaria • Malaria Interventions • Risk Groups
Presentation Suggestions/Approaches	<ul style="list-style-type: none"> • Stress the point that malaria is a potentially deadly but curable disease • Describe the transmission cycle and clarify the role of the mosquito as a vector • Explain why pregnant women and small children are at high risk
Exercise	Break the class into groups of 5 to 6 persons; give each group a hand-out showing the malaria transmission cycle and give them 15 minutes to think of all the ways (interventions) to break the transmission cycle. Request one person from each group to present their findings to the rest of the group. Recognize any unique ideas that they may have had
Learning Outcome(s)	The LCS or shop owner should be able to explain the basics about malaria and its prevention

Module 3: Skills for Dispensing Medicine to Public	
Objective	To provide the LCS with a simple tool (<i>W-WHAM</i>) that can be used for symptom recognition and to teach them on how to use this tool effectively in real life situations
Method of Instruction	<ul style="list-style-type: none"> ● Lecture/discussion ● Role play ● Group Exercises
Aids	<ul style="list-style-type: none"> ● Power Point Slide Deck ● LCS Training Manual ● Hand-out
Time Frame	<ul style="list-style-type: none"> ● One hour
Content	<ul style="list-style-type: none"> ● The <i>W-WHAM</i> tool for symptom recognition
Presentation Suggestions/Approaches	This module lends itself to a lively and interactive “laboratory exercise” by the trainer. The trainer must be capable of demonstrating personally how to use the <i>W-WHAM</i> tool for symptom recognition and lead exercises where the trainees can practice the tool
Exercise	A series of exercises are included in the training manual and the presentation slides. These exercises may be conducted with the whole class, in small break-out groups, or using role plays. The trainers should use a variety of methods to reinforce the skills and behaviours espoused in the <i>W-WHAM</i> tool and to keep the exercises lively. The techniques are left to the trainer’s discretion based on his/her preference
Learning Outcome(s)	The trainee should be able to use the <i>W-WHAM</i> tool for symptom recognition and to decide on treatment and referral of patients

Module 4: Malaria Symptom Recognition

Objective	To teach the trainees how to recognize malaria symptoms in patients , determine if the case is uncomplicated malaria or complicated (severe) malaria, and be able to decide what the appropriate action to take is: treatment, referral or both
Method of Instruction	<ul style="list-style-type: none"> ● Lecture/discussion ● Group Exercise
Aids	<ul style="list-style-type: none"> ● Power Point Slide Deck ● LCS Training Manual ● Hand-out
Time Frame	<ul style="list-style-type: none"> ● One Hour and 30 Minutes
Content	<ul style="list-style-type: none"> ● Uncomplicated versus Severe Malaria ● Malaria in Small Children ● Malaria in Pregnant Women ● Action Alerts for Severe Malaria
Presentation Suggestions/Approaches	It is a critical objective of the MAM training program to provide the LCS and shop owners the skills and tools to recognize malaria symptoms and to instil in them the behaviour of prompt symptom recognition. It is important for the trainer to relate and reduce to practice the knowledge provided in the lecture to real life application through frequent discussions and questioning based on guidance provided to the trainer in Chapter 1
Exercise	The exercise in the module is designed to apply the <i>W-WHAM</i> tool that the trainees learned in Module 3 to a malaria case study. Part of this exercise will be to challenge the trainees on what questions to ask and how to ask them. A

	test case study information will be provided to the trainer, or, the trainer may decide to design a case study of his own
Learning Outcome(s)	The LCS and shop assistants will demonstrate a behaviour change from passive "sellers" of medicine to active "symptom recognition" using the knowledge, skills and tools provided in this training

Module 5: Malaria Treatment	
Objective	To teach and train LCS and shop assistants on how to treat uncomplicated malaria using ACTs , inform pregnant women to seek IPT , and referral of severe malaria cases
Method of Instruction	<ul style="list-style-type: none"> • Lecture/discussion • Group Exercise • Demonstration
Aids	<ul style="list-style-type: none"> • Power Point Slide Deck • LCS Training Manual • Hand-out • Posters and Cards
Time Frame	<ul style="list-style-type: none"> • Two Hours
Content	<ul style="list-style-type: none"> • The National Malaria Control Program (NMCP) Treatment Recommendation • Artemisinin-based Combination Treatments (ACTs) for Uncomplicated Malaria • Intermittent Preventive Treatment (IPT) of Pregnant Women with Sulphadoxine-Pyrimethamine (SP) • Treatment of Uncomplicated Malaria in Pregnant Women • Treatment of Uncomplicated Malaria in Children Under Five Years of Age • Patient Counselling on Taking Care of Malaria Patients • Pre referral Actions LCS can take for Severe Malaria in Children Under Five Years of Age
Presentation Suggestions/Approaches	This will be the most information heavy module in the training session and will introduce complex subject matter and important policy guidelines. The trainer should spend

	considerable time explaining the material to the trainees with examples and demonstrations, and frequent questioning to confirm that the material has been correctly transmitted and understood by the learners
Exercise	A malaria case study is included at the end of the module that is designed to test whether the trainees have understood the subject matter and is able to integrate all the skills taught during the training up to this point to properly manage the malaria case
Learning Outcome(s)	The LCS and shop assistant will believe in, practice and promote the use of ACT for the treatment of malaria and SP for IPT for pregnant women, and promptly refer severe malaria cases to the nearest health centre for urgent medical attention

Module 6: Referral and Documentation

Objective	To provide the LCS with a tool to refer malaria cases to the health centre, and to teach the LCS on how to use the tool the process to follow, and records that should be kept
Method of Instruction	<ul style="list-style-type: none"> • Lecture/discussion • Group Exercise • Demonstration
Aids	<ul style="list-style-type: none"> • Power Point Slide Deck • LCS Training Manual • Hand-out • Referral Cards • Document Record Book
Time Frame	<ul style="list-style-type: none"> • One hour and Thirty Minutes
Content	<ul style="list-style-type: none"> • Know Why and When to Refer • The LCS Referral Form and Process • Record-Keeping, Documentation and Feedback
Presentation Suggestions/Approaches	The LCS Referral Tool is a new element that is being introduced in the MAM Program. This will be the first time the trainees will be exposed to this tool. The trainer/instructor should carefully explain how this tool works and demonstrate when and how this tool should be used. The trainer should take the time to confirm that the LCS is able to use the tool correctly
Exercise	The exercise presents an opportunity for the LCS to fill out a referral form and walk through the process using the case study presented in Module 5
Learning Outcome(s)	The LCS is able to use the Referral Tool in real life and walks out of the MAM Training with the commitment to use it

Module 7: Client Care and Messaging

Objective	To refresh the LCS and shop assistants on good dispensing and client care best practices that will help to build trust with the community and grow the business
Method of Instruction	<ul style="list-style-type: none"> • Lecture/discussion • Role Play
Aids	<ul style="list-style-type: none"> • Power Point Slide Deck • LCS Training Manual • Role Play Card
Time Frame	<ul style="list-style-type: none"> • One Hour
Content	<ul style="list-style-type: none"> • Dispensing Best Practices • Client Care and Messaging
Presentation Suggestions/Approaches	This module should be a refresher and serve to reinforce behaviours that lend themselves to building credibility and trust between the LCS and the client
Exercise	The trainer should design a role play wherein he sets up a mock LCS shop and picks one person to be a client and another person to be the LCS. Pick three such client-LCS pairs and run through three five-minute skits. Let the class observe. At the end, ask for feedback from the class and also share your observations with the class
Learning Outcome(s)	A behaviour that reinforces client care and messaging as core values for LCSs

Chapter 3

TRAINING EVALUATION

Evaluation is an integral part of effective training. There are two aspects of evaluation:

- Course Evaluation
- Trainer Evaluation (self-evaluation)

Guidelines for Course Evaluation

Evaluating reaction:

- Find out how well the trainees like a particular training session and the course as a whole

Evaluating Learning

- What principles, facts and techniques were learned
- Use written test questions, oral questioning and skill tests
- A simple pre test and post test questionnaire will be provided to the trainer

Evaluating Behaviour

- This will be done as part of the MAM Monitoring and Evaluation program

Evaluating Results

- This will be done as part of the MAM Monitoring and Evaluation program

Guidelines for Trainer Evaluation

Preparation

- Notes, presentation plan, organization

Introduction

- Have you been able to excite interest of the trainees?

- Do they understand why they are here and what they need to walk away with?

Presentation

- Were you able to get the message across without distortion?
- Did you confirm that the message processed correctly into useful knowledge by the trainee?

Conclusion

- Did to reinforce the main points?
- Did you close the loop by tying all the modules together in a manner that the trainee is able to appreciate and will translate to a “behaviour change” on his part?

The trainer will be provided with module evaluation forms that should be filled out by the trainees after each session and a course & instructor evaluation form that should be filled out by the trainees after the session. These forms should be returned to the MAM Monitoring and Evaluation Coordinator.

FREQUENTLY ASKED QUESTIONS AND COMMENTS

- Why can't we use chloroquine when it is still available on the market?
- I respond very well to chloroquine so I don't agree with government for withdrawing it.
- Can I have amodiaquine and artesunate separately?
- Why should I take the two together since I react badly to the amodiaquine ?
- I prefer Coartem but it is too expensive.
- My child cannot swallow pills; how can I give him the medicine?

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