

## 3.1 Introduction

This section provides information for Project Implementers and Trainers about how to plan, develop and implement a training program for Community Health Promoters. It also talks about how to evaluate your training to ensure that Community Health Promoters have gained the necessary knowledge, skills and attitudes to do their job effectively. In addition, this section discusses different methods that can be used to regularly monitor the work of Community Health Promoters and assess behaviour change in the community.

## 3.2 Project Planning

Any type of water, hygiene or sanitation project should have an education component to ensure behaviour change and a positive impact on people's lives. Education objectives and the role of Community Health Promoters should be included in the initial project planning phase to ensure that sufficient time and resources are allocated.

It is often the case that the emphasis (and the majority of the financial resources) is placed on the technology, rather than educating people on how to use and incorporate the technology into their lives. Public awareness and education programs are usually an after thought and by the time their importance is finally recognized, the project money has already been spent.

The education objectives and resources available will depend on the scale of the project. For larger projects (such as those working with more than 100 households), the first two years may be necessary to devote to the exploration of local awareness, assessment of demand and its underlying causes, and developing demand-generating interventions. The next few years could then be used for behaviour promotion, project implementation and follow-up monitoring of interventions including technical support to the families with newly installed facilities.

## 3.3 How to Recruit Community Health Promoters

The first step to recruit Community Health Promoters is to create a description of the position based on the knowledge, skills and attitudes you expect them to have. The job description needs to clearly communicate what responsibilities and tasks are expected of the Community Health Promoter and the key qualifications of the job.

It is useful to create a draft of the job description and then ask yourself the following questions:

- Are we asking too much of these individuals?
- Are the responsibilities and tasks realistic?
- Do we need to provide additional compensation?

Once a person is selected, the job description serves as a guide to the knowledge, skills and attitudes that they will need to perform the job. Those skills that they already possess should be refined and applied in the position, while skills or knowledge that they lack can be acquired through your training program.

**Exercise – Create a Job Description**

Look back at Section 4 and review the knowledge, skills and attitudes that you identified for Community Health Promoters. Write a job description for your project using this information to guide you.

**Title****Summary**

*(Concise definition of the major responsibilities)*

**Responsibilities or Tasks**

*(List of duties that the person will perform. Begin each duty with an action verb, e.g., check, help, visit)*

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**Qualifications**

*(List the knowledge, skills or attitudes necessary to perform the job)*

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**Compensation**

*(Is this a volunteer or paid position?)*

**Work Schedule**

*(Is this a part-time or full-time position? What is the time frame?)*

The next step is to advertise and interview people for the position. You can post the job description in local newspapers or community boards and make announcements at local events. Often the best way to find people is through word of mouth. You can speak with local leaders and other organizations to see if they have any suggestions for suitable candidates.

### **Offering Recruitment Incentives**

The Koshish Foundation is a non-profit organization working on biosand filter projects in Pakistan. As part of their project, volunteer Lady Health Workers are recruited to provide support to approximately 125 families in the village. Even though the position is unpaid, Koshish is able to successfully recruit Lady Health Workers by offering the incentive of receiving a free filter once the first 20 filters are installed in the village.

Almost anyone can become a Community Health Promoter. They can be community representatives, members of a local NGO or CBO, health workers, nurses, or teachers. It is good to have a gender balance and ensure that you have enough female Community Health Promoters to connect with mothers and girls. It doesn't matter what age or socioeconomic status they are. What is more important is that they have the ability to acquire the right knowledge, skills and attitudes, and be able to apply these confidently towards household water treatment, hygiene and sanitation.

The number of Community Health Promoters needed will also depend on the housing density of the population in your community. A higher number of Community Health Promoters are probably needed in mountainous regions where distances between households can be far, while more people can be reached by one Community Health Promoter located in a dense urban area.

You should plan to recruit more Community Health Promoters than are actually needed in case some change their mind and drop out of the project. For example, train five people if only three are actually needed.

### **Exercise – Potential Community Health Promoters for Your Project**

List the names of people in your project and community who could potentially be recruited as a Community Health Promoter.

## 3.4 How to Develop the Training Program

Community Health Promoters will require training to ensure that they have the necessary knowledge, skills and attitude to promote water, hygiene and sanitation for your project. Their training program will depend on your budget and time that is available. It can range from one session at the beginning of the project to a series of sessions that are held on a frequent basis over the course of the project.

As a minimum, it is recommended that you provide an initial training to Community Health Promoters and a second refresher training shortly before the community work is scheduled to begin. You should also accompany and provide support to the Community Health Promoters during their first activities in the community.

### 3.4.1 Conducting a Needs Assessment

Your Community Health Promoters will probably come from different backgrounds and have varying levels of experience. Before you create your initial training program, it is a good idea to conduct a needs assessment where you determine their baseline knowledge, skills and attitudes. The needs assessment is then used to plan the training program to ensure that the content is at the right level, and the materials and activities are relevant for everyone. A targeted and focused training program shouldn't waste anyone's time, including your own. Conducting a needs assessment shows people that you are willing to invest time and effort to really understand their needs.

Many needs assessments are developed based on a list of competencies required to perform a job well. Participants can be given a survey where they asked questions about their competencies to help you determine in advance their knowledge and skills. Keep your survey brief so more people will be willing to complete it and tallying the results will be more manageable.

Sometimes it is difficult for people to identify the skills or knowledge they lack to perform their jobs adequately - in other words, they don't know what they don't know. In this case, you might not get back enough specific information from the survey or people may ignore the survey all together because they don't know how to respond to it. As well, it may not be feasible due to time and resource limitations for you to send out a survey in advance.

No time for a needs assessment? At the very least, it is a good idea to speak one on one with a few of your new Community Health Promoters to get a better understanding of the culture, motivation, problems, needs and the types of solutions that will be most effective. Even a brief fact finding discussion can uncover some of the gaps in their knowledge and skills and what is needed to fill them in.

If your Community Health Promoters are already working in the field and you want to conduct on-going training, you can discuss what struggles they may be facing from day-to-day and what would make their job easier and more efficient. This is also an opportunity to identify any behaviour change challenges they are encountering and address those during on-going training. Remember to keep them focused on what they need rather than what they want.

### 3.4.2 Planning the Content

The training program should be designed to help Community Health Promoters become competent and do their job better. If you want this to happen, start by noting how you want them to do their job afterwards. For example: *“After the first training session, the Community Health Promoters will be able to conduct household visits and educate family members about household water treatment options.”*

This list of competencies then becomes the list of the training objectives. The objectives are concerned with achievements by the end of the training session and should be SMART (specific, measurable, achievable, relevant and timebound). For example: *“By the end of the training session, the Community Health Promoters will be able to...”*

1. Identify different ways water is contaminated by human activities.
2. Describe disease transmission routes related to water.
3. Describe the 3 steps in household water treatment.
4. Demonstrate how to use various participatory learning tools including the F-Diagram, Three Pile Sorting and the Sanitation Ladder.
5. Identify skills, knowledge and attitudes required for Community Health Promoters.
6. Discuss guidelines for working with households.
7. Demonstrate how to use the poster presentation.
8. Demonstrate how to use the contents of the field kit.

#### Creating SMART Objectives

Use Tool 32: Writing Aims and Objectives to help provide a framework for your planning and learn more about SMART objectives.

### 3.4.3 Developing the Format

The format of the training sessions will depend on several factors – the objectives, the available time, geographical location of the participants, and the budget.

Creating an agenda for each day brings together all the different activities and exercises. It allows you to see if what you plan is possible in the time available. You will need to consider each objective and ensure that they can be achieved with the planned activities. Often you find that there are too many objectives, so you must either design a longer workshop or cut back on your objectives. You may need to re-write the agenda and objectives a number of times to make sure that you have a format that works.

The general structure of a training session includes the following activities:

- **Opening and introductions.** To welcome people and enable participants and facilitators to get to know each other.
- **Housekeeping.** To give information about meal times, facilities, expenses, and what to do in an emergency.
- **Learning expectations.** To clarify participants' hopes about the training session.

- **Ground rules.** Participants develop ground rules so that everyone has a shared understanding of how people will work together. They are sometimes called a “group agreement” to emphasize the fact that the rules are not imposed by the facilitators.
- **Objectives and schedule.** To outline the objectives, content, methods and timings of the training session. Although presented at the beginning of the workshop for the participants to see, schedules should be flexible to allow the planned activities to be reviewed and changed to meet the needs and interests of the participants.
- **Energizers.** To help participants relax and get to know each other, and give them more energy and enthusiasm. See Appendix 3 for suggested energizers.
- **Field work.** To provide an opportunity for participants to put new skills into practice. For people to learn new skills, they need to practice in situations as near as possible to reality. Though simulations can be helpful, field visits may be required for direct experience.
- **“Car park” flipchart.** To give facilitators and participants a place to “park” issues that need to be covered at some stage, but are not appropriate for that moment in the training session.
- **Small and large group work.** To do participatory activities and have focused discussions.
- **Recaps.** To provide a summary (usually by participants at the beginning of each day) of what has been covered so far.
- **Follow up action plan.** For participants to clarify what concrete steps they will take after the workshop in order to use the new skills and knowledge they have gained.
- **Evaluation.** To enable participants to assess the strengths and weaknesses of the training session, including facilitation, methodologies used, materials, venue, accommodation, food, relevance of topics covered. They can be carried out by using questionnaires or participatory activities. Evaluations can be conducted at the end of every day, or at the end of the entire training session. See Appendix 4 for different evaluation methods.
- **Closing.** The end of the training session can be official or unofficial depending on what is appropriate. Certificates may be expected in some countries. See Appendix 4 for different closings that can be used.

(Adapted from International HIV/AIDS, 2001)

The following is an example agenda that has been created for the previous objectives on household water treatment. See Appendix 4 for an agenda template.

**Example Agenda**

<b>Time</b>	<b>Day 1</b>	<b>Day 2</b>
2 hr	<ul style="list-style-type: none"> <li>• Introduction <ul style="list-style-type: none"> <li>◦ Energizer</li> <li>◦ Housekeeping</li> </ul> </li> <li>• Creating the learning environment <ul style="list-style-type: none"> <li>◦ Ground rules</li> <li>◦ Learning expectations</li> </ul> </li> <li>• Workshop objectives and schedule <ul style="list-style-type: none"> <li>◦ Participatory learning</li> <li>◦ Explain manual</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Opening <ul style="list-style-type: none"> <li>◦ Recap Day 1 activities</li> <li>◦ Energizer</li> </ul> </li> <li>• How to change behaviour</li> <li>• Skills, knowledge, attitudes of Community Health Promoters <ul style="list-style-type: none"> <li>◦ Active listening activities</li> <li>◦ Effective questioning activities</li> </ul> </li> </ul>
15 min	<b>Break</b>	<b>Break</b>
2 hr 15 min	<ul style="list-style-type: none"> <li>• Global and local water, hygiene and sanitation issues</li> <li>• Water cycle</li> <li>• Water quality and disease transmission <ul style="list-style-type: none"> <li>◦ Traditional beliefs</li> <li>◦ F diagram activity</li> </ul> </li> <li>• Improved hygiene and sanitation <ul style="list-style-type: none"> <li>◦ Sanitation ladder activity</li> <li>◦ Three pile sorting activity</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• How to work with households</li> <li>• Develop checklist for household visits</li> <li>• Review poster presentation</li> </ul>
1 hr	<b>Lunch</b>	<b>Lunch</b>
2 hr 30 min	<ul style="list-style-type: none"> <li>• Community versus household water treatment</li> <li>• Household water treatment <ul style="list-style-type: none"> <li>◦ Multi-barrier approach</li> <li>◦ Sedimentation</li> <li>◦ Filtration</li> <li>◦ Disinfection</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Role play household visits using checklist and posters</li> </ul>
15 min	<b>Break</b>	<b>Break</b>
1 hr 30 min	<ul style="list-style-type: none"> <li>• Role of Community Health Promoters</li> <li>• Evaluation</li> <li>• Closing</li> </ul>	<ul style="list-style-type: none"> <li>• How to create a field kit</li> <li>• Follow up action plan</li> <li>• Evaluation</li> <li>• Closing and certificates</li> </ul>
Home Work	<ul style="list-style-type: none"> <li>• Read manual</li> <li>• Review posters</li> </ul>	

#### 3.4.4 Choosing a Location

It is important to find a place where people can express themselves freely and feel comfortable. If possible, take the Community Health Promoters away from their work or community and make it a residential workshop. People will share not only the classroom time, but social time as well. As well, participants are much more likely to attend full-time since they will not be distracted by other commitments from work and home.

It may not always be possible to find a location outside of the office or community. An effective training session can still be organized regardless. In this case, you may want to insist that participants attend the whole training sessions rather than coming and going.

Also consider a location which is easy for all Community Health Promoters to get to. Remember, it is more important for it to be a place which is easy for participants to get to, rather than a place which is easy for you to get to.

#### 3.4.5 Identifying the Participants

It is important to choose the right number of people. You may want to have a small group to provide intensive training and support, or a larger group to have a wider range of participation.

A maximum of 20 participants is recommended so that everyone has the chance to fully participate in the training. If there are more people than this, some of the participants will keep quiet and not contribute. A common reason for training sessions to fail in meeting their objectives is that more people than planned are added to the participant list. The event then turns into lectures rather than participatory activities and time for practice is lost.

#### 3.4.6 Selecting the Facilitators

You will need at least one facilitator for a workshop of 20 participants. It is always a good idea to have an assistant facilitator to help the main facilitator if you can afford a second person. It is always a good idea to have more than one person in your organization who can deliver the training and an assistant is a perfect way to train somebody about facilitation skills.

It can also be helpful to have guest speakers or local experts on a topic to participate in the training session. They can help everyone to deal with issues, such as how to put theory into practice at a community level. Always talk to your guest speakers beforehand about your expectations and be sure that they understand their role and time commitment.



### 3.4.7 Working with the Facilitation Team

It is important that the facilitation team works well together – both as professionals and as a group of people. Ways to build a strong team include:

- **Get to know each other as people.** Use participatory activities to share information about each other. For example, share timelines showing key milestones in each other's lives. Go out for lunch or dinner together the day before your training session.
- **Get to know each other as facilitators.** Share information about your skills and the areas where you would like to develop more skill. For example, draw self-portraits and note facilitation strengths down one side and facilitation weaknesses down the other.
- **Get to know each other as colleagues.** Different team members will have different working styles and preferences. These can be explored through activities such as “I like it when colleagues...I don't like when colleagues...”
- **Get to know the subject matter together.** Read through the resources to develop a common understanding and clarify points that are unclear.
- **Assign roles and responsibilities.** Decide who will do what for each day and each session. Facilitators may prefer to design and conduct sessions in pairs for support. It is useful to clarify the role of the other facilitators when they are not actually leading an activity – should they be helping group work or be available to answer questions?
- **Enable continuity.** Where possible, ensure that all facilitators are present during the entire training session.
- **Develop a facilitation team contract.** Setting the ground rules can answer questions about how facilitators want to work together, such as:
  - What does the team want their training session to be like? For example, fun, interesting, challenging.
  - How does the team want to function together? For example, providing mutual support, working in pairs, having a leader.
  - What principles are important for the team? For example, being gender sensitive, respecting each other's strengths and weaknesses.
  - How will you deal with potential problems? It is always useful to have a pre-arranged signal or a way of drawing each other's attention. For example, raise your hand and the lead facilitator can call on you.

(International HIV/AIDS Alliance, 2001)

### 3.4.8 Monitoring the Training

Facilitators should debrief at the end of each day and at the end of the training session to discuss the overall strengths and weaknesses of the training session and to identify improvements for the future. The following are things that could be monitored and discussed to make sure that the training session is on track.

- Is the agenda being followed? Are activities too long or too short?
- Did participants learn what was planned during the activities?
- Is the participant behaviour friendly and respectful towards each other?
- Did any participant dominate the discussion? Should you leave it or take action?
- Did any participant stay quiet and not contribute? Should you leave it or take action?
- Were there enough breaks?
- Is the training room ready for tomorrow? Is it tidy? Are visuals available? Are all the supplies present?
- Are there any other problems that need to be dealt with? Accommodation? Food?

### 3.4.9 Writing the Final Report

You often have to write a final report on the training session for the funders and for your organization's records. Writing a final report is a good way to reflect on what worked well and lessons learnt to improve the next training session. The following is a suggested table of contents for your final report.

- Training Session Title
- Host
- Location
- Dates
- Funding agencies
- Objectives
- Facilitation team
- Translators
- Participants and contact information
- Activities worth noting
- Lessons learned
- Recommendations for future training
- Follow up action plan

## 3.5 Training Activities to Develop Skills and Knowledge

The following sections describe the key skills and knowledge required of Community Health Promoters. Various participatory learning activities are provided to help you train Community Health Promoters to develop and enhance these skills and knowledge.

### 3.5.1 Active Listening Skills

This means more than just listening. It means helping people feel that they are being heard and understood. Active listening encourages the participation of people and a more open communication of experiences, thoughts and feelings. In active listening, the person listening:

- Uses body language to show interest and understanding; in most cultures this will include nodding the head and turning the body to face the person speaking
- Uses facial expression to show interest and reflect on what is being said; this may include looking directly at the person speaking, although in some cultures such direct eye contact may not be appropriate until some trust has been established
- Listens to how things are said by paying attention to a speaker's body language and tone of voice
- Asks questions to show a desire to understand
- Summarizes and rephrases the discussions to check on an understanding of what has been said and asks for feedback.



(International HIV/AIDS Alliance, 2006)

**Exercise – Nodders and Shakers**

You will need to work with a partner to show how body language affects communication. Hold a conversation on any topic for five minutes. During this time, one of you has to nod their head repeatedly while the other shakes their head. About half way through, swap nodding and shaking your heads.

Discuss the following questions with your partner and the entire group:

- Did you feel that you were being listened to?
- Were you distracted by the nodding and shaking?
- How did making those body movements affect your conversation?
- Can you remember what was said?

**Exercise – Practice Your Active Listening**

Use Tool 10: Back-to-Front, Tool 11: Bad/Good Listening and Tool 12: Margolis Wheel to help you to develop active listening skills.

**3.5.2 Effective Questioning Skills**

Effective questioning increases people's participation in discussions and encourages their involvement in problem solving. In effective questioning, the person:

- Asks open-ended questions that create discussion and encourage everyone to participate. For example using the six key 'helper' questions (Why? What? When? Where? Who and How?)
- Asks probing questions by following up people's answers with further questions that look deeper into the issue; continually asking, 'But why...?' is useful for doing this
- Asks clarifying questions to ensure they have understood, which can be done by rewording a previous question
- Asks questions about personal points of view by asking how people feel and not just about what they know.

(International HIV/AIDS Alliance, 2006)

**Exercise – Practice Your Effective Questioning**

Use Tool 13: Probing Deeper, Tool 14: Open and Closed, and Tool 15: Sensitive Topics to help you to practice effective questioning skills.

### 3.5.3 Facilitation Skills

Facilitation means to “make things easy”. This skill is needed to ensure that everybody feels that they are part of the group and has the chance to participate in the activity. Good facilitation skills help to improve the quality of group discussions and problem solving. In general, Community Health Promoters need to develop facilitating skills in four main areas:

- Encouraging sharing and learning
- Communicating well
- Keeping material practical and relevant
- Responding to group dynamics

The following sections provide a checklist and some ideas of the techniques that facilitators use to make sure that participants have the best possible learning experience (International HIV/AIDS Alliance, 2001).

#### *Encouraging Sharing and Learning*

- Participation of each group member should be considered equally important. You must also be seen to be on the same level as participants. Do not present yourself as an authority figure who knows more than everyone else.
- Ensure that everyone is comfortable and can see and hear each other.
- Encourage two-way communication by actively listening to people and by using open, rather than closed questions.
- Paraphrase or sum up to confirm people’s key points. Tips for summarizing include:
  - State the positive points first.
  - Highlight where there was agreement or differences.
  - Reflect on people’s comments rather than your own opinions.
  - Focus on the main points that have been made.
- Confidentiality also needs to be stressed; participants must agree not to disclose embarrassing details about others. Or a group can agree that things can be talked about outside the group, but nobody can be identified.

#### **Exercise – Trust Game**

Use Tool 16: Trust Game to help people understand the issues of confidentiality and what it feels like to give people sensitive information about themselves. It also helps people to gain trust in each other.

#### *Communicating Well*

- Talk slowly and clearly. Use language that is simple and appropriate.
- Provide clear guidance and instructions.
- Be honest and clear about what you do and don’t know.
- Use handouts, prepare flipcharts, and make examples to help explain activities.
- Display the results. Put participants’ work on the walls, on tables, or on the ground where everyone can see them.

### Exercise – Folding Paper Game

This exercise will help to show how simple instructions can be misinterpreted and the importance of clear communication.

- Four volunteers need to stand in front of the rest of the group.
- Give each volunteer a square sheet of paper. They must close their eyes and not ask any questions.
- Another person gives the following instructions:
  1. Fold the paper in half and tear off the bottom right hand corner.
  2. Fold the paper in half again and this time tear off the upper right hand corner.
- Ask the volunteers to open their eyes and show everyone the unfolded paper. It is very likely that the results will not be the same.
- Discuss as a group how the directions could have been clearer and what words could have been interpreted in different ways. How can people be encouraged to ask for clarification when they do not understand something?

### Keeping Materials Practical and Relevant

- Focus on practice rather than theory. Include case studies of real community projects in action.
- Talk about “we” and “us” rather than “they” and “them”.
- Link the activities to participants own work or home. Ask “How could you use this in your day-to-day activities?”

### Responding to Group Dynamics

- Cope with power imbalances. Encourage people with different social and professional backgrounds to work together as equals.
- Avoid crisis. Deal with problems as they come up and work with the group to resolve them.
- Deal positively with criticism. It is important to find a way for the participants to challenge each other constructively. Encourage discussion of the criticism, such as by asking, “Can you explain why you feel that way?” or “What do others think?”
- Accept that you may not be able to please everyone all the time. It can be difficult for facilitators to accept the fact that participants do not always have to agree on everything. It is more important that they have shared different experiences and learned from them.
- Balance participation. Encourage quiet participants to speak out and dominant ones to respect others.



**How to Cope With Quiet and Dominant Personalities**

Facilitators can build the confidence of quiet participants and encourage them to become involved by:

- Encouraging them to start by speaking during small group work.
- Asking them to share in a discussion about their area of specific interest or expertise.
- Using activities where all participants are asked to make a small contribution.
- Providing them with positive, but not patronizing, feedback when they contribute. For example, try and build on or reinforce what they have said rather than say “well done” or “very good”.

Facilitators can work positively with dominant participants and support them to let others make a contribution by:

- Giving them positive feedback and involving other participants in responding to them. For example, by saying “Thank you for that interesting viewpoint. What do other people think about it?”
- Speaking with them privately during a break to ask them to allow others more time to participate.
- Giving them a “job” to do within the workshop, for example providing the participants with a re-cap at the beginning of each day, or gathering and handing out the materials for the activity.
- Drawing their attention to the established “ground rules” about allowing everyone to contribute or using games that encourage awareness of one’s own behaviour.
- If the dominant person is a community leader, you can approach them formally or privately early in the planning phase, explain the process, and try to gain their support. Hopefully, you will be able to convince them that allowing community members to fully and equally participate will result in personal growth and betterment for all.

Use Tool 17: Sabotage and Tool 18: Facilitation Challenges to help you to practice how manage group dynamics.

**Exercise – Practice Your Facilitation Skills**

Use Tool 19: Good Versus Bad Facilitation to consider what are good and bad practices and help you practice your participatory facilitation skills.

### 3.5.4 Knowledge

Community Health Promoters should be able to provide basic and accurate information on how to provide safe drinking water, good hygiene practices and basic sanitation. This type of information is provided in Section 2 Water, Hygiene and Sanitation and Section 3 Household Water Treatment.

The following tools can also be used to check understanding of basic water knowledge and proper hygiene and sanitation practices:

- Tool 1: Transmission Routes
- Tool 2: Analyzing the Barriers
- Tool 3: Three Pile Sorting
- Tool 4: Sanitation Ladder

As well, Community Health Promoters should understand and know how to use the water, hygiene and sanitation posters that are provided in Appendix 2.

*It is beyond the scope of this workbook to provide specific details on how to use, maintain, and troubleshoot different household water treatment technologies. Community Health Promoters may require additional technical training depending on the nature of the project and activities they are expected to perform.*

Community Health Promoters also need know how to use a variety of PLA tools effectively. This means knowing:

- The range of tools and which work best in different situations with different people.
- How to facilitate these tools effectively.

The tools referred to in this workbook are all available in Appendix 1. It is a good idea to look through and familiarize yourself with as many tools as possible.

You will need to match the right tool to the issues you will be addressing. There are no rules about which tools can be used for which issue. You also need to consider which tools work best with the people who will be using them. Some tools work best with people who share the same characteristics, for example same gender, age group and so on. Some tools work better in large groups, others in smaller groups. As a general guide, tools that require a lot of detailed analysis, or are of a very personal nature, are best used in small groups.

You also need to think about how much time you have available to cover all of your objectives. Some tools can deal with a lot of issues at once, while others concentrate on just one issue in depth. Time is the most important resource required in facilitating participatory learning and action. However, the poor who you are trying to engage are often very busy and suffer from “time poverty”. Time spent away from their regular livelihood often means a loss of income. You need to be aware of people’s schedules and time limitations when trying to plan a community activity (International HIV/AIDS Alliance, 2006).



## 3.6 How to Evaluate the Training

You need to know whether the training session has achieved its objectives. There are different ways for you to evaluate if Community Health Promoters have the minimum knowledge and are competent in a certain skill set.

### 3.6.1 Knowledge Gained

It is quite easy to find out whether participants know the facts after the end of a training session, but this does not necessarily tell you whether they have learned anything new. They may have known them before they ever came into the session. They may also forget them before they ever have a chance to use the information in the field. If you can find out what the participants know to start with it also helps you to plan your training better.

You can evaluate participant's knowledge gain by using a simple test before they have undertaken a topic and then another one after they have finished it. Use exactly the same questions every time.

You can also test participants' knowledge by giving them problems or scenarios and asking them to tell you what they would do. For example:

- You approach a household for the first time and the door is slammed in your face. What would you do?
- You are explaining how diseases are transmitted to a mother and she refuses to believe that she gets sick from drinking the water. What would you do?
- You are visiting a household who received a new biosand filter two months ago. You notice that the filter lid is missing and that the outlet tube is very dirty. What would you do?

Alternatively, participants can do the following informal self assessment of their learning. Often, people grade themselves harder than the facilitator would.

- On a chart paper write the three or four topics that are going to be covered in the training session.
- Under each heading draw a line with a 10-point scale (1 being low, 5 being medium and 10 being high).
- On the first day for the pre-evaluation, have participants mark their knowledge of each category with a coloured sticker or marker. Explain that it is OK for participants to rate themselves low on the scale. This is just to get an idea of the group's knowledge and demonstrate how much people will learn over the course of the training session.
- On the last day for the post-evaluation, have participants mark their knowledge of each category with a different coloured sticker or marker. Discuss how participants have moved along the scale.

### 3.6.2 Skills Learned

For each skill, a checklist can be used to help you evaluate a Community Health Promoter's performance. Checklists help you to judge the extent to which the new skill has been learnt.

First of all, decide on what the skill is going to be. For example, you may want Community Health Promoters to practice talking with a household about how a biosand filter is installed, operated and maintained; or you might want them to discuss basic hygiene and sanitation practices with a family.

Then have the group analyze the skill to be learnt and make a checklist with which they can judge their own performance. An example checklist could look like the following...

Did the Community Health Promoter...

- |  |   |
|--|---|
| 1. Greet the person politely?  | <input type="checkbox"/> Yes <input type="checkbox"/> A bit <input type="checkbox"/> No |
| 2. Introduce them self?  | <input type="checkbox"/> Yes <input type="checkbox"/> A bit <input type="checkbox"/> No |
| 3. Explain the purpose of the visit?   | <input type="checkbox"/> Yes <input type="checkbox"/> A bit <input type="checkbox"/> No |
| 4. Use appropriate language?   | <input type="checkbox"/> Yes <input type="checkbox"/> A bit <input type="checkbox"/> No |
| 5. Give useful information?  | <input type="checkbox"/> Yes <input type="checkbox"/> A bit <input type="checkbox"/> No |
| 6. Find out how committed the individual and household is to change?                       | <input type="checkbox"/> Yes <input type="checkbox"/> A bit <input type="checkbox"/> No |
| 7. Agree on strategies to help change?   | <input type="checkbox"/> Yes <input type="checkbox"/> A bit <input type="checkbox"/> No |
| 8. Design a plan for change with the individual, including a timeframe and future visits?  | <input type="checkbox"/> Yes <input type="checkbox"/> A bit <input type="checkbox"/> No |
| 9. Say thank you for the individual's time?  | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| 10. Provide their contact information in case the household has questions at a later date? | <input type="checkbox"/> Yes <input type="checkbox"/> No                                |
| 11. Etc.   |   |

Notes:

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The checklist ensures that people know the standard they have to achieve. The standard could be that “by the end of the training, each participant will score a “yes” tick on most of the items on the check list” – perhaps eight out of ten or whatever you decide is appropriate.

Have the participants work with a partner to rehearse what they are going to say and do. Sometimes it helps people to write down their thoughts in advance and prepare a script for themselves. One participant acts the part of an individual household while the other plays the Community Health Promoter.

The role play can be done in partners, or held in front of the group depending on the participant’s comfort level. Afterwards, the partners or group can complete the checklist to determine what went well and what part needs more work. Tool 21: Role Play can be used to facilitate this activity.

It might take several times of practice before Community Health Promoters score enough “yes” ticks on the checklist. People could change the partner or group they work with after each practice. You may need more time for people whose performance, measured by the checklist, was not good enough.

In some cultures it is difficult for people to make fools of themselves, as they see it, in front of their peers or supervisors. In this situation, it is better to have people practice their role plays in partners rather than in front of the entire group. In other cultures, people have problems separating the role from them. If they play a “bad person”, they feel they are being seen by others in that way. Where these attitudes exist, it is better if the “bad people” roles are played by facilitators or other staff.

As the facilitator, you may notice that somebody shows inappropriate attitudes or that there is a common misunderstanding during the role play. One good way of challenging this is for the facilitator to take the role of the Community Health Promoter in the role play and in front of the group exaggerate these poor attitudes or misunderstandings. After discussion, another item could be added to the checklist, such as “Did the Community Health Promoter demonstrate the right attitude towards the household?”

The need to practice is especially important for technical skills. Imagine that you are training Community Health Promoters on how to use and maintain the biosand filter. You will need real biosand filters to practice on and a checklist with specific criteria to ensure that the job is well done. You might decide that each Community Health Promoter should demonstrate the maintenance steps at least three times and to receive a good score.

(Adapted from Moynihan et al., 2004)

### 3.7 How to Monitor Community Health Promoters

Regular monitoring of Community Health Promoter activities allows the project to be modified and improved over its lifetime. It is recommended that the Trainer visit with the Community Health Promoters once per week during the first month after training, and then meet once per month afterwards to monitor the progress of their activities. However, this may not be possible depending on your budget, so an appropriate monitoring schedule should be created based on your organization's needs and available resources.

The Community Health Promoters should also be brought together once every month or when required to review their progress, exchange experiences, and discuss any problems or issues. Tool 33: Monitoring Matrix can be used with the Community Health Promoters to see what activities are working well and what needs improving according to their experiences.

#### **Follow Up with Community Stewards in India**

The South Asia Pure Water Initiative (SAPWII) supports a small factory in Kolar, Karnataka state to make biosand water filters. Their initiatives are designed to mobilize communities around the importance of clean water in three ways: provide clean point-of-use drinking water; educate children about better hygiene; provide community-based employment for project staff. Their five-year goal is to manufacture and install 15,000 filters in South India by 2011 and provide ongoing water and sanitation education.

To help meet their goal, SAPWII employs Community Stewards who are trained and paid for a one year period to oversee the proper use of the filters by the villagers. They also provide sanitation and hygiene education to make the link between clean water and health.

SAPWII requires that Community Stewards get together at the Kolar workshop on a monthly basis to review their progress, exchange experiences, and discuss any issues. Many of the Community Stewards must travel a great distance to attend the monthly meeting, but it is worthwhile for the opportunity to interact with their colleagues. Community Stewards also receive their monthly pay at this time which is an extra incentive to attend the training session.

(SAPWII, nd)

## 3.8 Additional Resources

International HIV/AIDS Alliance (2001). A Facilitators' Guide to Participatory Workshops with NGOs/CBOs Responding to HIV/AIDS. Available at: [www.aidsalliance.org](http://www.aidsalliance.org)

Moynihan, M., Guilbert, J., Walker, B. and A. Walker (2004). How to Run a Workshop. Available at: [www.networklearning.org](http://www.networklearning.org)

## 3.9 References

Dawson, S., Manderson, L. and V.L. Tallo (1993). A Manual for the Use of Focus Groups. Available at: [www.who.int/tdr/publications/publications/focus.htm](http://www.who.int/tdr/publications/publications/focus.htm)

Ferron, S., Morgan, J., and M. O'Reilly (2000). Hygiene Promotion: A Practical Manual for Relief and Development. CARE International.

International Fund for Agricultural Development (nd). Managing for Impact in Rural Development: A Guide for Project Monitoring and Evaluation. Available at: [www.ifad.org/evaluation/guide/index.htm](http://www.ifad.org/evaluation/guide/index.htm)

International HIV/AIDS Alliance (2001). A Facilitators' Guide to Participatory Workshops with NGOs/CBOs Responding to HIV/AIDS. Available at: [www.aidsalliance.org](http://www.aidsalliance.org)

Moynihan, M., Guilbert, J., Walker, B. and A. Walker (2004). How to Run a Workshop. Available at: [www.networklearning.org](http://www.networklearning.org)

South Asia Pure Water Initiative, Inc (nd). Personal communication. Available at: [www.sapwii.org](http://www.sapwii.org)