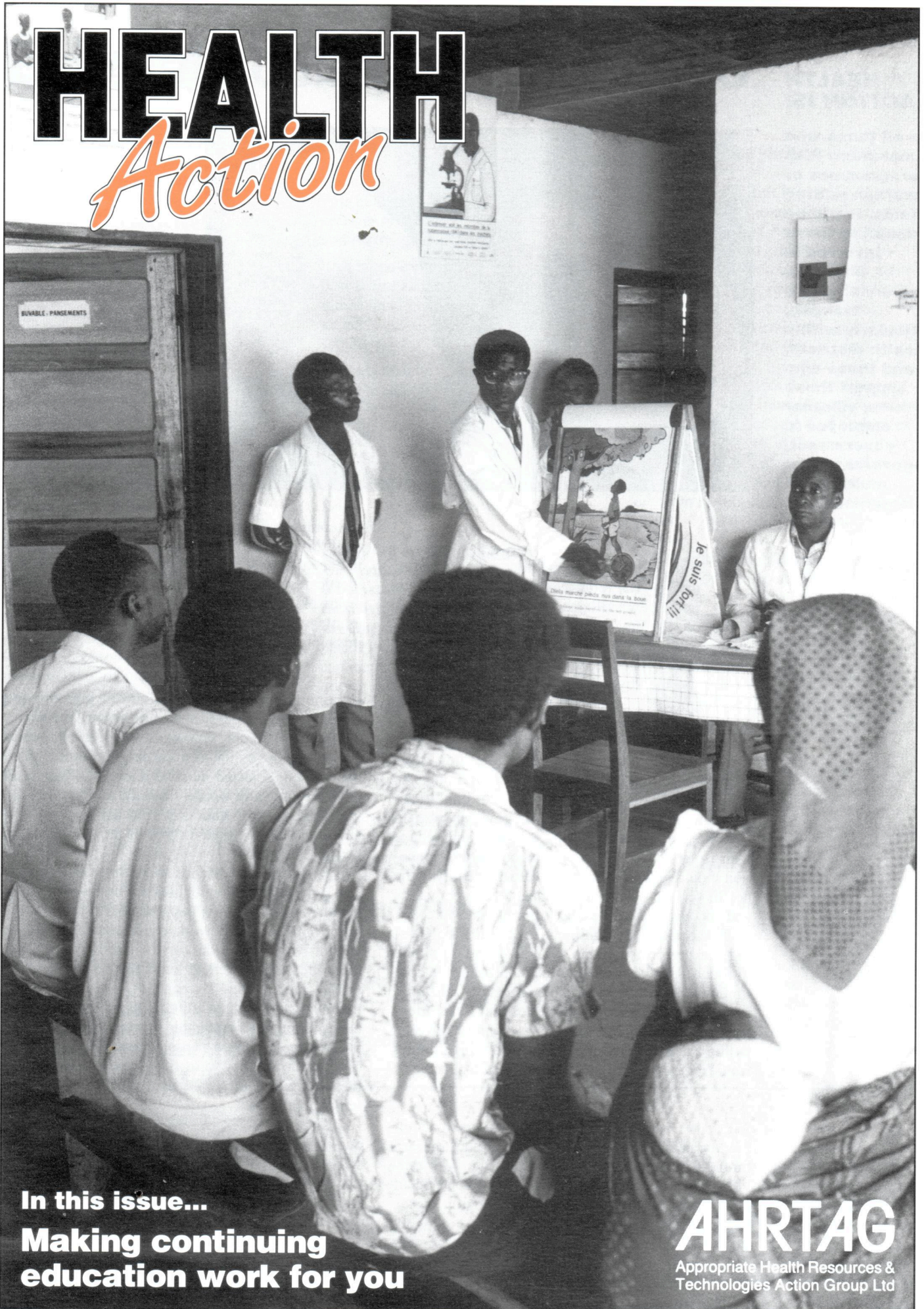


HEALTH *Action*



In this issue...
**Making continuing
education work for you**

AHRTAG
Appropriate Health Resources &
Technologies Action Group Ltd

Implementing Primary Health Care Worldwide

Ways of working

*There are many ways to integrate
education with everyday work.*

Here are two different approaches.

Supportive supervision

In many situations, supervision is the only means of improving the performance, competence and quality of health workers. It should be used as part of an ongoing continuing education process. It is also important that supervision is part of a national system and that feedback from supervisory visits is passed on to the appropriate levels in the health service to assist in solving the problems raised. Supervision can be used to:

- ✓ assist health workers to improve their performance through on-the-job training.
- ✓ identify and contribute to the solution of problems and difficulties in work performance
- ✓ create a better working environment for health workers
- ✓ identify health workers' training needs
- ✓ identify initiatives and resources available or required
- ✓ assess whether health workers' training serves community needs.

Constraints which hinder effective supervision include:

- ✗ lack of supervision guidelines
- ✗ shortage of staff
- ✗ lack of resources
- ✗ unclear roles and responsibilities of supervisors
- ✗ inadequate staff training and motivation in the task.

The process approach

The process approach aims to allow people to work through problems and find solutions for themselves rather than to impose them from the outside. Learning is based upon the participants' own experiences, knowledge and skills and relating theory to practice, by means of workshops, study-circles and fieldwork, rather than by conventional classroom teaching.

The underlying principles of the process approach are those of popular education or 'empowerment', so that people can act to change their environment for the better (see *Health Action 7*). To be successful, process learning must be relevant, have clear and defined goals and be flexible and adapt its work methods to different situations and participants. A sympathetic and effective facilitator is essential to guide the process.

The first step is to ensure that participants understand what they will be learning, why improving their knowledge and skills is important and how they

The process approach starts with the participants' experiences gained in their homes and workplaces, rather than theories put forward by 'experts'

can do this. This leads to the second step where the facilitator encourages the participants to describe, analyse and exchange individual experiences. What procedures did they follow and why? What were the results? How did they deal with the situation? This helps the participants become aware of other ways of seeing and doing things.

The third step is called diagnosis and reflection. The participants compare their different practices and give views on what they think the situation should be. They study the gap between what they actually do and what they should do. Sometimes 'brainstorming' helps to identify possible solutions. The fourth step involves placing past experience and new knowledge into a 'system'. This enables the participants to have a clear 'frame of reference', which they can use in practice and in further education and training.

Later the participants dig deeper into the subject. They can do this in many ways: gathering extra information, analysing problems or case-studies, taking part in fieldwork and conducting experiments. The facilitator demonstrates that there are no 'easy' answers but that participants can apply the first four steps of process learning to the questions. The final steps involve integrating the new knowledge into planning and implementation of projects.

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Styles of supervision	Problems	Advantages
Autocratic: giving orders	Can result in a drop in efficiency, creates resentment among staff, discourages initiative	Can be important when staff have limited skills and experience
Anarchic: letting staff do as they like	Can result in a drop in efficiency, lack of co-ordination, no clear lines of authority, neglect of important tasks	Less bureaucracy, encourages initiative
Democratic: agreeing together on what needs to be done	May lead to unclear roles and responsibilities of supervisors	Results in improved performance, is useful for competent and experienced staff

*Further information on supervision is available in *On being in charge, a guide to management in primary health care*, Rosemary McMahon, Elizabeth Barton and Maurice Piot, 2nd edition, 1992, World Health Organization. Available from Distribution and Sales, WHO, CH-1211 Geneva 27, Switzerland. Price: Sw.fr.21 (developing countries); Sw.fr.30 (elsewhere).*