Tanzania: strengthening service delivery using the Training Resource Package for Family Planning

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 five-year project is led by Pathfinder International, in partnership with the African Population and Health Research Center, ExpandNet, IntraHealth International, Management Sciences for Health, and PATH.

Background

Training providers to offer high-quality services that meet the needs of their clients and follow national and international standards for service delivery is inherent to E2A’s mandate of strengthening the delivery of family planning and reproductive health services. In Tanzania, E2A collaborated with the Ministry of Health’s Human Resources for Health Department at an advantageous time: in July 2015, when the ministry was in the midst of redesigning their pre-service nursing and midwifery education curriculum. The Government of Tanzania was moving toward competency-based training to address weaknesses in family planning service delivery.

Competency-based training

With the East, Central and Southern Africa Health Community College of Nursing and the IBP Initiative, E2A conducted a competency-based training workshop for 33 nursing and midwifery pre-service education tutors using the Training Resource Package for Family Planning (TRPFP).

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The training, from July 6-10, was part of E2A’s effort to build the capacity of the East, Central, and Southern Africa Health Community (ECSA) so that the organization can demonstrate application of the TRPFP with providers and trainers in its member states.

Before the workshop began, the E2A team conducted three days of intensive planning with a smaller team that included ECSA staff and nursing leadership to understand their training needs and how the TRPFP could strengthen and support those needs in the future. During the workshop, participants learned about high-impact practices in family planning and were led through the structure and content of the TRPFP. A Ministry of Health trainer also gave an overview of the World Health Organization’s new Medical Eligibility Criteria (MEC).

All participants built their skills in family planning counseling and communication and the use of competency-based methods to deliver family planning services. Participants worked in small groups to practice their counseling skills and prepare 20-minute training sessions on various family planning topics using a template from the Ministry of Health. During the last two days, the E2A-IBP team leading the training posed as student nurses to give feedback after each session. Participants learned that students acquire skills from doing and not from lectures. The family planning sessions also provided an opportunity for a contraceptive technology update.

At the end of the workshop, participants developed action plans for improvements at each training school or institution represented, such as plans to update content and demystify competency-based training methods. Participants also planned orientations for their colleagues on the TRPFP.

Sustainability and scale
Tanzania’s Ministry of Health is currently reviewing its curriculum using the TRPFP as the technical standard, and has expanded the tasks which they expect to be taught in the family planning module from just counseling and follow-up to provision of methods. Nurses will be able to provide pills, condoms, injectables, and in-depth counseling that exercises informed choice and decision making. In-service training is currently underway to upgrade the skills of existing nurses and midwives, with a focus on their competency in provision of intrauterine devices and implants.

IBP Initiative has also created an online community of practice (on its Knowledge Gateway) for the TRPFP in Tanzania, which participants plan to continue to use as a sharing platform.

E2A is also making plans to organize a similar training in Uganda in December, in collaboration with ECSA: E2A will be observing and coaching while ECSA conducts the training. ECSA also plans to conduct a TRPFP training at its member country meeting in May 2016.

"Indeed it was a wonderful training of all the trainings I have ever attended. As time went by, my mindset towards competency-based education and training kept on changing," said one participant. "My humble request to all trainees: let us make sure that we keep the TRPFP fire burning, and by so doing, we shall have many clients who meet MEC using contraceptives for the health of the nation."