

SCHOOL OF SCIENCE AND TECHNOLOGY

PRACTICAL NURSING EDUCATION

BSN 5820P



BANGLADESH OPEN UNIVERSITY

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**SCHOOL OF SCIENCE AND TECHNOLOGY
BANGLADESH OPEN UNIVERSITY**

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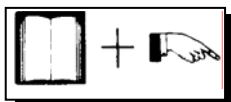
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Unit 1: Class Room Teaching

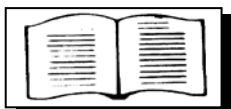
Assignment 1: Concept of Classroom Teaching

1.1. Learning Objectives



On completion of this assignment you will be able to-

- explain the concept of classroom teaching
- understand the importance of communication in teaching and learning.



1.2. Introduction

In the classroom teaching a teaching- learning interaction is taken place. The term teaching means a mixture of an art and a science in the sense that the activity can be based on a body of systematically derived knowledge, converted to principles with which to guide its practices.

Teaching, as an art, cannot be reduced to any exact sequential series of actions but in its very essence it can be reduced to two dynamic factors- the minds natural activity on the part of the learner and the intellectual guidance on the part of the teacher. The fundamental fact of nature is that no man can learn or understand anything for another person.

Both the teacher and the learner have the same kind of intellect, they use the same principles of natural reason. The difference being that in the mind of the teacher a certain number of consequences are related to the principles and follow from what she is learning. Teaching should start with the experience of the learner.

Learning may be defined as the mental activity by means of which knowledge, skills attitudes, appreciations and ideas are acquired, resulting in the modification of behavior. This modification comes through knowledge and experience as such but rather implies something new which has not existed for that individual before. Learning is the addition of new knowledge and experience interpreted in the light of past knowledge and experience.

Learning is manifested by change in the behaviour of the person who is in the process of learning. This changes in behaviour involves the way a person thinks and feels as well as her overt action. Changes in behaviour resulting from experiences (mental, physical, emotional, social) constitute the essence of leanings on those, which merely occur in the process of maturation.

Class Room Teaching

In the classroom, reading materials and problem solving exercise can help to give the ideal answer to a patient's problem. The answer to the actual patients problem may not be so clear in the clinical setting. The patient may be frightened, angry or might have complications. The ward may be very busy and other patients need attention.

The risk of emotional feelings in the real life situation could be avoided in the classroom session. The learners, teacher and patient often face unpleasant things when dealing with human beings. The learners are often distracted by incidents around them. In the classroom, clinical problems can be solved in theory. In the clinical setting, the patient's personal responses have to be dealt with.

There are huge differences between learning in the classroom and in the clinical area-

- In the classroom, the student can “hide” from the teacher's attention.
- In the clinical area, no one can “hide” from the teacher's attention.
- Students want feedback but they also fear the teacher who assesses their performance.

1.3. Communication in Teaching and Learning

The effective communication in nursing education is essential. The word communication means a variety of things to people. Nurses speak of the image of nurses being communicated through relationships with patients, engineers speak of communicating heat and motion, teachers and students communicate with each other in the teaching- learning situation.

In education, communication can be defined as anything that conveys meaning, that carries a message from one person to another, from student to teacher, from student to student, from teacher to student, from educational administrator to teacher and so on. It means the ability to assume the role of another person in order to share a common experience. Effective communication requires knowledge of the symbols, the clues, and the stimuli to which other persons will response. The instructional process is the heart of education and instructional materials give shape and structure to the curriculum, control its content and vitally affect the teaching-learning process. With the invention of new media, the conventional role of the teacher in the classroom changes.

Teacher will work much more close with individual students, directing their learning, pointing out further references, asking critical questions, encouraging the student to accept increasingly higher levels of responsibility for her own educational growth.

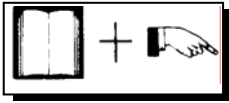
Thus, it is important for the teacher to understand how the communication process works, how meaning is transferred from one subject field to another, how opinions and attitudes are created or modified and how group memberships, role concepts and social structure are related to the process. Everything that goes on in the teaching learning situation, whether it is in the classroom, in the clinical setting, in the home.

1.4. Activity

1. As a nurse, how would you communicate with a patient?
2. How would you differentiate between classroom and clinical learning?

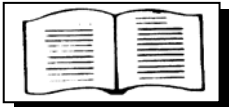
Assignment 2: Classroom Management

2.1. Learning Objectives



On completion of this assignment you will be able to-

- describe about classroom management
- explain the five basic elements of classroom management.



2.2. Introduction

Classroom management it is the vital factor in successful teaching. Proper classroom management can ensure favorable working conditions and effective procedures for teaching learning activities.

The basic elements of classroom management are-

- The role of the teacher
- Handling attendance and seating
- Regulating activities and movements of students during class
- Handling instructional materials and equipment and
- Improvement of working conditions.

2.3. The Role of the Teacher

When working conditions pleasant and comfortable, the teacher contributes materially to make teaching and learning interesting and enjoyable. Classroom management is important factor, which needs careful planning. It includes regulation of physical conditions i.e., lighting, heating, and ventilation, regulations concerning attendance and seating, control of activities and movements of students during the class period, handling of instructional materials and equipment, and improvement of working condition. The effective classroom management of working condition. However, it should be considered that there are some factors affect classroom management are beyond the control of the teacher. Thus every teacher needs to be fully acquainted with all aspects of classroom management.

2.4. Handling Attendance and Seating

Seating arrangement and student attendance are one of the important aspects of classroom management particularly for a large class. A definite rule should be adopted and followed to check student's attendance. A definite system of regular seating arrangement can help the teacher to

check attendance very quickly with minimum interference to the class, so that classes should begin promptly. In addition the teacher should have a seat regulation regarding absence.

2.5. Regulating Activities and Movements of Students During Class

The one general principle that applies to the handling of classroom activities is that there should be freedom to carry forward effectively those activities essential to the attainment of objectives. Certain routines may be necessary to prevent confusion and waste of time, but they should be such that they do not stifle initiative and creativity and prevent the development of self-control.

The following practices are generally accepted as good procedures:

1. Prepare for class: Poor planning, that is poor management on the part of the teacher, often is the cause of much wasted time in the classroom. For instance, too much attention is given to minor details and not enough to major areas. Much student teacher energy is wasted through needless repetition and dictation and through recitation and poor conduct.
2. Begin and end classes promptly: “Time and tide wait for none”- everyone is bound by time. An effective way for the student to learn the value of time is from the teacher who begins and end the class timely.
3. In conducting class discussion, the teacher should insist that all students give attention to the work at hand. Certain definite mechanism should govern classroom discussion. If several people talk at a time, no one can be heard, and the only result is confusion. It is true that the teacher should try to create intense interest and to develop spontaneity but this should not be done at the expense of some of the students.
4. In certain types of activities, certain uniform procedures may be used. For example, in giving reports, students should report in front of the class as a matter of course. Confusion is prevented and time is saved if students know what and where to go without needing special directions every time.
5. There should be as much freedom as possible to make classes effective and valuable for each student.

2.6. Handling Instructional Materials and Equipment

Every teacher should know what constitutes standard equipment in the teaching-learning situation for which she is responsible. She should be familiar with the kind, the quality and the amount of materials best suited

Class Room Teaching

for the subject that she is to teach. She should check all equipment to see that it is available and in good working order before class time, so that available class time will not be wasted trying to determine why equipment will not work or trying to repair it.

Much valuable classroom time can be wasted by poor distribution of instructional materials. The following are distribution procedures that have been tried and found to be effective.

1. Plan an effective method for distributing the teaching materials, books or equipment to be used in class. If such distribution is frequent this plan should be followed regularly.
2. Plan an effective method for distributing and collecting student papers.
3. Assemble materials before class that are planned for use during class.
4. Display all visual materials to be used for class instruction so that they can be seen easily by all students.
5. Mimeograph and distribute summary statements of future assignments.
6. Teach students to handle all materials carefully and quietly.
7. Post-detailed summaries and similar material on the bulletin board in preference to using class time for dictation.
8. Plan all routine handling of materials carefully and effectively. Maintain order. The teacher's classroom efficiency cannot exceed the order she maintains in her class.

2.7. Improvement of Working Conditions

The primary purpose of managing and controlling the physical environment for teaching and learning is to provide favorable working conditions so as to facilitate learning and teaching. Often, much time is wasted in non-learning activities, such as dictating directions, when mimeographed materials could be used just as satisfactorily. The primary purposes of routine in the management of classroom work are:

- i. Economy of time and effort,
- ii. Prevention and decrease of confusion and
- iii. The teaching of good habits of study and ideals of workmanship.

Organized routine means the management of details so as to leave students and teacher free for the major activities of the class period. The amount

and the nature of routine vary according to the size of the class, the arrangement of the classroom equipment, the materials available and the students themselves.

In the classroom teaching different teaching methods are used such as lecture, lecture with discussion, demonstration, brainstorming, role play, etc.



2.8. Activity

1. Prepare a good learning environment in the classroom considering the factors like lighting, ventilation, seating etc.
2. Prepare and display visual materials to be used for class instruction.

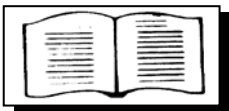
Assignment 3: On a Particular Subject

3.1. Learning Objectives



On completion of this assignment you will be able to-

- define lecture
- state the purpose of lecture
- describe the preparation required for a lecture
- use the techniques of delivering the lecture
- use different types of teaching aids during lecturing
- use different evaluation tools
- explain the advantages and disadvantages of lecture.



3.2. Introduction

A lecture is an instructional technique through which presented an oral discourse on a particular subject is presented.

The purpose of a lecture:

- To convey information about topic
- To provide the learner with an up-to-date SURVEY or OUTLINE of the subject.
- To put across subject matter which is difficult to learn from, or is not found in books
- To stimulate and provide interest
- To express personal views and approaches
- To encourage questions and discussion

3.3. Preparation

1. Decide on the aims and objectives of the lecture: These should also be intimated to the students.
2. Read around the subject and make sure that your material is up-to-date: If repeating a lecture prepared some time ago, check that it is still up-to-date!
3. Establish your method of approach: e.g., instructional, provocative, questioning.

4. Establish correct level of difficulty: Material, which is too difficult or obscure, will conflict with the major purposes of the lecture; material, which is too simple, will lose credibility.
5. Establish what time you will have available for your lecture and aim at complete the lecture well within that time- especially if you intend to stimulate questions and/or discussion.
6. List the subject headings you intend to cover.
7. Decide upon an opening, which carries some impact and which stimulates the students to pay some attention. Plan a conclusion, which will sum up your main points.
8. Write your lecture notes in accordance with your style and your chosen method of approach: Try to do it in note form as a fully-worded script will ensure you into a formal delivery as you will find it very difficult to take your eyes away from the paper.
9. Try to arrange your material in a logical order so that students can easily take meaningful notes. When you are on the receiving end, there is nothing more infuriating than trying to make notes of material, which refuses to follow a pattern.
10. Do not try to cover too much material: There is only so much that a student can usefully take in one session. If you are uncertain of the time you may take in delivering the lecture, prepare several points at which you can stop. Going on beyond the scheduled end of a lecture will only produce agitation and annoyance where students may have another lecture or where they have planned other activities. You will achieve little by trying to force the extra material on to them in such a circumstances.
11. Prepare your notes in good time: Finishing them off just before the class arrives is never a good idea. Always go over your notes before each lecture, however often you may have given it before- especially if you expect questions and/or discussion.
12. Check your visual aids for relevance, accuracy and physical condition. Check that you have ordered any necessary equipment and that you know how to use it. Ask for instructions if you are at all unsure.
13. Always be prepared for breakdown of equipment, non-arrival of hired films/videos, late arrival of slides from processors etc. Have some alternatives prepared, just you need in case.

Delivering the Lecture

1. Start on time: Establish the fact, from the very beginning, that you will start at the scheduled time, so the learners will soon “adapt”.
2. Finish on or before time: Carrying on over time is unfair to the students; a following lecture does not add anything to the effectiveness of your material.
3. Allow a break between lectures: This follows on from the previous point.
4. Emphasize topic headings and display them clearly on black board, overhead projector or handout.
5. Make it quite clear when you are starting a new topic.
6. * Say what you are going to say, i.e. introduction.
* Say it, i.e. the main body of the lecture.
* Say what you have said, i.e. conclusion.
7. Adjust your voice to the circumstances: i.e. size and acoustics of the room, number of learners. Above all you must be audible and you must speak clearly. While there is nothing wrong with regional accents, you should observe Standard English usage and avoid dialect. Vary the speed and intonation of your voice. Avoid delivering your material in a monotone but do not speak too quickly.
8. Do not throw away words and make sure that key words are emphasized and, if necessary, explained.
9. Allow time for students to notes-note-taking in a panic is never productive.
10. Avoid reading your notes word to word: Remember that eye contact with your audience is very important.
11. Be individual but do avoid irritating mannerisms. You may not be aware that you have mannerisms, but the students will. It may be a good idea to deliver a lecture in front of a video camera. You will probably be surprised at what you discover about yourself.
12. Use Jokes cautiously and only if they will assist the impose of your material. Humour often proves effective in making your material more attractive. However, you don't want the students to remember the jokes rather than the information contained in your lecture.

13. Look at your class. But not always at the same student or the same part of the room. Eye contact with the class shows that you wish to communicate with the students, not the floor or the ceiling. Always look (and sound) as such that you are interested in your subject. Boredom is easily transmitted.
14. Do not discourage interruptions (unless they are obviously intended to disrupt) and be willing to answer questions and engage in discussion. This may need some extra skill, as your timing will certainly be put at risk. Although you will be careful to mistakes, trying to bluff your way out of a mistake rarely succeeds and will damage your credibility. Admit and correct.
15. Where relevant, use the blackboard, overhead projector and other aids. However, avoid using aids where they do not add anything to the lecture. Aids should always be very carefully selected and should be of reasonable quality.

3.4. Using Aids to Lecturing

1. The Chalkboard

A chalkboard is much-maligned visual aid in this age of technology- largely because of misuse and the effects of chalk dust but it still has advantages. In particular, the only materials needed are chalk and a duster and there are no power, focusing and blackout requirements.

- Make sure that it is clean before use (an open weave duster is best).
- Write boldly and neatly.
- Use it in an orderly fashion- like a notebook.
- Do not erase until students have finished using the information.

2. Marker Boards

Dry-wipe pens are best as the marks are easily removed with a dry cloth. Other types of pen need special liquids for successful eraser.

3. Flipcharts

Flipcharts can be used in a similar way to chalk and marker boards - with the advantage that the sheets may be prepared beforehand, can be saved for future use or can be displayed separately. However, it is easy to be tempted to waste paper and the pads and pens are expensive.

4. Handouts

These should provide a synopsis of the lecture or even of the whole course. They may contain more detailed information of a topic covered in the lecture, diagrams or illustrations. They may be in the form of work sheets or references to books etc.

It should be clear and easy to read. Bulky and wordy handouts are often field away and rarely referred to.

Above all, handouts should never be read out word for word during a lecture.

5. Audio Visual Aids

The preparation and use of audio visual aids to lecturing is a subject in its own right. Success in this area demands extensive study and practice.

You must accept that you will always be risking some sort of technical breakdown or the non-arrival of hired materials- so BE PREPARED!!

3.5. Evaluation

Delivery of the lecture is not the end of the process. How will you know whether or not the lecture has been success, examinations and tests will give you an idea as to the overall effect of your course.

There are many ways of evaluating lectures. This includes-

1. FEEDBACK (tutorials, short tests, group work).
2. OBSERVATION OF STUDENTS' REACTION during a lecture.
3. TALKING TO STUDENTS after a lecture.
4. QUESTIONNAIRES about content and delivery.
5. RECORDING (audio, video).
6. ADVICE FROM COLLEAGUES (invite a co-operative colleague to sit-in).

3.6. Advantages and Disadvantages of Lecture Method

3.6.1. Advantages of Lecture

- In expensive
- Favoured by most students and teachers

- A good lecture or lesson should provide an easily-followed summary of essential and up-to-date material
- Not time consuming.

3.6.2. Disadvantages

- Entirely dependent on individual skills and interests of teacher.
- Active student involvement usually low or non-existent.
- Pace, content and viewpoints controlled by the teacher.
- Strong temptation to include too much information to ‘cover the whole subject.’

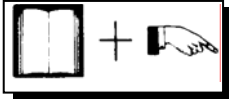


3.7. Activity

Deliver a lecture on a topic by following the appropriate place, voice, timing etc.

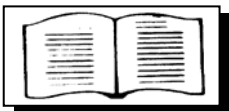
Assignment 4: Discussion, Demonstration and Brainstorming

4.1. Learning Objectives



On completion of this assignment you will be able to-

- describe why discussing is important as teaching method
- define demonstration
- use 16 key points for demonstrating psychomotor skill
- explain the concept brainstorming its strengths and limitations
- take preparation for brainstorming.



4.2. Introduction: Discussion

Discussion ensures a two-way dialogue between teacher and students. It is a way of helping all or most students to actively contribute to the learning process. It is a quick way for a class to review their experiences and thus reinforce what has been learnt. It is a rapid way of finding out what a class has understood or remembered and of giving immediate feedback to confirm ideas or correct errors. It can be used to develop attitudes and also to encourage students to give expression to their ideas. It makes learning more active and more meaningful. It may lead to new ideas being accepted and used by the learner.

Question and answer is used in many circumstances. At the introduction to lesson to find out what students already know, where a teacher wishes to review what students have learned from an experience or a field visit, as informal revision of knowledge or to lead into a discussion or a controversial issue. Class discussion can be used at difficult points in a lesson or at the end of a topic for review purposes.

- **Strengths**
 - Involves audience at least after the lecture.
 - Audience can ask question, clarify and challenge.
- **Limitations**
 - Time may limit during discussion period.
 - Quality is limited to quality of questions and discussion
- **Preparation**
 - Requires that questions be prepared prior to discussion.

4.3. Demonstration

A demonstration can be defined as a visualized explanation of facts, concepts and procedures. The purpose of demonstration can be broadly classified into:

- Those designed to show the learner how to perform certain psychomotor skills, and
- Those designed to show the learner why certain things occur. In the first one, the learner must reproduce exactly the behavior that is demonstrated, whilst in the latter the behaviour is intended only as a strategy to aid the learners understanding of a concept or principle.

4.4. Demonstrating Psychomotor Skill

The following checklists identify 16 key points to consider before, during and after the demonstration.

Before the Demonstration

1. Formulate the learning outcomes.
2. Perform a skills analysis and determine the sequence.
3. Assess entry behaviours of students and determine prerequisites.
4. Formulate the teaching plan, with particular reference; to:
 - a) Ensuring optimum visibility; and
 - b) Preparation of all materials.

It is crucial to formulate the objectives and prerequisites before commencing the lesson plan, just as in preparing any kind of lesson. This is a very important step, as it is not always appreciated that the learner must not only remember the techniques for each sub-skill, but also the correct sequence of these.

4.5. During the Demonstration

5. State the learning outcomes to the students.
6. Motivate them by explaining why this skill is important.
7. Demonstrate the total skill at normal speed.
8. Write the sequence of part-skills on the chalkboard or overhead projector, as a checklist for the step-by-step demonstration.
9. Demonstrate each part-skill slowly, in the correct sequence.

Class Room Teaching

10. Obtain feedback by questioning and observation of non-verbal behavior.
11. Avoid the use of negative examples and variations in technique. It is good practice actually to put the sub-skills on the chalkboard in the correct sequence, so this can serve as a guide when the learner is practicing the skill.

When teaching a new skill, it is agreed that learning is facilitated by teaching only one method of performing the skill and omitting any negative example. This will minimize the effects of psychological interference that could otherwise arise due to the similarity between the original material and the variations or negative examples.

4.6. After the Demonstration

12. Provide immediate supervised practice, with adequate time.
13. Provide verbal, rather than physical guidance.
14. Make the environment psychologically safe by providing a friendly atmosphere and constructive criticism.
15. Remember that initial interest may diminish so provide motivation and encouragement.
16. Remember that students will acquire the skill at different rates, so individualize the planning to cater for the fast and slow learner.

The single most important aspect of the demonstration of a psychomotor skill is the provision of immediate practice for the students.

4.7. Brainstorming

This is an effective method of obtaining creative solutions to a problem. The idea is for each member to generate as many ideas as they can about the problem in question. The emphasis is on free expression of ideas, and no criticism is permitted, however unlikely the suggestions. There are three main features of a brainstorming session: 'cross-stimulation', 'suspended judgment' and a 'formal setting.' Cross-stimulation refers to the effects of other people's ideas on an individual and the fact that these ideas may interact with existing ones to produce creative solutions. As the name implies, suspended judgment means that no criticism of suggestions is allowed, however silly the ideas may seem. It is important that the leader or chairperson be on the lookout for any evaluative comments and step them immediately. It is not vital to produce entirely new or novel ideas, indeed, it may be that an old idea is the best solution to a difficulty in certain situations.

A formal setting is important so that participants can feel that there is something special about the group and thus be less inhibited about saying things that might seem ridiculous. The organization of a brainstorming group involves a leader as a chairperson and someone to make notes of the ideas as they arise. It is helpful to audiotape recording to ensure that no ideas are lost. The brainstorming activity can continue about 30-40 minutes, and frequently lasts only some 5-10 minutes.

4.8. Strengths and Limitation of Brainstorming

Strengths

- Listening exercise that allows creative thinking for new ideas.
- Encourages full participation because all ideas equally recorded.
- Draws on group's knowledge and experience.
- Spirit of congeniality is created.
- One idea can spark off other ideas.

Limitations

- Can be unfocused.
- Needs to be limited to 5-7 minutes.
- People may have difficulty getting away from known reality.
- If not facilitated well, criticism and evaluation may occur.

Preparation

- Facilitation selects issue.
- Must have some ideas if group needs to be stimulated.



4.9. Activity

Do brainstorming sessions on the following issues-

- a. What would you want to find out from a patient who complained of tiredness, fever and cough?
- b. How can you help people to remember the correct qualities of sugar, salt and water in oral rehydration solutions?
- c. What could community health nurses do to increase the proportion of children who are immunized in their community?

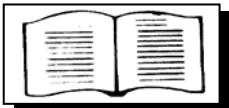
Assignment 5: Role Play

5.1. Learning Objectives



On completion of this assignment you will be able to-

- define role play and its use
- explain when and how to use role play
- describe the importance of debriefing session after role play
- understand the potential difficulties.



5.2. Introduction

Role-play can be a powerful teaching method when it is planned and prepared well. It can be used in a number of different ways depending on the learning objectives, which the teacher has in mind. Some of these are shown below:

- To describe a situation in a more dramatic way.
- To demonstrate a procedure or process.
- To practice a specific skill.
- To reflect on an experience especially in relation to the emotional impact of one's own and other's behavior.
- To sensitize participants to the feelings of others in a particular situation.
- To express oneself.

Given the wide variety of objectives to which the use of role-play may be linked, it can also use at several points within a specific session.

- As an introduction to a topic
- As a follow up to explore a point in more depth
- As the central focus of the whole lesson
- As a warm-up exercise or to create a break in the lesson
- As a means of summarizing the lesson
- As a means of revision
- As a means of assessment.

As can be seen from this list, role-play is a very versatile teaching method with many advantages. It offers participants and observers an opportunity

for a different type of learning from that which occurs in lectures or discussions. Some of the reasons for this are shown below-

- It enables participants to express hidden feelings
- It enables participants to empathize with others and understand their motivation
- It provides participants with an opportunity to practice and experiment with their behaviour in a safe situation.
- It creates a realistic situation demonstrating the impact of social dynamics upon behaviour.
- It allows participants to demonstrate their knowledge and skills without depending on writing ability.
- It strengthens participant's motivation to learn through involvement in an activity.
- It closes the gap between training and reality.
- It helps to change attitude through experience of different perspectives/positions.

5.3. When and how to use Role Play

In order to use role-play successfully, the experience must be carefully planned and prepared in order that it does provide participants with the intended learning opportunity. If the guidelines given here are followed, it is more likely that this will be achieved.

The steps in the creation of role-play are shown below:

- Set the objectives for the role-play and plan how it will be integrated into the other teaching within the lesson
- List the critical factors of the problem which role play is being used to address
- Decide on the type or structure of the role play to be used
- Prepare the brief for the players and any materials which are needed
- Run the role play as planned
- Debrief the participants and observers
- Follow-up or refer back to the role-play in subsequent teaching on the topic.

This is perhaps the most important part of the role and must not be omitted.

It is important to remembering that if “Observers” are used, this may have an impact on the players.

5.4. Debriefing After the Role Play

It is important to recognize the time required to run a role-play and successfully achieve the learning from it. Participant must be prepared for

roles they will play, they must play them and then all participants must be involved in the debriefing.

Time is also needed to create the role-play itself, the amount varying depending upon the complexity.

5.5. Potential Difficulties

Within any role-play there is a potential for things to go wrong. A successful role-play depends on the commitment and enthusiasm of the facilitator and participants. It can be quite challenging for participants.

The following problems may occur which will require the facilitator to assist the players.

Even a short role-play may be quite time-consuming. As a general proportional rule briefing or preparing players takes 1 unit, running the role-play takes 2 units and debriefing takes 3 units.

- The player departs from his/her prescribed role
- The player over-acts from nervous
- The player performs poorly from nervous
- The player does not have the insight needed to perform the role as given.
- Participants feel bored if a role-play is repeated too often
- The emotions engendered by the role-play become over-whelming.



5.6. Activity

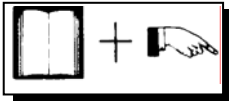
Activity I: Conduct a role-play session for showing good supervision to the nursing staff by a nursing supervisor in the hospital.

Activity II: Conduct a role-play for brining positive/desirable attitude towards patient in the hospital.

Activity III: Suppose you are a district public health nurse and you want to provide antenatal advice to a pregnant woman during your home visit. But the mother-in-low does not want to allow her daughter-in-low to listen you. Conduct a role play session to motivate the mother-in-low fulfil your purpose.

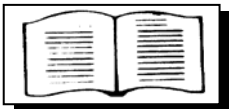
Assignment 6: Audio-Visual Aids

6.1. Learning Objectives



On completion of this assignment you will be able to-

- explain the importance of audio-visual aids
- describe the purposes of audio-visual aids.



6.2. Introduction

Audio visual aids are the aids or materials used in the instructional process through which knowledge, information ideas are communicated.

The selection, observation, and delivery of stimulation by means of various sources comprise a large portion of the decisions the teacher must make everyday. The ultimate guide to decisions about the sources of instructional stimulation is the learning objective (Gagne 1983).

The object of using audio-visual material in the classroom is the communication of information incidental to the total teaching process. Selected and used skilfully- 'the right aid at the right time in the right place in the right manner'- audio-visual aids (AVA) can multiply and widen the channels of communication between teacher and class. Used at random or un-skilfully, so that they dominate or distort rather than assist the instructional process, or without careful consideration of their effect on the attainment of objectives, they can generate sufficient 'noise' to render those channels ineffective. This assignment 6 requires a few details of some AVAs like types of AVAs and description.

6.3. The Purpose of Audio-Visual Aids

A class acquires knowledge and skills as the result of the assimilation of responses elicited by those stimuli, which create sensory impressions. The concept of teaching, which is based on the teacher relying solely on his voice and personality stems from the belief that communication is best achieved through the medium of sound. The use of AVA in a lesson is based on the consideration of communication as related to all the senses; the task of the teacher in providing the appropriate stimuli for desired responses can be facilitated by being able to engage the student's senses of hearing, seeing, touching etc.

Because the 'real thing' (an object or process), which is the subject matter of the lesson, is unavailable, inaccessible, inconvenient or impossible to handle, or because its essential characteristics can be shown only with difficulty or not at all, AVA may be employed to provide effective

substitutes. Films, three-dimensional models, characteristics sounds and enlarged microphotographs can be integrated into a teaching strategy involving the supplementation of verbal explanation, the focusing of class attention, the stimulation and maintenance of interest, the transfer of learning and the promotion of retention of information.

6.4. The Teaching Plan

After a teacher has made an outline of his programme he can then start to plan each lesson in detail.

The lesson is the focus where the teacher's skill is applied. A teaching plan can help to minimize the chances of omitting some vital part of the lesson and ensure that all the necessary factors have been considered.

Teaching plans need to be distinguished from a closely related concept that of the teacher's subject matter notes. Subject matter notes are used to provide a reminder to the teacher of the actual details of the subject matter during a session and eliminate the possibility of forgetting some crucial aspect. It is quite possible for a teacher to present a teaching session without having teacher's notes, depending on the type of subject matter and the degree of expertise of the teacher. If any teacher anxious not to omit any detail, it is still possible to include all the major headings and subheadings, with suitable indicators of examples, etc, without writing the whole plan in prose form.

A teaching plan includes all aspects of learning experiences, considering the following issues a teaching plan should be made:

- What are the objectives?
- How do I motivate (fulfill) students? (To do something to be activate)
- How do I ensure a good atmosphere? [So the facilitator/ teacher can organize a whole group together].
- What is the baseline situation of the students? [What levels are they at].
- What steps do I take in the learning process?
- What sequence do I take in the learning process?
- How much time do I have for the lesson and for each step?
- Which method(s) will I use and WHY? [This method followed by e.g. overhead projector, lecture, blackboard, flip chart].
- Which aids will be relevant and possible? [Don't put any diagram/picture with which nothing to do].

- What should be organized in advance? [e.g. apparatus, materials, setting out, preparation of OHP (Spare bulb) etc.]
- How and when do I assess whether the students understand the materials? [Students feel safe in asking questions, no point of pretending this sort of relationship is important.]

The educational circle (shown in the diagram) applies to every lesson, as well as to the teaching program as a whole.

In planning a lesson we can go through a systematic scheme, which helps us to answer these questions.

Most of the form is self-explanatory, but the following should be noted.

The column headed 'sequence' is for the main headings only, as finer details should be contained in the teacher's notes, as should be questions that one is planning to ask.

TITLE ----- DATE -----
TEACHING METHOD ----- TIME -----
VENUE -----

GROUP DETAILS

- a) Number of learner:
- b) Type of course:
- c) Educational level:
- d) Previous experience:

ROOM ARRANGEMENTS	LEARNING RESOURCES
-------------------	--------------------

EVALUATION FORMAT

- a) During lesson:
- b) End of lesson:

AIMS AND OBJECTIVES

CHALKBOARD PLAN

TIME	SEQUENCE	ACTIVITY	
		TEACHER	LEARNERS

SELF-EVALUATION OF LESSON

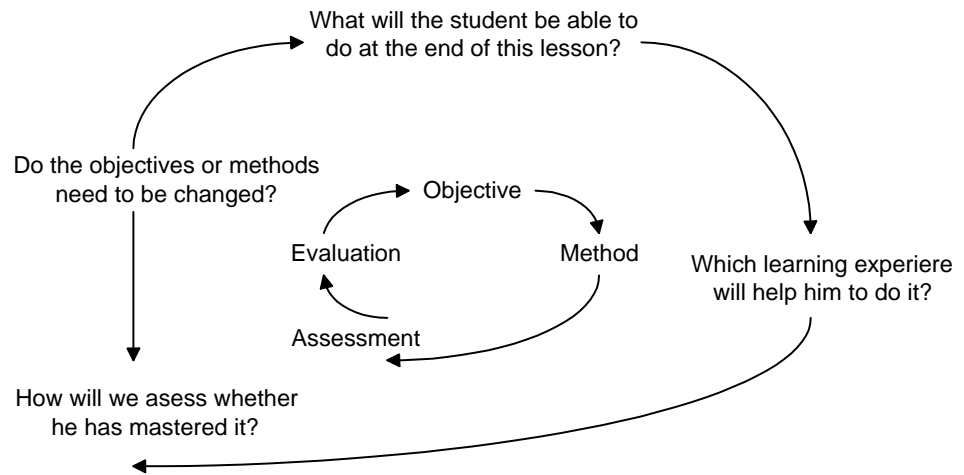


Fig.: Format for a teaching plan.

The Herbartian principles are useful as a general approach when considering the sequencing of the session; they state that teaching should proceed from the simple to the complex, from the concrete to the abstract and from the known to the unknown.



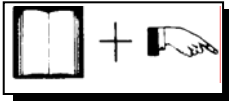
6.5. Activity

1. Plan a teaching session and demonstrate your patient teaching skills. This presentation will last 15-20 minutes.
2. Prepare a one-hour teaching plan on 'Vitamin A deficiency' for first year basic nursing students.

Unit 2: Planned Clinical Teaching in Hospital Wards

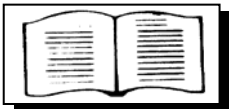
Assignment 1: Clinical Teaching

1.1. Learning Objectives



On completion of this assignment you will be able to-

- define clinical teaching
- describe the purposes of clinical teaching
- explain the principles of clinical teaching and
- describe the qualities of a clinical teacher.



1.2. Introduction

Clinical teaching is a series of deliberate actions or the part of the teacher to guide student in their learning. It involves a sharing and mutual experience between teacher and student and is carried out in an environment of support and trust.

Since learning is an active and personal process, the aim of clinical teaching is to create the environment and activities for learning. It also recognizing that each student will gain different insights and in-depth from them.

Teacher or clinical instructor can provide opportunities and structured planned activities in real life situation of clinical settings that will auditable learning. Clinical teaching is a systematic approach that enables the students in learning new skills, adopting new behavior and acquiring new attends related to nursing practice.

1.2. Purpose of Clinical Teaching

As nursing is a practice oriented professional discipline, emphasis should be given on skill development, which is essential for clinical nursing practice. Clinical practice requires critical thinking and problem solving abilities, including psychomotor and technological skills and a professional value system. So the ultimate purpose of clinical teaching is to prepare nursing students for professional practice. Guided practice in clinical settings exposes students in various ways that can not be conveyed by a textbook. The purposes of clinical teaching are as following:

- To help in integration of theoretical knowledge into practice.

Planned Clinical Teaching in Hospital Wards

- To learn and practice various nursing skills, techniques and procedures.
- To develop cognitive, affective and psychomotor skills.
- To improve and maintain high standard of nursing practice.
- To develop proficiency and efficiency in carrying out various nursing techniques and procedures.
- To develop new skills, adopting new behaviors and acquiring new attitudes related to nursing practice.
- To become independent enough to practice nursing.

1.3. Principles of Clinical Teaching

Clinical teaching have some principles, they are as follows:

- Clinical teaching should reflect the nature of professional practice.
- The nursing student in the clinical setting is a learner, not a nurse.
- Clinical teaching is supported by a climate of mutual trust and respect.
- Clinical teaching and learning should focus on essential knowledge, skill and attitudes.
- Sufficient learning time should be provided before performance is assessed.

1.4. Qualities of a Clinical Teacher

The central activity of the teacher in clinical setting is clinical instruction or clinical teaching. Here the appropriate role of the teacher is compliant guidance. The characteristics and qualities of the teaches that are essential in facilitating learning in the clinical setting that can be described under three headings knowledge, skills and attitude.

1.4.1 Knowledge

- Teacher must have in-depth and up dated knowledge of nursing and they should be clinically competent.
- They must know their students' capability.
- They should possess advance knowledge in educational theory, which is essential if learning is to be maximized.

1.4.2 Skills

- The teacher must be a skilled practitioner of nursing.

- The teacher must be able to demonstrate a high degree of teaching in clinical settings.
- Ability to form good relationships with learners, patients and colleagues is a prerequisite for clinical teaching.
- Ability to communicate effectively and efficiently.

1.4.3 Attitudes

- The teacher must be interested in the learner and respect his or her individually.
- They should be sensitive to the feeling of the patient in a teaching situation.
- They should be professional in their performance i.e., maintain a high standard in both clinical and teaching roles.

Besides the above qualities, personal attributes of the teacher also influence teaching effectiveness. These attributes include enthusiasm, a sense of humor, approachable; consider individual differences, caring behaviors and flexibility when working with students in the clinical setting.



1.5. Exercise

1.5.1. Multiple choice questions

Answer the correct one from the following:

1. Clinical teaching involves a sharing and mutual experience between
 - a. students and books
 - b. time and place
 - c. teacher and student
 - d. nurse and doctor
2. Clinical practice requires critical thinking and
 - a. take care of patients
 - b. problem solving abilities
 - c. routine works
 - d. guidance.

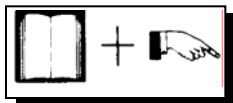
1.5.2. Fill in the blank

- a. As nursing is a practice oriented professional discipline, emphasis should be given on
- b. The nursing student in the clinical setting is a, not a nurse.
- c. Qualified teacher must know their students'
- d. Ability to form good relationships with, patients and colleagues is a prerequisite for clinical teaching.

1.5.3. Short and broad questions

1. Briefly, describe on clinical teaching.
2. What are the purposes of clinical teaching?
3. Describe about the qualities of a clinical teacher.
4. What are the principles of clinical teaching?

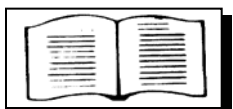
Assignment 2: Choice of Audio-Visual Media for Clinical Teaching



2.1. Learning Objectives

At the end of the assignment, you will be able to–

- know the methods of teaching in nursing education
- choice the appropriate media for clinical learning’ and
- understand about the best audio-visual methods of clinical learning.



2.2. Introduction

Teaching physical examination skills is a fundamental component of medical education. In the past, nursing students practiced physical examination skills by performing full examinations on one another. Now, a variety of methods are used to teach physical examination skills. These methods will vary among nursing institutions and may depend on funding, instructor comfort level, and how the course has been taught in the past. The methods used to teach physical examination include practicing on peers, instructors, plastic/rubber models, or standardized patients, a term applied to both actors who simulate patients and actual patients trained to demonstrate physical examination skills.

Other teaching methods may include the use of audio-visual aids such as videotapes and slides, role-playing, instructor demonstration, and, most recently, interactive computer-based programs. Nursing institutions have been noted to use several methods to teach one topic area, such as having the instructor demonstrate on an standardized patients first, followed by the student practicing on a rubber model and then on a patient. Research on methods for teaching physical examination to nursing students has shown that a variety of these methods can be effective.

2.3 Audio-Visual Media for Clinical Teaching

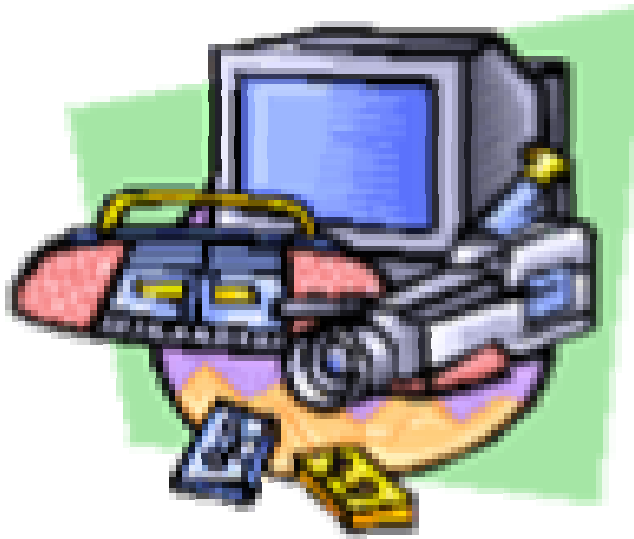
Learning subject knowledge today is not sufficient for challenges of tomorrow. Learner will need to keep himself or herself up to date. They will need to learn new knowledge each week of the rest of their life. Another way, learning and teaching should not stand on opposite banks and just watch the river flow by; instead they should embark together on a journey down the water. Through an active, reciprocal exchange, teaching can strengthen learning how to learn. Use a variety of teaching methods to accommodate the different learning styles that will motivate the learner. These are as follows:

2.3.1 Group Discussion- helps members express their own thoughts. Use open-ended questions to encourage everyone to participate.



2.3.2 Brainstorming- creativity is the key - all ideas are accepted and none are criticized. Encourage the group to list all ideas, no matter how wild or unreasonable they may sound at first. All ideas are recorded and reviewed, funneling down to realistic actions. The process of total creativity introduces ideas the group may not have ever considered attempting before the exercise.

2.3.3 Audio-visual aids- videotapes, DVD's, CD's, slides, tapes, computer presentations, and overhead projectors, are methods that help us learn. Be sure to preview any visual aids and identify key discussion points prior to sharing with the group. Videotaping presentations or club meetings is a good way of teaching and providing feedback.



2.3.4 Video – Conferencing

Enables real time interaction among teachers or tutors and learners in different locations. Can bring together teachers, tutors and learners in one event. It can be used for presentations and teaching sessions, discussions, course delivery in combination with other media. Video conferencing can support development of teachers across large distances, enabling contact between groups. Limitation of Video conferencing has high start-up cost; requires technical support.

2.3.5 Television

Can reach a mass audience of learner and the community. It raises awareness in the community at large about educational issues and teaching. It shows a variety of schools and classroom contexts also provide rich visual content, interviews, dynamic simulations, and examples of teachers' work and teacher in action.

2.3.6 Computer Communication

Enables teachers to participate in larger professional communities. It also provides access to databases, either on a local area network provided by the educational authorities, or the internet. It can provide a wide range of multimedia materials, if the infrastructure permit. Support a range of interaction, from formal to non-formal of varying group size. Can archive discussion for later use by other teacher and learners. Allow teacher and learner to participate widely and to exchange experience and materials in peer groups. Provides access to more source of information and assistance, on topics from the specific to more general educational topics.

Requires an adequate infrastructure (electricity, telecommunication), affordable prices, supportive policy framework and investment of resources.

2.3.7 Poster - an artistic composition of materials pasted on a surface - conveys an idea or theme. Materials may be pictures and text from magazines and newspapers, graphic images, construction paper, tissue paper, poster board, original drawings/objects.

2.3.8 Demonstration - a presentation of "how to" do something, using visual aids and props, and having a finished product to display. Demonstrations allow the students to learn a new skill, reinforce the skill, and gain confidence and communication skills in speaking in front of a group. Demonstrations are the best presentation method to begin with since having something to do with their hands takes a lot of the "stress" out of speaking in front of a group. If the finished product takes longer to

make than the allotted demonstration time, as with baking bread, the member should bring a finished product to display.

2.3.9 Speech - a prepared speech that has been rehearsed, or one that is spontaneous. One of the most important skills as youth enter the workforce, is the ability to speak in public. Each time a member speaks in front of a group, the easier it gets. Learners may want to have members stand to answer the roll and have them share something verbally with the group. As preparation to giving a "formal" prepared speech, learners may want to have fun with extemporaneous speeches - prepare fun/silly topics and have members pull them randomly from a hat or other object. Explain that they can speak up to two minutes on the topic. Laughter can take a lot of the stress out of speaking in front of the group. Students might also put the group in a circle, have one member begin speaking on a particular topic, then pass an object to another member to continue the story. Be sure everyone has a chance to participate, and keep the activity light and upbeat.

2.3.10 Field trip or Tour - An excellent way to reinforce topics discussed in the class. This is also a good way to get more group involved by helping make arrangements, provide transportation, etc.

2.3.11 Simulations, Games - a good method for problem solving. Real life situations are presented through simulations or games where participants must make decisions.

2.3.12 Role playing - participants act out real life situations in front of the group. They are given a situation and individual roles, but there is no script. 4-H'ers create the way each character will act. The entire group in relation to the situation then discusses the performance.

2.3.13 Workshops - an opportunity for the leader, club member, or invited guest to show the steps in doing something, and have the rest of the group perform the task with guidance. A workshop gives more time for hands-on learning and opportunities for immediate feedback.

2.3.14 Exchanges - club members and leaders host and/or visit other clubs in the county, in other counties, other states, and even other countries. An excellent way to learn about others, create new friendships, share experiences, increase coping skills in facing unfamiliar situations, and develop leadership and communication skills.

This peer feedback process is intended for use by individuals wanting to learn more about their teaching and learning process. It is voluntary and is initiated by the staff member seeking feedback. It can be used to

- focus on teaching in one or more units or courses at an undergraduate or postgraduate level,
- assist the teacher to review the overall quality of their teaching.

This instrument is provided as a guide and it may be modified to best suit the needs of the learner and the teacher. Academics may wish to include peer feedback in their teaching portfolios (however it is not compulsory).

2.4 Prospective of Audio-Visual Aids in Clinical Teaching

Furthermore, researcher suggests that people learn and retain 20% of what they hear, 30% of what they see, 50% of what they see and hear, 70% of what they say, and 90% of what they experience directly or practice doing. This concept is very much in keeping with an old Chinese proverb, which nicely summaries the difference between traditional subject-oriented education and the project-oriented educational model of problem based learning:

*Tell me and I will forget
Show me and I will remember
Involve me and I will understand
Step back and I will act.*

In problem based learning, the learning process is based on a real life problem, such as the workplace or research setting. Problem based learning gives the students the responsibility and opportunity to identify what kind of information they need and how to combine facts and knowledge from different areas in order to find out how problems can be solved. In problem based learning students learn to be and become self-evaluating. All of these abilities are key skills for their future working lives.



2.5. Exercise

2.5.1 Multiple choice questions

Answer the correct one from the following:

1. Video conferencing can bring together teachers, tutors and learners in one-----
 - a. place
 - b. event
 - c. systems
 - d. consultation.
2. Demonstration is a presentation of "how to" do, -
 - a. make a class
 - b. explore the issues
 - c. something
 - d. a guidance.

2.5.2 Fill in the blank

- a. Physical examination skills is acomponent of health education.
- b. Television can reach a audience of learner and the community.
- c. Poster is an artistic composition of pasted on surface.
- d. Learning subject knowledge is not sufficient for challenges of tomorrow

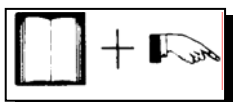
2.5.3. Short and broad questions

1. Briefly, describe on physical examination methods.
2. What is brainstorming?
3. Describe about the demonstration.
4. What are the advantages of computer based learning?

Unit 3: Planning Experience of Rotation Plan

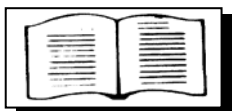
Assignment 1: Planning

1.1. Learning Objectives



On completion of this assignment you will be able to-

- explain planning
- describe importance of planning
- discuss about the planning cycle
- describe time frame of planning.



1.2. Planning Concept

Planning is something that is not entirely a new concept. However, progress in science and technology has opened new dimensions in the field of planning.

Planning is a decision making process; but not all decisions making is planning. Planning in fact is making current decisions in the light of their future effects.

Planning can be defined as the process of deciding how the future should be better than the present, what changes are necessary to make these improvements and how the changes should be implemented.

1.3. Planning Cycle

A plan is essentially today's design for tomorrow's action, an outline of the steps to be taken some future period. A health plan should specify at least the policies, objectives and targets, strategies, programmes and activities, resources and organizations.

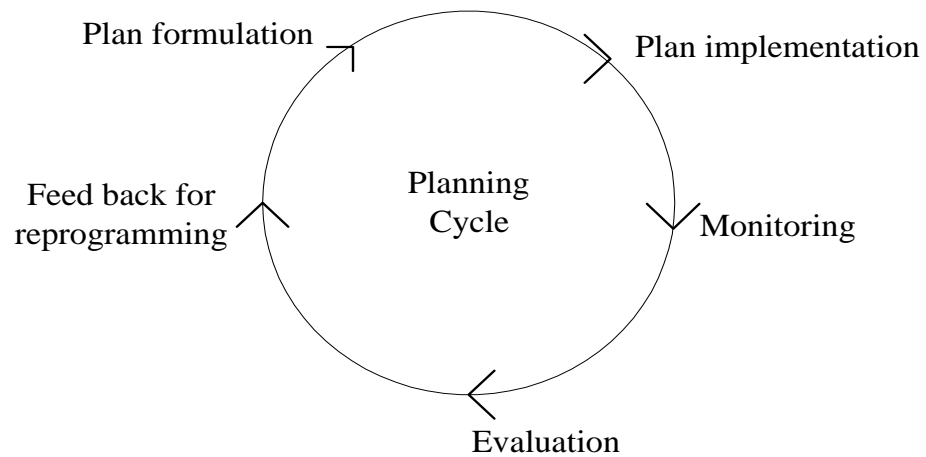


Fig. 1: Planning cycle.

Plan Formulation

Preparing a schedule of performance. Plan formulation is an important steps in the planning process. In order to avoid difficulties at some later stage of the planning process.

Plan Implementation

Plan implementation is putting a program into action: doing the work. It is a continuous process and has three inter related aspects:

- Starting up of activities
- Program operations
- Monitoring

Monitoring

Monitoring is a systematic and disciplined process of observation to see the progress and standard of an activity or program.

Evaluation

A judgement of value, based on observation or measurement of performance, the extent to which has been efficient.

Feedback

The flow of information back from one stage in a cycle or process or system to a preceding stage, as a basis for further development.

1.4. Objectives of Planning/ Importance of Planning

- Plan must be formulated based on the objectives.
- To perform activities systematically.
- To provide for integration and co-ordination of activities.
- To provide consistency of the performance.
- Planning helps to perform and evaluate own activities.
- Planning helps of perform work timely and economically.

1.5. Time Frame, Levels and Approaches to Planning

This is a period of plan during which intervention measures will be applied to achieve the desired objectives or targets.

There are three types of planning:

- i. Long Term Planning: This is also called perspective planning and usually covers several years (15-20 years). It deals with subjects or areas, which generally take long time.
- ii. Meddile-Term Planning: The duration of this type of planning also called strategic planning, usually varies from 4 to 6 years. This usually corresponds to the cycle of the socio-economic development plan of the country.
- iii. Short Term Planning: This term also called tactical planning, this usually covers 1-2 years.

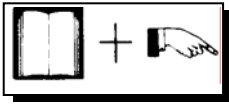


1.6. Activity

A road traffic accident patient, aged 10 years, is brought to the emergency ward. He has broken his left leg. He complains to on duty nurse that he cannot moue his leg properly, feels pain and thirsty. According to this patients problems try to prepare a nursing care plan.

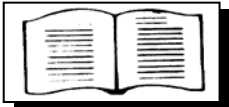
Assignment 2: Time Management

2.1. Learning Objectives



On completion of this assignment you will be able to-

- state the meaning of time management
- explain the importance of time management in nursing
- list the principles of time management
- develop tools of time management
- able to prepare time schedule.



2.2. Meaning of Time Management

In the hospital setting, nurses in clinical area will often have to work all shifts. There are usually 3 shifts over 24 hours period.

During shifting hours, the nurses need to control their own work. The nurses have to manage their time according to tasks, and responsibilities and plan their work routine accordingly.

Effective time management is therefore necessary for professional staff and all categories of personnel.

2.3. Importance of Time Management

Time can be described as a kind of resource like logistics, human resource etc. and it has to be dealt with in a proper planned way for cost effectively management. This will then ensure quality within the time frame given for certain activities.

Planning and proper use of time and concentrating on resources is essential for nurse managers at every level.

In any nursing position it is unlikely that all the tasks will be easily contained within a working day or working week.

It is essential to prioritize the tasks in order to make sure that most of the important tasks are accomplished.

Various aspects of time management such as planning of time, delegation of tasks, use of management tools and managing interruptions are important to ensure an effective time management.

2.4. Principles of Time Managements

Plan the work as much as possible: Routine work can easily be planned beforehand while other important tasks may need to be prioritized to get it done.

Delegate effectively: To ensure effective work output, some tasks can easily be delegated to your subordinate ensuring proper assessment. Delegation means you have to trust the person to whom you delegate responsibility and authority.

Exercise Self Discipline in Work: Work should be planned to ensure time is utilized properly.

Make Good use of Time Management Tools: e.g. Calendar, diaries, work plan, wall planner, which help to organize and manage working time work plan or calendar can be useful tools to get the overall view both for the daily plan, weekly plan, etc. Then it will be easier to find time for any emergency.

2.5. Tools for Time Management

Use of time management tools such as “to do” list and monthly/weekly plans is convenient and practical. “What to do list” can be easily prepared either on a daily, weekly or monthly basis.

A diary can be used to keep a note appointments, but this will only be useful when nurse use it on a regular basis.

Examples of different planners

2.6. Design: I Daily Planner

Time	What to do
7 AM	
8 AM	
9 AM	
Continue	

Design- 2: Weekly Planner

Time	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday
07.00						
08.00						
09.00						
10.00						
11.00						
Continue						

2.8. Design 3: Monthly Planner

Date/day	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday
	1	2	3	4	5	6
	7	8	9	10	11	12
	13	Continue				

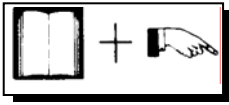


2.9. Activity

In your hospital, 6 senior staff nurses are newly appointed. Need to distribute them in different department or ward. In this circumstances prepare a weekly planner for them.

Assignment 3: Master Plan

3.1. Learning Objectives



On completion of this assignment you will be able to-

- explain master plan
- describe purposes, principles and factors of master plan
- able to prepare a master plan.



3.2. Concept of Master Plan

A master plan is a detailed plan that will make a complicated project successful.

Master plan is a written document of time and work schedule for the personnel of an organization to achieve desired goal or objectives.

After broad programming and programme budgeting a document called “master plan of action” is prepared and submitted to the government for acceptance or modification.

It is useful to prepare rough timetables and refine them progressively with the implementation of the plan.

It is important to know that the distribution of manpower and work in various aspects to perform the work smoothly.

3.3. Purposes of Master Plan

- Determine the functions of each level.
- Development of co-operative attitudes among the personnel.
- Duplication and overlapping function can be avoided.
- Master plan is useful to establish self-confidence.
- Channel of communication is clear.
- Master plan helps in training and education.

3.4. Principles of Master Plan

- Master plan should be designed on long term and short term objectives.
- Master plan focuses the work schedule as a whole group of personnel.
- Locates all levels of member of the team.

Planning Experience Rotation Plan

- Master plan is brief, concise and self-explanatory.
- It is easily understandable and changeable.

3.5. Factors Responsible for Master Plan

- The national health policy.
- Legislation and managerial mechanism.
- The strategies and the countrywide program.
- Intersectoral actions
- Budget
- Organizational responsibilities.

3.6. Design: Example: Master plan of fourth year student are shown bellow

Orthopedics Group

1	2	3	4	5	6	7	8	9	10	11	12
B ₁	B ₁	B ₁	B ₁	C	C	C	B ₂	B ₂	C	C	C

13	14	15	16	17	18	19	20	21	22	23	24
C	C	AL	B ₃	B ₃	C	C	C	C	C	C	C

25	26	27	28	29	30	31	32	33	34	35	36
C	B ₄	B ₄	AL	C	C	C	C	B ₅	B ₅	C	C

37	38	39	40	41	42	43	44	45	46	47	48
C	C	AL	B ₆	B ₆	C	C	C	C	B ₇	B ₇	C

49	50	51	52
C	C	C	AL

B = Theory Blocks

C = Clinical Placement

AL = Annual Leave

3.7. Distribution of Hours

17 weeks theory blocks = 510 hours

1 study day per week during clinical placement = 140 hours

Total theory time = 650 hours.

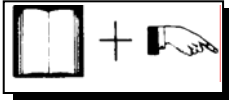
Total time spent in clinical placement = 700 hours (31 weeks- statutory holidays and other days off = 28 weeks).



3.8. Activity

In your institution some 4th year students are admitted for Diploma in Midwifery group. A master plan for them is needed to be prepared. With the help of above this information and designed master plan, prepare a master plan for these students.

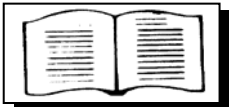
Assignment 4: Making a Rotation Plan for Group of Students in Medical Surgical Ward



4.1. Learning Objectives

On completion of this assignment you will be able to-

- explain rotation plan
- describe the importance of rotation plan
- able to prepare a rotation plan by self.



4.2. Rotation Plan

Rotation plan is a cyclical change of the personnel according to time schedule in the clinical area.

It helps to provide clinical areas for student nurses to relate the theoretical knowledge into practice.

Relation plan also helps to maintain co-operation with hospital administration and other hospital services to provide facilities and to ensure environment conducive to optimal care of the patients.

4.3. Importance of Rotation Plan

- Opportunities for learning experience.
- Avoid conflict and overlapping.
- Facilities for co-operation and co-ordination.
- Delegate task easily for effective work output.
- Provide individualized nursing care for each unit.
- Equal distribution of the personnel according to the needs.
- Work should be planned as much as possible to ensure time is utilized properly.

4.4. Planning the work of the Ward Staff

- Planning work for each shift on duty.
- Planning duty roster for ward staff.

4.5. Planning Work for Each Shift of Duty

The nurse in-charge should be ready with her prepared work plan when the ward staff and students come on duty.

In making a work plan following things to be considered-

- a) Study the roster
- b) Consider the ward situation regard to
 - i. Patient care
 - ii. Operations
 - iii. Admissions.
- c) The nurse in-charge should give each of the nurse a reasonable allocation of patients and work

Senior student nurses should have responsibility for one or more junior student nurses and all should work together as much as possible.

4.6. Planning Duty Roster for Ward Staff

In each ward or department of the hospital there should be basic pattern for the on-duty roster. After this, depending on the number of nurses, both student and staff, variation can be made (See Fig. 1).

- i. Write down the names of the nurses on the duty roster.
- ii. Write down according to their year in training or set.
- iii. Use numbers for easy reference.

There may be some invariables (e.g. study days). In this list, 4th year student and 2nd year student nurses have study days on Saturday and Sunday, 3rd year students have study days on Mondays and Tuesdays, first year students have Wednesdays and Thursdays.

4.7. The Design

A sample of student nurses rotation plan diagram for medical-surgical ward is shown below-

Name	S	S	M	T	W	T	F
4 th Year I	SD	SD	M	A	M	A	D/O
II	SD	SD	M	D/O	A	M	A
III	SD	SD	N	N	N	N	N/O
3 rd Year I	M	A	SD	SD	M	D/O	M

Planning Experience Rotation Plan

II	N	N	SD	SD	N/O	N	N
III	A	M	SD	SD	D/O	A	M
2 nd Year I	SD	SD	N	N	N	N/O	N
II	SD	SD	M	D/O	A	M	A
III	SD	SD	A	M	D/O	A	M
1 st Year I	A	M	D/O	M	SD	SD	M
II	M	D/O	A	M	SD	SD	A
III	N	N	M	A	SD	SD	D/O
Number on duty morning	2	2	4	3	2	3	4
Number on duty afternoon	2	1	2	2	2	2	2
Number on duty night	2	2	2	2	2	2	2

Key:

N – Night duty

N/O – Night off

M – Morning duty

A – Afternoon duty

SD – Study day

D/O - Day off



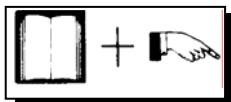
4.8. Activity

In your ward some student nurses are placed for clinical practice. The students are 4th year 10, 3rd year- 10, 2nd year 6 and 1st year- 6 in number. Now make a rotation plan for these student nurses.

Unit 4: Audio-Visual Aids

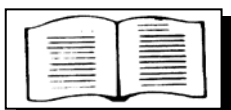
Assignment 1: Preparation of Audio-Visual Aids for Post Natal Mothers

1.1. Learning Objectives



On completion of this assignment you will be able to-

- what is audio-visual aids
- what is health education
- what is family planning
- who are the post-natal mothers
- what aids you can use for them.



1.2. What is Audio-Visual Aids?

Audio-visual aids are the part of health communication materials made of either by objects, print, talks or shows—those can be shown or broadcast through direct or indirect methods to a big audience.

In another terminological one called it IEC (Information Education and Communication) aids.

Audio-visual aids can be of many types, based on suitability of the audience or target population as per following:

Table: List of Audio-Visual Aids

Mode	Process
1. Interpersonal communication	a. Home visits
	b. Flip charts
	c. Counseling
	d. Models and exhibitions
2. Community based media	a. Public meeting
	b. Group discussion
	c. Folk theatre
	d. Slide shows
	e. Video forum
	f. Bulletin board
	g. Publications and pamphlets

-
- | | |
|---------------|-----------------------------|
| 3. Mass media | a. Television |
| | b. Radio |
| | c. Audio cassettes |
| | d. Bill boards |
| | e. Posters |
| | f. Newspapers and magazines |
| | g. Cartoons and conies |
-

If you analyze the list carefully, you will realize that some of them are methods, some are medias and few are method and media both. However, whatever may be your previous understanding try to co-opt all those in minds that all are used for health education, motivation and awareness and development.

1.3. What is Health Education?

First, we have to know what is education. Education is a process, the chief goal of which is to bring about changes in human behavior.

The term 'behaviour' is education in the broad sense and includes thinking, feeling and acting.

Is short, health education is the knowledge concerns for improvement of health.

By definition, health education is defined as the process by which one enables any individual or group of individuals to realize the health needs and match them which necessary health related behavior for the attainment of positive health.

1.4. What is Family Planning?

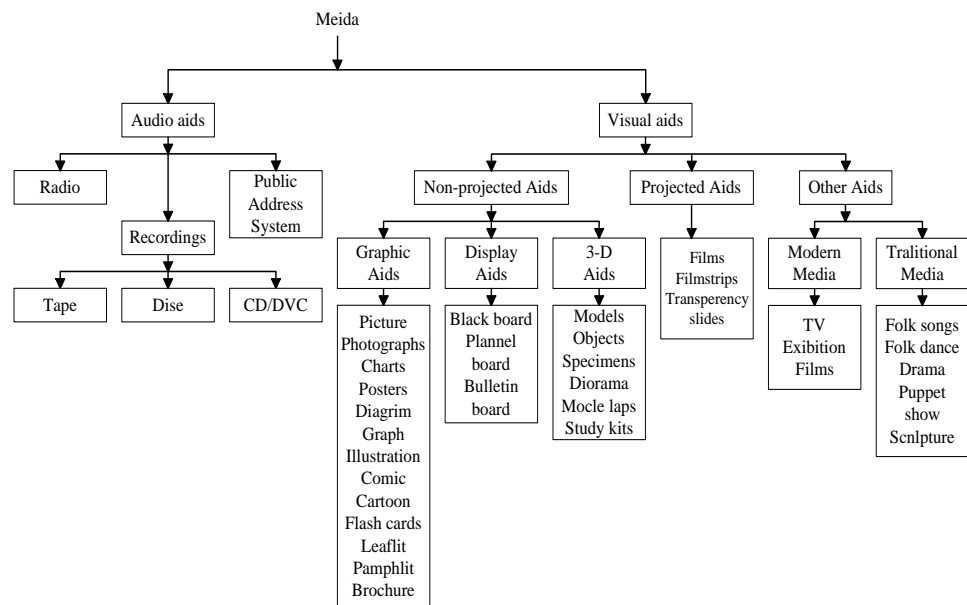
Family planning (FP) is a multipurpose broad based comprehensive program that help individuals or compels to avoid unwanted births, to bring wanted births, to regulate the intervals between pregnancies, to control time at which births occur in relation to the ages of the parent and to determine the number of children in the family.

Components of family planning are:

1. Ante-natal care (ANC)
2. Delivery care (NC)

3. Post-natal care (PNC)
4. MR and post-abortion care
5. Clinical contraception
6. Non-clinical contraception
7. Management of contraception side-effects or complication
8. Adolescent health etc.

A simple chart of audio visual aids



1.5. Post-natal and Related Terms

Natal means delivery of baby. Postnatal means the specified period after giving delivery or birth of a baby. This period are described by two ways-

A. By defining the mother

- Puerperal period (up to 3 week after delivery)
- Postnatal period (up to 6 week after delivery)

B. By defining the child

- Prenatal period (up to first days of the baby)
- Neonatal period (up to first 28 days of the baby)

Common Complication of this Period

- a. Puerperal sepsis

Audio-Visual Aids

- b. Thrombo-phlebitis
- c. Secondary hemorrhage
- d. UTI and
- e. Mastitis.

Health Education Needed in this Period

- a. Personal and environmental hygiene
- b. Mother feeding
- c. Infant feeding
- d. Birth spacing
- e. Birth registration and
- f. Importance of health check-up

1.6. What Aids you can use for the Post-natal Mother?

Please revise the audio-visual aids table and chooses the appropriate method and media; those can be used for postnatal mothers.

In our suggestion, you can list them as follows:

1. Home visit (where you can use the AV Aids)
2. Flip chart
3. Counseling (also here, you can use AV Aids)
4. Pamphlet
5. Audio-cassettes
6. Posters
7. Magazines etc.

Please remember that, audio visual aids selection is always depends on the recipients' education, socio-economic condition and acceptability. You should not choose the above list through and through, rather you can simplify it or rearrange it as per the situation demands.

In last semester, we described the “home visit” in detail; we will not discuss those here again. The others will be described in next chapters.



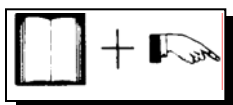
1.7. Exercise

1.7.1. Short questions

1. What is audio visual aids, health education and family planning?
2. Classify audio-visual aids.
3. What are the components of family planning?

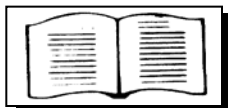
Assignment 2: Audio-Visual Tools and Techniques

2.1. Learning Objectives



On completion of this assignment you will be able to-

- understand practical tips on preparation of AV aids
- learn better presentation of preparation of audio-visual aids
- develop your ability of performance.



2.2. Introduction

Community health education is an important part of primary health care. Learning about how illnesses such as diarrhoea are caused and what can be done to prevent them can help to improve community health. Community health education should build on local beliefs and practices, and should use teaching methods and techniques, which are culturally appropriate and relevant.

Many health workers do not have training in teaching techniques, nor in how to make and use basic educational aids. This Health Education supplement is intended to help those who may be responsible for initiating health education with the community, by providing some examples of ideas about ways to teach and how to make simple teaching aids.

2.3. Learning by Doing

The best way to learn is to be actively involved.

Books and manuals are valuable, but their use is limited in communities where few people can read and write. Long talks without illustrations can be dull to listen to.

Practical activities may be more appropriate ways of teaching and learning. Good health education helps people to work out solutions for themselves.

How to make an easel by local materials?

You will need:

- Three long tree branches
- String

Tie the branches together at the top, and allow them to splay outwards. Boards may be rested on protruding twigs.



Effective teaching aids need not be elaborate or expensive. Many of them can easily be made from local materials at little or no cost, with the participation of local people.

Making teaching aids is often part of the learning process, and should be included in the dialogue between the health worker and the community.

It is important to remember, however, that all teaching aids should be carefully tested to make sure that the message they are intended to convey is well understood and accepted. If people are not used to learning from pictures, another way should be found to help them understand basic health messages. Images or activities that are not culturally acceptable may do more harm than good.

The best way to ensure that they are appropriate is to involve members of the community in making them.

2.4. Practical Tips

Using pictures: Visual images can be a very useful way of conveying health messages. Existing materials, such as newsletters, or flip chart can be used to make posters or wall charts, and may be adapted for local use.

Walls can be made into billboards for display. For small groups, a simple easel can be made to carry a blackboard, flipchart or flannel board.

2.5. How to make your presentation as good as possible?

1. Plan your presentation
2. Rehearse and pre-test the presentation, preferably with a critical audience
3. Use only large, clear pictures
4. Do not crowd the board with too many pictures
5. Lean the board slightly backwards so that the pictures stick well
6. Remember to stand beside the board, not in front of it!

If possible, roughen the surface of the board before painting the first coat. Allow drying, roughening the surface again, and applying a second coat of paint. When the paint is dry, rub the board with a cloth covered in chalk dust. This will make it easier to rub out chalk marks later.

How to make a chalkboard?

You will need:

- a sheet of plywood or fiberboard (about 55 x 57 cm)
- matt black paint.



2.6. Making Posters

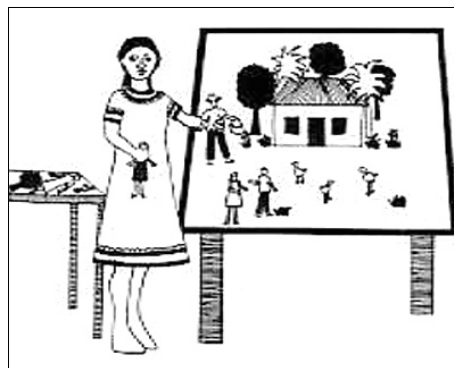
Posters can convey a single, simple message very strongly. They can be displayed in health centers, clinics, schools, or in public places.

Points to bear in mind when designing a poster are:

- Choose large, clear images
- Avoid too much unnecessary detail or background
- Include only the relevant details which are essential to the message
- Avoid complex ideas which are hard to represent visually
- Avoid the use of objects shown larger than they really are within a picture-this may be misleading
- Do not use technical drawings.

Select colours, where used, with care, so that they fit in with the message, make people want to look at the poster, and are culturally acceptable.

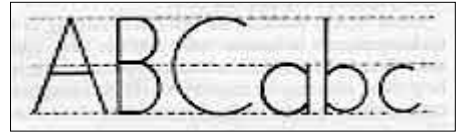
Different cultural groups will respond to different types of visual image. In some countries photographs are familiar, in others it may be better to use outline drawings. Careful use of colour is important because, although it can help make a poster more attractive and effective, certain colours have significance in themselves, which may undermine the message of the poster.



Using words

It is important that any writing used is clear and easy to read:

- Make the letters big enough to be easily seen
- Keep the style of the letters simple-printed capitals are usually best
- Leave enough space between words and lines
- Be sure that the contrast between the colour of the background and of the letters is clear so that they are easy to see.



Where it is appropriate to use written materials for health education, try to choose or make those, which are as clear as possible. Written materials should be:

- Attractive
- Easy to read
- With plenty of space and pictures
- Broken into short sections
- As short as possible, with the most important points at the beginning
- Written with the shortest and simplest words possible.

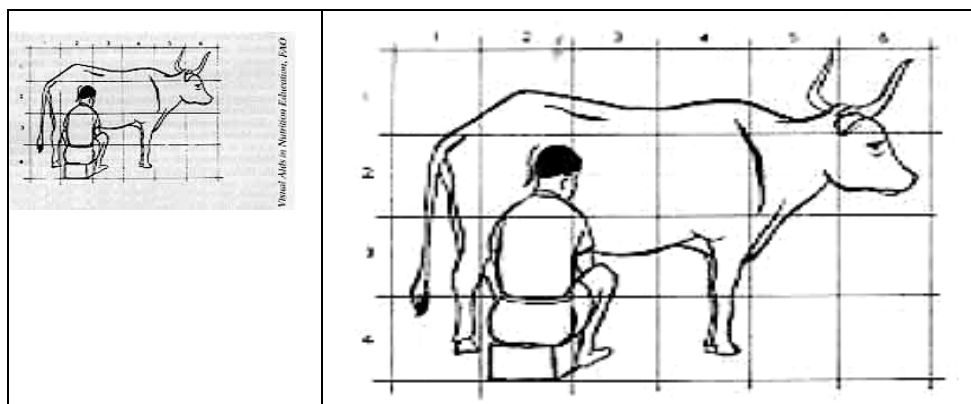
Point to remember: Use a simple lettering style (see example above).

Copying and Adapting Pictures

When you have chosen your picture, you can copy it following the method below. Draw a grid of equal sized squares over the picture using a soft pencil. On a blank piece of paper to be used for the poster, draw a plain grid with the same number of squares.

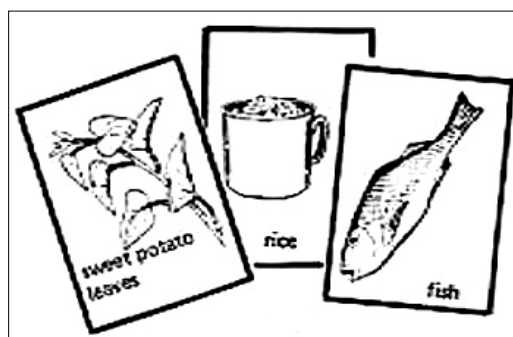
Copy the picture square by square in pencil.

To make a copy the same size as the original, use squares of the same size. To make the copy bigger, use bigger squares.



2.7. Games

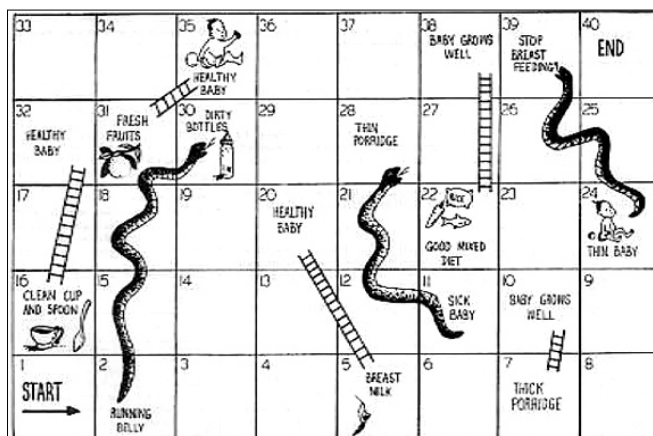
Another way of using visual images is with games. These could be either board games, such as 'snakes and ladders', or picture card games. Games are a good way to involve people in active learning, which is always the most effective kind.



The card game is suitable for older children or adults, and can be used to test what knowledge has been gained, for example after a class, which used flannel board or chalkboard with discussion or role playing. People can always be involved in making up their own games - they can make the rules, or just the cards and boards, for example.

This can be made from an old glove or sock, with an egg or stuffed ball for the head. Using drama, song and storytelling. Drama can be entertaining and educational.

Everyone in the community can learn from dramas or performances of song and dance. Popular songs and drama, which may be broadcast through mass media, i.e., radio and television, such as “Sabuj Chhata”, can also be used to reach the

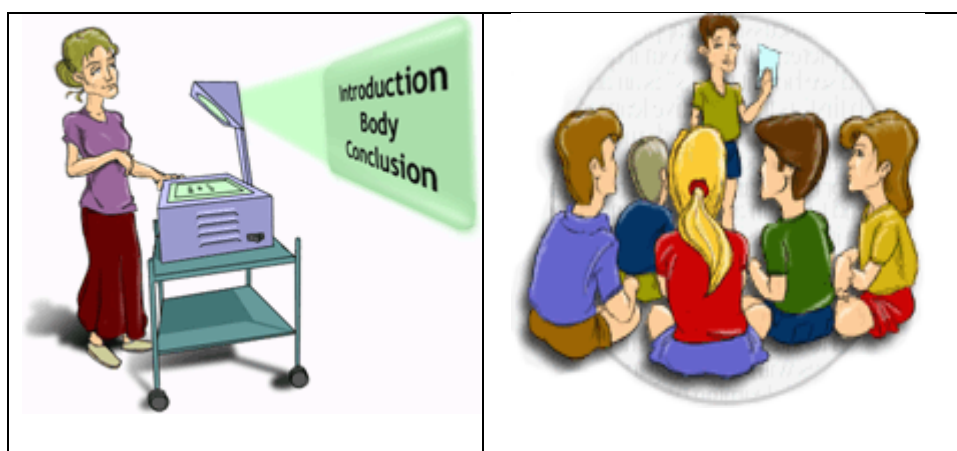


general public.

Structure your presentation according to the guidelines, facilities and time allocated. You must leave your audience with a sense that they have been given a well-structured and organized presentation.

2.8. Speaking in Public

While it is one of the most daunting tasks for some people, speaking in public is a necessary part of community mobilization. You will often be asked to explain and justify your ideas in demonstration and or discussion seminars.



This lesson looks at what makes for a successful oral presentation and arrives at a checklist which will help you deliver successful, entertaining and informative.

Think back to the best speeches, lectures or presentations that you have ever seen. Enter in the space below, the things, which made those presentations successful.

Yours' Criteria

Here are the criteria for successful oral presentations that you can follow in any demonstration or motivational session. Do some of your criteria appear in this list? Please check yours one with the following:

- | | | |
|-------------------------|---|---|
| 1. Entertaining | √ | × |
| 2. Relevant and useful | √ | × |
| 3. Knowledge | √ | × |
| 4. Involve the audience | √ | × |

Audio-Visual Aids

5. Well organized	√	×
6. Easy to understand	√	×
7. Confident	√	×

Content Knowledge

One of the best ways to overcome the nervousness of speaking publicly is to thoroughly know your topic. After all, this is primarily what your lecturer or tutor will be looking for. You will have to know your topic well enough to inform, debate, instruct or present an opinion - whatever the purpose of your presentation is.

For public presentations you will also have to allow for practice at delivering and demonstrating your content knowledge.



Audience Involvement

By slowly moving your eyes over members of the audience in your front, you will see a range of hints as to how audience involvement can be encouraged.

When should you try and get your audience involved?

Right from the start!

Why not ask your audience what they already know about your topic and use this as a starting point? This way you will be tapping into the prior knowledge of the audience and you will be giving them a sense of involvement from the outset.



2.9. Exercise

2.9.1. Short questions

1. Why learning by doing method is more suitable?
2. How to make your presentation better?
3. What are the important points to be remembered for making a poster?
4. How do you prepare yourself for public speaking?

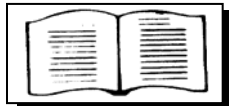
Assignment 3: Audio-Visual Aids for Diarrhoea Control

3.1. Learning Objectives



On completion of this assignment you will be able to-

- understand how to make audio-visual messages
- understand main points of persistent diarrhoea and making audio-visual aids for it.



3.2. Introduction

Before preparing audio-visual aids, we have to learn first the basics cause of deaths and sufferings from diarrhoea.

What are the types of diarrhoea?

- Acute
- Chronic
- Persistent

There are many classification based on different scales, such as, germ or food intake, stooling amount, with or without vomiting and fever, water loss and so on. Here we consider main three types by onset or symptoms.

Acute diarrhoea: it is the diarrhoea that starts very quickly and weaken the baby rapidly. Severe fluid loss can even cause death or severe complication like ARF etc. Assessment should be done quickly and rehydration therapy should start as early as possible.

Chronic diarrhoea: when diarrhoea grows slowly or persists for long time it may consider as chronic diarrhoea.

Persistent diarrhoea: when diarrhoea remains for more than two weeks we consider it as a case of persistent diarrhoea.

In case of providing health education we will not show you the AV Aids for all types of diarrhoea, but for theoretical detail, we will discuss one only. Because, most of you know the basics of diarrhoea and its management and can easily follow this methods for also too!

3.3. Persistent Diarrhoea

Persistent diarrhoea is becoming recognized as an important child health problem in developing countries, although its control and prevention have received less attention than acute diarrhoea.

Persistent diarrhoea is an important cause of illness and death in children in developing countries. Moreover, as acute diarrhoea is more widely and successfully treated with oral rehydration therapy (ORT), the proportion of diarrhoea deaths associated with persistent diarrhoea will probably increase.

3.3.1. What is Persistent Diarrhoea?

Acute and persistent diarrhoea are not two separate diseases but form a continuum. Most episodes of diarrhoea last less than one week, but a small proportion of episodes last for two or more weeks. In 1987, a meeting sponsored by WHO defined persistent diarrhoea as an episode, which starts acutely, but which lasts at least 14 days. Most investigators and programmes have adopted this definition.

3.3.2. Causes of Persistent Diarrhoea

A number of studies have tried to find out if particular pathogens are associated with persistent diarrhoea. This information could help to predict the course of the disease and help decide whether to use an antibiotic. However, most cases of persistent diarrhoea seem to be associated with the same pathogens that cause acute diarrhoea.

Four studies in India, Bangladesh and Peru found that rotavirus, *Aeromonas*, *Campylobacter*, *Shigella* and *Giardia lamblia* were equally common in acute and persistent diarrhoea. *Cryptosporidium* was more common in persistent than acute diarrhoea in Bangladesh, but the reverse was true in Peru.

Evidence from several studies suggests that the entero-adherent *Escherichia coli* (so called because of their ability to adhere to intestinal cells in tissue culture) may be particularly associated with persistent diarrhoea. However, these organisms may be responsible for only a small proportion of all episodes.

Even though most pathogens seem to be equally common at the onset of acute episodes that do or do not become persistent, different pathogens are found if cultures are taken from the same individual during the course of persistent diarrhoea. Studies in Bangladesh and Peru showed that it was not common to find the same pathogen in samples taken at different times during a persistent episode.

3.3.3. Nutritional Status

Evidence from Bangladesh, India and Brazil shows that malnutrition is strongly associated with persistent diarrhoea. Researchers have found a small increased risk of diarrhoea incidence in malnourished children, but a large increased risk of prolongation of the episode. In Bangladesh, for example among persistent diarrhoea deaths, 81 per cent were associated with malnutrition. These findings suggest that malnutrition significantly increases the risk of dying in children suffering from persistent diarrhoea.



3.3.4. Feeding Practice

Studies have shown that breastfed babies are less likely to have persistent diarrhoea. Breastfeeding shortens the duration of diarrhoeal episodes, and that lack of breastfeeding is associated with persistent diarrhoea.

Other Factors

Research is continuing on the relation of several other factors to persistent diarrhoea. These include deficiency of vitamin A, zinc, iron and other micronutrients; behaviours related to water source and use, food preparation and consumption and hygiene; presence of other diseases such as measles; suppression of immunity; and the interaction of these factors.

3.4. Set your knowledge to Prepare Audio-Visual Aids



materials that you can hand around.

Audio-visual aids can help with your presentation because they can help take the pressure off you and provide an opportunity for variety in your presentation. The use of an overhead projector for example, can not only take the focus off you but can also provide memory prompts. Other audio-visual aids you should consider using include audiocassettes, video, slides, computer presentations, flip charts or

Now we will emphasize on 'best feeding' which is one of the 'best way' to prevent persistent (and acute) diarrhoea.

3.4.1. Breastfeeding

Breastfeeding is the best way to feed a new baby: breast milk is the perfect food for babies, and breastfeeding is safer and cheaper than any milk, which can be bought. Babies fed from the breast are more likely to be healthy and free from diarrhoeal diseases.

Please follow the information to make your messages for audio visual aids preparation.

3.4.2. Why Breastfeed?

- Breast is best - nothing that money can buy is as good for a baby as breastfeeding.
- Breast milk is the best food there is for babies: it provides all the goodness and energy needed for healthy growth, and is easier for the baby to digest than any other milk.
- Breastfeeding passes on protection from mother to baby against infections; breast milk is the only milk, which contains antibodies to fight diseases such as diarrhoea (bottle-fed babies do not get this protection).
- Breastfeeding is cleaner and safer than giving milk from a bottle or other container, which can be easily contaminated with dirt and germs.
- Breast milk is much cheaper than powdered milk food - all it costs the family is the little extra food needed by the mother. Special baby foods and milk formulae are very expensive and never as good as breast milk.
- Breastfeeding does not use up valuable fuel and water resources which may have to be gathered or bought and used to boil water for bottle-feeds, and to ensure that feeding bottles and teats are sterilized.
- Breastfeeding is convenient: it can be done whenever the baby is hungry or unhappy, at any time of the day or night. Breast milk is always available at the right temperature and never goes bad.
- If a mother is breastfeeding a baby frequently by day and night, she is less likely to become pregnant again during this time.
- Breastfeeding helps to stop maternal bleeding after delivery.
- Breastfeeding helps to develop the emotional bond between mother and child.

3.4.3. Why does Breastfeeding Need to be Promoted?

Most women know that breastfeeding is the natural and best way to feed a baby, but there are many pressures on them not to breastfeed.

Traditionally, women have always breastfed: they have seen other babies' breastfed and learnt from their mothers and other women in the community. But, increasingly, women are being told that bottle-feeding is the modern way to feed a baby, and must therefore be better.

Artificial baby milks are sometimes promoted very aggressively and are even provided in hospitals. Once a mother starts to give milk formula, and stops breastfeeding, it is difficult for her to start breastfeeding again. Health workers can encourage and support mothers, providing information and practical advice about breastfeeding. This information is not new but, often, it needs to be re-learnt in modern urban communities, especially when mothers are working outside the home, when they have moved away from their extended family, or if they give birth in hospital.

3.4.4. Messages on Breastfeeding and Diarrhoea

- Babies who are exclusively breastfed are less likely to get diarrhoea, because breast milk is free from germs and contains antibodies which protect a baby from infection
- When giving oral rehydration solution or expressed breast milk germs always use a cup and spoon, never a feeding bottle.
- Bottle-fed babies are more likely to get diarrhoea. Feeding bottles are very difficult to keep clean, and dirty bottles are a major source of illness, especially diarrhoea.
- If a baby has diarrhoea, always continue breastfeeding because a baby still needs food, and especially liquids, to replace what is lost during the diarrhoea.
- When a baby has frequent diarrhoea, oral rehydration fluids may be needed as well. These should be given by cup and spoon.
- If the baby is too weak to suck at the breast, expressed breast milk can also be given by cup. Cups used to feed a baby with expressed breast milk should be carefully washed with boiled water to remove germs.

Here are some pictures you can use in poster, flip-chart or flash-card to promote breast-feeding:



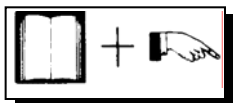
3.5. Exercise

3.5.1. Short questions

1. Prepare at least 4 messages for acute diarrhoea control and show it to your tutor for comment.
2. What you can speak on 'Diarrhoea in Bangladesh' in a 5-minute public speech arranged for village mothers. Write it and submit to your course teacher.
3. Poster, flip chart, flash card and models- which one will be more suitable for the slum-mother's gathering? Why? Mention at least five reasons.

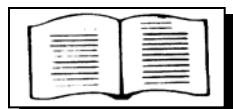
Assignment 4: Audio-Visual Techniques

4.1. Learning Objectives



On completion of this assignment you will be able to-

- advantages of different audio-visual aids
- techniques of different audio-visual methodology
- necessary points for each.



4.2. Introductions

The most used method of AV aids are chalkboard and transparencies. Let us first concentrate on it.

Chalkboard Do's

- Legible
- Preplanned
- Eye contact.

Transparency Do's

- Limited information
- Advanced preparation
- Expound, don't read.

To keep learners interested and reach audiences who process information visually, an instructor can use various audiovisual techniques. Audiovisual materials, like transparencies, can also serve as a teleprompter to give new ideas or topics. But it needs electricity and some expensive instruments.

Audiovisuals present two challenges:

1. What audiovisuals should be used? and
2. How can audiovisual tools be used effectively?

So, before choosing aids, you have to analyze your logistics capacity and suitability.

4.3. Useful Techniques

CHALKBOARDS AND OVERHEAD TRANSPARENCIES are the two most accessible audiovisual tools. Most community centres have

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chalkboard space. Departmental offices usually supply of chalk and transparency film that can be used in community center, such as THCs. Learners can see transparencies better than chalkboards in large rooms.

FLIPCHARTS OR EASELS are an under-used audiovisual support for small classes or discussion groups. Flipcharts can be prepared ahead or used to record classroom discussion and are easily referred to again. They are less formal than overheads and can be torn off and posted so that results from several discussions can be viewed at once. They are particularly useful for group discussions to the community or outdoor as a whole.

VIDEOTAPES AND FILMS are available from the collection of DGHS, DGFP, NGO or specialized service providers. While this medium can be entertaining, getting the equipment can be cumbersome, and if movies or tapes are not already available it may be too expensive to rent one.

4.4. Preparation

Since chalkboard and transparencies are the most commonly used audiovisual tools, we will briefly address tips on using these resources well.

4.4.1. Chalkboard

K.I.L.L. (Keep It Large and Legible). Audiovisual tools are of no use if all audiences can't see them. Write legibly. Test by going to the back of the room or sitting places to look.

PLAN AHEAD. When preparing a discussion or class, it is useful to plan out what you will want to write on the chalkboard. This saves time and is generally clearer for the audiences. One way to do this is to outline information that goes on the board from the previous notes or guide provided- like CDD or ARI guidelines.

MAKE EYE CONTACT FREQUENTLY. Instructor or social worker writing on the board for extended periods of time has his or her back to the audiences. This behavior can result in losing control of the group. Instructors need to regularly observe participants nonverbal behavior and use eye contact to keep them involved.

4.4.2. Overhead Transparencies

LIMIT INFORMATION ON EACH TRANSPARENCY. Since we can process no more than seven bits of information at a time, a single transparency should contain no more than four to six major points. Charts

or tables with a great deal of information should be broken into smaller pieces using an enlarging copier. Small areas should be highlighted or colored to help audiences focus their attention.

GET EQUIPMENT AND TRANSPARENCIES PREPARED? A guide/motivator using overheads should plan to arrive early enough to get the equipment set up and focus the overhead. Transparencies should be arranged in order and numbered so that there is no need to fumble with them during the presentation.

BE AWARE OF ATTENDANTS' VIEW. It can be hard to remember not to stand in front of the image and block learners' view. A transparency participants can't see is frustrating and distracting.

DON'T READ THE TRANSPARENCIES. Talk about the material using the transparency as a launching pad rather than writing out the entire thought on it and reading it to the audience. Too much information on a single transparency is distracting and, if learners can simply read it, they do not need to pay attention to the motivator.

Learners take very seriously whatever is written on the board or presented on transparencies. Be sure to allow them time to understand it all down.

4.4.3. Plan the Discussion Together

DEFINE LEARNING GOALS CONCRETELY AND CLEARLY. Decide what participants should know by the end of the session or next meeting. Frequently communicate these goals to learners.

ELICIT PARTICIPANTS' INTERESTS and difficulties at the start of the session and/or sessions and work out a joint agenda, if they demand.

DISCUSS WITH THE TARGET PEOPLE WHAT KIND OF FORMAT or formats are appropriate. Pick one or several with which they feel comfortable and that are compatible with your goals.

4.5. Focus Discussion

SET VERY SPECIFIC LEARNING GOALS and organize them in a clear sequence or agenda.

When possible, express your goals in terms of participants or common people's behavior (e.g., in an education class, the behavioral objective might be: Learners will identify the reasons why active breast feeding decreases diarrheal episodes).

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SUGGEST APPROPRIATE TIME SCHEDULES. Sometimes it is necessary to limit discussion to a certain time frame.

You can ask one of your intelligent learners to remind others of the time remaining in the discussion period (e.g., "Let's try to conclude here because we have 10 minutes left").

PROVIDE BACKGROUND INFORMATION AND RESOURCES. Before a discussion begins, participants might have questions that involve factual information. For example, participants, who are already trained *Acute Respiratory Infection* might have questions about breathing count.

ASK PLENTY OF QUESTIONS THAT FOCUS ON THE DAY'S TOPIC. Avoid open-ended questions, which may lead the discussion in other areas.

EMPHASIZE KEY POINTS in the material frequently.

Remind your audiences that you want them to pay special attention to certain aspects of the material you are covering.

RESTATE PARTICIPANTS' COMMENTS TO FOCUS THEIR CONTRIBUTIONS. (e.g., "I take you to be saying you disagree with the interpretation of breastfeeding during diarrhoea?" or "Am I right that your claim supports the no antibiotic for simple cough and cold?"). Ask for further clarification if they seem uncomfortable with your rephrasing of their views.

IF A COMMENT OR QUESTION IS SOMEWHAT OFF THE TRACK, RESPOND SELECTIVELY to that aspect of it which most fulfills the goals of the discussion.

GIVE AUDIENCES TIME TO THINK. After you ask a question, allow your listeners time to reflect on the question and formulate an answer. Don't be afraid of the few seconds of silence that may follow a question.

SUMMARIZE BOTH YOUR OWN POINTS AND THE THEMES OF THE DISCUSSION periodically--especially at the end of a meeting. Keep track.

GIVE THEM FEEDBACK. Feedback is an important element of communication. If your learner has made a good point, then praise her, if he has misunderstood the concept then you need to let him know, gently. Avoid responding with only "U-huh" or "OK" all of the time because such vague signals prevent them from judging whether their answers were wrong or right.

NOTE DOWN major points in time.

Ground Rules

In order to create an atmosphere in which all audiences feel free to participate, we will determine ground rules for discussion. We will adapt the following guidelines:

1. Create a safe atmosphere for open discussion. Thus, members of the group may wish to make comments that they do not want repeated outside the room. If so, the person will preface his or her remarks with a request and the group will agree not to repeat the remarks.
2. Assume that all participants always do the best they can.
3. Acknowledge that oppression exists.
4. Targeted groups are not to be blamed for their oppression.
5. We will actively pursue information about our own groups and those of others.
6. We will share information about our groups with other members of this group and we will never demean, devalue, or in any way "put down" people for their experiences.

We each have an obligation to actively combat the stereotypes about our own groups and other groups so that we can break down the walls, which prohibit group cooperation and group gain.

4.6. Group Discussion

Educators agree that when workers work in small groups, they tend to understand the subject matter more thoroughly. Small group work transforms the discussion into supportive learning teams; the group keeps participants energized, motivated and provides support to complete complex tasks.

Group work helps attendants explain, summarize, apply, analyze, synthesize, and evaluate an aspect of the subject matter. For example, participants may answer questions about the content, develop examples, solve problems, and summarize main points regarding diarrhoea control.

In addition, groups serve as forums where learners can personalize their learning experiences and identify and correct misconceptions and gaps in understanding.

A. Before the Group Work – Planning

PLACE Participants IN APPROPRIATE GROUPS. Keep the group small; limit it to four to five members. There are several methods to placing participants in groups.

Designate the groups yourself; for example, use 1, 2, 3 numbering system. Assess participants' personalities before you assign groups (e.g., placing two very outgoing participants in one group may be problematic.)

USE ASSIGNMENTS THAT REQUIRE GROUP INTERACTION. For example, if assignments are too easy, one member may complete it on behalf of the group.

EXPLAIN THE PURPOSE OF THE GROUP WORK. Why are you asking the participants to work together? What will they gain from the group work?

EXPLAIN THE ASSIGNMENT CLEARLY AND PROVIDE A HANDOUT, if any.

INDICATE WHAT SPECIFIC LEARNING OUTCOME YOU ARE EXPECTING FROM THE GROUP. For example, groups hand in written answers to questions, groups present an oral summary of their discussion, and groups list main arguments on an overhead transparency.

STATE A TIME LIMIT FOR THE GROUP WORK. Time allocated to group work depends on the nature of the task.

ASSIGN ROLES WITHIN THE GROUPS TO ENCOURAGE EQUAL PARTICIPATION. For example, reporter, note taker, timekeeper, and facilitator.

B. During the Group Work – Implementation

CIRCULATE AMONG THE GROUPS TO CHECK ON PARTICIPANTS PROGRESS. This gives you the opportunity to assess the extent to which they understand the material. What content is clear to them? What questions do they have?

SIT IN ON GROUP DISCUSSIONS. You can get to know your participants better by listening in on the group, asking and answering questions, providing direction and clarification, and praising them for their work. Your joining the group also can help motivate participants to complete the task in a timely fashion.

REMIND PARTICIPANTS OF THE TIME REMAINING TO COMPLETE THE TASK. Check with groups to see whether they need more time. Be flexible.

C. After the Group Work – Report and Reflection

BRING THE PARTICIPANTS TOGETHER AND ASK GROUPS TO SHARE THEIR WORK. Highlight main issues learned from the groups, possibly use the board to summarize. Provide feedback on both the content and the group process.

REFLECT ON THE GROUP WORK and participants learning and incorporate what you have learned into your planning for the next discussion.

4.7. Demonstrations

[Demonstrations can be absolute disasters. You should remember all the times that you missed a crucial piece of equipment or couldn't get the demonstration to work at all. I learned the hard way how important planning is—Gilbert]

Essential Planning Steps

Before short a session, organize yourself according to the following steps:

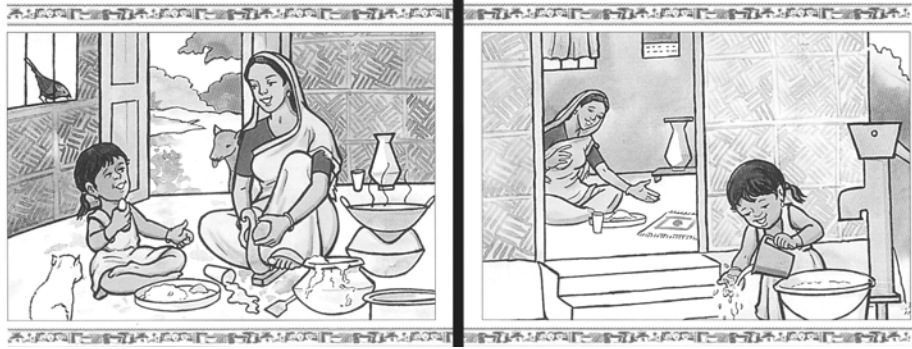
- Concept summary
- Specific example
- Steps to be followed
- Key points
- Materials list, specially (AV aids)
- Introduction
- Site preparation
- Rehearsal

Demonstrations are valuable tools for teaching both concrete techniques (skills) and abstract concepts (principles). A good demonstration permits participants to learn by observation, a skill we use innately when learning to talk, walk, and even clap our hands.

Flash Card: A good demonstration Technique for learning-

ফ্ল্যাশ কার্ডের খেলা

- এই ফ্ল্যাশ কার্ডের খেলা এবং আলোচনার মাধ্যমে জনগণকে ডায়রিয়া বিষয়ে সচেতন করুন।
- প্রতি কার্ডে দুটি ছবি আছে। দুটির মধ্যে পার্থক্য খুঁজে বের করতে বলুন। কার্ডের ছবির দিকটা যেন দর্শকের মুখোমুখি এবং প্রশ্নের দিকটি আপনার দিকে থাকে।
- প্রতি কার্ডে একটি মূল সংবাদ (লাল রং-এ) আছে। দর্শকদের এই মূল সংবাদ জানান এবং মনে রাখতে বলুন। প্রতি প্রশ্নে দর্শকদের আলোচনা করতে উৎসাহিত করুন।
- দর্শকদের সাথে আলোচনা ও খেলার আগে আপনিও একবার এই কার্ডগুলো ভালো করে দেখুন।



ছবিতে কি দেখছেন বলো ?

১

- বলো দেখি, কোন বাড়ির শিশুর হতে পারে ডায়রিয়া ?
- ডায়রিয়া হয় কেন বলো দেখি ?
- ডায়রিয়া হবেনা, এমন ৩টি উপায় বলো
 - ক) সাবান দিয়ে ভালমত হাত ধুয়ে।
 - খ) খাবার-দাবার ঢেকে রাখলে।
 - গ) সবকিছুতে পরিষ্কার পানি ব্যবহার করলে। তাই ভাল করে হাত ধুয়ে নেবে। খাবার-দাবার ঢেকে রাখবে এবং পরিষ্কার পানি ব্যবহার করবে।

**রোগবালাই থেকে দূরে থাকাই
বুদ্ধিমানের কাজ।**

For a demonstration to be effective, advance planning is essential.

SUMMARIZE THE CONCEPT OR STATE THE TECHNIQUE to be demonstrated in a few words.

Reading about the concept or talking your ideas over with peers may help increase your own understanding of the concept.

DETERMINE A SPECIFIC EXAMPLE OF THE CONCEPT OR TECHNIQUE that can be easily demonstrated.

Remember every concept has a referent; however, if you cannot think of a good example, perhaps a demonstration is not appropriate.

LIST THE STEPS TO BE FOLLOWED during the demonstration in their correct order. List the key points to be emphasized.

LIST ALL MATERIALS AND EQUIPMENT. List any visual aids, such as graphs, drawings, visual aids, models, etc., that are needed.

INTRODUCE THE DEMONSTRATION. The introduction should: (1) relate the new concept or principle to the participants' previous knowledge or experience, (2) arouse curiosity, (3) give background information, and (4) define new terms. Once plans are complete, preparations need to be made for the demonstration.

PREPARE THE TEACHING AIDS listed in the plans.

ASSEMBLE ALL NECESSARY MATERIALS AND EQUIPMENT.

PREPARE THE PHYSICAL SETTING in which the demonstration will be conducted so that each participants will be able to see and hear comfortably. A subtle technique may need to be presented several times to small groups.

PRACTICE OR REHEARSE THE PRESENTATION. To improve the performance, it is often helpful to ask a fellow to observe the demonstration, or at least the demonstration rehearsal.

Plan Sheet/Check List

Introduction	Method:	Terms:
1. _____	2. _____	3. _____
4. _____	5. _____	6. _____
7. _____		

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Materials Needed:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____

Feedback

By norms, it should be done after any session. Unless you practice it in regular fashion, it is not unlikely to forget.



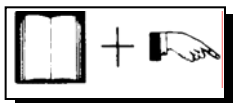
4.8. Exercise

3.5.1. Short questions

1. Where you can use chalkboard and where overhead transparency?
2. Why focus discussion is effective for active learning? Give reasons.
3. What do you mean by ground rules? Mention five ground rules for focus group discussion?
4. Why planning is important for any motivational or learning session? Discuss.

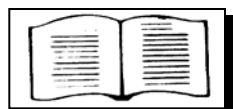
Assignment 5: Using Visual Aids Effectively

5.1. learning Objectives



On completion of this assignment you will be able to-

- learn importance of visual aids presentation
- use OHP, flip chart and posters, videotape, handout, microphone etc.



5.2. Introduction

The key to a strong presentation isn't the equipment you use. You should be able to do your presentation on a blank stage, with no props, and have it work on its own. The whole idea of visual aids is to enhance your presentation, not to be the purpose of it.

The absolutely worst presenters are those who use the equipment as a crutch. For example, those who stand up before a group and just read slides during a presentation.

It is very important that you follow the rules of using visual aids in the successful presentation.

5.3. Using Overhead Projector (OPH)

Before Presentations

1. Make sure the plug reaches the socket. It is a good idea to carry an extension cord
2. Put the projector at a height that is comfortable for you.
3. Make sure the lens is dust free.
4. Put the projector on a vibration free base.
5. Arrange the electric cord so no one will trip over it.
6. Focus and center the picture on the screen beforehand.
7. Number your transparencies in accordance with your facilitator's guide.
8. Never assume projectors will work. Have a backup strategy ready.

During Presentations

1. Keep the screen above the heads of the participants.
2. Keep the screen in full view of participants.

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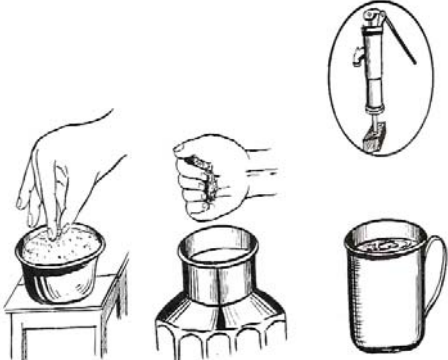
3. Make sure you are not blocking anyone's view when presenting.
4. Darken the room appropriately by blocking out sunshine and dimming nearby lights.
5. Turn the screen off between slides if you are going to talk for more than two minutes.
6. No one should be farther from the screen than six times the width of the image.
7. Talk to the audience, not to the screen.
8. Use a pointer to emphasize points, don't use it as a crutch and don't wave it wildly.

5.4. Flip Charts and Posters

Before Presentations

1. Check the height of the easel.
2. Make sure you have plenty of paper.

A Flip chart showing pictures what to do in Diarrhoea

A. What we should do?	B. How you prepare ORS?
	

During Presentations

1. Title each page with a short topic or heading.
2. Print the large block letters 1 1/4 inches high, larger if the room is deeper than 30ft.
3. Printing should be neat and legible.
4. Use different colors for page headings and primary points.

5. The color red should be used only for emphasis.
6. Do not use pastel colors. Black, blue, dark green and brown are acceptable.
7. Put marker down when you are not using it.
8. Don't talk to the board while writing on it.
9. Do not write more than ten lines on a page.
10. Do not fill the page to the bottom. People in the back will be unable to see.
11. Respond to and note input from participants.
12. Post important papers on the wall with masking tape or pins.
13. Do not write on the papers after posting on the wall. The pen may bleed.
14. Highlight key points.
15. Respond to and highlight input from participants.
16. Allow time for reading, retention and note taking.
17. Use the 'matador tear', a sharp tug at the corner, not straight down.

Other Suggestions

1. For complex pages, prepare ahead in light pencil and then trace with a marker.
2. If you travel with prepared pages, roll them up and carry them in a mailing tube.
3. Sometimes you might use two easels, one already prepared and one for extemporaneous use.

5.5. Videotapes

Before Presentations

1. Be sure the videotape is rewound and at the starting point. Do this right after you show the film.
2. Check to make sure the playback machine and the monitor are playing properly. Check this before the session so you may replace the machine if it is not working properly.
3. Check audio level and contrast.
4. Lights should be dimmed but not turned off.

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During Presentation

1. Explain what the purpose of the tape is before playing it.
2. Show interest in the tape and watch it enthusiastically.
3. Summarize the main points after you have shown the tape.

5.6. Books

1. If you are using training manuals, make sure each student has one.
2. Make sure you have a few extra books with you in case extra students arrive.
3. Make sure you frequently reference page numbers with your audience so they know where you are in the book.

5.7. Handouts

1. For visual variety provide handouts on yellow light blue paper.
2. Distribute the handouts just prior to discussing the topics.
3. Have extra handouts for unexpected participants.

5.8. Microphone

Before Presentation

1. If you are going to be moving around during your presentation make sure that a clip on (Lavalier) microphone is available.
2. The Lavalier should be attached to a jacket, lapel, collar, neckline or tie above the mid chest level, but not against the larynx or your voice will become muffled.

During Presentation

1. Speak clearly into the microphone.
2. Keep proper distance from the microphone. When using a standard podium microphone talk about six inches from the microphone.
3. Repeat questions from the audience into the microphone. This helps everyone hear the question that was asked.



5.9. Exercise

5.9. Short questions

1. Describe a overhead projector. What can make your show hazardous or unsuccessful by overhead projectors?
2. How flip chart works?
3. What point should be noted in mind for using videotape?
4. Did you ever use microphone? Write effective use of microphone before and during presentation in your own language.