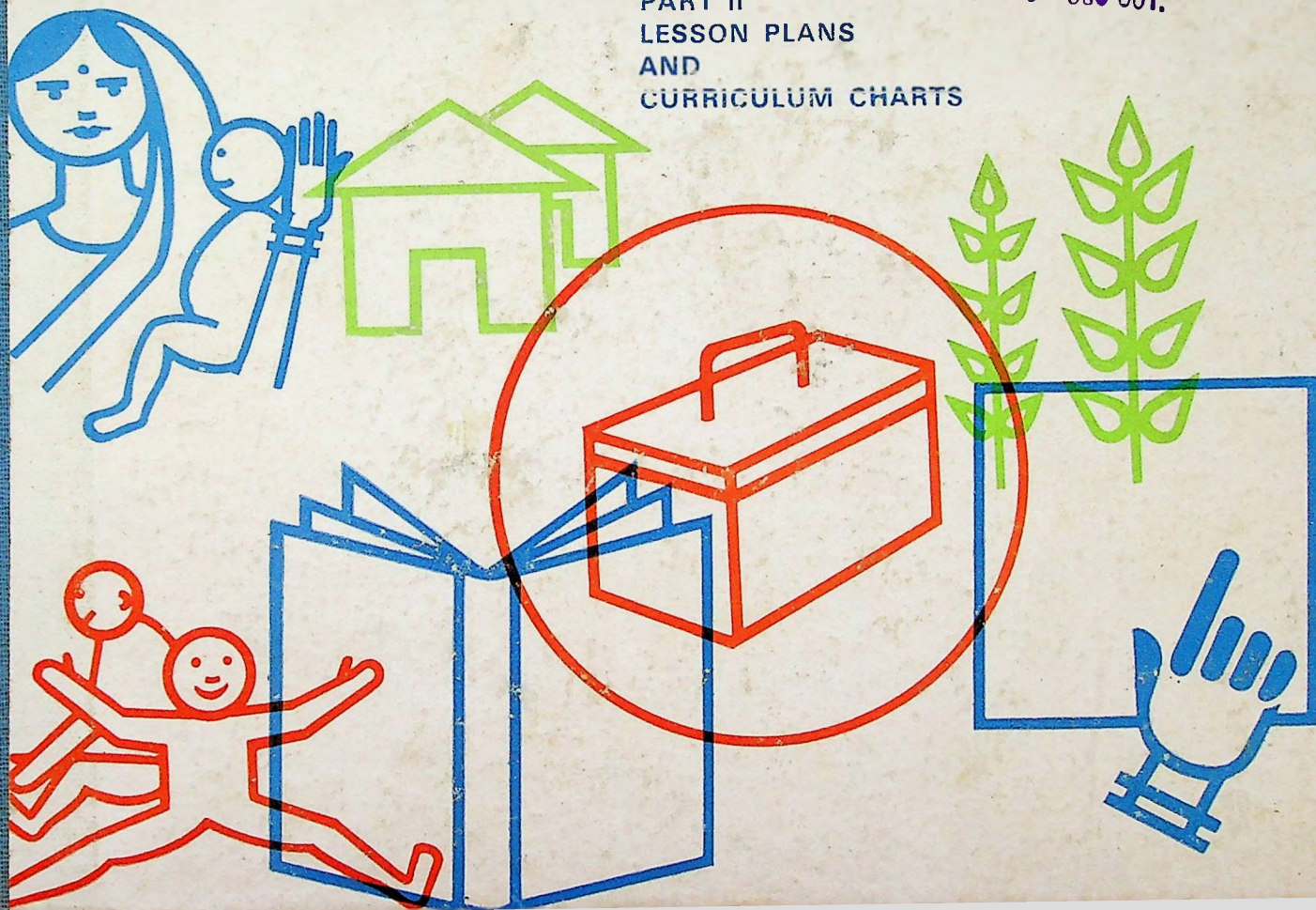


Teaching Village Health Workers

a Guide to the Process

COMMUNITY HEALTH CELL
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PART II
LESSON PLANS
AND
CURRICULUM CHARTS



COMMUNITY HEALTH CELL

A TEACHING GUIDE

Months ago, even years, when we first began getting requests for help in the teaching of Village Health Workers, we realized that what people wanted was a book containing the whole course content, something the teacher could give to the trainees consecutively, page after page. We could not prepare such a book because as we have said before, there are too many different things to be considered. **WE STILL CANNOT GIVE YOU SUCH A BOOK.** If you have studied Part I of this volume, you will understand the reasons for this. If you have not studied Part I, then, please do before you read further.

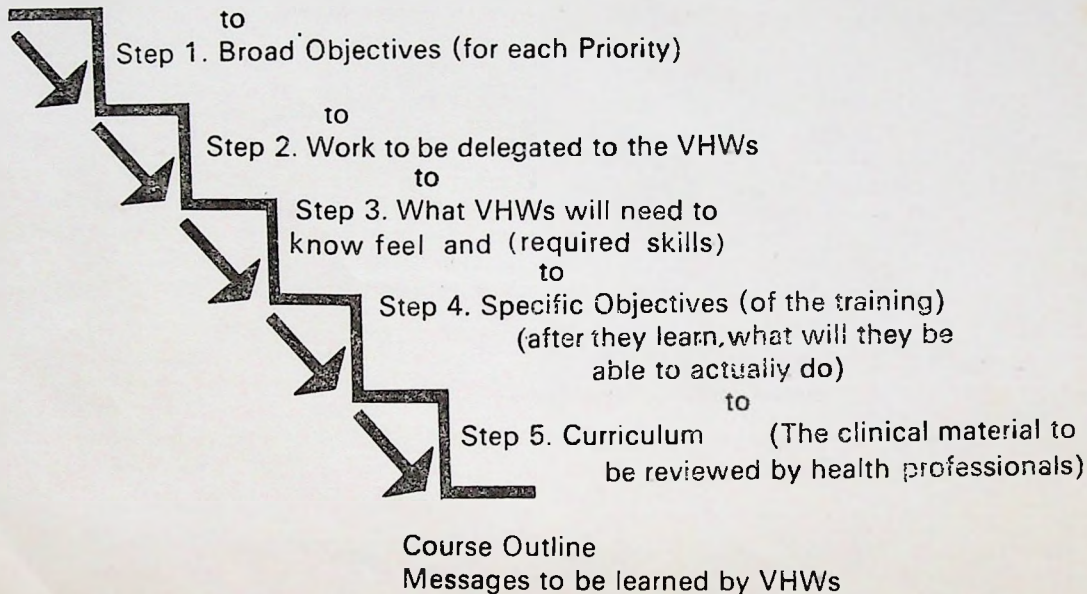
Nevertheless, we do realize that it would be helpful to give some kind of a guide which could serve as a beginning. Part II, we hope, will serve this purpose, if you have been able to accept the concepts in Part I. Following the same process which we have described in Chapter III, we have developed some Curriculum charts to show how the Course Outline and Messages to be taught were decided upon. To make this more realistic we have spent considerable time in health projects which have the benefit of several years of experience when added together. Although there are differences in what have been selected as priorities in various parts of the country, there seem to be several common needs. We have therefore taken these as a basis, considering them to be the priorities which we want to include. These common priorities are:

1. Care of Under-Fives
2. Prevention of Malnutrition in Children
3. Antenatal, Maternity and Postnatal Care
4. Family Planning
5. Control of Leprosy
6. Prevention of Blindness
7. Control of Tuberculosis.

The fifth priority Control of Leprosy, is an example of one which would **not** be included in some parts of the country, where there may be others which would be more important. For example, in several areas we have been told that drinking and gambling are the most serious problems affecting health both directly and indirectly.

For these seven priorities, you will find what we have called Curriculum Development Charts. The steps shown should be carried out by the Health Team or Faculty. The steps are from the Process Charts shown in Chapter III, and including the following :

Project Goal and Priorities selected



You will see that the actual curriculum, including the course outline and the messages to be learned by the VHWs, is the **last** step in the process, and it means that many, many decisions have been made at each step.

The Specific Objectives are stated in a way that will make it possible for you to observe and evaluate whether the VHW is actually doing it. For example, "Teaches and demonstrates to Leprosy patients how they should care for hands, feet and eyes to prevent deformities." This can be tested by observation. What messages will she have to learn in order to do this? There may be three — "Ulcers and deformities can be prevented", "Injury to feet and hands must be avoided", and "Eyes that cannot be closed need special care." There are **many** different ways of stating these, and you may have different ones. Please do improve on the messages in any way you can.

Our purpose in including the charts for the seven priorities is two-fold: 1) we hope they will help you to take your own steps for your own priorities, and 2) to give you a head start if you **want** to use the course outline and messages in our charts, using the specific objectives to test whether you have accomplished what you hoped. Remember that Curriculum Development is a continuous process, and you will not be hurting our feelings if you don't agree, and make changes in the chart. On the contrary, we will be pleased to hear from you about improvements you are making.

Before the Curriculum Charts you will find twenty sample lesson plans. Those included have been marked by (*) on the Curriculum Charts. We have already referred to how these are written in Chapter IV of Part I. We hope later to prepare more lesson plans and would like to have you send any you may develop to us. Participants in many workshops throughout the country have contributed ideas which are included in the samples. One of the reasons why we have made Part II of this book a loose-leaf guide is so you can add your own lesson plans as they are developed, or replace the samples as you improve on them. A few points to remember are —

- May be some of these plans will not be useful in your area, only you can judge.
- Teaching aids and methods of all kinds can be used. Be imaginative and innovative.

but relate your aids to the people you are teaching.

- The order in which the lessons are taught will depend on opportunities available or needed at the moment. If too many babies are brought to the centre dying of tetanus, maybe you should concentrate on teaching and carrying out **an immunization** campaign on this, leaving whatever you were teaching before.
- More than one class time may be needed to teach one lesson, or it may take less than one time, so that another can be started. You will need to be flexible in your time table.
- The VHWs will help you to find more imaginative teaching aids. One we know of used a big round lemon with a hole in one end to represent a child with diarrhoea. As he squeezed out the juice the lemon became thinner and more wrinkled and finally almost dry !

1. You will see that every plan includes in the Introduction on the "How to Teach" side, a long discussion on the village treatments, ideas and misconceptions the village people have about the new topic. We consider this a **very necessary** part of the plan. The health professionals can learn from the VHWs about the situation. Otherwise, the teaching is likely to be irrelevant, or impossible for the people to accept or follow. Take **TIME** to **LEARN**; **then** teach accordingly.

The misconceptions, superstitions and ancient customs are one of the major barriers to change, and have been "blamed" for the failure of development programmes and health care systems to teach villagers or to change rural areas for the better. But we have seen that where Village Health Workers have been trained in the way described in Part I of this book, they have succeeded in changing old traditions. Therefore we urge that you who teach VHWs spend time at this point in each lesson to **LEARN** about the villages and their people. This will give you guidance in how you should teach the particular topic.

2. Each lesson plan contains only one or two short messages, and a few simply stated points under these. This seems to be a better approach than covering a great deal of new in-

formation. For example, one class on giving semi-solid foods to a baby from the age of four months is enough to absorb at one time. To tell the mothers about the diet of a child from birth to two years in one class is more than can be remembered and too many messages to receive and accept at one time.

3. In planning the review of the points learned in each class, try to think of various ways to do this — questions, repeating the points with a different kind of visual aid, acting out or "role play," planning how they will teach their people. This will accomplish your purpose in having the review, but it will also be more interesting.

We have already mentioned the Reminder Cards in Chapter IV. You will find one card for each lesson plan in the Supplementary Audio-Visuals Kit. They are each marked with a code number such as II, 13 which means it would belong to the lesson Plan for Unit II, Message 13. The same code appears on the corner of the lesson plan. These cards are simply drawn, so you will be able to make sufficient copies (see Chapter IV) to give one to each of your VHWs when they have learned the message. Rubber stamps can be made so you can need to show them how they can use them tenced a plastic cover to keep them in. You will prepare all the cards you need. The VHWs will help remember the lesson, and the way they can teach in the village.

The challenge is ours, let us share our successes and failures.

UNIT I — CARE OF UNDER-FIVES

Message 11 : Dehydration is a serious condition caused by diarrhoea which can be prevented by giving the child plenty of water to drink.

WHAT to Teach	HOW to Teach
<p>A. Review of the causes of diarrhoea.</p> <ol style="list-style-type: none"> 1. Wrong kind of diet (including water) and not giving the child enough food, right kinds, and clean water to drink. 2. Infections— germs, intestinal worms found in dirty food and water. 	<p>Discuss</p> <p>Think of some children you have seen with diarrhoea. Did they have enough food ? (Mother's breast milk is not enough after 3 months.)</p> <p>Were they given water to drink ?</p> <p>Where did the mother get the water ?</p> <p>Where do the germs and worms come from ?</p>
<p>B. Introduction to need for water to drink.</p> <ol style="list-style-type: none"> 1. Early symptoms of dehydration. <ul style="list-style-type: none"> — lips and tongue are dry. — child acts thirsty. — eyes begin to look sunken. — skin stands up on pinching. 2. Give enough water to replace what is lost in watery stools. 3. Water can be added to food to make it liquid or soft. 	<p>Do the mothers in your village give water to a child with diarrhoea, or do they stop ? Why ? How can we persuade them that water is needed ?</p> <hr/> <p>Equipment</p> <p>2 empty tins or plastic bags with a hole in the bottom of each. Water in a container. Empty pan.</p> <hr/> <p>Experiment</p> <p>Pour water in each tin or plastic bag. Show how water runs out of the hole in each tin (or bag) into the empty pan like a watery stool. Keep pouring water into only one tin or bag to replace what is lost. What happens ?</p> <p>(One tin empty, while second remains full).</p> <p>The empty tin is like the child who is not given</p>

water to drink — it dries up — loses weight etc.

C. **Review.**

1. Early symptoms of dehydration.
2. Give water to replace what is lost.
3. Add water to food given.

Questions

How will you know that a child needs to have extra water to drink ?

Why does a child with diarrhoea need more water ?

How can we give it to him ?

D. **Practice** by each VHW.

How can you persuade a mother to give water to her children with diarrhoea.

Tell and show the experiment to persuade her.

E. Give out **Reminder Card**.

UNIT I — CARE OF UNDER-FIVES

Message 13 : Water given to a child to drink should be from a clean source.

WHAT to Teach	HOW to Teach
<p>A. Review of need to give water to prevent dehydration in children with diarrhoea.</p> <ol style="list-style-type: none"> 1. Early symptoms of diarrhoea. 2. Give enough water to replace that lost in stools. 3. Water can be added to food. 4. Serious symptoms of dehydration. 5. Give rehydration fluid (medicine water). 	<p>Discuss</p> <p>Have you talked with any mother about giving water to children with diarrhoea ? If you were able to persuade them, how did you do it? Have any of them tried it? Can you offer to give it and take the responsibility ?</p> <p>Make rehydration fluid.</p>
<p>B. Introduction : Need for clean water to drink.</p> <ol style="list-style-type: none"> 1. Sources of Dirty water — Why dirty ? <ul style="list-style-type: none"> —open well, ponds, river —trash, leaves fall into water —bird and animal droppings, and human excretions wash down into water when it rains or through the ground. —washing dirty clothes, bathing near water source —dirty buckets —water stored in open containers on the ground, and dipped out with dirty dipper 2. How to get clean water : <ul style="list-style-type: none"> —Pump in well if possible, otherwise clean bucket to remove water. Borehole well and pump. 	<p>Discuss What are the causes of diarrhoea ? Why did we say to give boiled water to a new born baby?</p> <hr/> <p>Equipment</p> <p>Flannelgraph on dirty and clean water.</p> <hr/> <p>Demonstrate Show visual aids. Discuss the sources of water in their villages. Are they clean? Where do you store water ?</p> <p>How do you get it out of the container to drink ?</p> <p>Discuss Does your village have a “pukka” well? Could you talk to the panchayat leaders about WHAT can be done to improve the water source ?</p> <p>Discuss</p> <p>Has anyone come from the Government to put medicine in your wells, especially in the cholera season ?</p>

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- Medicine put in contaminated (dirty) well to kill germs.
 - Potassium Permanganate ("Lal" or Red medicine) may result in slightly pink water
 - this is not harmful and will go away.
 - Bleaching powder (Chlorinated lime) is colorless but better than P.P. solution.
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Persuade the panchayat to make a plan for making a good well, or improving the existing wells.

C. Review

1. Source of dirty water
2. How to get clean water in the community sources.

Have one of the VHWs repeat the class as if she were teaching people in the village. Ask the others to make necessary corrections.

D. Practice by each VHW

Have as many of the VHWs as possible repeat the class until all know it.

E. Give out Reminder Cards.

UNIT I — CARE OF UNDER-FIVES

Message 14 : Water given to a child to drink can be made clean (purified).

WHAT to teach	HOW to Teach
<p>A. Review of water sources, and getting clean water in the community or village.</p> <ul style="list-style-type: none"> — sources of dirty water — how to get clean water to drink in the village. 	<p>Discuss</p> <p>What are the sources of the water used for drinking in your village? What are ways in which clean water can be made available?</p>
<p>B. Introduction to clean water in the home.</p> <ol style="list-style-type: none"> 1. Clean water can become dirty by <ul style="list-style-type: none"> — storing in an open jar or pot — using unclean utensils, dipper or glass — keeping the water pot on the ground open and where dust and dirt from sweeping can get in. 2. If clean water becomes dirty, how can it be made safe to drink? <ol style="list-style-type: none"> i) Boiling is the best, but expensive; Filter through a cloth, boil, and store in a covered jar. Try to give under-five children in the family boiled water during the time when diarrhoea is most common in the village. ii) Filter with four-jar system 	<p>If your village has a good source of clean water for drinking, a pukka well, borehole well with pumps, how is it possible for it to get dirty before you drink it in your house?</p> <hr/> <p>Equipment</p> <p>Pot with cover, Dipper or cup, Visual aid — Flannelgraph</p> <hr/> <p>Demonstrate</p> <p>Covered pot on a raised stand. Dipper up side down on the cover, or hanging nearby. (Show in a village home if possible).</p> <hr/> <p>Equipment</p> <p>Kerosene tin of water, 4 litres, 400 grams fresh bleaching powder.</p> <hr/> <p>Demonstrate</p> <p>Flannelgraph showing.</p> <ol style="list-style-type: none"> 1) — boiling and storing water

iii) Medicines for purifying water

- make bleaching powder solution (100 grams in $4\frac{1}{2}$ litres of water).
- or 5 drops of tincture of iodine in 1 litre of water. Leave both of these half an hour before drinking.

(Ask the Health team to help you prepare these medicines for either village wells or water in the home).

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- 2) — Four-jar filtering
— each jar has a hole in the bottom excepting the collecting jar on the bottom
— Top jar with gravel
— Second jar with clean sand
— Third jar clean powdered charcoal
— Dirty water in the top one is clean when it reaches the bottom.

3) Medicine

Put 100 grams of bleaching powder in $4\frac{1}{2}$ litres of water and leave overnight. Store clear fluid in dark glass bottle, the next morning. One teaspoon of this liquid in 1 kerosene tin of water for half an hour will purify it.

C. Review Purifying water in the home.

1. How water gets dirty even when it was clean when you brought it home.
2. Ways of cleaning water at home
 - boiling
 - filtering with 4 jars
 - medicines : Chlorinated lime, Iodine.

Questions

How would you tell the villagers about the ways water gets dirty? Show the flannelgraph on boiling, filtering and storing water. Tell how the medicine was used to clean the water.

D. Practice

Ask each of the VHWS to answer the questions and use the flannelgraphs as done in the Review. Explain the card as usual. Stress that clean water is especially important for children; but everyone needs to have clean water for drinking.

E. Give out Reminder Card

UNIT I — CARE OF UNDER-FIVES

Message 32 : Treat burns by placing the burned part in cold water for at least ten minutes.

WHAT to Teach	HOW to Teach
<p>A. Review of care of children with Fevers</p> <ul style="list-style-type: none"> — cool water sponge — fresh air, no heavy covering — lots of cool water to drink (not hot water) — baby aspirin 	<p>Discuss</p> <p>Have you taken care of children with fever? What did you do? When should you take the child to see the Health Team or doctor?</p>
<p>B. Introduction of First aid for burns.</p> <ol style="list-style-type: none"> 1. Put the burned part immediately in cold water or pour cold water over it, or wrap in clean cloth kept wet with water) <ul style="list-style-type: none"> — Leave in cold water at least ten minutes, or until it stops hurting — What this does — <ul style="list-style-type: none"> * stops pain * cools the flesh so it won't burn and damage deeper part. — Don't remove clothing that is stuck to the skin. 2. When to take the child to the clinic or Health Team. 	<p>Discuss</p> <p>Have you seen any children with burns ? How did it happen ? What is the village treatment for this ?</p>
	<p>Equipment</p> <p>Burning stick. Pot of warm water (to represent boiling water) Pot of cold water, dipper or cup, clean cloth or rags.</p> <p>Demonstrate</p> <p>Put burning stick in cold water and leave until it stops burning.</p> <p>Have one VHW pretend to have her arm burned. Show how to put her arm in cold water. Take part out to see if it has stopped hurting. If not, put it back in water.</p> <p>Repeat using shoulder or head that can't be put into the water using cold wet cloth to wrap the part. Keep the cloth wet. Check by removing to see if pain has stopped.</p>

- the burned or blistered area is bigger than the palm of your hand
- the face is burned.
- 3. What to do for small burn
 - after burn stops hurting when you take it out of water, keep it clean and dry.

Show how wet cloth can be kept on burned area while the patient is taken to the clinic.

Discuss

What do you do for a small burn ? When surface skin is red ? — blistered ? (re-enforce good practices for example, leaving blisters unbroken).

C. **Review main points**

1. First-aid — cold water
2. When to take patient to clinic
3. Small burns — keep clean and dry

Questions

Role play by two VHWs to show the points to be followed.

D. **Practice by each trainee.**

Acting out — VHWs take turns being the patient and the VHW treating the burn. Use different parts of the body (head, feet, etc.) and different sizes of burns.

Ask some children to act as patients.

E. **Give out Reminder Card.**

UNIT I — CARE OF UNDER-FIVES

Message 33: Prevent burns by safe practice with fire, hot stoves and hot plates.

WHAT to Teach	HOW to Teach
<p>A. Review First aid treatment of burns in children.</p> <ul style="list-style-type: none"> — cold water for ten minutes — when to take to the clinic — what to do for small burns 	<p>Role play or acting</p> <p>Ask VHWS to act out a play — one pretending to be burned, the other giving treatment. Or try to have children play the part of the burned person.</p> <p>Discuss experience of teaching they have carried out on burns.</p>
<p>B. Introduction on Prevention of Burns*</p> <p>*(Note: Points to be taught will vary from place to place. Find out most common causes of burns in your area; include only 2 or 3 ways of prevention that will be most effective. You may find better ways than the suggestions below).</p>	<p>Discuss which are the most common causes of burns in your village?</p> <p>How can children be kept away from fires?</p>
<ol style="list-style-type: none"> 1. Keep small children away from the cooking fire, by a low protective wall. <ul style="list-style-type: none"> — to prevent touching the fire — to prevent pulling hot water or dal over 2. Store kerosene and matches out of reach of children. 3. Used matches which are still hot. <ul style="list-style-type: none"> — throw into fire 	<p>Equipment</p> <p>Fireplace, chula or common stove used for cooking. Kerosene tin, matches. Empty tins with covers or containers. Extra stores, brick or mud.</p> <p>Demonstrate</p> <ol style="list-style-type: none"> 1. Build a "guard" of stones or brick which would keep a crawling child from coming too close. 2. Keep matches in a tightly closed tin. Put kerosene tin, tightly closed, high above the reach of children. 3. Put used matches in an empty tin, or in fire.

— put into an empty tin or something which will not burn.

4. Pour kerosene carefully to avoid spills.
5. Keep loose clothing from catching fire.
6. Teach an older child to watch younger children to keep them away from fires and hot pots.
7. Build the fireplace high enough so small child can't reach it

4. Have a VHW pour kerosene (or water to represent it) from the tin into an empty tin.

Show how mother's sari can be tucked in when she is working near the fire.

Discuss how they might build a guard around the fire, and how children might be taught what 'hot' means when used as a warning.

Discuss Possibility of raised fireplace.

C. Review the points you have taught.

Questions

What could you do in your homes to prevent accidents with the cooking fire, lanterns, or lights of other kinds?

D. Practice.

Have each VHW teach the others the points covered until they know them.

E. Give out **Reminder Cards**.

Show how the card can be used, to re-enforce review. Ask them to teach others before the next class.

UNIT I — CARE OF UNDER-FIVES

Message 34 : Cuts and wounds should be kept clean and dry to help them heal quickly.

35: Cuts and wounds should be pre-vented by keeping dangerous cutting instruments out of reach of children, and removing broken glass and sharp stones.

WHAT to Teach	HOW to Teach
<p>A. Review prevention of burns.</p> <ul style="list-style-type: none"> — protection around the fire — safe keeping of matches and kerosene — protection of clothing — teaching of children about what is 'hot' — high fireplace 	<p>Discuss</p> <p>Did you teach anyone how to protect children from being burnt? Did you make any change in your own home ?</p>
<p>B. Introduction On care of minor cuts and wounds.</p> <ol style="list-style-type: none"> 1. Cut or broken skin allows dirt and germs to get inside the body. 2. What to do — <ul style="list-style-type: none"> — wash gently with clean water and soap (if possible) or salt in the water, until it is clean *wash surrounding skin first, then the wound itself. — Some bleeding is not harmful (If it continues, stop it with pressure by putting a pad of cloth on the wound and then bandage). — Keep the wound clean and open to the air. (If it is on the foot or likely to get dirty, then protect it with a bandage). 3. Keep cutting instruments put away where a 	<p>Discuss</p> <p>What do you usually do in the village when a child is cut, or the skin is broken ? Does it happen often ?</p> <p>Equipment</p> <p>Clean water in container, bowl, soap or salt, clean cloth (bandage).</p> <p>Demonstrate Pour water over the cut. Use soap on a wet cloth to clean the skin around wound. (May need to put the cut part into water in a bowl) Gently but thoroughly clean the cut or wound. Dry and leave open, or bandage to keep clean. If bleeding continues, then put folded cloth pad and bandage on.</p> <p>Discuss Where can knives, grass-cutters etc. be kept</p>

child will not find them.
— clean away broken glass or sharp stones
so child won't be cut by these.

in the house? Where can cut glass and stones be
thrown away so child won't be injured?

C. **Review.**

1. Germs and dirt get through cuts and breaks in the skin.
2. Wounds must be kept clean and dry.
3. Dangerous instruments, stones etc. should be kept away from children.

Question

Why are cuts dangerous to the child? What will help wounds to heal quickly? How can we prevent such injuries?

D. **Practice.**

Have VHW's each do a dressing for an imaginary cut or wound, using various parts of the body for the location of the cut.

E. **Reminder Cards.**

UNIT I — CARE OF UNDER-FIVES

Message 36 : If a cut or wound is infected, it should be soaked and cleaned several times a day.

37 : Make sure that a child with a wound has been immunised for tetanus.

WHAT to Teach	HOW to Teach
<p>A. Review of care of minor cut or wound.</p> <ul style="list-style-type: none"> — Germs can enter body. — Heal quickly if they are clean and dry — Keep dangerous things away from children. 	<p>Role-play A VHW or child to act as patient and others show how to care for a cut on the arm/foot.</p> <p>Question Why are cuts dangerous? How can we prevent them?</p>
<p>B. Introduction to caring for an infected wound, or sore.</p> <ol style="list-style-type: none"> 1. Germs have gotten inside the skin making the wound infected. 2. Dressing for an infected wound : soak 2 or 3 times a day in warm salt water. <ul style="list-style-type: none"> — clean as for a fresh cut — keep clean and dry — cover with bandage only if the wound is on the foot, or likely to get dirty. 3. Find out if the child has had a tetanus toxoid immunization. If not, take him to the health team for injection. 	<p>Equipment</p> <p>Deep bowl or bucket, soap, clean warm water with salt, clean cloth, bandage.</p> <p>Demonstrate</p> <p>Cover the sore with warm water (with salt dissolved in it), and soak. With fresh salt water and clean cloth, clean as you did the fresh cut. Dry and leave open. Cover only if it is on the foot or likely to get dirty.</p> <p>Discuss</p> <p>How does tetanus get into the body? Are all the children in your village immunized against tetanus? If not, plan a day for giving the immunization to them, with the health team.</p>
<p>C. Review</p> <ol style="list-style-type: none"> 1. Germs are the cause of infected sores or wounds. 	<p>Questions</p> <p>(Make sure they know the main points).</p>

2. Infected sores need to be soaked and kept clean and dry.
3. Children with cuts or wounds need to be immunized against tetanus.

D. **Practice**

What would you do for a child with an infected wound or sore ? Show how you would do the dressing, after soaking the part.

E. Give out **Reminder Card**

Ask each VHW to use the Card to help her remember, and to start treating a child with infected sores in her village.

UNIT I — CARE OF UNDER-FIVE3

Message 38: If a child stops breathing, IMMEDIATE treatment is necessary.

WHAT to Teach	HOW to teach
<p>A. Review of Care of infected wounds.</p> <ol style="list-style-type: none"> 1. Infection caused by germs. 2. Infected wound needs soaking and dressing to clean it. 3. Tetanus immunization needed. 	<p>Equipment</p> <p>Deep bowl or bucket, soap, clean warm water salt, clean cloth, bandage, ointment.</p> <p>Demonstrate by VHW of dressing for an infected wound.</p>
<p>B. Introduction What to do for a child who has stopped breathing.</p> <ol style="list-style-type: none"> 1. "Not breathing" caused by <ul style="list-style-type: none"> — a block in the air passage — damage to the brain which makes it stop breathing, for example in suffocation and lack of oxygen (or air). 2. "Blocks" are caused by thick mucus, blood, vomiting, or food, a seed, or anything which makes the child choke <ul style="list-style-type: none"> — symptoms: choking, coughing, child struggles, turns blue, unconscious. 3. What to do: <ul style="list-style-type: none"> — hold baby up by ankles or over one arm and pat sharply 2 or 3 times on the shoulders — lay the child on its back with head back, and clean out the mouth with your finger (and cloth) — blow some air into the child's mouth about 	<p>Discuss</p> <p>Have you ever seen a child when he stopped breathing? What was the cause? Why does a new born baby not start breathing sometimes? What can you do? What kind of things can block a child's breathing? What do you think can be done about it? before demansbate</p> <p>Demonstrate: using a balloon to represent lungs in a doll, show how to breathe into it, and let the air come out again.</p> <p>Equipment</p> <p>Balloon, doll, clean cloth pieces, Visual Aid</p> <p>Demonstrate</p> <p>Try to show the steps of the treatment with a baby or child (as described in the left column). The cloth may be used around the little finger to clean the mouth and throat. BUT if you don't have any, use your finger.</p>

TM-110
28

20 times a minute until it starts breathing again.

— you may need to clear out the mouth with your finger again.

You may put a thin cloth over the child's mouth and nose before you put your mouth over them to blow. Cover both the nose and mouth when you blow in, then move your mouth away so air comes out.

C. Review

1. Caused by blockings in airway or by brain damage.
2. Steps to take — pull head back, jaw up, remove obstruction, give air "breaths" to start child breathing.

Discuss — causes, How can we prevent these?

Show how you would treat the child that stops breathing.

How long would you do this?

Explain the visual aid (balloon) on artificial respiration.

D. Practice.

VHWs should show how to start breathing with a child or explain the visual aid on artificial respiration.

E. Give out Reminder Card.

UNIT II — PREVENTION OF MALNUTRITION IN CHILDREN

Message 7: Breast milk is the best food for infants.

8: Start breast feeding immediately after birth and supplement with boiled water between feedings.

WHAT to Teach	HOW to Teach
<p>A. Review the health problems in the villages, recognised by VHWS. Try to pick up the fact that a majority of deaths are among the very young children so we will begin with this problem.</p>	<p>Discuss</p> <p>What do you think are serious problems in your villages? What deaths have there been recently? What is the age of those who died? Why did they die? Are there many sick in the village? What are their ages? What are the symptoms of the sick children?</p>
<p>B. Introduction to breast feeding of infants.</p> <ol style="list-style-type: none"> 1. Why is breast milk best? <ul style="list-style-type: none"> — first three months provides all nutritional requirements, and — protection against some diseases. — reduces diarrhoeal diseases caused by infections etc. — always available (except when mother is ill or has too little), making other arrangements necessary. — mother can show her love for the baby which is good for growth. 2. Should be started right after birth. 3. A little boiled water should be given to the baby between feeding. 	<p>Do any of you have young children you are breast feeding? Are they taking anything else? When did you begin to feed your newborn baby? (Reinforce usual practice of rural mothers to breastfeed their babies until next baby is born)</p> <p>It is the custom to wait for three days before feeding the baby at the breast.</p> <p>How is milk given in these three days? How can you persuade the mother to start right away to breast feed and to give boiled water?</p>
	<p>Equipment</p> <p>Clean small bowl, boiled cool water, spoon or other feeding instrument, clean cloth.</p> <p>Demonstrate Give the child small sips of water (one or two teaspoons the first time).</p>

- the mother may object — try to reassure her; take the responsibility, do it yourself, assuring that if there is any difficulty you will care for the child and get help from the health team.
- Give one or two teaspoons of boiled and cooled water to the child.
- Put the baby over your shoulder and pat on the back gently to get the air out.
- See the child frequently to reassure the mother.
- Do this for several days.

4. Mother should give breast feeding as baby wants it. A small baby may need it often.

"Bubble" the baby on your shoulder.

Discuss A baby needs water and food when it is very small just as planted seed needs water and fertiliser to grow. We don't wait until late or they will be very weak.

C. Review

1. Breast milk is best food for baby.
2. Start breast feedings right after birth.
3. Give a baby boiled water.
4. Feed baby when it wants.

Questions

Why is breast milk good for the baby? When should it be started?

When should we give water to a baby? How often should the baby be fed?

D. Practice

(This may take more discussion in successive classes because in many places, water is not given during the first year).

Show and explain how and why we need to give water and breast feeding to a baby soon after it is born.

E. Reminder Cards

Explain how they can be used by the VHW to help her Remember the points she needs to teach.

Give out the Cards and go through the points carefully. The VHWs should understand how the pictures show the main points she needs to teach.

UNIT II — PREVENTION OF MALNUTRITION IN CHILDREN

Message 9: Soft, semi-solid foods should be given to the baby starting gradually from about the fourth month.

WHAT to Teach	HOW to Teach
<p>A. Review Give breast milk and boiled water to a baby beginning soon after birth. Like a seed that needs water and fertilizer to grow, a baby needs water and food when it is tiny.</p>	<p>Discuss (take plenty of time because this is against the usual practice and belief). Did you talk to anyone about giving boiled water to a newborn baby? — starting breast feedings right after birth? What was the reaction? Has anyone tried giving water to a baby? What was the result?</p>
<p>B. Introduction to give a baby semi-solid food beginning from fourth month.</p> <ol style="list-style-type: none"> 1. After the third month, Mother's milk becomes less and less, as the baby's body needs more food, because it is growing. 2. From the fourth month the baby's stomach is ready to take more food. 3. Begin with a small amount of mashed banana (or mango or papaya) <ul style="list-style-type: none"> — other foods to try, according to what is available in their homes : — well cooked mashed rice with a little milk and sugar (kanji is especially good). — kanji of suji or ragi — dal soup — soft cooked yellow of egg (if they can afford it). 	<p>Discuss — When do you give the baby something besides mother's milk? Which month is the "anna prasana?" (6th) Why not continue to give food (as many Brahmin families do) after this "ricefeeding" ceremony?</p> <hr/> <p style="text-align: center;">Equipment</p> <p>Dish, ripe banana (mango or papaya)</p> <hr/> <p>Demonstrate Mash some banana (or mango or papaya). Be sure everything is clean. Take a little on your clean finger, and put it in a baby's mouth. (Try to do this with a VHW's baby). If he spits it out, try again, patiently. Repeat next day until he learns how to swallow and to like it.</p> <hr/> <p>Equipment Flour of Jawar, ragi or other grain, pan, water (or milk if available), fire, sugar, gur or salt.</p>

4. Add one at a time of these gradually every week or so.

Demonstrate Jawar (or other grain) (ground flour).
Roast on the fire; cook in water (or milk). Add sugar, salt or gur. Give a small amount to the baby. as you gave fruit.

-
- C. **Review** begin to give baby semisolid food from the fourth month.

1. Mother's milk less, child needs more.
2. Baby's stomach ready from four months.
3. Small amounts of mashed fruits, Kanji, dal soup etc. may be given.
4. Increase amounts and kinds gradually.

Discuss — Did the baby take the food? Has he learned to swallow? Why does the baby need more food? What can you give at four months?

-
- D. **Practice**

Have several VHWS practice one of the above, and try to feed it to a child, Ask them to try at home.

-
- E. Give out **Reminder Card**.
-

UNIT III — ANTENATAL, MATERNITY AND POSTNATAL CARE

Message 6 : A pregnant woman should eat more than she eats normally.*

HOW to Teach	WHAT to Teach
<p>A. Review on Tetanus Toxoid during pregnancy.</p> <ul style="list-style-type: none"> — protects mother, and the child (for three months) from tetanus — two injections by the eighth month. First any time after three months. <hr/> <p>B. Introduction to nutrition of mother to be.</p> <ol style="list-style-type: none"> 1. She is feeding herself, and the unborn baby as well. <ul style="list-style-type: none"> — baby grows rapidly, and needs food. — mother will feel weak, tired because her food is used for baby's body. — baby will be born weak, unable to suck milk properly, get sick quickly or too easily. Many born too soon, die quickly. Mother is RESPONSIBLE for the unborn baby. 2. Baby growing in the mother is also a member of the family. <ul style="list-style-type: none"> — She is not selfish if she eats a little more, because another member of the family is growing in her. — it is her DUTY to eat more. 	<p>Discuss</p> <p>Why is it important for the mother to have this injection? How many should she have — When?</p> <hr/> <p>Why should the mother eat more? Another way to protect the child.</p> <p>Where does the unborn baby get food? How will the mother feel if she doesn't eat enough? What is likely to happen to the child when it is born? Do mother's usually eat more when they are pregnant? How can you persuade her to do so? Does she need to feel guilty? When does the mother usually eat? Is there enough left for her?</p> <hr/> <p>Equipment</p> <p>Common food for a meal in pans, thali, spoon.</p> <hr/> <p>Demonstrate Ask VHW to put on the thali what she usually eats. Add just a spoonful more, or half a chapati for the growing baby.</p> <p>Discuss Would this be possible?</p>
<p>C. Review</p> <ol style="list-style-type: none"> 1. Eat for two. 	<p>Question</p> <p>Why should the pregnant mother eat more? Role-</p>

2. Baby is also a member of the family.

Play — trying to persuade a mother.

D. Practice

Each VHW tells how she would teach this point to a pregnant woman.

E. Give out **Reminder Card**.

*PLEASE don't tell a village mother to eat eggs and fruits and drink milk every day. The great majority of rural mothers just don't have them, and often they are not even available if she could buy them.

UNIT III — ANTENATAL, MATERNITY AND POSTNATAL CARE

Message 7 : A pregnant woman should eat some green, leafy vegetables every day.

WHAT to Teach	HOW to Teach
<p>A. Review on a pregnant woman eating more than she usually does</p> <ul style="list-style-type: none"> — eating for two — baby growing in the mother is a member of the family. <p>The baby will be strong IF the mother is strong.</p>	<p>Discuss</p> <p>Have you talked with other women about a pregnant woman needing more of what she eats each day? Did you succeed in persuading anyone to try this? What problems did they bring up ?</p>
<p>B. Introduction</p> <p>She needs iron in her blood so the baby can get it from her.</p> <ol style="list-style-type: none"> 1. Green leafy vegetables have iron. <ul style="list-style-type: none"> — One way to get iron into the body, eat 1 small bowl (katori) of cooked green leafy vegetables every day in second half of pregnancy. 2. The growth of the new baby's brain may be affected if the mother doesn't have enough food and green vegetables. <ul style="list-style-type: none"> — a baby with a weak body can be improved after birth. — but the baby's brain may not develop fully if it is weak at the beginning. 	<p>How can you be sure the mother is strong? Besides seeing that she eats more? What kind of green vegetables do you have in your village? How do you prepare them to eat? Are they available all through the year? How expensive are they ?</p> <p>Example — Discuss</p> <p>A seed or very young plant needs fertilizer when it starts to grow. If it is used too late, the plant will never be as strong as it should be.</p>
<p>C. Review</p> <ol style="list-style-type: none"> 1. Mother gets iron she needs from eating green leafy vegetables every day. 	<p>What would you tell a mother about iron to make her strong during pregnancy ?</p>

2. Baby needs iron while its brain is forming before it is born, so it will develop properly. Advise a weak, tired pregnant woman to
- eat a little more each day
 - eat green leafy vegetables every day.
-

Ask each VHW to think of a new way to teach this — song, dance, play etc.

D. Practice

Questions

Why should a mother have iron in her diet? Where can she get it? What kinds of vegetables can you find in your gardens and fields?

E. Give out Reminder Card.

UNIT III — ANTENATAL, MATERNITY AND POSTNATAL CARE

Message 18: Early recognition of danger signals indicating possible complications, can save a mother's life.

WHAT to Teach	HOW to Teach
<p>A. Review of care the mother should take to make sure she is healthy during her pregnancy.</p> <p>Diet : enough green vegetables and yellow fruit or vegetables.</p> <p>Rest and exercise, breast care.</p> <p>Avoid heavy work.</p>	<p>Discuss</p> <p>What are the things the pregnant woman should remember to do to keep herself healthy? How are these different from old practices?</p>
<p>B. Introduction to danger signs in pregnancy.</p> <p>1. Signs :</p> <ul style="list-style-type: none"> — Anemia — Eyelids pale (inside) — Face and tongue look pale. — Eyes look yellowish instead of white. — Swelling of feet and hands maybe face (Toxemia) — Night-blindness (Vitamin A deficiency). — Uncontrollable vomiting. — Bleeding. <p>2. What to do when you see these signs?</p> <ul style="list-style-type: none"> — Show to a Health Team member or TAKE TO THE CENTRE. 	<p>Discuss</p> <p>Do you remember any pregnant woman who was very sick or even died before or during delivery? What were the symptoms? (Try to show some of the symptoms in an actual patient). WHENEVER such a patient is admitted to the hospital or dispensary, show the VHWS the actual case, and allow them to see what you do for them).</p>
<p>C. Review</p> <p>1. Danger signs (see above).</p> <p>2. TAKE THE PATIENT TO THE CENTRE or show to a Health Team member.</p>	<p>Questions</p> <p>When would you take a pregnant woman to the Centre, or ask a Health Team member to examine her? Tell the danger signs.</p>

D. **Practice**

Ask each VHW to describe the danger signs.

E. Give out **Reminder Cards**.

UNIT IV — FAMILY PLANNING

Message 1: Family Planning is to improve the life of children and their mother and father.

WHAT to Teach	HOW to Teach
<p>A. Review postnatal care of mother — symptoms to be reported to the Health Team or taken to the Centre.</p> <ol style="list-style-type: none"> 1. First day after delivery <ul style="list-style-type: none"> — heavy bleeding — severe headache — unconsciousness — muscular twitching 2. Second day <ul style="list-style-type: none"> — difficulty in passing urine — fever — severe abdominal pains. 	<p>Discuss</p> <p>Have you heard of any mother seriously sick or dying one or two days after her delivery? What were the symptoms? Could anything have been done during her pregnancy to prevent these?</p>
<p>B. Introduction to the need for Family Planning.</p> <ol style="list-style-type: none"> 1. Fathers and mothers usually have great “delight” in the first and second child, but as more come, they may become a burden. <ul style="list-style-type: none"> — Food needed for each addition — Clothes — more needed — Illnesses more because of less food — medicines cost more — Shelter — more space needed or overcrowding. — Education can't afford for many children. — Time needed to give mother's care to 	<p>One of the reasons for a weak mother and a weak baby is too many pregnancies and too many children. As the number of children increase, who suffers when there is not enough money for clothes, food, medicines, education etc? In addition, what happens to the mother's health?</p> <hr/> <p style="text-align: center;">Equipment</p> <p>Flannelgraph on Father's problems of providing for family (Mouse story).</p> <hr/> <p>Demonstrate</p>

children, becomes less and less.

2. Family Planning means to

- space the number of children so they don't come too often
- limit the number so that the parents can look after them better.
- consider the ability of a father to provide for children.

Flannelgraph — bring out the problems listed.

Discuss

What would happen if a family had only 2 or 3 children?

What do your children need during their lives? Can you provide it? Could you provide it for more children? Parents can have the number of children they really want and are able to care for.

C. **Review**

1. Many children can become a "burden" instead of a delight.
2. "Family. Planning" is being able to PLAN the best life for your family.

Ask VHW to show the Flannelgraph and bring all the points she has learned into the explanation.

D. **Practice.**

Repeat demonstrations by others.

E. Give out **Reminder Cards.**

UNIT V — LEPROSY

Message 13: Ulcers and Deformities can be prevented.

14: Injuries to feet and hands must be avoided.

WHAT to Teach	HOW to Teach
<p>A. Review leprosy contacts may need to take medication.</p> <ul style="list-style-type: none"> — Children need to live with parents even if the latter have leprosy. — Leprosy may be transmitted by long contact as happens in families. — So children, especially, may need to take the medicine. 	<p>Discuss</p> <p>Do any of your leprosy patients have children? Have you persuaded them to come for skin tests? — to take the tablets as the doctor has ordered? What are the problems?</p>
<p>B. Introduction to New Topic</p> <ol style="list-style-type: none"> 1. Ulcers and deformities are what frighten people. cause ostracism (Look awful, smell, hard to heal, discharging). 2. Caused by untreated injuries, as patients don't feel pain or have feeling in the skin, example, thorn pricks. 3. Prevent injuries : <ul style="list-style-type: none"> — use eyes before using hands — watch where you are walking — keep skin clean — look carefully at hands and feet to find cuts, blisters etc. — massage hands daily with oil — wash feet at night 	<p>Discuss</p> <p>Do leprosy patients in your village have ulcers? deformities? Why are these a problem, since they are not painful? What do people think about these cases? How did we test for lack of feeling? What would happen if a patient</p> <ul style="list-style-type: none"> — touched hot things — stubbed a toe on a rock — stepped on a nail? <p>How can we keep from getting injured?</p> <hr/> <p>Equipment</p> <p>Soap and water, oil clean cloth, special shoes.</p> <hr/> <p>Demonstrate</p> <p>Washing and massaging hands and examining feet of</p>

— use shoes without nails.

leprosy patient. Show how special shoes are made.

C. **Review of main points**

1. Difficulties caused by ulcers and deformities.
2. Caused by injuries.
3. Prevent injuries to hands and feet — using eyes, cleanliness, massage, using special shoes.

Questions and Visual Aids.

What will you teach the patients in your village? Why do we need to prevent ulcers and deformities? How are they caused? How can you prevent injuries to hands? to feet?

Equipment

Visual Aid on Care of hands and feet of leprosy patients.

- D. **Practice** by trainees until all know (in class, or supervise in village).

Questions :

Show how you care for feet, for hands of leprosy patient.

- E. Give out **Reminder Cards**.
-

UNIT VI — PREVENTION OF BLINDNESS

Message 7: Spread of Eye Infection to other people can be prevented.

WHAT to Teach	HOW to Teach
<p>A. Review Eye infections can be cured :</p> <ul style="list-style-type: none"> — symptoms — redness, swelling, discharge — washing of eye with warm water — use of ointments for 2 to 3 days — put ointment on both eyes <p>Untreated eye infections can cause blindness.</p>	<p>Discuss</p> <p>Have you seen redness, swelling or discharge from eyes in your village? Did anyone try washing the eyes and using ointment? What happened? Did anyone with sore eyes refuse treatment? What did you say? What did he say? Did anyone else give him treatment? What treatment?</p>
<p>B. Introduction to the idea that eye infections are spread easily.</p> <ol style="list-style-type: none"> 1. How do eye infections spread? <ul style="list-style-type: none"> — Eye infections are spread by touching. — Germs from one person come and touch another — — by cloth which has eye germs on it. — by flies resting on eyes — by hands which have touched eye germs. 2. To stop spread : <ul style="list-style-type: none"> — wipe infected eyes with small cloth used only for the eyes of that person. — keep flies away from eyes — wash hands after touching infected eyes. 	<p>Discuss</p> <p>Do parents in your village wipe the eyes of their children with the end of their dhoti or sari? Could something else be used for a person with sore eyes? Do you ever see a baby with flies all over the eyes? Could older children keep the flies away? Is there some way to get rid of so many flies? Do people wash hands before eating? Why? Should eyes also be protected?</p>
<p>C. Review</p> <ol style="list-style-type: none"> 1. Spread by cloth spread by flies 	<p>Questions</p> <p>How will you get the people to use a separate cloth to clean infected eyes? Will the people agree that</p>

spread by hands

2. Stop spread by cleanliness of these.

flies can make eyes sore? How will you convince them?

D. Practice by all the VHWs.

Each make up a story about how the eyes of many are sore because people would not listen.

E. Give out Reminder Card.

UNIT VI — PREVENTION OF BLINDNESS

Message 8 : If you look you will see things which can tell you a person is going blind.

HOW to Teach	WHAT to Teach
<p>A. Review Eye infection symptoms : redness, swelling, discharge Treatment — warm water, ointments Spread : wiping with cloth, hands, flies.</p> <p>B. Introduction. There are other things besides infections which can cause blindness.</p> <ol style="list-style-type: none"> 1. How to recognize signs of night blindness — watching the behaviour of the person. When a person cannot see when it is dark, when he stumbles at night because he cannot see, that is a sign that he may be going blind. 2. If you look closely at a person's eyes, you can see <ol style="list-style-type: none"> a) difficulty in looking at light; keeps eyes closed b) dryness of the white part c) wrinkling of the white part d) dark spots on the ear side of the white part e) black part of the eye may become white. 	<p>Discuss How many sore eye cases have you seen this week? What did you do? Did the people listen to you? Have you told them how eye infections spread? What did you say? What did they say? Did you see anyone wiping the sore eyes of her child with her sari? Did you suggest a different cloth? What about the flies? Are the older children helping you?</p> <p>Discuss Have you seen people, especially children, in your village who have some difficulty in seeing at night or in dark places? How many? Bring cases if available to show dryness, wrinkling, dark spots. Point out where to look and exactly what to look for; show photos of eyes affected and unaffected. Ask them to look at eyes of others and see the difference between affected and unaffected eyes. Suggest a detection campaign in the villages.</p> <p>Equipment Photos of eyes with and without Vit. A deficiency.</p>

C. **Review**

Night blindness can be discovered by

- a) watching people.
- b) looking closely in the eyes.

Questions

How will you go about organizing your detection of night blindness campaign? Why is it important? What is the most serious consequence of blindness?

D. **Practice** — recognition and detection campaign.

Prepare a "quawali" on the topic and bring it to the next class.

E. Give out **Reminder Card**.

UNIT VI — PREVENTION OF BLINDNESS

Message 12: Immediate First Aid Treatment is necessary in eye injuries to prevent further damage.

WHAT to Teach	HOW to Teach
<p>A. Review nutritional blindness symptoms — behaviour, eye examinations, causes poor diet; prevention, good diet, Vitamin A.</p>	<p>Discuss : Reaction of people to your teaching — by people's words and people's action. Is detection campaign continuing? Could the Health Team help in some way ?</p>
<p>B. Introduction to the question of eye injuries.</p> <ol style="list-style-type: none"> 1. How to know when eye is injured? Watering of eyes, redness of eye, pain. Does not want to open it in the light. Injury which is able to be easily seen. 2. What to do? Clean it with water. 3. When to bring to centre — If the patient still has pain after washing the eye. 	<p>Discuss Causes of Eye injuries: Have you had anything in your eye? How does "dirt" get in the eye? How else can eye be injured? Have you ever seen someone with an injured eye? How did it happen? Are injuries frequent in your village? What did eye look like? Patient says "something is in my eye".</p>
	<p>Equipment Broad mouthed vessel, clean water.</p>
<p>C. Review : Ordinary causes of eye injury. How does an injured eye look? Wash eye with clean water, send to centre.</p>	<p>Demonstrate washing eyes. Cover affected eye with broad mouth vessel containing CLEAN water. Ask patient to look up, down and across several times, object should fall out. If patient still feels something in the eye send immediately to centre; instruct patient not to rub the eye.</p> <p>Questions What do your people do when something is in the eye? How will you get them to wash the eye with clean water?</p>

D. **Practice** Wash your own eyes, wash the eyes of another.

Prepare a drama on blindness being caused because a patient did not have first aid.

E. Give out **Reminder Cards**.

UNIT VII -- CONTROL OF TUBERCULOSIS

Message 1: Tuberculosis is caused by germs which can be killed by taking medicine.

2: Taking treatment early will prevent increased symptoms.

WHAT to Teach	HOW to Teach
A. Review Rehabilitation of blind people.	Discuss progress and problems in the villages of blindness rehabilitation cases.
<p>B. Introduction to Tuberculosis.</p> <ol style="list-style-type: none"> 1. TB is caused by a germ which makes a home in the chest of the patient. 2. Germs grow and increase in number inside the chest. When there are too many the person begins to cough. 3. Medicine will kill the germs and stop any more from growing. 4. If we can begin the medicine early before the germs grow to be very many, the person will get well quickly. 	<p>Discuss</p> <p>What do people do about people who are diagnosed as TB? What do they say is the cause? treatment? Why are patients, especially women, ostracised? What can be done? Have you opened a wild fig and found worm inside?</p> <hr/> <p>Equipment</p> <p>Several wild figs (or mangoes at end of the season)</p> <hr/> <p>Show — cut into the wild figs. One or more is likely to have worms growing inside.</p> <p>Discuss : In early cases there won't be big "houses" or cavities, and many fewer germs are easy to treat.</p>
<p>C. Review 1. Caused by germs.</p> <ol style="list-style-type: none"> 2. Greater number causes cough. 3. Can be killed. 4. Early treatment is successful quickly. 	<p>Questions : How is TB caused? How can germs be killed? How can we persuade people not to send patients away from their homes?</p>

D. Practice by the trainees until all know.

What will you teach the villagers about TB? Show how you will do so.

E. Give out **Reminder Cards**.

UNIT VII — CONTROL OF TUBERCULOSIS

Message 3 : Tuberculosis is spreaded by breathing and especially in the cough of a patient.

4 : Learning about how TB germs spread will make people less afraid of Tuberculosis.

WHAT to Teach	HOW to Teach
A. Review Cause and need for early treatment of TB.	Discuss Have you talked with anyone in your village about why TB occurs? What did they say? Could you persuade them that it can be cured?
B. Introduction to how TB is spread. <ol style="list-style-type: none"> 1. Germs like a wet place to live (They die when they dry up) 2. They live in tiny droplets, water and mucus that come from the lungs when we cough. 3. Coughing spreads germs much further than breathing, and there is more mucus in the droplets. 4. We can prevent germs from getting into a well person if we <ul style="list-style-type: none"> — ask the sick person not to allow moisture from their mouths or nose to get to the well person <p>— keep the cough droplets from spreading far</p>	<p>How can germs get from the chest of one sick person to a well person ?</p> <hr/> <p>Equipment</p> <p>Mirror</p> <hr/> <p>Experiment :</p> <p>Ask someone to breathe on a mirror held close to the nose. What is on the mirror? does it go away? Breathe on it at various distances. From how far does the moisture appear on the mirror? Now cough hard on the mirror at various distances. What comes on to the mirror? Is it different when it dries? From how far away does the cough leave something on the mirror?</p> <p>Conclusion Germs can be spread some distance by coughing, but not far by normal breathing.</p> <p>Discuss What does this experiment mean for a person with tuberculosis? What can be done instead of sending the patient away from home? We don't need to be so afraid.</p>

C. Review

1. Germs die when they dry up.
2. Live in droplets from lungs
3. Coughing spreads germs.
4. Prevent spread by stopping droplets from going from a sick to a well person.

Questions

Where do TB germs live?

Where do they die?

How are they spread?

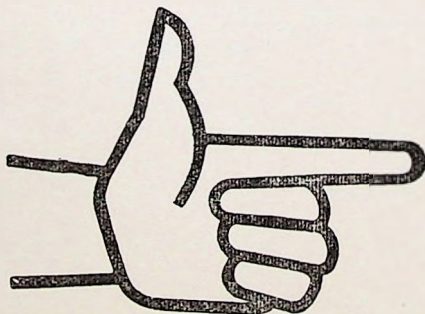
What habits do we have that would help the TB germs to spread to other people?

What can we do to stop the spread ?

D. Practice by trainees.

Show how you can use a mirror to tell people about germs spreading by a cough. Can you think of another way (besides medicines) that TB germs can be killed ? What can you tell people about keeping TB from spreading ?

E. Give out Reminder Cards.



RELEVANT
TEACHING
AIDS SAMPLES
ARE GIVEN
AS
EXAMPLES.
THEY ARE GIVEN
AS SEPERATE UNITS
BECAUSE THE USER
CAN EASILY USE THEM.

