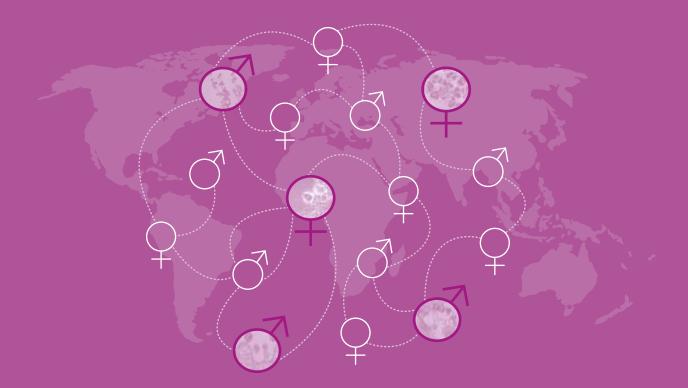
Training Modules for the Syndromic Management of Sexually Transmitted Infections 2nd Edition

Trainer's Guide

Breaking the chain of transmission Breaking the chain<u>of transmission</u>





# **Trainer's Guide**



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## Introduction

### Aims of this guide

This guide is intended for people responsible for in-service training at any first-level health facility, such as a health centre, district hospital, mission hospital or clinic dedicated to the care of persons with sexually transmitted infections (STIs).

- It aims to equip the user with the skills and information needed to train all relevant clinicians and service providers in the management of persons with STIs, including syndromic management.
- It also suggests a number of ways the training could be adapted to respond best to local needs.
- It provides practical advice and information to help you plan and execute the training and assess outcomes effectively – and as easily as possible.

This Introduction explains the main features and benefits of syndromic case management of STIs and the flexible learning approach it advocates.

- Section 1 explains the content and structure of the training programme and how it can serve the training needs of service providers with a range of responsibilities for STI case management.
- Section 2 explores a variety of training options, from conventional training to distance learning or CD-ROM.
- Section 3 explains the support that learners may need during their training and how that support can be provided.
- Sections 4, discuss the main tasks before, during and after the 5 and 6 training.

### What is syndromic case management of STIs?

The control of STIs presents one of the great health challenges of the last two decades. STIs are spreading rapidly throughout the world. Untreated, they can lead to serious complications and even death. They substantially increase the risk of transmission of the human immunodeficiency virus (HIV), the virus which causes the acquired immunodeficiency syndrome (AIDS).

Despite their best endeavours, existing STI services often fail to treat the majority of those infected. It is only by making it possible to treat patients with STIs at their *first* contact with a health facility that we can begin to reduce the burden of these infections. For a health facility to diagnose and treat STIs:

- it must be possible to make a diagnosis *without* sophisticated laboratory equipment and methodologies;
- thorough training must be available to all first-line service providers;
- resources such as drugs and condoms must *always* be available, accessible and affordable.

Syndromic management is based on the identification of consistent groups of symptoms and easily recognizable signs (syndromes) and the provision of treatment that will deal with the majority of organisms responsible for each syndrome.

The syndromic management programme is designed to train service providers to treat patients for STIs in the course of their normal patient contact.

Any service provider who has been trained in history-taking, examination and the use of flowcharts for STI case management can confidently diagnose and treat patients with STIs.

## Why training?

While training is one essential component for improving STI services, and the modules have been developed for this purpose, not all training has the impact that is needed. How can you ensure that training will have a positive, practical impact on the delivery of services?

Bear in mind that training is not the only solution to service delivery problems. New skills need to be complemented by adequate resources and commodities. For example, if sufficient quantities of the appropriate drugs are not available for service providers to use in the management of STIs, then the impact of this training on services will be minimal. Also, better services are often the result of improved management or supervision. Follow-up after training, using personal action plans and personal accountability will help to increase the likelihood of learning being transferred to the workplace and reflected by improved services.

Another strategy to improve the effectiveness of training is to provide it only to those who need it. Often, service providers do not have a choice whether to attend in-service training or not, and trainers are training service providers who do not need to know, or who are not interested in learning new skills. Wherever possible, training should be targeted towards staff who will be able to use the knowledge and skills frequently and have expressed an interest in learning the skills. Assessing the learning needs of trainees can be an important first step towards improving the impact of the training.

Adults learn best when stimulated, involved and given enough opportunity to practise. The modules are based on these principles, but the training programme will have most impact if the trainer provides various opportunities for learning and allows each person to learn in a way and at a pace best suited to him/her individually. This increases the effectiveness of training, although it may be less convenient for the trainer.

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