



**Report of Third Training workshop  
On health hygiene and nutrition  
With Community Resource Persons  
SRSO Shikarpure on 17 -23 November2022**

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### **ACRONYMS AND ABBREVIATIONS**

BISP	Benazir Income Support Program
CBDRM	Community Based Disaster Risk Management
CCA	Climate Change Adaptation
CERC	Crisis & Emergency Risk Communication
CIs	Community Institutes
COVID-19	Corona Virus Disease 2019
CRPs	Community Resource Persons
DRR	Disaster Risk Reduction
HH	House Hold
IEC	Information Education Communication
IFAD	International Fund for Agriculture Develop
IFL	Interest Free Loan
M&E	Monitoring & Evaluation
NGO	Non-Governmental Organization
NPGP	National Poverty Graduation Program

PIM	Project Implementation Manual
PMU	Project Management Unit
POs	Partner Organizations
PPAF	Pakistan Poverty Alleviation Fund
SRSO	Sindh Rural Support Organization
TOT	Training of Trainers
TORs	Terms of References
UC	Union Council

### **EXECUTIVE SUMMARY**

07 days capacity building Tot event on Health, Hygiene and Nutrition (H&HN3) It was third training workshop of National Graduation Program (NPGP) was organized by Sindh Rural Support Organization (SRSO) from **November 17-.23 2022 at SRSO Hall Shikarpur (Agenda attached, Annex-1)** . In this event, total **21** community resource persons (CRPs), get themselves registered. **All** from District **from** District Shikarpur.

This ToT was based on class room/ hall learning. During training, the participants were briefed on program objectives, output and implementation of NPG program me and prioritization of health, hygiene and nutrition related initiative in particular. As this seven days event was organized for social sector CRPs who will further roll out the field training events on the same topic so detailed discussions, group work and presentation remained focus in the training to develop trainer skills among participants. Overall, training objectives were met amicably; from the reflections of the participants it was evident that participants were able to grasp the main theme of the training.

Consultant capacity building took the lead in the training and facilitated sessions. SRSO staff arranged and coordinated the event in a highly professional manner in coordination with Training manager Mr. Zubair Soomro and Program Manager and other team members. Presentation skills and discussions were the key components of the training; Brainstorming, Buzz Group and Round Ribbon, role-plays, and demonstration also helped participants to making the concepts clear and easy to understand.

## **OBJECTIVES OF THE EVENT:**

1. To increase knowledge and skills of target CRPs to train the target communities/households on key concepts of Health, Hygiene and Nutrition.
2. To define Health and its Kind, Hygiene and its kinds as well as nutrition.
3. To discuss on diseases, its causes and impacts.
4. To discuss open defecation and its contribution on diseases.
5. To equip CRPs with the required tools and techniques to cascade capacity-building sessions with the target communities/households on these key topics.
6. To enable CRPs with knowledge and skills to facilitate target communities/households in developing their learning and best practices on key concepts of Health, Hygiene and Nutrition.

## **NAME OF RESOURCE PERSON**

**Ghulam Mustafa Baloch**

## **PARTICIPANTS OF THE TRAINING**

Total 25 participants attended the event 6 female and 19 male

## **SRSO FOCAL PERSON**

☑ Mr. Zubair Somroo (Training Manager-IMSD)  
Ashraf Rahoja and Saleem.

## **Training Methodology:**

Following training methodologies were used.

- Brainstorming in Plenary.
- Buzz Group exercise.
- Group work.
- Round Ribbon
- Lecture and flip chart presentations

## **Training Day One:**

The First Session was Introductory Session, it was started from recitation of Holy Quran.

Participant Introduced Himself /Herself, with names, Districts, And Shared Pervious Experienced (if any). Most of Participant was new and they were participated first time.

After introduction of Participant. Facilitator shared two color cards with them and ask them to write their expectations and fair.

The facilitator distributed PRE assessment Form. To ask participant to fill it

**Following expectations and fair were received.**

### **Expectations**

Learn New Ideas

Training Tools

Replication of Training

New Knowledge

Learn training tools and techniques.

### **Fears**

Fears about Proper Logistic  
For example residents, Food  
and others

1. Behavior of trainer
2. Language Issue
3. Difficult timing
4. written Material are available or not due to weather

In next Brainstorming session of the participant, Facilitator said if, we want fulfilled these expectations, we should set some norms; Following Norms:

### **Norms of Training**

- No Smoking
- Keep Mobile Silent Mode
- Discuss one by one
- Punctuality and time management
- Respect others Opinion and point of view
- Raise the hand before sharing
- Respect women participation
- Contribute Actually

In the end of this session; facilitator display a chart of objectives and ask participant these objectives can meet with your expectations or not? He also discussed with them, there is way to achieve training objectives; if we follow these norms.

Following Objectives were shared:

- Define Health, Hygiene and Nutrition
- Define kinds of health, hygiene and nitraton
- Important of hygiene and nitraton for our health
- Discussion about importance of nitraton, of pregnant and new born child.
- Discussion on open defecation and its impact on our health.
- Discussion on common dieses in Sindh and its causes and its impact.
- Strengthen capacity of CRPs to replicate these trainings in community.

In last exercise of the day, the participant was divided in three groups. Like; ho jamalo group, julae Lal group, and Mor Tho tile rarna group for round ribbon exercise.

Facilitator hanged three charts. What is health? Its kinds, what is hygiene? Its kinds, what is nitraton? Its kinds.

Facilitator said to them please scroll around the all charts, then shared your points on each chart.

When every group write theirs points, then display it and present. After completing the presentations of groups, facilitator show them these slides:

Before the ending of the day facilitator divided participant in buzz group and ask them to discuss following questions:

- What is important knowledge you get from this training?
- On which point you need further clarity?
- The Facilitator also introduced training material.
- Management of SRSO briefly introduced SRSO (Sindh Rural Support Organization) as well as NPGP ( National Poverty Graduation Program)

### **Day two:**

Day two was started with recitation of Quran. Then facilitator gives the review of previous day.

In Brainstorming Session facilitator repeated about health and its kind, hygiene and its kind, and diet balance.

The next session was about importance of hygiene in Islam, and scientific point of view. The discussion was ended on wrong perception and myth in communities. In the last session facilitator divided participant into union council, and said them to discuss on common dieses, of your respective union council.

Advice of participant that you will also discuss on this issue at night, and share presentation in next morning.

### **Day three:**

This day was started with recitation of holy Quran. Participant gives their presentations. The next session of large discussion was about open defecation. One practical was shared. How a flier contributes dirt in our food and water.

Participant taken interest and enjoy this practical example. Facilitator said participant to take your chart of diseases and discussed it in same group, what are the reasons, how the dirt was contributed, worse hygiene condition in our houses, in our environment, they contribute these kinds of diseases.

Basically, the exercise was about to analysis the situation of area, the social mapping exercise was also conducted to provide technical assessment to that how you involved in community. When you will conduct the exercise of situation analysis. The next tool was introducing the transect walk, you can practically verify about social mapping and hygienic condition of village. In the end of the day a documentary of village tando Soomro was also presented. Third day was closed to evaluate.

#### **Day four:**

This day was started with recitation of Quran.

Participant was divided in buzz group and asked participant to share important points of yesterday, and any topic which need further clarity.

In next exercise of buzz group in brainstorming session shared stories of sanitation, after long discussion, then facilitator said to participant please take previous chart of diseases, and discuss. If anyone who suffered malaria, Diarrhea, motions and vomiting.

So, each group discussed about these common diseases and estimate expenses of treatment. In this one-hour exercise, participant presented chart of expenses. One member of family who suffered in one disease, following cost was estimated.

- Malaria: 25000 to 40000 rupees.
- Diarrhea: 20000 to 40000 rupees.
- Motions and vomiting: 15000 to 30000

In next session of brainstorming in plenary, facilitator said to participant to draw structure of toilette and divided to participant into pairs, to draw a picture of toilet with estimate cost. The participant estimates the cost of toilette was about 10000 to 20000 rupees. Then the facilitator open the discussion, to compare the



toilette and dieses cost. Toilette is one-time expense, and the dieses expenses are continuing. Which is the result of open defecation.

The major causes of infant motility are Diarrhea, the major cause of Diarrhea is dirty environment of home, and surrounding. Main reason is open defecation, we can minimize infant motility to taken following steps

- To construct and utilization of hygienic and clean toilet.
- Wash hands before eat and after using washroom.
- Boil water and keep covered it with a clean cloth
- Do not use smelly, stale and vacuumed food on which flies are sitting.
- Do not allow kid toileted outside because it makes germs and join the food.
- Use namcol whenever you have diarrhea.
- If you didn't find namcol at shop, make your own with 4 glasses of boil water, 4 spoon sugar and one spoon salt.

In the end of the day the facilitator asked to the participant to evaluate. What we learn today and on which topic you need further clarity. So, we will discuss tomorrow morning.

**Day five:** day was started with recitation of holy Quran and the facilitator review the previous day in buzz group.

In next exercise the facilitator divided participant in three groups, and given following tasks to each group:

Group one: what is the role of gender discrimination in maternal and infant motility?

Group two: what is the role of early child marriage infant and motility?

Group three: what is the role of lacking medical facilities and hygienic conditions?

All three groups give their presentation and facilitator summarize the session with following points:

- Boys' and girls' marriages before 18 years have some natural issues, and some constitutional issue according to Sindh government, if anybody who did this they will be convicted according to the law. Pakistan and many others countries who faced these kinds of circumstances.
- Every 15 to 19 years of girls, as ratio of 1 to 6, one girl is married according to survey of (population and health of 2006-2007).
- The time of pregnancy under 15 years' girls have more chances of death, rather than 20 years of girls. (UNICEF 2007)
- According to WHO, Pakistan has 11 rating country, where girls give birth of child in 15 to 19 years, more than 6 million women.

After the presentation of participant, the facilitator asked question with them what is business they answered differently and facilitator replied it is so simple definition, business means (investment for profit) so, and you can ask to parents, what do you want in children boy or girl? Mostly parents replied boy, because he will be look after our older age. Daughters will marriage and go her home. She will be only consumer in our family. In shape of son, we are investing to secure our future. Basically, this is root cause of gender discrimination. Do your things this perception we were discrimination on food and other things.

Quote: "Protection is better than treatment". No doubt there are minimum facilities. Gian ologist, Trained, TBAS, lack of maternity homes and others. But the main cause is lacking of awareness, there are many myths. No doubt pregnant women need double nutritional food, with complete indicates like; calcium's, vitamins, protein etc.

Our next session is about nutritional, in round ribbon exercise the facilitator divide participant in three groups, and hanged three charts on wall like what is nutrition? Why we need nutrition?

What is the nutritional need for pregnant women? When groups were competed, and all groups presented their charts.

What is nutrition? What is the difference between nutrition and food?

Food is basically for our hunger, and nutrition gives energy to our body, muscle, make strong our bones, basic nutrition for our body, which protect our body. Use vegetables, fruits in our daily life.

Nutritional need for pregnant women: Pregnant and breastfeeding women, need more than three times food. She must use of milk, juices and vegetables in their food. She used salad too, for protein use fish, milk, and chicken.

**Day six:** day six started with recitation of Holy Quran, then review of previous day.

It was Field Visit, Participants Divided in two group

One Group visited village Mad Khoso.

The member of LSO (Local Support Organization) Introduced Structure of Community Organization, Village Organization and Local Support Organization.

She defined role, structure, saving, linkages with government, other linkages and initiatives like Link with Legal forum for ALLTP/SEF. And others.

She also shared a wonderful story of conflict between two tribe and how women of LSO played their role for reconciliation and peace. It was first time when village women attended PUNCHAYT (JARGA).

Then CRPs delivered sessions on health and hygiene to community and LSO members.

Facilitator given feedback when CRPs return in training hall.

**Day Seven.**

**Day seven was started with recitation of Holy Quran,**

**In next session was about feedback of Field visit.**

**Mostly participants were appreciated and their learning about Structure, Systems, Role of CO, VO, and LSOs.**

**In next session Facilitator divided post assessment form to participants to measure and rate of learning.**

**In the end of day certificates were distributed and group photos.**

1. Pre-Training this is administrative role.
2. During Training it's Facilitator Role.
3. Post Training Role IT is Training Writing above Follow Rules.

#### **Questions of PRE\_ POST test:**

Q1: Objective of Healthy Person?

1. Heavy Weight Person
2. Access of Food
3. A person with physically, mentally, spiritually, without any diseases.

Q2: The main Reasons of Health and Hygiene?

1. Laziness
2. Personal domestic and hygienic condition
3. Lack corporation of government

Q3: What are the reasons of 3lacs 64 thousand children died before the age of five?

1. Road accident
2. Lack of Doctors

3. Lack of awareness on health and Hygiene

Q4: what are the major reasons and diarrheic and motions?

1. Lack of food
2. Pollution, not washing hand proper, open defecation
3. Incompetent government

Q5: Best means of Balance of diet?

1. Accesses of meat
2. Complete diet which has provide energy and fulfill all component.
3. Eliminate Hunger

Q6: The Accusation nutrition of a Pregnant Women?

1. Complete and balance of Diet
2. Avoid to food
3. Minimum food

Q7: Diet of New Born Child is?

1. Baby milk of market
2. Milk before sleeping
3. Minimum 12 times mothers milk every day

Q8: Diet and Balance nutrition means?

1. Maximum meat
2. Food to fulfil to protein, vitamins, carbohydrates
3. Food with butter

Q9: The reasons of night blindness?

1. Lack of vitamins
2. Less lighting
3. Careless

Q10: Reasons OF Malaria?

1. Less drinking water
2. Mosquitos

3. unavailability of doctors

Q11: According to Sindh marriage retirant act of children is?

1. Less of 5 years
2. Less of 18 years

Q12: Reasons of HIV aids?

1. Pollutant Water
2. Used of unsettles injections
3. Sexual lust

Q13: Please define the role of community resources person?

1. Awareness of clean environment
2. Awareness of Good health
3. Educate to people



