Part III:

FP Counseling in Practice
Session 25: Counseling Role Plays

Participants’ Learning Objectives
By the end of this session, the participants will be able to:
• Demonstrate how to counsel FP clients, applying all of the counseling skills covered in this workshop and using the REDI model and profiled clients
• Describe self-assessment and peer assessment after counseling practice

Time
3 hours, 10 minutes

Materials
• Flipchart paper, markers, and masking tape
• New role play scenarios (see Advance Preparation)
• New role play scenarios with hidden information for second round of role plays (see Advance Preparation)

Session Outline

<table>
<thead>
<tr>
<th>Training Activities</th>
<th>Methodology</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Introduction</td>
<td>Presentation</td>
<td>5 mins.</td>
</tr>
<tr>
<td>B. Reviewing Tools</td>
<td>Presentation/discussion</td>
<td>15 mins.</td>
</tr>
<tr>
<td>C. Counseling Practice</td>
<td>Large-group role plays/feedback</td>
<td>1 hour, 50 mins.</td>
</tr>
<tr>
<td>D. Concurrent Practice in Groups (Eliciting Hidden Information)</td>
<td>Role play in small groups/feedback</td>
<td>55 mins.</td>
</tr>
<tr>
<td>E. Summary</td>
<td>Presentation</td>
<td>5 mins.</td>
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Advance Preparation
1. This session includes five large-group role plays and at least two rounds of concurrent role plays in small groups. Both in the full group and in small groups, all of the participants who play the service provider will get feedback on their performances. The purpose is to make sure that each participant gets a chance to practice counseling and get feedback in this session.
2. Decide how you will rearrange groups. Up to this point in the workshop, the participants have worked in the same groups in most of the sessions and exercises. To make the small-group work and role plays more interesting and challenging, rearrange the participants to form five new groups. You can also choose to have four or six groups, depending on the number of participants, with the aim of ensuring that each participant gets a chance to play the provider and get feedback.

3. For the plenary role plays in Activity C, pick five role play scenarios from the list below, one for each group. Make sure that there is an even representation of new clients and return clients among the five role-play scenarios that you choose. This is also an opportunity to cover client characteristics that have not been adequately discussed so far in the workshop (e.g., postabortion FP, postpartum FP, FP counseling during antenatal care, high individual risk for HIV and STIs, HIV-positive clients, clients with an STI, unmarried people, and adolescents). To facilitate your selection of role-play scenarios, you can refer to the keywords (in the first column below) that describe the theme and population group covered in the role-play scenario.

<table>
<thead>
<tr>
<th>Client characteristics</th>
<th>Role play scenarios</th>
</tr>
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<tbody>
<tr>
<td>New—female client—unmarried—no method in mind</td>
<td>1. [client’s name] is 26 years old and will marry her boyfriend next month. They have not had sex so far, and she does not want a child until their income is sufficient to support the child. She comes in asking for FP. She does not have a method in mind.</td>
</tr>
<tr>
<td>New—female client—married—female sterilization</td>
<td>2. [client’s name] is 31. She has one daughter and one son, ages 5 and 3 respectively. She and her husband have decided that she should have female sterilization. They love each other very much and do not have any problem. They come to the FP station asking for female sterilization.</td>
</tr>
<tr>
<td>Return—male client—vasectomy</td>
<td>3. [client’s name] had vasectomy four months ago, and he returns to the facility saying that his wife is six weeks pregnant. In answer to the counselor’s questions, he admits that they have had unprotected sex about one month after the vasectomy. He is concerned very much about the health of his wife, whom he loves very much and who has diabetes.</td>
</tr>
<tr>
<td>Return—female client—pill</td>
<td>4. [client’s name], age 27, comes to the FP station saying that she forgot to take her last two pills (yesterday and the day before) while she was lying in bed sick with the flu. She has been married for one year, but she and her husband believe that they are not ready to have a child yet.</td>
</tr>
<tr>
<td>New—female client—IUD</td>
<td>5. [client’s name], age 25, has just had a son and does not want to have another child. She is interested in having an IUD, like her colleagues at work. Her husband is very caring for her and the baby, and he believes that they should not have another child so as to take better care of their son.</td>
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</tbody>
</table>
4. For role plays in small groups in Activity D, pick at least two scenarios from the list below. Because the five groups will be practicing simultaneously, they can each work with the same role play scenarios.

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<td>New—female client—postpartum</td>
<td>6. [client’s name], age 35, has delivered her fifth child a week ago by cesarean section and has returned to the facility to have her stitches removed. The counselor asks if she has thought of FP. Already breastfeeding, she doesn’t want any more children but is not sure about a permanent method.</td>
</tr>
<tr>
<td>Return—female client—IUD + pregnancy</td>
<td>7. [client’s name], age 40, has been using an IUD for six months. She returns to the facility saying that she is pregnant. She wants to keep the child.</td>
</tr>
<tr>
<td>New—female client—postabortion</td>
<td>8. [client’s name], age 32, comes to the facility with bleeding due to a miscarriage. After an uncomplicated procedure, she is about to leave the facility. A counselor explains that fertility returns quickly, within a few weeks, and asks her if she is interested in protection against pregnancy.</td>
</tr>
<tr>
<td>Return—male client—unmarried—condom—dual protection—emergency contraception</td>
<td>9. [client’s name], age 26, is using condoms with his girlfriend and with other girls he meets occasionally. Last night the condom slipped during intercourse, and he is concerned his girlfriend might get pregnant.</td>
</tr>
<tr>
<td>Return—female client—married—injectables (DMPA)</td>
<td>10. [client’s name], age 30, is married and has three children. She comes back to the clinic for sixth injection. She is very happy with DMPA, especially because her periods are less severe now.</td>
</tr>
</tbody>
</table>

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<td>New—female client—unmarried adolescent</td>
<td>11. She is worried about pregnancy and she wants to prevent it. She has a boyfriend. She does not know anything about STIs, and she has not even thought about her possible risk for contracting one. <strong>Hidden information:</strong> She had vaginal sex with her boyfriend, but she became very scared of getting pregnant. For this reason, they started practicing anal sex, but she does not enjoy it.</td>
</tr>
<tr>
<td>Return—female client—married—STIs—unsafe abortion</td>
<td>12. She presents with vaginal discharge and itching. She is on the pill. She has heard of STIs. Now she is convinced that she has got one and that it is her husband’s fault. <strong>Hidden information:</strong> She did not take the pill correctly. She got pregnant, but she did not tell anybody. She had an unsafe abortion. The discharge and itching started after she had the abortion.</td>
</tr>
<tr>
<td>New—male client—married—vasectomy—STI risk—multiple partners</td>
<td>13. He wants a vasectomy because he and his wife already have a child. They do not want to be worried about pregnancy any longer. <strong>Hidden information:</strong> He has sex with other women. He wants a vasectomy to avoid getting them pregnant. He is not thinking of HIV or other STIs.</td>
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</table>
### Session 25

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<td>Return—female client—postabortion woman—pill</td>
<td><strong>14.</strong> She has a history of repeat abortions and says that this happened because of method failure (the pill). <em>Hidden information:</em> Her husband wants to have a male child, and he put pressure on her to have the abortions.</td>
</tr>
<tr>
<td>Return—female client—IUD—STI/HIV risk</td>
<td><strong>15.</strong> She complains that she has prolonged periods and pain. She blames the IUD for the prolonged periods. <em>Hidden information:</em> She has noticed that her husband has lost interest in her since she got the IUD, but she is too shy to discuss this with the provider.</td>
</tr>
</tbody>
</table>
Session 25

Activities

Activity A. Introduction (2 minutes)

1. Explain that in this session, the participants will work on synthesizing the skills they have learned in a counseling session following all of the phases and steps of REDI. So far, they have practiced the phases and steps of counseling separately. This session will give them the opportunity to practice counseling and receive feedback on their performance and to use tools and job aids that support counseling.

2. Review session objectives with the participants.

Activity B. Reviewing Tools and Job Aids before Counseling Practice (15 minutes)

1. Tell the participants that they will review tools and job aids that will help them with FP counseling practice during the workshop and later at their workplaces.

2. Refer them to Appendix B in the Participant Handbook. Remind them that they have already covered the phases and steps of REDI in previous sessions. The learning guides list the essential steps that need to be accomplished in counseling, so they will be useful as a reference. They can also be used as a self-assessment tool. Service providers can assess their own performance by scoring themselves on the learning guide. The learning guides help providers identify gaps in their performance and remind them what to do to improve their skills.

3. Briefly review the learning guides for new clients and for return clients (just by going through titles and orienting the participants to the template), and answer any questions that the participants have.

4. Refer the participants to the Essential Ideas in Handout 25A of the Participant Handbook and explain how “self assessment” and “peer assessment” can be done. Then refer them to Handout 25-B (Counseling Skills Observation Guide) in the Participant Handbook. The participants are seeing this guide for the first time. Tell them that this guide is intended for use during observation of a counseling session. Trainers, supervisors, and peers can use this guide to record and give feedback to a provider observed during counseling.

5. Tell the participants that they will be using this Counseling Skills Observation Guide to provide feedback to the role players in the role plays that will follow.

6. Orient the participants to the flow and content of the guide by reviewing it briefly, and tell them that explanations of the items in this guide can be found in the learning guides in Appendix B of the Participant Handbook.

7. Give the participants five minutes to review the items in the guide, and answer any questions they have.
**Session 25**

**Activity C. Counseling Practice (1 hour, 50 minutes)**

1. Tell the participants that they will do role plays using new role-play scenarios. They also will work in new groups.

2. Explain that they will work in their new groups to prepare for and practice all phases of REDI, from **rapport building** through **implementing the decision**. Groups will have 10 minutes to prepare for the role play, and then each group will be asked to perform in front of the large group. They will choose one group member to play the provider and another to play the client. The other members of the groups will help with the preparation for the role play. Each group will have a maximum of 20 minutes to do the counseling role play in the large group and then get feedback from the large group. All of the participants in the large group will be observers, and they will base their feedback on the Counseling Skills Observation Guide. *(10 minutes for each role play and 10 minutes for feedback for each group)*

3. Divide the participants into new groups and hand each group a new role play scenario (see Advance Preparation). Then give the groups 10 minutes to prepare for the first role play.

4. Ask the groups, one by one, to do the role play in front of the large group. Have the provider and client from the first group role play for 10 minutes. Then spend 10 minutes on feedback based on the Counseling Skills Observation Guide (Handout 25-B). Repeat with all five groups.

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**Training Tip**

You will notice that the role plays will improve as you approach the end of the practice session, and both the role plays and the feedback will take less time as the participants become more efficient.

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**Activity D. Concurrent Practice in Groups (Eliciting Hidden Information) (55 minutes)**

1. Tell the participants that they will continue doing the role plays concurrently in their groups. They will repeat the same process of role playing and giving feedback for two more rounds in their small groups. With each new role play, members of the group will switch roles. By the end of the practice session (Activities C and D), each participant will have assumed each role at least once. Each group will be given two new scenarios. For a change of pace and to make the activity more challenging, the role-play scenarios will be given only to the person playing the client. In each role-play scenario, there will be a piece of hidden information. The “client” should not reveal this hidden information unless specifically asked or probed by the “provider.” The challenge for the person playing the provider is to explore the client’s circumstances to elicit the hidden information—that is, all factors that would affect the client’s decision (the social context and background, relationships, other RH needs and problems, and so on). Each role play will last no longer than 10 minutes and will be followed by 10 minutes of feedback from the group, led by the observer. The observer will fill in the Counseling Skills Observation Guide for each role play, and the feedback will be based on this guide.
2. Tell the participants to go back to their groups; then hand the “clients” the first role-play scenario. Tell them to start practicing.

3. Go around the groups to make sure that they understand the task and are all on track—that they are switching to the feedback and to the second role play in a timely manner, that they are switching roles, and that they are using the Counseling Skills Observation Guide correctly.

4. When groups finish the first role play, hand the second role play scenarios to the group members who will assume the role of the client and tell them to continue practicing the role play and feedback. *(40 minutes total for two rounds of role plays, Steps 1–4)*

5. Ask the participants to come back into the large group.

6. Ask those who assumed the client role in the last two role plays:
   - How did you feel during and at the end of counseling?
   - Were your needs met? If not, what else did you need?
   - Did you have any other questions to be answered? If yes, what questions?

7. Ask those who assumed the provider role in the last two role plays:
   - What did you find easy and what did you find difficult to do as the counselor?
   - What would you do differently if you had one more chance to counsel this client?

8. Ask those who assumed the observer role in the last two role plays:
   - What did you observe in general as points to be improved?
   - How useful was the Counseling Skills Observation Guide in observing counseling? *(15 minutes total for large-group discussion, Steps 5–8)*

**Activity E. Summary (5 minutes)**

Wrap up by saying that the participants will improve their counseling skills and become more efficient through further practice and feedback. Once they are back in their facilities, they can use the Learning Guides for FP Counseling Skills to assess their own performance and identify the gaps they should work on. The participants can also seek feedback from peers who are trained in counseling. Peers should use the Counseling Skills Observation Guide while observing and should base their feedback on the findings they have marked in the guide (see Essential Ideas on Handout 25-A in the Participant Handbook).
Session 26:  
Action Plans to Apply New Learning

Participants’ Objectives
By the end of this session, the participants will be able to:
• Identify three changes to make in their work as a result of what they learned in the course
• Develop action plans for implementing the changes identified

Time
1 hour, 35 minutes (Option 1—Individual work)  
2 hours, 5 minutes (Option 2—Work in groups)

Materials
• Flipchart paper, markers, and masking tape
• Flipcharts prepared with text (see Advance Preparation)
• Flipchart (“Principles of Good Client-Provider Interaction”) from Step B-4 in Session 3
• Index cards
• Participant Handbook—Handout 26-A: Applying What Was Learned; Handout 26-B: Action Plan; and Handout 1: Goal and Objectives from Session 1
• All daily wrap-up flipcharts (see the explanation under Training Implementation in the Introduction for Trainers and Program Planners [page xx] and in Appendix C: Daily Warm-Ups and Wrap-Ups)

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<td>10 mins.</td>
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<tr>
<td>B. Review of Training Goal and Objectives</td>
<td>Reading/discussion</td>
<td>15 mins.</td>
</tr>
<tr>
<td>C. Introducing the Action Plan Framework</td>
<td>Presentation</td>
<td>10 mins.</td>
</tr>
<tr>
<td>D. Preparing and Presenting Action Plans (Option 1/Option 2)</td>
<td>Individual/small-group work/presentation in large group</td>
<td>45 mins./1 hour, 15 mins.</td>
</tr>
</tbody>
</table>
Session 26

Advance Preparation

1. Decide whether you want the participants to prepare their action plans individually or in groups (see Training Tip).

➡️ Training Tip

If the participants can be divided into groups according to their work places (those coming from the same facility or the same unit in a facility), or based on a close day-to-day working relationship (such as participants who work at a number of sites under the same administrative division or members of a task force summoned from different organizations), they can work in small groups. Group members will develop a joint action plan on a flipchart and report as a group at the full-group session (see Activity D, Option 2: Work in groups).

If the participants cannot be divided into such groups, they can work individually. In this case, the presentations to the large group will be limited to one action per participant. Reporting will be done orally, by reading from the Action Plan worksheet (Handout 26-A), and the participants will not repeat actions already reported by other participants. They will report only different actions or different aspects of actions already reported (see Activity D, Option 1: Individual work).

2. Post all of the daily wrap-up flipcharts together where the participants can see them. If you have opted for having the participants write their “identified actions from the day’s learning” in their notebooks, you do not need to post any flipcharts. When you get to Activity C, just refer the participants to their own notes.

3. Prepare flipcharts for Step C-2 and Activity D (at least five flipcharts for Step D-3 under Option 1 or one sample flipchart for Step D-2 under Option 2) (see below).

[Flipchart for Step C-2]

QUESTIONS FOR ACTION PLAN:
• What will you do differently in counseling?
• How can you help make counseling more client centered in your facility (among your colleagues)?

[Flipchart for Step D-3 (Option 1) and D-2 (Option 2)]

<table>
<thead>
<tr>
<th>Actions</th>
<th>Barriers</th>
<th>Strategies</th>
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Session 26
Activities

Activity A. Introduction (10 minutes)

1. Explain the following points to the participants:
   - Implementing what you have learned is important to you and your clients. Thinking about impact and results makes you ask yourself, Why am I doing this? Do I think this is valuable? What difference will it make for clients? What difference will it make for myself and my colleagues? Even a minor improvement in the quality of the counseling service you provide might mean a lot to your clients—for example, it might mean more satisfied clients, clients who continue longer, or clients who trust you and your facility more.
   - To facilitate taking concrete steps for improving the quality of counseling services, you will develop an action plan in this session. At the end of every day, you have been picking out one activity that you could implement as soon as you return to work. This action plan is meant to remind you of those ideas and to give you a framework for focusing on them. The action plan will be inspired by those ideas.
   - To ensure your co-workers’ and supervisors’ buy-in to the changes you will be making (actions you will be taking), you will need to provide information and coordinate closely with them—especially with colleagues from your site or your district who are attending this workshop. You might need to be prepared to overcome resistance within your facility.
   - Being clear about why you are carrying out these action plans will help you if and when you encounter people who are curious or concerned about the changes they see or whose work is also affected by the changes.
   - Finally, to maximize the support you receive from your institution, you will need to coordinate with your colleagues. You will design activities for informing your managers about the outcomes and implications of this workshop and for getting their endorsement and support, and you will work together to implement those activities.
     - Include this paragraph only if it has been discussed and negotiated with the managers in advance: Last but not least, the organizers of this workshop have already engaged your managers (specify the level of managers—i.e., either site level or higher) in making decisions about this workshop, and they will also report back to your managers after the workshop to describe the kind of support and endorsement the managers can and should provide at your workplace.

Activity B. Review of Training Goal and Objectives (15 minutes)

1. Tell the participants that before moving on to the action plan, it will be good to review the goal and objectives of the workshop as well as what has been accomplished so far.
2. Ask them to refer to Handout 1 in the Participant Handbook, and ask a volunteer to read the goal and objectives of the workshop.
Session 26

3. Next, refer back to the objectives one by one, and for each objective ask the participants the following question:

* How (through which sessions or activities) has this objective been addressed and achieved?

4. Ask the participants:

* What are the key messages of this workshop?
* What are the new ideas or tasks that this training course brings to FP counseling?

Activity C. Introducing the Action Plan Framework (10 minutes)

1. Refer the participants to the “Principles of Good Client-Provider Interaction” flipchart from Session 3. Tell them that these principles describe the ideal situation. In their action plans, they will be identifying the changes they want to make to the way they provide counseling or the actions they want to take in order to achieve that ideal situation.

2. Post the “Questions for Action Plan” flipchart (see Advance Preparation) and refer the participants to Handout 26-A in the Participant Handbook. Read the two questions and tell them that they will write their answers to these two questions in the first column of the Action Plan table:

* What will you do differently in counseling?
* How can you help make counseling more client centered in your facility (and among your colleagues)?

3. Orient the participants to the table and to the task:

- Column 1: Specific changes or actions that the participants can implement immediately; write the answers to the two questions here.
- Column 2: Barriers that might be encountered; for each proposed change or action, write the possible barriers to the implementation of that change or action in the corresponding cell.
- Column 3: Strategies for overcoming barriers; for each barrier identified, write at least one strategy for overcoming that barrier here.

4. Review the flipcharts from the daily wrap-up sessions, with the participants’ ideas about how they can apply what they have learned. Or, if you have instructed the participants to take notes (as part of the daily wrap-up) about what they have learned each day that they could apply in their work, ask them to find those notes in their notebooks. Tell them that they can use these ideas or develop new actions for the first column of the table.

Activity D. Preparing and Presenting Action Plans

(Option 1—Individual Work) (45 minutes)

1. Ask the participants to identify (to themselves) three concrete actions they would like to implement when they get back to their workplace, based on what they have learned in this training. As they choose their actions they should prioritize those actions that are (1) feasible with their own resources, (2) important in terms of service quality, and (3) realistic.
2. Ask them to start filling in all three columns of the Action Plan framework. Give them 15 minutes to complete the task.

3. Post the “Actions, Barriers, Strategies” flipchart (see Advance Preparation).

4. Ask the participants to volunteer to share the actions they listed in the first column of their action plans and record them in the first column of the flipchart. Get one action at a time from each participant and then move on to another participant. With each action that you record, ask how many other participants have the same action. Ask everybody to volunteer the barriers they have identified for that action and record them on the flipchart. Do the same for strategies to overcome the barriers.

5. Encourage the participants to write down in their individual action plans the barriers and strategies that the group has identified collectively for their specific actions.

6. Repeat the same process, going through actions, barriers, and strategies until there is no action left. Tell the participants not to repeat the same or similar actions but to share only those actions not yet listed on the flipchart.

(Option 2—Work in Groups) (1 hour, 15 minutes)

1. Divide the participants into groups (see Advance Preparation on how to do this). Ask the groups to identify (to themselves) three concrete actions they would like to implement when they get back to their workplace, based on what they have learned in this training. As they choose their actions, they should prioritize those actions that are (1) agreed on by the group members, (2) feasible with their own resources, (3) important in terms of service quality, and (4) realistic.

2. Post the “Actions, Barriers, Strategies” flipchart (see Advance Preparation). Ask the groups to start filling in all three columns of the action plan framework. Give them 25 minutes to complete the task and prepare for reporting on a flipchart.

3. Ask the groups to volunteer to present their action plans. After each group presents their plan, ask if the other participants have questions or anything to add. Ask if the plan is feasible and realistic.

4. Spend no more than 10 minutes on the presentation and discussion of each action plan, and continue until all groups have reported.

5. Encourage the groups to add to their action plans any additional points or any changes they think they should make as a result of the discussion.

6. Before closing, remind all of the groups to give you their site action plans for copying or typing. They will need to keep their own copy for reference back at their workplaces.

Activity E. Review of Action Plans (15 minutes)

1. Provide an overview of the action plans, including the most common actions, the most common barriers, and ideas for strategies for overcoming the barriers.

2. Ask if the participants have questions and answer them.

3. Refer the participants to Handout 26-B in the Participant Handbook for a list of possible barriers and suggested strategies.
Session 27:  
Follow-Up Plans and Workshop Closing

Facilitator’s Objectives
• To administer the postcourse knowledge assessment
• To solicit the participants’ thoughts and impressions about the training and their suggestions for improving future workshops
• To describe the follow-up plans of the institution organizing the workshop, of the participants’ own institutions, and of the trainers

Time
1 hour, 25 minutes

Materials
• Postcourse knowledge assessment (Appendix B)
• Copies of the participants’ precourse knowledge assessment
• Participants’ workshop evaluation form (Appendix G)
• Certificates of participation

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</table>
| B. Postcourse Assessment    | Written test/presentation of correct answers    | 40 mins.
| C. Course Evaluation        | Written evaluation                              | 15 mins.
| D. Review of Follow-Up Plans| Lecture/Q&A                                     | 10 mins.
| E. Closing Ceremony         | Presentation/distribution of certificates        | 15 mins.

Advance Preparation
1. Identify and invite guests from the organizing institution and/or the participants’ institution(s) for the closing ceremony. If possible, invite them to attend the afternoon session beginning after the first hour. This will allow them to listen and contribute to the action plan presentations as well.
2. Make enough copies of the postcourse knowledge assessment to have one for each participant.
3. Make enough copies of the evaluation form to have one for each participant.

4. If follow-up plans were not made before the start of the workshop (see the “Training Preparation” section in the Introduction for Trainers and Program Planners), discuss follow-up plans for this training with the institution organizing the workshop and with the participants’ institution(s), and determine what follow-up will be conducted, by whom, and when. See Trainer’s Tool No. 7 (Session 27).

5. If follow-up plans have already been made, arrange for a representative of the institution(s) to inform the group about the follow-up plans.

6. Prepare a certificate of participation for each participant (as appropriate for each setting).

7. Optional: Identify one of the participants to give closing remarks on behalf of the participants. (Preferably, this would be done earlier in the day or the day before.)

8. Summarize the workshop for any guests attending the closing ceremony (this can be done by a participant as well), and prepare the guests to give brief comments.
Session 27
Activities

Activity A. Introduction (5 minutes)
1. Open the session by saying that this is the final session and the closing of the course.
2. Provide an overview of the activities that will take place during the session.

Activity B. Postcourse Knowledge Assessment (40 minutes)
1. Administer the postcourse knowledge assessment. (30 minutes)
2. When everyone is finished, collect the papers.
3. Distribute the scored precourse assessments. (Each participant will get his or her own paper, distinguishing it by the number marked on it.)
4. Provide the answers to the assessment aloud in front of the group while the participants correct their own precourse assessment papers. (10 minutes)
5. Remind the participants of your commitment to keeping scores confidential. (Participants can keep the pretests.)

Activity C. Course Evaluation (15 minutes)
1. Distribute the evaluation forms.
2. Allow 15 minutes for the participants to complete them.
3. Collect all copies of the evaluation.

Activity D. Review of Follow-Up Plans (10 minutes)

Training Tip
The trainer should have discussed the follow-up plan with the institution organizing the workshop and the participants’ institution(s) in advance, or before this session at the latest. Ideally, a representative from one of these institutions should explain the plans for follow-up activities. If such a person is not available or the trainer will be conducting the follow-up activities, the trainer should go ahead and explain the plans for follow-up.

1. Invite and introduce the representative from the organizing institution or from the participants’ organization to describe the training follow-up plan. This might include follow-on or inservice workshops to focus on specific content areas for FP counseling. It might also include technical assistance site visits—to see how the participants are doing in implementing their action plans, to provide guidance and support for further development of skills, and to assist with problem solving. See Trainer’s Tool No. 7 (Session 27).
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2. Have the representative answer the participants’ questions about follow-up.

3. Remind the participants of mechanisms such as self-assessment, peer feedback, and client feedback as means of getting feedback on one’s performance as a counselor. Remind them of the three tools in the curriculum that they can use for the above mentioned activities: the Learning Guides for FP Counseling, for self-assessment; the Counseling Skills Observation Guide, for peer feedback; and the Client Interview Form, to solicit feedback from clients.

4. Ask if the participants have any questions.

Activity E. Closing Ceremony (15 minutes)

Conduct a closing ceremony that is appropriate for the setting. This might include closing remarks by the representative(s) of the organizing institution or the participants’ institution and the distribution of certificates. Thank the participants and announce the completion of the course. Optional: Have one participant give closing remarks (see Advance Preparation).
Follow-up is a set of activities for supporting the participants in a training event and reinforcing their learning. Follow-up can be done by the trainers and supervisors from the institution that has organized the training event, or it can be conducted by the participants’ institution, as long as they have been trained and understand the principles, steps, and behaviors to look for. Follow-up involves direct observation of the provider conducting the particular skill; feedback on the application of acquired skills, knowledge, and attitudes; guidance on further development of skills; assistance with problem solving; monitoring how action plan implementation is progressing; and assistance in soliciting the support that the participants need from their supervisors, colleagues, and organization. It is one of the ways of ensuring transfer of learning to the work environment.

Why is follow-up essential?

- It takes more than attending a training to become an expert at conducting FP counseling. Skill development occurs through practice. Facilitative feedback from supervisors and trainers about how the trainees are doing is intended to provide support and promote the learning process once the participants have returned to their home facilities and have begun using their newly acquired skills.

- A common weakness of trainings like this is insufficient posttraining follow-up. Making changes on your own in your work setting can be difficult, and many people give up after a while, no matter how enthusiastic they were after the training. That is why the trainers and the organizing institution are committed to providing follow-on trainings and site visits, so that the trainees will have the needed technical and emotional support to change the way they work.

How can follow-up be done?

Major responsibility for developing mechanisms for and conducting follow-up rests with the organization or institution in which the newly trained participants work. Institutions and those organizing training events should plan and budget for follow-up along with planning for the training event. Supervisors, trainers, and peers can all provide follow-up. Clients also can provide valuable feedback through exit interviews, and their input can be used as a follow-up mechanism. Below is a list of possible follow-up activities:

- Follow-on meetings or inservice workshops with the participants
- Follow-up visits (technical assistance site visits)
- Phone calls to and among the participants
- Newsletters, email groups, and web sites to share achievements, problems, remedies
- On-the-job sharing of experiences among peers
- Peer feedback using the Counseling Skills Observation Guide (see Session 25)
- Self-assessment using Learning Guides for FP Counseling Skills (Appendix B in the Participant Handbook)
- Client interviews and focus group discussions to monitor improvement of service quality

(See Appendix C: Client Interview Form)