# MATERNAL AND CHILD HEALTH SYLLABUS

## FOR ASSOCIATE NURSING PROGRAM

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## FOREWORD

The Ministry of Education, through the Rwanda Basic Education Board (REB) has initiated the Associate Nursing Program at the second cycle of secondary education. The underlying principle behind the introduction of this program is to ensure that the curriculum responds to the needs of the learners, the society, and the labour market.

Maternal Child Health is one of subjects of Associate Nursing Program that emphasizes on equipping the learners with required knowledge, skills, and attitudes and values required for high-quality nursing care. This aligns with Rwanda Vision 2050, which focuses on improving the country's socio-economic status through health care.

It is only the healthy people who can significantly play a major role in this socio-economic transformation journey. Maternal Child Health subject teach the theories, principles, and procedures on which the midwifery practice depends.

I extend my sincere appreciation to all those involved in developing this syllabus, especially the Ministry of Health in collaboration with REB, who coordinated the entire process from start to the end. Feedback and suggestions for future revisions of this syllabus are welcome.

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## TABLE OF CONTENTS

FOREWORD
ACKNOWLEDGEMENTiv
1. GENERAL INTRODUCTION
1.1. Background on introduction of the associate Nursing Program in secondary schools1
1.2. Associate nurse leaver's profile
2. TEACHING AND LEARNING MATERNAL AND CHILD HEALTH4
2.1 Rationale of teaching and learning Maternal and Child Health4
2.1.1 Maternal and Child Health and society4
2.1.2. Maternal and Child Health and learners
2.2. Competences
2.2.1. Generic competences
2.2.2. Broad Maternal and Child Health subject competences
2.2.3. Maternal and child health and developing competences
2.3. Pedagogical Approach
2.3.1. Role of the learner
2.3.2. Role of the teacher
2.3.3. Special needs education and inclusive approach
2.4. Assessment Approach10
2.4.1. Types of assessment
2.4.2. Record keeping11
2.4.3. Item writing in summative assessment11

2.4.4. Structure and format of the examination
2.5. Reporting to parents
2.6. Resources
2.6.1. Material resources
2.6.2. Human resources
3. SYLLABUS UNITS DEVELOPMENT
3.1. Presentation of the structure of the syllabus
3.2. Maternal and child health subject for S 417
3.2.1. Key competences at the end of S 417
3.2.2. Table units for S 4
3.3. Maternal and child health subject for S 5
3.3.1. Key competences at the end of S 527
3.3.2. Table units for S 5
3.4. Maternal and child health subject for S 6
3.4.1. Key competences at the end of S 6
3.4.2. Table units for S 6
4. REFERENCES
APPENDICES
Appendix A: weekly time allocation for associate nursing program43
Appendix B: Maternal and Child Health Overview45

## **1. GENERAL INTRODUCTION**

### 1.1. Background on introduction of the associate Nursing Program in secondary schools

For a long time ago, nursing education around the World has taken different steps from the traditional apprenticeship, vocational, and hospital-based training models to a higher education academic model of teaching and learning (Gaberson & Oemann, 2010). This paradigm shift was driven by the increased demand of the professionalization of nursing, the changing illness patterns, and the expansion of the knowledge-based society requiring more improved and innovative education preparation of nursing professionals that is adapted to the context and specific health needs (Yam, 2004).

In Rwanda, the above-mentioned transformations in nursing education evolved overtime. Healthcare education in general started in 1933 with medical assistants "Assistants Médicaux" program, followed by the assistant midwives "Auxiliaires accoucheuses" in 1949 (Harelimana, et., 2015). From 1954 up to 1979, the A2 and A3 programs were established at secondary level. From the academic year 1979 to 2004, the program of nursing education was exclusively "A2" secondary level (Kabgayi School of Nursing and Midwifery, 2013). Nurses were mostly prepared for hospital and health center-based healthcare provision, leaving out the community. This gap was later addressed by introduction of the Community Health Workers (CHWs) in 1995 (MoH, 2012).

The Cabinet resolution of October 27th, 2004 phased out the A2 nursing program. A transition period was decided to move from nursing program A2 to Nursing Program A1 up to 2007. This was in the purpose to train nursing professionals at a tertiary level in order to produce highly-qualified professionals, thus improving the quality health care delivery. However, gaps in providing basic nursing care at different levels were continually observed.

Fourteen years later after the closure of A2 nursing program, the Government of Rwanda has decided to introduce Associate Nursing Program as provided by the Article 58 of the Rwandan Law Determining Organization of Education No 10/2021 of 16/02/2021 (MoE, 2021).

Therefore, the associate nurse program is being introduced to provide the support needed in basic nursing care provision, with capacity to progress in different advanced health care professions. This decision aims to meet the current and contextual health needs that present high demand to provide the basic nursing care at different levels of the Rwanda healthcare system, particularly in the community.

### 1.2. Associate nurse leaver's profile

Upon completion of the associate nursing program, learner should have acquired knowledge, skills and attitudes to:

- 1. Provide support to individuals, families, groups, and communities when faced with unpredictable news and life changing diagnoses;
- 2. Provide health education within her/his scope of practice;
- 3. Demonstrate understanding of the determinants of health that affect individuals, families, groups, and communities;
- 4. Demonstrate understanding of basic common health conditions affecting individuals of all age groups and their basic nursing care;
- 5. Assess individuals, families, groups, and community health needs and provide basic nursing care using evidence-based practice;
- 6. Collaborate effectively with multidisciplinary team members, clients, and stakeholders in the provision of basic nursing care;
- 7. Demonstrate the values of responsibility, accountability, commitment, and patriotism in serving the nation;
- 8. Ensure the privacy, confidentiality, dignity, and safety of individuals is maintained at all times;
- 9. Provide support on basic care in reproductive, maternal, neonatal and child health;
- 10. Explain scientific phenomena using correct scientific terminologies;

- 11. Demonstrate knowledge and skills required to progress to higher learning education;
- 12. Express themselves fluently, and with confidence, in speaking and writing using correct vocabulary and grammar appropriately;
- 13. Perform experiments using a range of scientific and medical tools and equipment and draw appropriate conclusions;
- 14. Demonstrate ability to manage data (collect, recording, processing, analysis, synthesis, and reporting) and take appropriate decision.

## 2. TEACHING AND LEARNING MATERNAL AND CHILD HEALTH

### 2.1 Rationale of teaching and learning Maternal and Child Health

Maternal and Child Health subject is one of professional subjects specific to Associate Nursing Program. The maternal and child health subject is a competence based like other subjects of associate nursing program. The aim of Maternal and child health subject is to equip the learners with knowledge, skills, and attitude that are required to perform basic maternal and child health services such as promotive, preventive, curative, and rehabilitative care for women, children and their families. The competences acquired will enable learners to provide quality care to women and families during pregnancy, labor, normal childbirth/delivery, and postnatal period. It provides the learner with basic knowledge, skills, and required attitudes to manage reproductive health and gynecology-related problems using Primary Health Care (PHC) approach. This contribute to addressing inequalities that affect health care outcomes, especially sexual and reproductive health and rights is fundamental to ensuring all women have access to respectful and high-quality maternity care.

This subject also introduces the learner to the normal child growth and development process, and the provision of care to well and sick children with acute and chronic diseases, as well as their families.

### 2.1.1 Maternal and Child Health and society

Maternal and Child Health focuses on the health of childbearing women, and children at all stages of their growth and development. It plays a crucial role in the community wellbeing by addressing identified health needs of individuals, families, groups, and the community as whole. Studying maternal and child health develops knowledge, skills, and attitudes towards the promotion, preventive, curative and rehabilitative care for women, children, and their families. As a health-related subject, Maternal and Child Health provides a good foundation for the study of health-related domains by knowing the normal and abnormal functioning of human bodies for women and children.

### 2.1.2. Maternal and Child Health and learners

Teaching maternal and child health subject at early age for learners is crucial to shape their carrier path in their future healthcare studies as well as to respond primarily to the national and global needs.

The inclusion of maternal and child health in associate nursing program reflects the importance of the subject in many aspects of the primary healthcare provided at the community level daily in health promotion, prevention and curative.

### 2.2. Competences

A competence is the ability to perform a particular task successfully, resulting from having gained an appropriate combination of knowledge, skills and attitudes. The national policy documents, based on the national aspirations, identify **'Basic Competences'** alongside the **'Generic Competences'** that will develop higher order thinking skills. Basic Competences are addressed in the stated **broad subject competences** and in objectives highlighted on year basis and in each of the learning units. The selection of types of learning activities must focus on how learners are able to demonstrate such competences throughout and at the end of the learning process. A Generic Competence is a competence that is not specific to a particular subject or situation. Generic Competences are transferrable and applicable to a range of subjects and situations including employment.

The generic competencies that must be emphasized and reflected in the learning process are briefly described below and teachers will ensure that learners are exposed to tasks that help the learners acquire the skills.

### 2.2.1. Generic competences

**Critical thinking and problem-solving skills:** The acquisition of such skills will help learners think imaginatively, innovatively, and broadly to evaluate and find solutions to problems encountered at the leaner's level.

**Creativity and innovation:** The acquisition of such skills will help learners take initiative and use imagination beyond the knowledge provided to generate new ideas and construct new concepts.

**Research:** This will help learners find answers to questions based on existing information and concepts and to explain phenomena based on findings from information gathered.

**Communication in appropriate languages:** Teachers, irrespective of not being teachers of language, will ensure the proper use of the language of instruction and appropriate local language by learners. This will help learners communicate clearly, confidently and respectfully and convey ideas effectively through speaking and writing and use the correct language structure and relevant vocabulary.

**Cooperation, inter personal management and life skills:** This will help the learner to cooperate and work with others in a multidisciplinary team in whatever tasks are assigned and to practice positive ethical moral values and respect for the rights, feelings and views of others. Learners will perform practical activities related to environmental conservation and protection. They will also advocate for individual, family and community health, hygiene and nutrition and respond creatively to the variety of challenges encountered in life.

**Lifelong learning:** The acquisition of such skills will help learners to update their knowledge and skills with minimum external support and to cope with the evolution of advances in knowledge for personal fulfillment in areas that need improvement and development.

### 2.2.2. Broad Maternal and Child Health subject competences

The overall objective of learning maternal and child health subject is to equip learners with skills to manage basic reproductive health concerns, basic obstetrical, newborn and child care in their practices.

Upon completion of this subject, learners will have acquired competences (knowledge, skills and attitudes) which will enable them to:

- Provide basic support to woman, children, and family members who are involved in the woman care process;
- Provide anticipatory guidance related to pregnancy, birth, breastfeeding, parenthood, and change in the family;
- Provide care to pregnant woman during prenatal, per natal, and postnatal period;

- Provide care to the newborn immediately after birth;
- Provide care to well and sick children with acute diseases using the Integrated Management of Childhood Illness (IMCI) approach.

### 2.2.3. Maternal and child health and developing competences

These basic competences alongside the generic competences are stated in such way that will develop higher order thinking skills and will help subject learning and the application of what has been learnt in real life situations. Through presentation of information observations and practice during the learning process, the learner develops not only deductive and inductive skills but also communication, critical thinking and problem-solving skills in trying to make inferences and conclusions.

Doing practical simulations using problem-based learning and case studies involves not only analytical and problem solving skills, but also innovation, creativity and research. Group work and cooperative learning of maternal and child health promote interpersonal relations and teamwork.

### 2.3. Pedagogical Approach

Learners learn best when they are actively involved in the learning process through a high degree of participation, contribution and production.

At the same time, each learner is an individual with their own needs, pace of learning, experiences and abilities. Teaching strategies must therefore be varied but flexible within well-structured sequences of lessons. Learner-centered pedagogy does not mean that the teacher no longer has responsibility of seeing that learning takes place.

### 2.3.1. Role of the learner

The activities of the learner are indicated against each learning unit and they all reflect appropriate engagement of the learner in the learning process.

The teaching and learning processes will be tailored towards creating a learner friendly environment based on the learner's capabilities, needs, experience and interests.

The learning activities will be organised in a way that encourages learners to construct knowledge either individually or in groups in an active and engaging way.

Learners work on one-unit competence at a time in the form of concrete units with specific learning outcomes broken down into knowledge, skills, and attitudes.

In practical lessons, learners will work in groups and will be also encouraged to work individually in simulation laboratory.

### 2.3.2. Role of the teacher

The competence-based curriculum is about transforming learning and ensuring that learning is deep, enjoyable and habit forming.

Teachers ought to shift from the traditional method of instruction to that of a facilitator in order to value the individual needs and expectations of learners.

The teacher should be a role model in ethical behavior and practice.

The teacher must identify the needs of the learners, the nature of the learning to be done, and the means to shape the learning experiences accordingly.

A teacher's role is to organise the learners, both in the classroom, skills lab and clinical settings, and engage them through participatory and interactive methods during the learning processes as either individuals, in pairs or in groups. This ensures that learning is personalised, active, participative, and co-operative.

The teacher will design and introduce tasks to the class to perform or for immediate discussion. The role of the teacher will be to guide the learners in constructing their own knowledge.

Learners are taught how to use textbooks and other resource materials in different ways for example to search for and make use of information in writing their own notes.

The teacher must select and develop appropriate materials such as teaching models, or charts, for the learners to use in their work.

In practical lessons, the teacher will first demonstrate the handling of the anatomical models and then show the way the procedure (technique) should be carried out before exposing to the learners, as the task that can be dangerous if not performed correctly.

The teacher ought to demonstrate how to self-prepare, prepare the simulated client, environment, materials and equipment that will be used for the procedures in the correct manner before leaving the learners to do it on their own.

The teacher must devise remedial strategies, both in and outside the classroom, to address the issue of slow learners and those with learning difficulties. The teacher must ensure these learners keep pace with the rest of the group in acquiring the required competences.

The teacher has to ensure that cross cutting issues are addressed in teaching and learning process.

#### 2.3.3. Special needs education and inclusive approach

All Rwandans have the right to access education regardless of their different needs. The underpinnings of this provision would naturally hold that all citizens benefit from the same menu of educational programs. The possibility of this assumption is the focus of special needs education. The critical issue is that we have persons/ learners who are totally different in their ways of living and learning as opposed to the majority. The difference can either be emotional, physical, and sensory.

These learners equally have the right to benefit from the free and compulsory basic education in the nearby ordinary/mainstream schools. Therefore, the schools' role is to enroll them and also set strategies to provide relevant education to them. The teacher therefore is requested to consider each learner's needs during teaching and learning process. Assessment strategies and conditions should also be standardised to the needs of these learners. Detailed guidance for each category of learners with special education needs is provided for in the guidance for teachers.

### 2.4. Assessment Approach

Assessment evaluates the teaching and learning methods through the collection and interpretation of evidence and individual learner's progress in learning and makes a judgment about the learner's achievements measured against a set of defined standards. Assessment is an integral part of the teaching learning processes. In the competence-based curriculum, assessment must also be competence-based. The learner is given a complex situation related to his/her everyday life and asked to try to overcome the situation by applying what he/she learned.

Assessment will be organized at the following levels: school-based assessment, district based assessment, national based assessment.

### 2.4.1. Types of assessment

#### a) Formative and continuous assessment (assessment for learning)

Continuous assessment involves formal and informal methods used by schools to check whether learning is taking place. When a teacher is planning his/her lesson, he/she should establish criteria for performance and behavioral changes at the beginning of a unit. At the of end of every unit, the teacher should ensure that all the learners have mastered the stated key unit competencesbased on the criteria stated before going to the next unit. The teacher will assess how well each learner masters both the subject content and the generic competences described in the syllabus. From this, the teacher will gain a picture of all-round progress of the learner. The teacher will use one or a combination of the following: (a) pen and paper, (b) oral questioning and tests, (c) Objectives structured clinical examination (OSCE), and (d) Clinical practice examination during or at the end of one or more learning units.

#### b) Summative assessment (assessment of learning)

When assessment is used to record a judgment of the competence or performance of the learner it serves a summative purpose. Summative assessment gives a picture of a learner's competence or progress at any specific moment. The main purpose of summative assessment is to evaluate whether learning objectives have been achieved and to use the results for the ranking or grading of learners. The results of summative assessment are also used for deciding on progression, for selection into the next level of education and for certification. This assessment should have an integrative aspect whereby a learner must be able to show mastery of all competences. Summative assessment can be internally school based assessment or external assessment in the form of national examinations. School based summative assessment should take place once at the end of each term and once at the end of the year. School summative assessment average scores for each subject will be weighted and included in the final national examinations grade. School based assessment average grade will contribute a certain percentage as teachers gain more experience and confidence in assessment techniques. In the third year of the implementation of the new curriculum it will contribute 10% of the final grade, but will be progressively increased. Districts will be supported to continue their initiatives to organize a common test per class for all the schools to evaluate the performance and the achievement level of learners in each individual school. This is a comprehensive assessment that takes place at all levels of studies. This subject will be part of the External National Examination. External summative assessment will be done at the end of S6 and this will be for both theory and practical examination.

### 2.4.2. Record keeping

This is gathering facts and evidence from the assessment instruments and using them to judge the learner's performance by assigning an indicator against the set criteria or standards. Assessment procedures generate data in the form of scores which will be carefully recorded and stored in a portfolio. These scores will contribute to remedial actions and alternative instructional strategies. They will also be used to provide feedback to the learner and their parents to check learning progress and to provide advice, as well as be used in the final assessment of the learners.

This portfolio is a folder (or binder or even a digital collection) containing the learner's work as well as the learner's evaluation of the strengths and weaknesses of the work. Portfolios reflect not only work produced (such as papers and assignments), but also it is a record of the activities undertaken over time as part of learner learning. The portfolio output (formative assessment) will be considered only as enough for three years of the Advanced level. It will serve as a verification tool for each learner that he/she attended the whole learning before he/she undergoes the summative assessment for the subject.

### 2.4.3. Item writing in summative assessment

Before writing a question paper, a plan or specification of what is to be tested or examined must be created. This will show the units or topics to be tested on, the number of questions in each level of Bloom's taxonomy and the marks allocation for each question.

In a competence-based curriculum, questions from higher levels of Bloom's taxonomy should be given more weight than those from the knowledge and comprehension level.

Before developing a question paper, the item writer must ensure that the test or examination questions are tailored towards competence-based assessment by doing the following:

- Identify topic areas to be tested on from the subject syllabus;
- Outline subject-matter content to be considered as the basis for the test;
- Identify learning outcomes to be measured by the test;
- Prepare a table of specifications; and
- Ensure that the verbs used in the formulation of questions do not require memorisation or recall answers only but test for broad competences as stated in the syllabus.

### 2.4.4. Structure and format of the examination

There will be one written paper and one practical examination in maternal and child health subject at advanced level. A written paper measures knowledge and understanding, and skills at all levels of Bloom's taxonomy while a practical examination will measure practical skills. Time will depend on the paper's items and procedure to be carried out and learners with special education needs.

Paper/ Practical exam	Component	Weighting
Written paper	The paper will measure both knowledge of the subject matter and acquisition of competences. The paper will consist of questions from all levels of Bloom's taxonomy. (100 marks)	40%

Practical	The practical exam will measure practical skills (assessment, self-preparation, client preparation,			
exam	environmental preparation, material and equipment preparation, implementation of the			
	procedure, finishing of the procedure, collaboration with the client, report). This exam requires			
	candidates to carry out practical work in a set period of time. (100marks)			

#### Assessment of Subject objectives

The assessment objectives listed below reflect those parts of the syllabus competences that will be assessed in the examination. Knowledge and understanding

- Scientific vocabulary, terminology and conventions (including symbols, quantities and units);
- Anatomical models, materials, equipment's, flip charts, medication, including techniques of operation and aspects of safety.

Candidates should be able to demonstrate knowledge and understanding of:

- Scientific phenomena, facts, laws, definitions, concepts and theories;
- Scientific and technological applications and their social, economic and environmental implications. The subject content defines the factual knowledge that candidates may be required to recall and explain.

Questions testing these assessment objectives will often begin with one of the following words: *define, state, name, describe, explain* (using your knowledge and understanding) or outline.

#### Handling information and solving problems

Candidates should be able to handle information and solve problems using, written, symbolic, graphical and numerical forms of presentation to:

- Locate, select, organize and present information from a variety of sources;
- Translate information from one form to another;

- Use information to identify patterns, report trends and draw conclusions;
- Give reasoned explanations for phenomena, patterns and relationships;
- Make nursing diagnosis;
- Apply knowledge, including principles, to situations;
- Demonstrate an awareness of the limitations in maternal and child health; and
- Solve problems.

These assessment objectives cannot be precisely specified in the syllabus content because questions testing such skills may be based on information which is unfamiliar to the candidate. In answering such questions, candidates are required to use principles and concepts that are within the syllabus and apply them in a logical, reasoned or deductive manner to a new situation.

Questions testing these assessment objectives will often begin with one of the following words: *discuss, predict, suggest, calculate, and explain (give reasoned explanations and explain the processes of using information and solving problems) or determine.* 

#### Clinical skills and investigations

Candidates should be able to:

- Collect samples, analyse, interpret and record basic lab tests in Maternal and child health;
- Collect, analyse, interpret and record client information to reach conclusions; and
- Evaluate methods and the quality of data and suggest possible improvements.

### 2.5. Reporting to parents

The wider range of learning in the curriculum means that it is necessary to think again about how to share a learners' progress with their parents. A single mark is not sufficient to convey the different expectations of learning which are in the learning objectives. The most helpful method of reporting is to share what learners are doing well and where they need to improve.

### 2.6. Resources

### 2.6.1. Material resources

Teaching and learning of maternal and child health subject necessitates practical activities for better understanding of facts. The successful implementation of this subject requires an equipped skills laboratory, equipped library, charts, and ICT tools like computers and projectors.

#### 2.6.2. Human resources

The effective teaching of this subject requires a joint collaboration of educators at all levels. Given the material and skills requirements, teachers are expected to accomplish their noble role.

The following are detailed skills required for maternal and child health teacher:

- Registered midwife with pedagogical content knowledge and teaching experience;
- Registered pediatric nurse with pedagogical content knowledge and teaching experience;
- Animated and engaging personality, patient and tolerant attitude, passion for sharing knowledge, excellent verbal and written communication abilities, creativity and diverse methodologies for imparting ideas and knowledge;
- Knowledge of educational software, programs for recording, grading, and evaluating learners' work and progress;
- Ability to use a range of teaching tools for example projectors and other media-sharing devices;
- Proficiency with anatomical models, materials and equipment in skills lab; and
- Proficient in maternal and child health, able to motivate learners and keep the classroom on task, a passion for life for maternal and child healthcare and working with learners, and proficient in the use and implementation of the latest technologies and tools.

## **3. SYLLABUS UNITS DEVELOPMENT**

### 3.1. Presentation of the structure of the syllabus

The subject of maternal and child health is taught and learned in associate nursing program as a core subject

At every grade the syllabus of maternal and child health for associate nursing program is structured in topic areas and then further broken down into units

Each unit has the following common components:

- 1. Each unit is aligned with the periods or number of lessons;
- 2. Each unit has a key unit competence whose achievement is pursued by all teaching and learning activities undertaken by both the teacher and the learners;
- 3. Each unit key competence is broken into three types of learning objectives as follows:
  - *a) Type I:* learning objectives relating to knowledge and understanding (Type I Learning Objectives are also known as Lower Order Thinking Skills or LOTS);
  - b) Type II and Type III: These learning objectives relate to the acquisition of skills, attitudes and values (type ii and type iii

Learning objectives are also known as higher order thinking skills or HOTS).

- 1. Each unit has content that indicates the scope of coverage of what should be taught and learnt in line with stated learning objectives;
- 2. Each unit suggests learning activities that are expected to engage learners in an interactive learning process as much as possible (learner-centered and participatory approach); and

3. Finally, each unit is linked to other subjects, its assessment criteria and the materials (or resources) that are expected to be used in the teaching and learning process.

In all, the syllabus of maternal and child health for associate nursing program has got 18 units including 6 units in S4, 6 units in S5 and 6 units in S6

### 3.2. Maternal and child health subject for S 4

### 3.2.1. Key competences at the end of S 4

- Identify the characteristics of a normal pregnancy
- Demonstrate the ability to manage a pregnant woman during antenatal period
- Provide adequate support to a woman in labour
- Assist in management of the first stage of labour
- Assist in management of the second and third stages of labour
- Provide immediate care to the newborn including Helping Baby to Breathe

### 3.2.2. Table units for S 4

Topic area: Women's health			Sub-topic area: Physiology of pregnancy			
S4 Maternal and Child health Unit 1: Normal pr		regnancy	Number of periods : 20			
Key Unit Competence: Identify the characteristics of a normal pregnancy						
Learning Objectives			Content	Learning Activities		
Knowledge and understanding	Skills	Attitudes and values				
<ul> <li>Define common concepts used in normal obstetrics</li> <li>Identify the characteristics of a normal pregnancy</li> <li>Identify the characteristics of a normal fetal skull.</li> </ul>	<ul> <li>Perform obstetric pelvic examination of landmarks and foetal sutures</li> <li>Differentiate normal and abnormal fetal skull.</li> </ul>	<ul> <li>Recognize common concepts used in normal obstetrics</li> <li>Appreciate the pregnancy to be normal</li> <li>Respect clients' rights, and privacy.</li> </ul>	<ul> <li>Concepts</li> <li>Physiology of normal pregnancy (pelvis, fetal</li> <li>head diameters, Presentations)</li> <li>Characteristics of a normal pregnancy.</li> </ul>	<ul> <li>Using case studies on normal pregnancy, discuss in groups the physiological changes in the female reproductive system during pregnancy and the consequences of these changes for the pregnant woman</li> <li>By watching a video for a normal pregnancy, discuss in groups the characteristics of a normal pregnancy.</li> <li>By watching a video of obstetrical pelvis and foetal sutures, discuss in groups different pelvic landmarks and foetal sutures.</li> </ul>		
			Fundamentals of Nursi	ng		
Assessment criteria:						
Materials: Pelvis, foetal head models, projectors, screen, computer and video CD, Flip chart of Foetal presentation, written case studies, skills lab, and skills lab equipment and materials.						

Topic area: women's health			Sub-topic area: Pregnant woman				
S4 Maternal and Child H	Health	Unit 2: Antenatal Care		Number of periods: 36			
Key Unit Competence: Demonstrate the ability to provide support to a pregnant woman during antenatal period							
Learning Objectives			Content	Learning Activities			
Knowledge and understanding	Skills	Attitudes and values					
<ul> <li>Define the concept of antenatal care</li> <li>Explain the principles of focused antenatal care (FANC) approach</li> <li>Describe the physiological changes of pregnancy</li> <li>Discuss disease preventive measures during pregnancy</li> <li>Interpret laboratory investigation findings for a pregnant woman</li> <li>Explain danger signs of pregnancy.</li> </ul>	<ul> <li>Apply principles of FANC</li> <li>Perform an assessment on a simulated pregnant woman</li> <li>Carry out the basic laboratory tests for a pregnant woman.</li> </ul>	<ul> <li>Acknowledge the principles of FANC</li> <li>Use appropriate language while providing FANC</li> <li>Respect clients' rights and privacy</li> <li>Demonstrate professionalism during the provision of FANC.</li> <li>Appreciate disease preventive measures during pregnancy</li> </ul>	<ul> <li>Concept of antenatal care</li> <li>Principles of FANC</li> <li>The diagnosis of pregnancy</li> <li>Comprehensive assessment of a pregnant woman</li> <li>Calculation of gestational age based on the last menstruation period</li> <li>Physiological changes duringpregnancy</li> <li>The basic laboratory investigations during</li> </ul>	<ul> <li>Watching a video on antenatal care, discuss in pair the assessment of a pregnant woman.</li> <li>In small group, perform anassessment of a simulatedpregnant woman</li> </ul>			

Describe the balanced nutrition during pregnancy	antenatal care (rapid blood glucose, proteinuria, HIV,• Using models in the skills lab, carry out the basic laboratory investigations
• Explain the gestational agefor a pregnant woman	Malaria, pregnancy test)(rapid blood glucose, proteinuria, HIV, malaria, pregnancy test)• Danger signs ofpregnancy test)
<ul> <li>Explain disease prevention during pregnancy</li> <li>Identify danger signs in</li> </ul>	<ul> <li>Management of minor pregnancy complications (mild</li> <li>Using case studies, manage minor complications in</li> </ul>
pregnancy.	anaemia, early morning sickness, lickness, warms and
Identify complications     ofpregnancy	warms and infections on pregnancy) sickness, warms and infections on pregnancy).
• Categorize the management of complications in pregnancy	<ul> <li>Nutrition during pregnancy.</li> <li>Using role plays, carry out simulations on a health education on nutrition and diseases prevention during pregnancy.</li> </ul>
	15, Pharmacology, and Fundamentals of Nursing
	regnant woman during antenatal period
	en, computer and video CD, nutrition Flip chart, Flip chart of danger signs on evolution, Flip chart of physiological changes during pregnancy , written case ipment and materials.

Topic area: Women's health			Sub-topic area: Assessment of a woman and fetus		
S4 Maternal and <b>(</b>	Child health	Unit 3: Introduction	to labour monitoring		Number of periods: 20
Key Unit Compete	ence: Provide adec	uate support to a wome	en in labour		
Learning Objectiv	Î.		Content	Learning Activities	
Knowledge and understanding	Skills	Attitudes and values			
<ul> <li>Define the concept normal labour</li> <li>Explain signs of labour</li> <li>Determine steps to follow in assessing a woman in labour</li> <li>Categorize maternal and fetal indicators.</li> <li>Identify signs of labour</li> </ul>	<ul> <li>Provide support to a mother in normal labour</li> <li>Assist during assessment of a woman in labour.</li> </ul>	<ul> <li>Recognize signs of labour</li> <li>Respect clients' rights, and privacy</li> <li>Utilize appropriate language while monitoring a woman in labour</li> <li>Demonstrate professionalism while monitoring a woman in labour.</li> </ul>	<ul> <li>Signs of</li> <li>Assessm labour</li> <li>Monitor progress <ul> <li>Use of</li> <li>Materr signs, <sup>1</sup></li> <li>or artifi the me contrac Drugs</li> <li>Fetal in rate, A</li> </ul> </li> </ul>	ent of a woman in ing the labour : partograph: nal indicators(Vital Time of spontaneous ficial rupture of embranes, Uterine ction, Urine output, administered) ndicators (Foetal heart mniotic fluid, Descent foetal headand head	<ul> <li>By watching a video of a woman in labour, discuss in groups the signs of labour</li> <li>By watching a video of assessment for pregnant woman, discuss in groups the elements to be considered when conducting a rapid assessment of a mother</li> <li>Using mannequins of a pregnant woman, monitor the labour progress</li> <li>Using partograph and structured case studies of a woman in labour, monitor a woman and fetus.</li> </ul>

Links to other subjects: Biology senior 3, pharmacology, Fundamentals of Nursing

Assessment criteria: Learner can provide support monitor a woman in labour

Materials: Pelvis, projectors, screen, computer and video CD, Flip chart of labour progress, partograph, Flip chart of Foetal presentation, written case studies, skills lab, and skills lab equipment and materials.

Topic area: women's health S4 Maternal and Child health			Sub-topic area: Ma	anagement of a woman and fetus
		Unit 4: Introduction to the management of the first stage of Labour		Number of periods: 20
Key Unit Competer	ice: Assist in mana	gement of woman in the first s	tage of labor	
Learning Objectives			Content	Learning Activities
Knowledge and understanding	Skills	Attitudes and values		
<ul> <li>Define stages of labour</li> <li>Explain danger signs of labour</li> <li>Describe the national referral system of a mother in labour</li> </ul>	• Assist in providing care to the woman in the first stage of labour	<ul> <li>Recognize danger signs of labour</li> <li>Acknowledge the national referral system of a woman in labour</li> <li>Appreciate appropriate language while providing careto a woman in the first stage of labour</li> <li>Respect clients' rights, and privacy</li> <li>Demonstrate professionalism when assisting in management of the first stage of labour</li> </ul>	<ul> <li>Management of first stage of labour</li> <li>Danger signs during labour</li> </ul>	<ul> <li>By watching a video of a woman in labour, discuss in groups the management of a woman in the first stage of labour</li> <li>By watching a video of a woman in labour, discuss in groups the danger signs to be considered and what to monitor when managing a woman in thefirst stage of labour.</li> </ul>
		logy, Fundamentals of Nursing		
		nanage a mother in normal labou		Elip chart of danger signs
		l video CD, Flip chart of labour p lls lab equipment and materials.	rogress, partograph	, rup chart of danger signs

Topic area: Women's he	alth		Sub-topic area: Deliver	y
S4 Maternal and Child Health			on To Management Of nird Stages Of Labour	Number of periods: 26
Key Unit Competence: Assist in management of women in the second a Learning Objectives			and third stages of labor Content	Learning Activities
Knowledge and understanding	Skills	Attitudes and values	-	
<ul> <li>Differentiate the secondand the third stages of labour</li> <li>List the observations needed during the thirdstage of labour.</li> </ul>	<ul> <li>Assist in providing care to a woman in the second stage of labour</li> <li>Assist in providing care to a mother in the third stage of labour</li> <li>Examine a placenta after delivery.</li> </ul>	<ul> <li>Appreciate appropriate language while providing care to a mother in second stage of labour</li> <li>Appreciate appropriate language while providing care to a mother in second third of labour</li> <li>Respect clients' rights, and privacy</li> </ul>	<ul> <li>Management of second stage of labour:         <ul> <li>Mechanisms of labor</li> <li>The passenger</li> <li>Maternal birth passage</li> <li>Assessing fetal well- being during second stage of labor</li> <li>Recognising fetal compromise during second stage of labor</li> <li>Duration of second stage of labor</li> <li>Reducing risks during second stage of labor</li> </ul> </li> </ul>	<ul> <li>By watching a videoof a woman in the second stage of labour, discuss in groups the the elements of monitoring during the second stage of labour.</li> <li>Using a case studies on the third stage of labour, discuss dangers of labour.</li> </ul>

	• Demonstrate professionalism	• Management of third stage of labour:	
	when managing labour.	<ul> <li>Administration of a uterotonic drug</li> </ul>	
		<ul> <li>Cord clamping</li> </ul>	
		<ul> <li>Controlled cord traction</li> </ul>	
		– Delivery of the Placenta	
		– Uterine massage	
		• Danger signs during labour.	
Links to other subjects: Biology, Pharmacology, a	and Fundamentals of	Nursing	

Assessment criteria: Learner can assist in management of a woman in second and third stages of labour

**Materials:** Pelvis, foetal head models, projectors, screen, computer and video CD, Flip chart of labour progress, Flip chart of danger signs on pregnancy, Flip chart of Foetal presentation, Written case studies, skills lab, and skills lab equipment and materials.

Topic area: Newborn			Sub-topic area: Neon	atal care
S4 Maternal and Chil	d health	Unit 6: Immediate care of	f a newborn	Number of periods: 22
Key Unit Competence: Provide immediate care to the newborn Learning Objectives			Content	Learning Activities
Knowledge and understanding	Skills	Attitudes and values		
<ul> <li>Define the term immediate care of a newborn</li> <li>Describe elements of assessment for a newborn</li> <li>Explain different positions for a breastfed newborn.</li> </ul>	<ul> <li>Assess the newborn</li> <li>Perform the procedure of Help babies breathe</li> <li>Support a mother to initiate breastfeeding</li> <li>Recognize correct positioning for a breastfed newborn.</li> </ul>	<ul> <li>Recognize elements of assessment for a newborn</li> <li>Pay attention when helping babies to breathe</li> <li>Appreciate appropriate language while providing care to a newborn</li> <li>Respect clients' rights and privacy</li> <li>Demonstrate professionalism when providing care to a newborn.</li> </ul>	<ul> <li>Concept of immediate care of a newborn</li> <li>Assessment of the new born</li> <li>Helping Babies Breathe</li> <li>Breastfeeding.</li> </ul>	<ul> <li>By watching a video on newborn assessment, discuss in groups the elements of assessment for a newborn</li> <li>Using Neonatalie model in skills lab, carry out simulations of newborn assessment</li> <li>Using Neonatalie model in skills lab, carry out simulations of Helping babies breathe.</li> </ul>
Links to other subjects	Biology, Pharmacolog	y, and Fundamentals of Nursin	ng	
Assessment criteria: lea	arner can provide imm	ediate care of a newborn		
	- /	n, computer and video CD, Flij s lab equipment and materials	· · ·	t of neonatal danger signs,

### 3.3. Maternal and child health subject for S 5

### 3.3.1. Key competences at the end of S 5

- Monitor a mother during postnatal period
- Identify obstetrical danger signs in women during postnatal period and manage the woman accordingly
- Detect, manage and refer a newborn with danger signs
- Provide counselling in reproductive health
- Provide counselling in reproductive health related conditions
- Provide counselling in Gender Based Violence situations

### 3.3.2. Table units for S 5

Topic area: Women's health		Sub-topic area: Woman in postpartum					
S5 Maternal and Child Health		Unit 1: Postnatal care	Number of periods: 40				
Key Unit Competence: Monitor a mother during postnatal period							
Learning Objectives							
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities			
<ul> <li>Define the term Obstetric</li> <li>Explain the importance of post- natal care.</li> </ul>	<ul> <li>Perform the rapid Initial Assessment of a mother during postnatal period</li> <li>Provide care to the mother during postnatal period.</li> </ul>	<ul> <li>Recognize the rapid Initial Assessment of a mother during postnatal period</li> <li>Use proper handling of a mother in postnatal period.</li> </ul>	<ul> <li>Immediate post- partum care:</li> <li>Assessment,</li> <li>Vital signs,</li> <li>Fundal height,</li> <li>Uterine retraction,</li> <li>Bladder fullness,</li> <li>Amount of blood loss.</li> </ul>	• By watching a video of postnatal care, discuss in groups on systematic assessment of a mother in postnatal period			
		nd Fundamentals of Nursing					
Assessment criteria: lear	rner can monitor a mothe	er during postnatal period					
Materials: mannequins, materials.	projectors, screen, compu	iter and video CD, Written ca	se studies, skills lab, and	l skills lab equipment and			

Topic area: Women's health			Sub-topic area: Obstetri	cal emergencies			
S5 Maternal and Child Health		Unit 2: Postnatal obstetric danger signs		Number of periods 32			
Key Unit Competence: Identify obstetrical danger signs in women during postnatal period and manage the woman accordingly							
Learning Objectives			Content	Learning Activities			
Knowledge and understanding	Skills	Attitudes and values					
<ul> <li>Describe the main danger signs of the mother during the post-natal period.</li> <li>Identify the main danger signs for the mother during the post-natal period.</li> </ul>	• Recognize the main danger signs for the mother during the post-natal period assist mothers and newborns with postnatal complications.	• Take action in relation to the identified danger sign.	<ul> <li>Obstetric danger signs for the mother during postnatal period: <ul> <li>Vaginal bleeding</li> <li>Fits/seizures</li> <li>Fast or difficult breathing</li> <li>Fever</li> <li>Signs of hypotension</li> <li>Severe headache</li> <li>Blurred vision</li> <li>Signs of Deep Vein Thrombosis (DVT).</li> </ul> </li> </ul>	<ul> <li>By watching a video of postnatal care, discuss in groups on systematic assessment of a mother in postnatal period</li> <li>Using mannequin, provide care to the simulated mothed during postnatal period</li> <li>Using case studies of a mother in postnatal period presenting different danger signs, discuss in groups danger signs of a mother in postnatal period.</li> </ul>			
· · · · ·	Biology, Pharmacology						
Assessment criteria: lear	mer can identify obstetrica	al danger signs in women	during postnatal period and 1	manage the woman appropriate			
	, projectors, screen, com d skills lab equipment ar		ip chart of danger signs on p	regnancy, written case studies			

Topic area: Newborn			Sub-topic area: Neonatal care		
<b>S5 Maternal and Child health</b>		Unit 3: Newborn danger signs		Number of periods: 36	
Key Unit Competer	nce: Detect, manage	and refer a newborn with dang	ger signs	'	
Learning Objectives					
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities	
• Explain neonatal danger signs	<ul> <li>Identify danger signs of a newborn</li> <li>Provide the required care while dealing with neonatal danger signs.</li> </ul>	<ul> <li>Use appropriate language while providing care</li> <li>Recognize neonatal danger signs</li> <li>Respect of rights and privacyof the newborn model</li> <li>Demonstrate professionalismwhile providing care.</li> </ul>	<ul> <li>Newborn danger signs</li> <li>Management of newborn danger signs</li> </ul>	<ul> <li>By watching a video of newborn with danger signs, discuss in group the danger signs</li> <li>Using a case study, manage a new born with danger signs in simulationlab.</li> </ul>	
Links to other subje	<b>cts:</b> Biology, Pharmao	cology, and Fundamentals of Nur	rsing		
Assessment criteria:	learner can identify,	manage and refer a newborn with	n danger signs.		
-	ins, Projectors, screer kills lab equipment a	n, computer and video CD, Flip c nd materials.	hart of neonatal dange	er signs, written case studies,skil	

Topic area: Repro	ductive health		Sub-topic area: Counse	elling
S5 Maternal and (	Child health	Unit 4: Counselling in I	Reproductive Health	Number of periods: 12
Key Unit Compet	ence: Provide counselling	g in reproductive health		
Learning Objectives				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul> <li>Define key concepts in counselling</li> <li>Describe principles of counselling</li> <li>Outline steps for Premarital counseling</li> <li>Explain the process of counselling in VCT</li> <li>Explain principles of counselling</li> </ul>	<ul> <li>Conduct counselling to individuals/ couples</li> <li>Conduct effective health education</li> <li>Provide effectively a premarital counselling</li> <li>Provide effectively a counselling in VCT</li> </ul>	<ul> <li>Acknowledge the principles of counselling</li> <li>Use appropriate language while providing counselling</li> <li>Respect rights and privacy when</li> <li>Demonstrate professionalism while providing counselling</li> </ul>	<ul> <li>Describe principles of counselling</li> <li>Premarital counseling</li> <li>VCT (Voluntary Counselling and Testing)</li> </ul>	<ul> <li>By watching a video on counselling, discuss in group the concept of counseling</li> <li>Using role play, provide counselling related to reproductive health</li> <li>Simulate premarital counselling in group</li> <li>Group discussion and role play on VCT</li> </ul>
Links to other sub	jects: Biology, pharmacolo	ogy, Fundamentals of Nurs	ing	
Assessment criteri	<b>a:</b> learner can provide cou	nselling in reproductive he	alth	
Materials: Projecto	ors, screen, computer and v	video CD, Skills lab, skills la	ab equipment and material	s.

Topic area: Reproductiv	ve health		Sub-topic area: Co	ounselling
S5 Maternal and Child health		Unit 5: Counselling in Reprod related conditions	luctive Health	Number of periods: 16
Key Unit Competence:	Provide counselling	in reproductive health related co	nditions	
Learning Objectives				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul> <li>Describe the Infectious andnon- infectious diseases that affectreproductive health</li> <li>Explain the purpose and procedure in Prevention of mother to child transmission.</li> </ul>	<ul> <li>Conduct a counselling related to prevention of mother to child transmission</li> <li>Diagnose the common Infectious and non-infectious and non-infectious diseases that affect reproductive health.</li> </ul>	<ul> <li>Recognize the purpose and procedure in Prevention of motherto child transmission</li> <li>Acknowledge the detection of common Infectious and non-infectious diseases that affect reproductive health</li> <li>Use appropriate language while providing counselling</li> <li>Respect rights and privacy when providing counselling</li> <li>Demonstrate professionalism while providing counselling.</li> </ul>	<ul> <li>Counselling in PMTCT (Prevention of mother to child transmission)</li> <li>Counselling in case of STIs, includingHIV/ AIDS.</li> </ul>	<ul> <li>By watching a video on counselling related to PMTCT, discuss in groups the process to be used when conducting PMTCT</li> <li>Using role play, provid counselling in case of HIV infection.</li> </ul>
Links to other subjects: I	Biology, Pharmacolog	gy, and Fundamentals of Nursing.		
Assessment criteria: lear	ner can provide cour	selling in reproductive health rela	ted conditions	
Materials: Projectors, scr	een, computer and vi	ideo CD, Skills lab, skills lab equip	ment and materials.	

Topic area: Reproduc	tive health		Sub-topic area: Cou	inselling
<b>S5 Maternal and Chil</b>	d health	Unit 6: Counselling in Gender Based Violence situations		Number of periods: 8
Key Unit Competence	Provide counselling i	n Gender Based Violence situation	ons	
Learning Objectives				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul> <li>Understand the nature and impact of Gender-based Violence.</li> <li>Explain the key principles and approaches to counselin in GBV.</li> </ul>	<ul> <li>Provide effective support to GBV survivors</li> <li>Advocate against gender-based violence.</li> </ul>	<ul> <li>Use appropriate language while providing counselling in case of Gender Based Violence</li> <li>Recognize advocacy to provide in case of Gender Based Violence</li> <li>Respect rights and privacy when providing counselling</li> <li>Demonstrate professionalism while providing counselling</li> </ul>	<ul> <li>Introduction to Gender-Based Violence (GBV)</li> <li>Main causes of Gender-Based violence</li> <li>Counseling in GBV</li> <li>Advocacy in Gender-Based Violence</li> </ul>	• Using role play, provide counsellingin case of Gender based violence
Links to other subjects	Biology, Pharmacolo	ogy, and Fundamentals of Nursin		
Assessment criteria: le	arner can provide cou	nselling in GenderBased Violenc	ce situations	
Materials: Projectors, s	creen, computer and v	rideo CD, skills lab, and skills lab	equipment and mater	ials.

## 3.4. Maternal and child health subject for S 6

### 3.4.1. Key competences at the end of S 6

- Provide natural family planning services
- Provide modern family planning services
- Provide barrier and permanent family planning services
- Provide promotional activities for the wellbeing of a child
- Provide preventive services to children
- Classify and manage a sick child.

## 3.4.2. Table units for S 6

Topic area: Reproductive	e health		Sub-topic area: Family planning		
S6 Maternal and Child h	ealth	Unit 1: Natural Family Planning		Number of periods: 26	
Key Unit Competence: Pr	ovide natural family pla	nning services			
Learning Objectives					
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities	
<ul> <li>Define key concepts of family planning</li> <li>Describe principles of family planning.</li> <li>Explain the mode of action of natural family planning methods</li> <li>Describe indications and contraindications of natural family planning methods</li> <li>Explain the effects of natural family planning methods</li> </ul>	<ul> <li>Provide effectively natural family planning methods</li> <li>Appraise the effects of natural family planning methods</li> </ul>	<ul> <li>Acknowledge key concepts of family planning</li> <li>Appraise principles of family planning</li> <li>Demonstrate professionalism</li> <li>Use appropriate language while providing naturalfamily planning methods</li> <li>Respect rights, privacy and confidentiality when providing natural family planningmethods</li> </ul>	<ul> <li>Key concepts of family planning</li> <li>Principles of family planning</li> <li>Natural family planning methods: <ul> <li>Mode of action,</li> <li>Indication,</li> <li>Contraindication of Fertility Awareness Method, Lactational Amenorrhoea Method, Withdrawal method.</li> </ul> </li> </ul>	<ul> <li>After watchinga video on the provision of natural FP methods, discussin Groups the use ofnatural FP methods</li> <li>Using reproductive health models, provide natural FP methods</li> <li>Role play on the administration of natural family planning product s</li> </ul>	

• Explain indications and contraindications of	• Demonstrate professionalism	
natural family planning methods to individuals		

Links to other subjects: Biology, pharmacology, Fundamentals of Nursing.

Assessment criteria: learner can provide natural family planning services

Materials: Reproductive health models, Projectors, screen, computer and video CD, Skills lab, skills lab equipment and materials

#### MATERNAL AND CHILD HEALTH SYLLABUS

Topic area: Reproducti	ve health		Sub-topic area: Fami	ly planning
S6 Maternal and Child	health	Unit 2: Modern Family Pl	anning	Number of periods: 30
Key Unit Competence:	Provide modern fami	ily planning services		
Learning Objectives				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul> <li>Explain the mode of action of modern family planning methods</li> <li>Describe indications and contraindications of modern family planning methods</li> <li>Explain the effects of modern family planning methods</li> </ul>	<ul> <li>Provide effectively modern family planning methods</li> <li>Appraise the effects of modern family planning methods</li> </ul>	<ul> <li>Use appropriate language while providing modern family planning methods</li> <li>Respect rights, privacy and confidentiality when providing modern family planning methods</li> <li>Demonstrate professionalism</li> </ul>	<ul> <li>Modern family planning methods:</li> <li>Mode of action,</li> <li>Indication,</li> <li>Contraindication and side effects of pills, injectables, implants, IUDs.</li> </ul>	<ul> <li>After watching a videoor the provision of modern FP methods, discuss in Groups the use of modern FP methods</li> <li>Using reproductive health models, provide modern FP methods</li> <li>Role play on the administration of modern family planning products</li> </ul>
Links to other subjects:	Biology, pharmacology	y, Fundamentals of Nursing.		
Assessment criteria: lear	ner can provide mode	rn family planning services		
1		ors, screen, computer and vide chart of FP, Skills lab, and skil	1	, i

Topic area: Reproductiv	e health		Sub-topic area: Family	y planning
S6 Maternal and Child h	lealth	Unit 3: Barrier and peri Planning	manent Family	Number of periods : 16
Key Unit Competence: P	rovide barrier and pe	ermanent family planning	services	
Learning Objectives				
Knowledge and understanding	Skills	Attitudes and values	Content	Learning Activities
<ul> <li>Explain the mode of action of barrier family planning methods</li> <li>Describe indications and contraindications of barrier family planning methods</li> <li>Explain the effects of barrier family planning methods</li> <li>Discuss the use of permanent contraceptive methods.</li> </ul>	<ul> <li>Provide effectively barrier family planning methods</li> <li>Provide effectively information related to permanent family planning methods.</li> <li>Appraise the effects of family planning methods.</li> </ul>	<ul> <li>Use appropriate language while providing care</li> <li>Respect rights, privacy and confidentiality when providing care</li> <li>Demonstrate professionalism</li> </ul>	<ul> <li>Barrier family planning methods (indication and contraindication of):</li> <li>Condom,</li> <li>Diaphragm</li> <li>Caps.</li> <li>Permanent contraceptive methods (indication and contraindication of):</li> <li>Vasectomy</li> <li>Tubal ligation.</li> </ul>	<ul> <li>After watching a video on the provision of barrier and permanent FP methods, discuss in Groups the use of FP methods</li> <li>Using reproductive health models, provide barrier and permanent FP methods</li> <li>Role play on the provision of barrier and permanent family planning methods.</li> </ul>
•		, and Fundamentals of Nur		
Assessment criteria: learn	er can provide barrier	r and permanent family pla	nning services	
Materials: Reproductive he equipment and	- /	rs, screen, computer and vid	leo CD, Flip chart of FP, Sl	kills lab, and skills lab

Topic area: Child healt	th		Sub-topic area: Chil	ldhood
S6 Maternal and Child	l health	Unit 4: Promotion of he	alth in children	Number of periods: 16
Key Unit Competence	Provide promotion	al activities for the wellbein	ng of a child	
Learning Objectives		Content	Learning Activities	
Knowledge and understanding	Skills	Attitudes and values		
<ul> <li>Define common concepts used in pediatrics</li> <li>Determine key elements for child assessment.</li> </ul>	• Identify beliefs and Practices thataffect Child Health.	<ul> <li>Use appropriate language while assessing children</li> <li>Respect clients' rights and confidentiality</li> <li>Show empathy when handling children</li> <li>Demonstrate professionalism while providing care to children.</li> </ul>	<ul> <li>Concepts of child health care</li> <li>Assessment of a child</li> <li>Beliefs and Practices that affect Child Health</li> </ul>	<ul> <li>Using an infant model, conduct ahealth assessment</li> <li>After watching a video of child assessment, discuss in groups about steps to be followed whenassessing a child</li> <li>After watching a video of community beliefs and practices that affect Child Health, discuss ingroups the impact of community malpractices that affect the child.</li> </ul>
-		gy, and Fundamentals of N	ursing.	
Assessment criteria: lea				
Materials: infant model,	, projectors, screen, co	omputer and video CD, skill	ls lab, skills lab equipme	ent and materials, and library.

Topic area: Child healt	h		Sub-topic area: Ch	ildhood
S6 Maternal and Child	health	Unit 5: Prevention of diseas	ses in children	Number of periods : 26
Key Unit Competence:	Provide disease preve	ntion services to children		
Learning Objectives			Content	Learning Activities
Knowledge and understanding	Skills	Attitudes and values		
<ul> <li>Explain the principles of early childhood development</li> <li>Determine the steps of child developmental monitoring</li> <li>Outline uses of vaccines in children according to the National Expanded Program of Immunization.</li> </ul>	<ul> <li>Screen the child growth and development</li> <li>Discuss the growth development of a child</li> <li>Administer vaccines according to Expanded Program of Immunization.</li> </ul>	<ul> <li>Recognize principles of early childhood development</li> <li>Use appropriate language while providing care to children</li> <li>Respect clients' rights and privacy</li> <li>Show empathy when handling children</li> <li>Demonstrate professionalism while providing care to children.</li> </ul>	<ul> <li>Principles of Early childhood development</li> <li>Promotion of child health</li> <li>Developmental monitoring and screening</li> <li>Immunizations according to Expanded Program of Immunization.</li> </ul>	<ul> <li>Using case studies, explain principles of Early childhood development</li> <li>Using WHO and CDC growth charts, plot the growth of a child</li> <li>Using mannequins, administer all types of vaccines in childhood age.</li> </ul>
Links to other subjects: E	Biology, Pharmacology,	and Fundamentals of Nursing.	•	
Assessment criteria: learn	ner can prevent disease	s in children		
		uter and video CD, National va t and materials, and library.	ccination charts, WH0	O growth charts, written case

### MATERNAL AND CHILD HEALTH SYLLABUS

Topic area: Child hea	lth		Sub-topic area: Chil	ldhood
S6 Maternal and Chil	d Health	Unit 6: Child Health Care		Number of periods : 30
Key Unit Competenc	e: Classify and mana	ge a sick child.		
Learning Objectives			Content	Learning Activities
Knowledge and understanding	Skills	Attitudes and values		
<ul> <li>Explain components of Integrated Management of Childhood Illness (IMCI)</li> <li>List danger signs of pediatric illnesses</li> <li>Enumerate common symptoms of pediatric illnesses.</li> </ul>	<ul> <li>Identify danger signs of pediatric illnesses</li> <li>Explain common symptoms of pediatric illnesses</li> <li>Provide care to children with common childhood illnesses using IMCI strategy.</li> </ul>	<ul> <li>Pay attention to danger signs of pediatric illnesses</li> <li>Recognize common symptoms of pediatric illnesses</li> <li>Use appropriate language while providing care to children</li> <li>Respect clients' rights and privacy</li> <li>Show empathy when handling children</li> <li>Demonstrate professionalism while providing care to children.</li> </ul>	<ul> <li>Components of Integrated Management of Childhood Illness (IMCI)</li> <li>Classification of childhood conditions of IMCI and their management.</li> </ul>	• Using computer software of ICATT (IMCI Computerized Adaptation and Training Tool), discuss steps to be followed when managing a sick child using IMCI strategy.
		ogy, and Fundamentals of Nursing		
	•	d provide appropriate care to the s		
-	, projectors, screen, co o equipment and mater	mputer and video CD, Flip chart of rials, and library.	f IMCI, IMCI teaching	and learning manual, Skills

## **4. REFERENCES**

Gaberson, K. B., & Oermann, M. (2010). Clinical teaching strategies in nursing. Springer publishing company.

Harerimana, A., Mtshali, N. G., Mukamana, D., Kimonyo, J., Kayihura, C. N., & Mugarura, J. (2015). Historical overview ofnursing and midwifery education and nursing workforce in Rwanda.

HAMELINE, D., 1983, Les objectifs pédagogiques (4ème édition), Editions ESF, Paris.

Kabgayi School of Nursing and Midwifery. Historic Background Muhanga: Kabgayi School of Nursing; 2013 [cited 2015 28thAugust]. Available from: http://www.kasnm.ac.rw/?Historic-Background

MoE (2021). Rwanda Ministry of Education: Law N° 010/2021 OF 16/02/2021 determining the organisation of educationRwanda Ministry of Health. National Community Health Strategic Plan July 2013–June 2018.

RWANDA EDUCATION BOARD (REB) 2015, Competence based curriculum, Curriculum framework, pre-primary to upper secondary, Kigali

RWANDA EDUCATION BOARD (REB) 2015, Subject syllabi, Kigali

WHO. 2016. Health workforce requirements for universal health coverage and the Sustainable Development Goals. Available at https://apps.who.int/iris/bitstream/handle/10665/250330/9789241511407-?sequence=1

Yam, B. M. (2004). From vocation to profession: the quest for professionalization of nursing. British Journal of Nursing, 13(16), 978-982.

# APPENDICES

## Appendix A: weekly time allocation for associate nursing program

No	Subjects	Weight	WEEKLY TIME ALLOCATION		
			<b>S4</b>	\$5	<b>S6</b>
1	Fundamentals of Nursing *	11	7	7	7
2	Biology*	11	7	7	7
3	Chemistry*	11	7	7	7
4	Mathematics*	5	3	3	3
5	Physics*	10	6	6	6
6	Ethics and professional code of conduct	1	1	1	0
7	Medical Pathology *	2	0	3	1
8	Surgical Pathology *	1	0	1	1
9	Pharmacology *	4	3	2	2
10	Maternal and Child health*	7	4	4	4
11	Individual learning	5	3	1	5
12	Clinical attachment*	13	6	7	10
13	Kinyarwanda	3	2	2	0
14	English*	6	4	4	4
15	French	2	1	1	1

16	Entrepreneurship	2	2	1	0
17	Citizenship	2	2	1	0
18	ICT	2	1	1	1
19	Sports/ Clubs	2	1	1	1
Total	periods / week	100	60	60	60
Total	Total number of contact/years		2340	2340	2340
Total	number of contact hours/year (39 weeks)		1560	1560	1560

#### MATERNAL AND CHILD HEALTH SYLLABUS

## Appendix B: Maternal and Child Health Overview

Торіс	Subtopic	Competences			
		Senior 4	Senior 5	Senior 6	
Women's health	Physiology of pregnancy	Identify the characteristics of a normal pregnancy			
Women's health	Pregnant woman	Demonstrate the ability to manage a pregnant woman during antenatal period			
Women's health	Assessment of a woman and fetus	Provide adequate support to a woman in labour			
Women's health	Management of a woman and fetus	Assist in management of the first stage of labour			
Women's health	Delivery	Assist in management of the second and third stage of labour			
Newborn	Neonatal care	Provide immediate care for a newborn including helping baby to breath			
Women's health	Woman in postpartum		Monitor a mother during postnatal period		

Women's	Obstetrical	Identify obstetrical danger	
health	emergencies	signs in women during	
		postnatal period and	
		manage them accordingly	
Newborn	Neonatal care	Detect, manage and refer a	
		newborn with danger signs	
Reproductive	Counselling	Provide counselling in	
health		reproductive health	
Reproductive	Counselling	Provide counselling in	
health		reproductive health related	
		conditions	
Reproductive	Counselling	Provide counselling in	
health		Gender Based Violence	
		situations	
Reproductive	Family planning		Provide natural family
health			planning services
Reproductive	Family planning		Provide modern family
health			planning services
Reproductive	Family planning		Provide barrier and
health			permanent family planning
			services
Child health	Childhood		Provide promotional
			activities for the wellbeing
			of a child

Child health	Childhood		Provide disease prevention services to children
Child health	Childhood		Classify and manage a sick child.