**Residential Field Site Training Program**

* RFST Course for Fourth Year Students is an integral part of the curriculum of Community

Medicine.

* Head of the Department of Community Medicine will implement the program as a coordinator.
* Teachers of Community Medicine assisted by UNHFPO will perform the responsibility for

successful implementation of the program.

* Health Educator of Community Medicine will organize field level activities of the students.
* All categories of personnel involved in this program will be given remuneration as per WHO

rules regulation.

**Objectives of RFST**

* After completion of the Residential Field Site Training Program as future health care providers

students will be able to:

* become accustomed with the environment and lifestyle of peoples of rural community.
* identify health needs and problems of the community people and prioretise them

conduct survey based on health needs and problems of the community

* be acquainted with health care delivery system at PHC level in Bangladesh.
* develop intersectoral coordination.

**Schedule Programme**

Daily activities schedule will be designed by the Department of Community Medicine

**Thana Health Complex**

The use of the teaching facilities, access to patient areas and employment of THC staff are all under

the control of the Thana Health and Family Planning Officer (TH and FPO), and teachers from

medical college must respect his/her authority in these matters.

Apart from the outdoor, ward and laboratory area two rooms are available for teaching sessions.

These are the classroom and the Resident Medical Officer’s room.

**Transport**

would be engaged for taking students and teachers from

the college campus to the Thana Health Complex during RFST Programme and preparatory period.

The driver of the micro-bus has a fixed schedule to follow. This is under the control of the Head of

Department of Community Medicine.

**Accommodation**

There are dormitories for the students. In each dormitory

rooms with sanitary facilities for teachers.

supporting staff ( drivers, guards, cook and table boy) will be appointed

for the conduction of the RFST Programme at Thana Health Complex.

The THFPO will support the programme by engaze in the working doctors and staffs.

**Games**

Arrangement for badminton, caromboards and volleyballs could be made available at the

dormitories.

Students may take their own music player or Walkman. But no loud music will be allowed in the

dormitories. No music is allowed after 10:00 p.m.

**Student supervision**

Supervision of the students is the responsibility of the Principal, teachers of Community Medicine

and TH & FPO.

**Community Medicine Teaching Programme**

**Residential Field Site Training Course**

**RFST Implementation Schedule**

|  |  |
| --- | --- |
| Day 1 | Introduction to UHC and briefing on primary level health care  activities and Upazila Health Profile  Indoor patients care |
| Day 2 and Day 3 | Community health survey |
| Day 4 | MCH Services  Health Education in MCH  Immunisation |
| Day 5 | Attending the OPDs and Investigation facilities at upazilla level  Attending the emergency department |
| Day 6 | Visit to Community Clinic and USC |
| Day 7 | Evaluation of the programme and presentation  Comments by students, teachers and local health authorities |

**Draft Structured Questionnaire**

**For**

**Field Site Epidemiological Survey**

This questionnaire should be completed by students after interviewing the head of household or an

adult. For some questions, may need to interview an adult female member of the family.

1. Name of village: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Name of Union: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Name of Thana : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Name of Head of family : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Name of person interviewed : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Name of student (s) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Batch / Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Roll : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Please state number of people in the family (oldest member of family first)

**Name**

**Relationship to**

**head of family**

**Sex**

**Age**

**Occupation**

**Education**

**Level achieved**

I

II

III

IV

V

VI

VII

VIII

IX

X

9. Type of housing? Pucca (building) / tin roof / thatched : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SECTION A: GENERAL DETAILS

SECTION B : HOUSEHOLD DETAILS

10. Family income per month : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If landowner, approx. amount of land owned : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

11. Disposal of excreta? Sanitary latrine / Insanitary latrine / Open air latrine :

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

12. Source of drinking water? Tubewell/ River / Pond / Others

Of others, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

13. Any pregnancy in the household ending within the last 12 months (excluding current

pregnancy ) Yes / No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, outcomeof baby : normal alive/ abnormal alive / dead

Outcome of mother : alive / dead

Was there any complications?

a) During the pregnancy (before delivery)

e.g. anaemia, pre-eclampsia : Yes/ No

If yes, specify : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

b) At the time of delivery: Yes / No

If yes, specify : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

c) After delivery e.g. fever, painful

perineum, urinary incontinence : Yes / No

If yes, specify : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14. Who attended the pregnant woman at the time of delivery?

TBA / FWV / others

If others, please specify : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If other why did the family not contact a health worker?

a) Not aware of any health worker (HW) in the village

b) Aware but did not wish to see the HW

c) Aware but HW too far to visit and she did not come to the village

d) Other reasons, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION B: MATERNAL HEALTH AND FAMILY PLANNING**

15. Where was the place of delivery? : Home / Hospital

16. Is there any body currently pregnant in the family? : Yes / No

If yes, duration : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ months

17. Any tetanus vaccine (TT) given to women during current or

previous (within last 12 months) pregnancy? : Yes / No

If yes, numbers of doses : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If not given, because of :

a) Not necessary (already received 5 doses)

b) Not aware of the need for TT

c) Aware but did not wish to have it

d) Aware but clinic too far away

e) Other specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

18. Practice of Family Planning

Male : Yes / No

If yes, type: Condom / Vasectomy / Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If no, reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Female : Yes / No

If yes, type: Oral pill / Injection / IUCD / Ligation / Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If no, reason : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

19. Immunisation status of under 5 children (check immunisation card if available)

**Child 1 Child 2 Child 3 Child 4 Child 5**

Penta 1, 2, 3

OPV 1, 2, 3

BCG

Measles

None given

If none given, because of:

a) Not aware of the need for vaccine

b) Aware but not wish to have it

c) Aware but clinic too far away

d) Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION D: CHILD HEALTH**

20. Breast feeding of under 5

**Age Duration of suckling Weaning time**

a)

b)

c)

d)

e)

21. Anthropometry of under 5:

Mid upper arm circumference (MUAC) and / or height and weight

**Age Wt in Kg Ht in Cm MUAC Cm**

a)

b)

c)

d)

e)

Dr.Md. Enamul Haque

Lecturer

Com.Medicine Department



**RFST Proposal on MCH services**

**Survey on knowledge and practice of rural mother’s regarding Family planning in two villages of upozila level in Sylhet**

**Dr. Arfa Islam**

**Lecturer**

**Community Medicine**

**Objective of the study:**

**General Objective:**

To knowledge & practice of rural mother’s regarding family planning in two villages in upozila level.

**Specific Objective:**

* To see the knowledge of rural mother’s regarding family planning.
* To determine practice of health care of the respondents during family planning.
* To know obtain socio-economic characteristic of the respondents.

**METHODOLOGY**

* Type of study: Cross sectional of descriptive study.
* Study Place: Any two villages in Sylhet
* Study Population: All the mother’s having last child of two years or less
* Sample size:100
* Sampling technique: Non-probability purposive sampling will be done.
* Data collection instrument: A semi-structured questionnaire will be used to collect data.
* Data collection technique: Data will be collected from respondents by the researchers (students) themselves by face to face interview.
* Data analysis: On completion of data collection, data will tabulate after checking & verification. Data will be analyses by simple statistical method using computer.