

## **Module Outline-5 June 2012**

**Title:** Sexual & Reproductive Health (SPI 101)—*Advanced Course*

**Duration:** 1 week

This is a one week advanced module running from 9 am- 4.30 pm (maximum 6 hour per day)

### **Aim of the Course:**

One week advanced module designed to enable student and professional participants to understand, describe and analyze sexual and reproductive health issues; and plan and manage sexual and reproductive health promotion programmes in low and middle income countries.

For participants/post-graduate students (including PhDs), advanced academics, and other interested health professionals.

**Credits:** 3 (PhD student credit will be decided in negotiation with their PhD-granting institution)

### **Description:**

The advanced sexual and reproductive module can be taken as an individual short course or an optional course for post-graduate students (including PhDs). The module is a non-clinical module aimed at enabling participants in planning and managing reproductive health promotion programmes in Low and middle income countries (LMICs). The target participants are post-graduate students, professionals working with NGOs, public health professionals, academics and students aspiring for a PhD in public health related programs. The module is designed to provide a detailed understanding of sexual and reproductive health and population issues, as well as the skills necessary for the management and evaluation of reproductive health interventions. The module will examine key challenges relating to policy, programming and management as well as the social, political and economic context influencing sexual and reproductive health.

**Objectives:**

By the end of the module, students should be able to:

- critically analyse sexual and reproductive health issues in local and global health contexts
- critically analyse SRH programmes in the context of national and international policy frameworks
- design, plan and manage SRH interventions in low-resource settings
- monitor and evaluate the effectiveness of SRH interventions

**Content & Structure:**

The module is designed in such a way it offers both theoretical and practical skills. The module will cover the following major topics: maternal health, family planning, infections, gender, social/political/economic factors, as well as planning and management (including monitoring and evaluation).

The module will take place over a single week of teaching and include a mixture of interactive participatory exercises, site visits, lectures, and guest speakers.

**Teaching and learning methods:**

In order to enhance learning, the module employs a combination of methods. These include peer-to-peer experience sharing, presentations/posters, group work, case studies, role play, site visits, and interactive lectures.

**Group work:**

All participants working on a Masters or PhD research proposal should bring in an abstract of their project on the first day of the course. The participant should identify up to 3 questions or dilemmas that they would like to address through the course.

Based on the abstracts, course facilitators will select some of them and then use them as cases for group work.

The preselected themes will be discussed as normal group work and in the end of each session concluded on in plenum. Lectures will be assigned depending on the questions raised.

### **Site visits:**

Students will develop objectives and approaches for their site visits in advance in coordination with the faculty facilitators. After the site visit, students will present their experiences and receive feedback from the other participants and facilitators.

### **Assessment:**

The final mark will be based on class assignments (individual or group work assignment)

### **Course work/Class assignment will contribute 50% of the final mark as follow**

- Individual assignment – E.g. paper critique, timed test, article review (30%)
- Group work - design an intervention based on a particular SRH problem/case study (20%)
- If taken as part of a masters program E.g. MPH, the student must pass this module to receive credit

### **Final Examination --50%**

- The final examination will be a **2.30-3** hour individual essay-based written exam and may be a closed or open book exam according to the decision of the course facilitator.

### **Certificates**

- Depending on individual request, participants who take the module as a short course can be given certificate of attendance or certificate of merit if she/he decides to do and pass the examination.

### **Grading:**

For grading, the following scheme will be used:

A	85 - 100%-	Pass
B+.	70 - 84%-	Pass
B	60 - 69%-	Pass
C	50 - 59%-	Pass
D	40 - 49%-	Fail
E	0 - 39%	

### **Bibliography:**

Richey, LA "Counseling Citizens and Producing Patronage: AIDS Treatment in South African and Ugandan Clinics" Development and Change (in press, 2012).

Richey, LA "Global knowledge/local bodies: Family planning service providers' interpretations of contraceptive knowledge(s)." Demographic Research, (2008). 18(17), 469-498.

C. Celum and Others, Acyclovir and Transmission of HIV-1 from Persons Infected with HIV-1 and HSV-2. *N Engl J Med* 362:427, February 4, 2010

Richey, LA *Population Politics and Development: From the Policies to the Clinics* (2008) New York and London: Palgrave MacMillan. (research monograph)

*The Fourth Wave: An Assault on Women. Gender, Culture and HIV in the 21st Century.* Social Science Research Council-UNESCO volume, New York: Columbia University Press. Vinh-Kim Nguyen and Jennifer F. Klot, eds. (2010).

<sup>1</sup> Choice of teaching and learning methods, to be selected by responsible lecturer

<sup>1</sup> Lecturers to provide core and further readings for their topics (text books, policy documents, articles, etc.)



Topics of focus	Contents	Teaching and Learning methods <sup>1</sup>	Recommended reading <sup>2</sup>
1. Family planning programs	<p style="text-align: center;"><b>DAY 1</b></p> <ul style="list-style-type: none"> <li>• Existing programs and Challenges in Family Planning and abortion-</li> <li>• Abortion</li> <li>• Family planning amongst people living on ART-</li> <li>• Adolescent family planning</li> <li>• Unsafe abortion-methods and providers</li> </ul>	<ul style="list-style-type: none"> <li>• Site visits</li> <li>• Presentations</li> <li>• Feedback</li> </ul>	<ul style="list-style-type: none"> <li>• Richey, LA “Global knowledge/local bodies: Family planning service providers' interpretations of contraceptive knowledge(s).” <u>Demographic Research</u>, (2008). 18(17), 469-498.</li> </ul>
2 Infections and reproductive health (HIV/AIDS, malaria in pregnancy, Human Papilloma Virus (HPV), syphilis)	<p style="text-align: center;"><b>DAY 2</b></p> <ul style="list-style-type: none"> <li>• Existing programs and Challenges in the intersection between infections and RH-</li> <li>• Malaria in pregnancy</li> <li>• HPV and reproductive health-</li> <li>• Neglected diseases (schistosomiasis)-</li> <li>• HPV types and cervical cancer or ART and reproductive decision making</li> </ul>	<ul style="list-style-type: none"> <li>• Group work based on submitted abstracts</li> </ul>	<ul style="list-style-type: none"> <li>• Lingappa JR, Lambdin B, Bukusi EA, Ngunjiri J, Kavuma L, et al. (2008) Regional Differences in Prevalence of HIV-1 Discordance in Africa and Enrollment of HIV-1 Discordant Couples into an HIV-1 Prevention Trial. <u>PLoS ONE</u> 3(1): e1411. doi:10.1371/journal.pone.0001411</li> <li>• Acyclovir and Transmission of HIV-1 from Persons Infected with HIV-1 and HSV-2 C. Celum and Others <u>N Engl J Med</u> 362:427, February 4, 2010</li> <li>• Richey, LA ”Counseling Citizens and Producing Patronage: AIDS Treatment in South African and Ugandan Clinics” <u>Development and Change</u> (in press, 2012).</li> </ul>

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<p>3. Maternal health (antenatal care, emergency obstetric care, maternal mortality &amp; morbidity)</p>	<p><b>DAY 3</b></p> <ul style="list-style-type: none"> <li>Existing programs and Challenges in maternal health</li> <li>Context-dependent variations in maternal mortality</li> <li>Quality of Care and Human Resources-</li> <li>Referral systems-</li> <li>Using new technologies to improve antenatal care</li> </ul>	<ul style="list-style-type: none"> <li>Group work based on submitted abstracts</li> <li>Interactive lectures and guest speakers</li> </ul>	<ul style="list-style-type: none"> <li>Thaddeus, Sreen and D. Maine (1994) “Too far to walk: Maternal Mortality in Context” in Social Science and Medicine 38(8): 1091-1110.</li> <li>Roadmap to maternal health</li> <li>Find WHO Reproductive Health indicators</li> </ul>
<p>4. Gender and reproductive health</p>	<p><b>DAY 4</b></p> <ul style="list-style-type: none"> <li>Existing programs and Challenges in gender and RH</li> <li>Gender violence-</li> <li>Fistula, care and gender-</li> <li>Female circumcision-</li> <li>Gender and masculinity in RH</li> </ul>	<ul style="list-style-type: none"> <li>Interactive lectures and guest speakers</li> <li>Group work based on submitted abstracts</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>
<p>5. Design, Planning, Monitoring and Evaluation of SRH Interventions</p>	<p><b>DAY 5</b></p> <ul style="list-style-type: none"> <li>Planning SRH</li> <li>Management of programmes</li> <li>Monitoring of SRH programmes</li> <li>Evaluation of SRH programmes</li> <li>Challenges in SRH programming</li> </ul>	<ul style="list-style-type: none"> <li>Interactive Lecture</li> <li>Case-based Innovative Group Work</li> </ul>	<ul style="list-style-type: none"> <li>USAID 2008. Gender-Based Violence in Tanzania: An Assessment of Policies, Services, and Promising Interventions.</li> </ul>