



# Job Aids

## *Rationale for Use and Experience to Date*

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URC IS AN INTERNATIONAL HEALTH CONSULTING FIRM WITH OVER 40 YEARS of experience helping government and private sector clients design, operate, and evaluate programs that address health, social, and educational needs. Job aids are one approach we use in a wide range of projects. This paper provides a summary of our work in developing, testing, and using job aids and summarizes the best practices and lessons learned from our work with job aids.

A job aid is typically used by a health care or other service provider while undertaking a specific task. The job aid provides cues to perform an action and directions on doing so. A job aid can reduce both reliance on recall and referral to materials that may not be handy when needed. The performance of health care providers in developing countries is often impeded due to lack of financial and human resources, low supervision and feedback, poor incentives, unclear work processes, or other causes. Such weaknesses reinforce the need for interventions like job aids. Several years ago, the USAID-funded Quality Assurance Project (QAP) and the Child Survival Collaborations and Resource (CORE) Group held a symposium to present views and evidence about the state-of-the-art in job aids, to share job aids that had been successfully used in international health, and to identify ways to make job aids more useful in field applications for child survival and international health.<sup>1</sup>

The symposium noted that pre-service and off-site training and continuing medical education do not sufficiently ensure the delivery of high quality health care. In addition, providers are not the only ones in the health care system who face obstacles in implementing interventions effectively; clients and caregivers can also be challenged in seeking care and following prescribed regimens. Language barriers, illiteracy rates, poor provider-client communications, and cultural and gender factors can all play a role in deterring best practices in medical care.

### **URC promotes the development and use of job aids because they:**

- ▶ Are more cost-effective than traditional, resource-intensive training and refresher courses since information is readily available when needed;
- ▶ Improve quality of care as they decrease provider dependence on memory (i.e., they remind providers/caregivers of key messages or processes);
- ▶ Clarify job processes by highlighting critical steps in decision making, etc.;
- ▶ Are acceptable to providers and patients;
- ▶ Are easily integrated into routine services if they have been locally adapted and are consistent with existing practices;
- ▶ Use imagery to convey information that may be difficult to communicate through text; and
- ▶ Can be applied across many technical areas (HIV/AIDS; malaria; maternal, neonatal, and child health, etc.).

<sup>1</sup> Symposium materials are available at <http://www.hciproject.org/search/node/job%20aids%20symposium>.

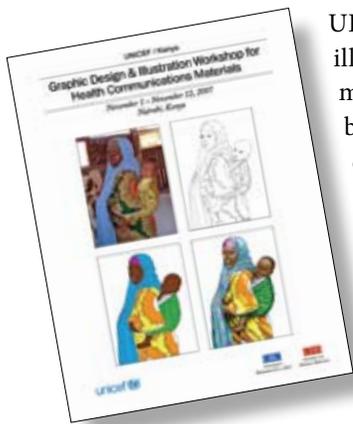
## Who uses job aids?

URC has developed job aids for numerous audiences—public and private service providers, lay health workers, community health workers, and caregivers. Job aids differ by target audience; for example, well-educated, literate health providers may need job aids with more text to supplement their recall, while less-literate community health workers may need pictorial images amplified by text in the local language to help them recall important messages to promote in the community.

## What is the process for developing a job aid?

URC follows three main steps in developing a job aid:<sup>2</sup>

1. **Formative research:** URC uses focus group discussions and key informant interviews to identify target audiences, barriers, sources of reliable information, and key messages.
2. **Developing the job aid(s):** URC next shares research results with key stakeholders and applies behavior change theories to develop sample job aids based on evidence.
3. **Testing the effectiveness of the job aids:** URC selects from a variety of methods—in-depth interviews, focus group discussions, experimental and quasi-experimental study design, pre-post test design, etc.—to measure the effectiveness of the job aid(s).



URC has graphic design and illustration capability to create materials with a pictorial image based on a photograph. This capability relies on capturing digital photos in community and health care settings; developing illustrations based on the photos; adding color and volume; laying out and designing the piece; field testing and adjusting each

piece; and repeated revisions. This process ensures a realistic illustration that not only communicates the action that should be taken but also relates to the target population. In addition, it enables easy modification for different cultures and sub-cultures. URC has trained field staff to undertake this process in Kenya, Uganda, and elsewhere.



*Graphic design training workshop in Kenya that initiated the development of the Kenyan infant and young child feeding job aids.*

## What can job aids contribute to quality improvement and behavior change?<sup>3</sup>

URC's experience with job aids in the context of quality improvement (QI) and behavior change and communication (BCC) shows that job aids can:

- ▶ Improve provider-patient communication,
- ▶ Improve client retention of key messages (knowledge),
- ▶ Form an integral part of a multi-pronged BCC strategy,
- ▶ Enhance provider performance in accordance with standards, and
- ▶ Allow less-skilled providers to carry out tasks.

URC recognizes the limitations of job aids:

- ▶ Job aids are not effective alone since QI and BCC are affected by multiple factors—infrastructure, availability of commodities, remuneration policies, to name a few—any of which can preclude a provider, client, or caregiver from performing according to a job aid's recommendations.
- ▶ Job aids that target behavior change work best when the recommended change is not too overwhelming for the provider, client, or caregiver. Supplemental behavior change interventions are necessary to change behavior significantly.

<sup>2</sup> Edson W, et al. 2002. Improving adherence to cotrimoxazole for the treatment of childhood pneumonia in Niger. Chevy Chase DM Published by QAP for USAID. Available at <http://www.hciproject.org/node/539>.

<sup>3</sup> Knebel E, et al. 2000. The Use of Manual Job Aids by Health Care Providers: What Do We Know? *Issue Paper*. Chevy Chase DM Published by QAP for USAID. Available at <http://www.hciproject.org/node/616>.

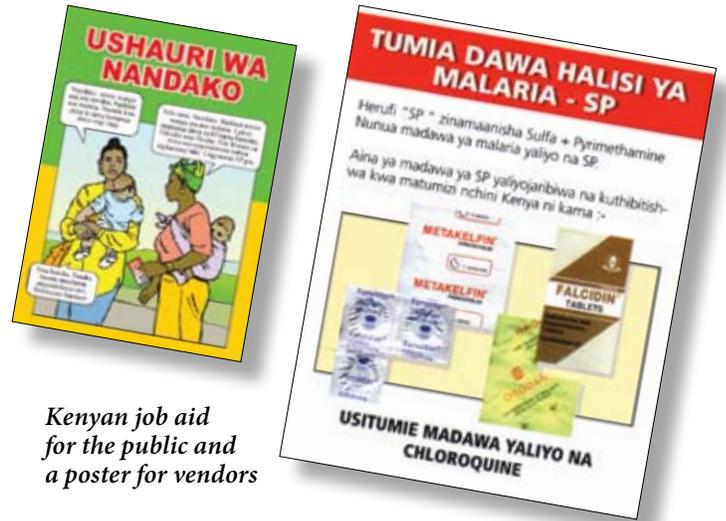
## Exemplary URC Job Aids

URC has worked worldwide in a variety of technical areas using job aids as one component to improve quality of services. Below are selected examples and their impact on improved health outcomes.

### Job aids for malaria vendors in Kenya<sup>4</sup>

QAP teamed with Kenya’s Bungoma District Health Management Team and the African Medical and Research Foundation to improve the prescribing practices of private drug outlets. The intervention, titled Vendor-to-Vendor Education, included training and equipping wholesale counter attendants and mobile vendors with customized job aids for distribution to small rural and peri-urban shopkeepers.

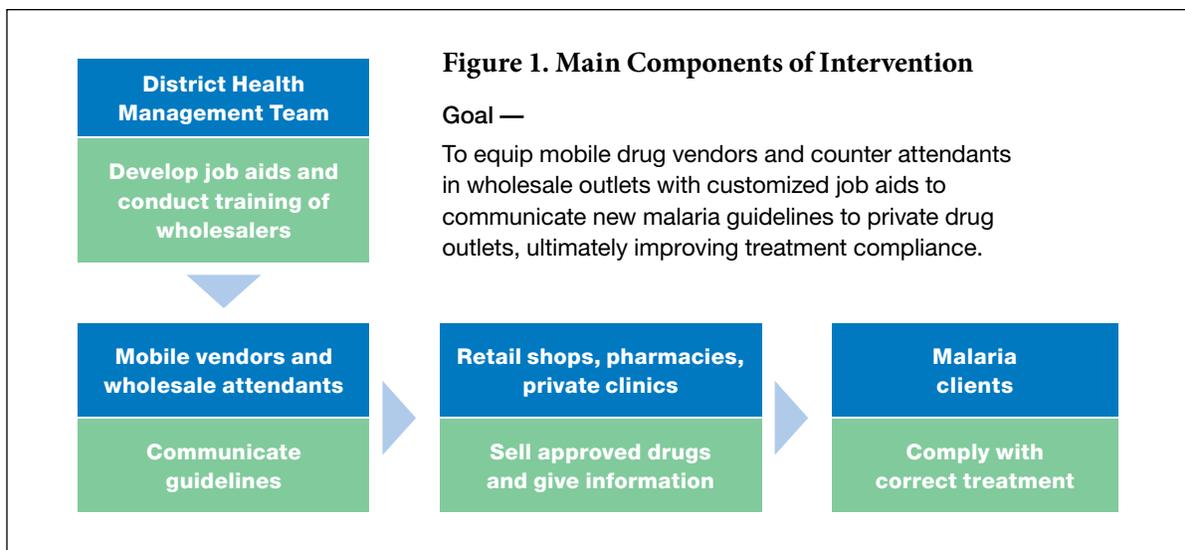
The job aids included: a poster for the shopkeepers that 1) described the new malaria guidelines, 2) provided a treatment schedule, and 3) gave advice on the appropriate actions to take in various scenarios and a poster for clients that depicted the five approved malaria drugs and advised clients to ask for them. Figure 1 shows the intervention’s main components. This work, involving local counterparts, was based on a study that revealed that while 87% of local shopkeepers had never received training on antimalarial drug use, about 60% of them were providing dosing instructions to customers. In addition, 27% of shopkeepers did not know the difference between antimalarials and antipyretics (fever reducers).



*Kenyan job aid for the public and a poster for vendors*

The wholesalers, during their normal business interactions, used the aids to provide information to shopkeepers; a separate job aid was developed for shopkeepers as a reminder. As part of an evaluation, “mystery shoppers” (simulated customers), who feigned illness and asked vendors to recommend treatment, 1) observed that the appropriate first-line antimalarial was the most-stocked and 2) received that drug most often.

The evaluation found the vendor-to-vendor education to be a low-cost outreach strategy that had a significant impact on knowledge of malaria treatment guidelines. In fact, 80% of outlets that received the shopkeeper job aids reported that it was useful, and a third used it spontaneously with the mystery shoppers. Nearly half of outlets that received job aids displayed them prominently.



<sup>4</sup> Tavrow P, J. Shabahang, and S. Makama. 2002. Vendor-to-Vendor Education to improve malaria treatment by drug outlets in Kenya. Operations Research Results. 2(3). Chevy Chase, MD: Published by QAP for USAID.

## Zambia

This country sought to train community health workers (CHWs) to prepare and interpret rapid diagnostic tests (RDTs). URC undertook a study to determine whether these low-level workers could accurately and safely perform these tests 1) using manufacturer's instructions alone, 2) better with a job aid, or 3) better still with brief training and the job aid. In collaboration with the Zambian National Malaria Control Center, FIND, and WHO-TDR, URC designed and tested the job aid and training for CHWs.

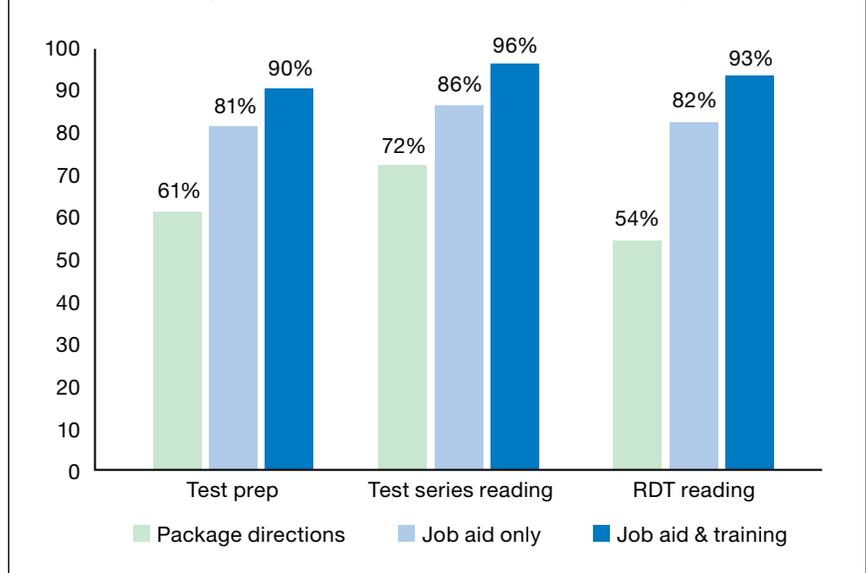
The materials dramatically improved CHW performance (see **Figure 2**), have been translated into multiple languages, and are fast becoming the international standard for community-based RDT use.

### Job aids for infant feeding, especially in the context of HIV

In 2002, URC initiated a significant collaboration with the United National Children Fund (UNICEF) under the USAID-funded QAP global leadership mandate. This partnership led to the compilation and analysis of existing programmatic evidence related to the early international guidance on infant feeding to reduce mother-to-child transmission (MTCT) of HIV.<sup>5</sup> The review highlighted many difficult and confusing issues surrounding the implementation of MTCT programs and ultimately contributed to efforts to update the global guidelines<sup>6,7</sup> and improve their interpretation, translation, dissemination, and adaptation at the country level.

The report underscored deficiencies in the training and supervision of health workers and the lack of quality counseling tools and take-home materials for mothers and caregivers. Given the growing interest in and relevance of these findings to its quality improvement work, URC/QAP committed to supporting the development of an integrated set of counseling tools that would reflect the updated international guidelines and several generic job aids designed by UNICEF and the World Health Organization. Funded by the President's Emergency Plan for AIDS Relief,

**Figure 2. Results from Zambia RDT study**



the package was finalized and tested using operations research<sup>8</sup> in collaboration with the University of Bergen, Norway, and the Kilimanjaro Christian Medical Centre in Moshi District, Kilimanjaro.

These job aids are exemplary materials for infant-feeding counseling. Adopted as the national package in Tanzania, health care workers countrywide have been trained in their use. The materials use compelling graphics and easy-to-follow text to facilitate the understanding of key messages. To create the imagery, URC/QAP's team used its graphic design capability described above. (See Tanzania collage in **Appendix 1**.)

Since launching the full package in Tanzania, URC has worked with national authorities in six countries (Uganda, Kenya, Zimbabwe, Benin, Malawi, and Zambia) to adapt and expand the job aids for use in other national programs addressing MTCT and ensuring appropriate child feeding. Building on this experience, URC and its not-for-profit affiliate, the Center for Human Services (CHS), are working with UNICEF to create a generic East African-focused package of community health worker training curricula, counseling job aids, and take-home materials. An early 2010 publication is anticipated.

<sup>5</sup> Koniz-Booher P et al. 2004. HIV and infant feeding: A compilation of programmatic evidence. Chevy Chase DM Published for UNICEF and USAID by QAP/URC.

<sup>6</sup> WHO. 2003. HIV and infant feeding: A guide for health-care managers and supervisors. Geneva.

<sup>7</sup> WHO. 2003. HIV and infant feeding: Guidelines for decision-makers. Geneva.

<sup>8</sup> Leshabari S et al. 2007. Testing a PMTCT infant-feeding counseling program in Tanzania. Operations Research Results. Chevy Chase DM Published for USAID by QAP/URC. Available at <http://www.hciproject.org/node/984>.

## Improving counseling on maternal and newborn care in Benin

URC worked with the Beninese Government to develop job aids to help nurse-midwives and lay nurse aides become more proficient at counseling mothers in caring for themselves and their infants immediately after childbirth. One of the objectives was to be able to shift tasks from the nurse-midwives to the nurse aides without sacrificing counseling quality. An important step was using locally relevant graphics to ensure that less-literate providers could fully understand the job aids.

A follow-up study (using a randomized pre-post group design) found significantly improved communications with the job aid-focused intervention. The mean percentage of messages these health workers provided to mothers increased significantly in birth preparedness, danger sign recognition, newborn care, and postpartum home practices. Additionally, mothers came to better understand their roles regarding self and newborn care (see Figure 3).

### Potential best practices/lessons learned

Throughout its work, URC collects important potential best practices and lessons learned. Several of those related to job aids include:

#### Potential best practices:

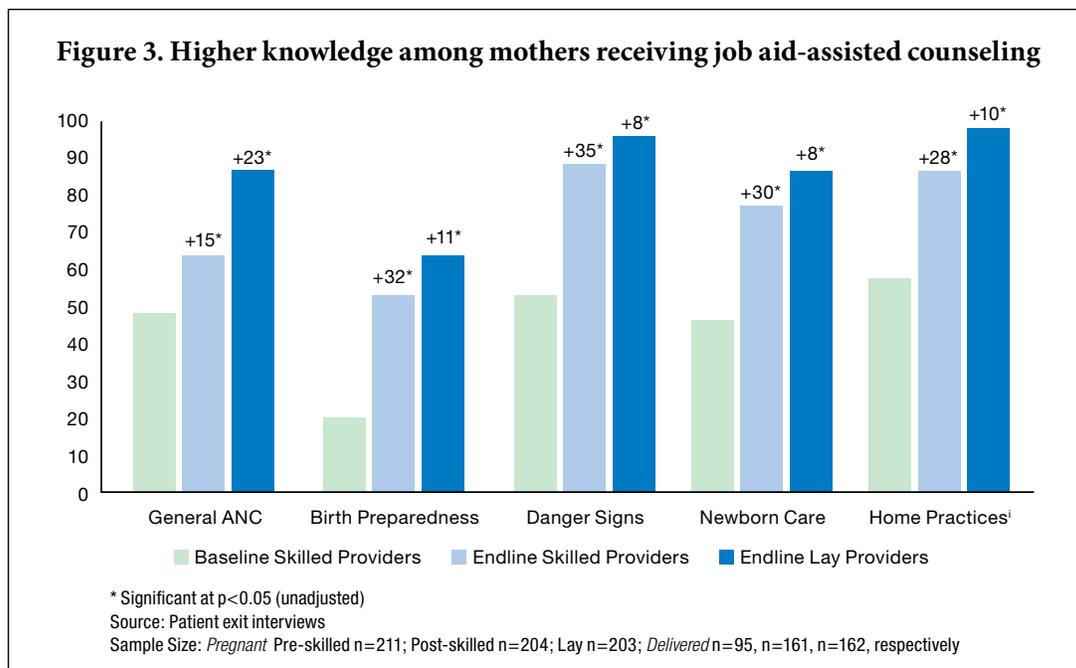
- ▶ Introduce job aids with adequate training and supervision to achieve highest impact;
- ▶ Keep job aids simple and easy to use;
- ▶ Use participatory approaches in the design of job aids;
- ▶ Focus only on the minimal information needed

to perform a task;

- ▶ Make job aids readily available to providers;
- ▶ Link aids to existing service processes and organization of care, including provision of take-home materials (when needed) to patients;
- ▶ Use well-marked imagery for low-literacy populations;
- ▶ Use local language; and
- ▶ Use an interactive and systematic process to involve stakeholders and reach consensus.

#### Potential lessons learned:

- ▶ Job aids should be consistent with priority messaging/ multi-pronged behavior change strategy;
- ▶ They should be integrated into an overall BCC strategy if possible;
- ▶ Formative research is essential for local adaptation and appropriate design;
- ▶ Several iterations are required for an optimal product;
- ▶ Inserting well-marked pictures at key steps of the process reduces errors;
- ▶ Job aids are useful across technical areas and for multiple purposes;
- ▶ Job aids are acceptable and effective in improving communication and service delivery among providers and clients;
- ▶ Local production may reduce the cost of developing job aids; and
- ▶ Job aids allow task shifting to less-skilled health providers in human resource-constrained settings.







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## Appendix 2: Catalogue of URC Communications Materials, Including Job Aids

Technical focus	Materials
<i>Guatemala</i>	
HIV, sexually transmitted infections (STIs), vulnerable groups	<ul style="list-style-type: none"><li>• Instructional guide on condom use.</li><li>• Brochures for CHWs and men who have sex with men (MSM) on condom negotiation and on STIs.</li><li>• Brochures for MSM on health services.</li><li>• Flyer for people with HIV/AIDS (PLWHA).</li><li>• Manual on orientation and management of emotions.</li><li>• Counseling cards for advising HIV-positive mothers on infant feeding.</li><li>• Poster on stigma and discrimination awareness.</li><li>• Brochures and posters on STIs prevention.</li></ul>
Family planning (FP) methods and use	<ul style="list-style-type: none"><li>• Manuals, flip charts, and counseling cards for FP providers.</li><li>• Brochures, buttons, videos, and radio and TV spots for the public on commonly asked FP questions, male and female sterilization leaflets, FP methods, IUD insertion. Some materials are available in local Mayan languages.</li><li>• Poster on myths about vasectomy.</li><li>• Video on vasectomy.</li></ul>
Maternal and neonatal health/ birth preparedness	<ul style="list-style-type: none"><li>• Brochures, worksheets, posters, and videos on family emergency plans relative to maternity and child birth.</li><li>• Banners and workbooks on community emergency plans.</li><li>• Radio spots on the prenatal and postpartum periods.</li><li>• Gestogram and partogram charts for health care providers.</li><li>• Poster and video on active management of the third stage of labor (AMTSL).</li><li>• Traditional birth attendant identification card.</li><li>• Brochure on prenatal and neonatal care.</li><li>• Brochures and banners on birth spacing.</li><li>• Brochures on pregnancy and postpartum issues.</li><li>• Leaflets and charts on AMTSL.</li><li>• Leaflet on referrals and counter-referrals.</li><li>• Backpack, towels, pens, buttons, and clipboards for community health workers.</li><li>• Flip chart and video on the danger signs of pregnancy and delivery.</li></ul>
Immunization	<ul style="list-style-type: none"><li>• Charts, posters, and brochures on vaccine schedules for infants and children.</li><li>• Booklet for health staff on measles and rubella vaccination.</li><li>• Leaflets, booklet, and TV and radio spots on measles and rubella.</li><li>• Municipality civil registration vaccination worksheets.</li><li>• Immunization balloons.</li></ul>

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**Technical focus****Materials****Guatemala (cont.)****Child health**

- Posters with reminders and important points in growth monitoring, infant and young child feeding, danger signs in young children, and upper respiratory infection prevention.
- Brochures on micronutrient supplementation, diarrhea, malaria, dengue, pneumonia, Vitamin A, etc.
- “Simple solutions that save lives”: 23 short videos.
- Radio spots (10 on vaccination and 10 on hygiene measures and danger signs).
- Guide on illness prevention and care.
- Flip chart on child health and nutrition.
- Child and women registers and protocols.

**Nutrition**

- Brochure promoting Vitacereal.
- Brochures, counseling cards, leaflets, manual, posters, and preparation reminder sheets for child and adult nutrition.
- Booklet on safe food and water.
- Posters on growth monitoring and promotion.
- Posters and guides on infant and young child feeding guidelines.
- Brochure and posters on safe drinking water.
- Leaflets on Sprinkles (a food supplement) and therapeutic zinc.
- Demonstration kits and brochures on breastfeeding.
- Guide for health facilitators on growth promotion and nutrition.
- Health provider activity registration sheet.
- Radio spots on infant and young child feeding.
- Nutrition CD-ROM.
- Nutrition buttons and towels.

**Adolescents and youth**

- “Know your body” pamphlet for youth and adolescents.
- Five-day teaching guide on sex and sexuality for adolescents and youth.
- Brochures on abstinence and condom use.

**Tanzania****HIV and infant feeding**

- Job aids and training program.
- Counseling card in English and Swahili.
- Q&A guide.
- Brochures and counseling cards.

**Family planning**

- Brochures on couples’ options and descriptions of natural and modern methods.
- Job aids for client-provider interaction during FP counseling.
- Fold-up display case with samples of FP products for providers to show to clients.

<b>Technical focus</b>	<b>Materials</b>
<b>Benin</b>	
<b>Community maternal and newborn health</b>	<ul style="list-style-type: none"> <li>• Facility and community job aids and training program (collage and PDFs).</li> </ul>
<b>Family health</b>	<ul style="list-style-type: none"> <li>• “Image box” (standing flip chart) for health facility workers to promote family health practices.</li> </ul>
<b>Adolescent reproductive health</b>	<ul style="list-style-type: none"> <li>• Flyer on sexual and reproductive health for middle and high school students.</li> </ul>
<b>Infection prevention</b>	<ul style="list-style-type: none"> <li>• Materials on personal protection (proper attire), proper disinfection, and hand washing before medical procedures, including delivery, disposal of medical waste.</li> </ul>
<b>Malaria</b>	<ul style="list-style-type: none"> <li>• RDT job aid.</li> <li>• Administering Coartem for malaria treatment.</li> <li>• Comic strip on malaria prevention and control.</li> <li>• Informational pamphlet on malaria prevention.</li> <li>• Brochures for men on assisting a pregnant wife with antenatal care and malaria prevention and for caretakers on management of malaria, on recognition of danger signs, and on referral for severe cases.</li> <li>• “Do as we do” poster for malaria prevention and control.</li> <li>• Handout for pregnant women on malaria prevention.</li> <li>• Flyer on donating blood to help patients with severe malaria.</li> </ul>
<b>HIV and infant feeding</b>	<ul style="list-style-type: none"> <li>• Q&amp;A guide.</li> <li>• Three flyers and three posters on feeding infants of HIV-positive mothers.</li> </ul>
<b>Exclusive breastfeeding for six months</b>	<ul style="list-style-type: none"> <li>• Counseling cards on cow’s milk, formula, and heat-treated milk.</li> </ul>
<b>Jamaica</b>	
<b>Improving quality of care</b>	<ul style="list-style-type: none"> <li>• Questionnaire on provider knowledge and checklist for observations.</li> </ul>
<b>Good parenting</b>	<ul style="list-style-type: none"> <li>• Calendar, booklet, and posters for good parenting.</li> <li>• Curriculum on parenting.</li> </ul>
<b>Advocacy</b>	<ul style="list-style-type: none"> <li>• Advocacy toolkit and training manual.</li> </ul>
<b>Adolescent health</b>	<ul style="list-style-type: none"> <li>• Facilitator’s guide and counseling tips.</li> <li>• Training manual on healthy lifestyles for adolescents.</li> </ul>
<b>Interpersonal relations</b>	<ul style="list-style-type: none"> <li>• Curriculum for health providers; set of job aids, including ruler, posters, and brochures.</li> </ul>
<b>Violence prevention</b>	<ul style="list-style-type: none"> <li>• Curfew DVD and discussion guide.</li> <li>• Brochures on violence prevention.</li> </ul>

Technical focus	Materials
<b>Kenya</b>	
Infant and young child feeding (IYCF)	<ul style="list-style-type: none"> <li>• Counseling cards (collage).</li> <li>• Training guide and counseling cards for community-focused IYCF.</li> </ul>
Proper hygiene	<ul style="list-style-type: none"> <li>• Job aids (collage and JPGs) and training program.</li> </ul>
PMTCT in the context of HIV/AIDS	<ul style="list-style-type: none"> <li>• Q&amp;A guide.</li> <li>• Collage and counseling cards.</li> </ul>
Malaria	<ul style="list-style-type: none"> <li>• Vendor-to-vendor materials for wholesale and retail vendors of antimalarial drugs.</li> </ul>
<b>Niger</b>	
Maternal-newborn nutrition	<ul style="list-style-type: none"> <li>• Provider job aids for AMTSL and newborn care.</li> <li>• Provider manual on assessment and treatment of malnutrition.</li> <li>• Feeding cards.</li> </ul>
<b>Zambia</b>	
Malaria	<ul style="list-style-type: none"> <li>• Job aid for RDTs (in English and local language).</li> <li>• Training guide for village- and clinic-level RDT use, both generic and for combination RDTs (<i>P. falciparum</i> and non-<i>P. falciparum</i>).</li> </ul>
<b>Malawi</b>	
Malaria	<ul style="list-style-type: none"> <li>• Job aids on RDTs.</li> </ul>
<b>Cambodia</b>	
Malaria	<ul style="list-style-type: none"> <li>• Billboard recommending insecticide net use.</li> <li>• Flip chart on prevention and control of malaria.</li> </ul>
<b>Uganda</b>	
IYCF with a focus on HIV/AIDS	<ul style="list-style-type: none"> <li>• Facility counseling cards.</li> <li>• Q&amp;A guide.</li> <li>• Counseling cards for community volunteers.</li> <li>• Brochures on infant feeding, breastfeeding, feeding with cow's milk, hand expression, formula, heat treatment of milk, and feeding a sick child.</li> </ul>
Maternal nutrition	<ul style="list-style-type: none"> <li>• Brochures on maternal nutrition during pregnancy and breastfeeding.</li> </ul>

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**Technical focus****Materials***El Salvador***Family planning**

- Technical guide on counseling services.
- Practical guide on counseling for youth health promoters.
- Technical guides for health personnel who work with midwives and for health promoters.
- Flip chart on sexual and reproductive health.
- Brochures on various methods, on choosing the best method, on methods that can be used after an abortion, and on learning to say no and deciding to wait.
- Posters: I Value My Life So I Get Informed before Getting Pregnant; By Participating Together, We Make Better Decisions; Don't Go Too Fast, Enjoy Life; Choosing the Best Method and Enjoying Your Life; Just Friends; Not Getting Pregnant at an Early Age Brings Lots of Opportunities for You and Your Family.
- TV and radio spots on child spacing (two versions of the radio spot); paternal responsibilities; postpartum abstinence; delayed start of sexual activity (two versions); consequences of adolescent pregnancies.

**Continuous quality improvement**

- Technical guide on quality improvement.
- Workbook on continuous quality improvement (rapid cycles).

**Maternal health**

- Document on standards for processes of care for obstetric and essential neonatal care and FP.
- Technical guide on the use of the perinatal informational system.
- Technical materials for obstetric, neonatal, and FP skills.
- Flip chart on complete care for a healthy family.
- Counseling cards on sexual relations during the different stages of pregnancy and afterwards.
- Posters and leaflets urging men to accompany their partner in important reproductive events, of a calendar of appointments during pregnancy, on the benefits of going with a partner or relative to prenatal visits, on attending the prenatal visit at 38 weeks, on vaccines for pregnant women, on recognizing the signs of complications in pregnancy, on signs of complications and going to the hospital immediately, on what to bring to the health care facility when labor pains start, and on attending postnatal visits.
- Brochures for a new mother on taking care of herself and the new baby by avoiding drugs and self-medication, healthy eating, alerts after delivery, and when to return to the health care facility.
- Radio spot on complications during and after pregnancy.

**Information, education, and communication (IEC)/BCC**

- Document and CD: National IEC/BCC strategy: tools for developing systematic processes and implementing educational interventions for the promotion of behavior change relating to infant, maternal, FP, nutrition, and infection prevention and control.

**Nutrition**

- Nutrition guide for adolescents.
- Brochures on arterial hypertension and juvenile diabetes, adolescent uremia, healthy eating.
- Posters on bulimia and anorexia, oral health, vitamins and minerals, and family nutrition.

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**Technical focus****Materials*****El Salvador (cont.)*****Infant/child health**

- Guides for care for premature/underweight infants as well as for children under five.
- Flip chart to promote complete child health.
- Poster and brochure to help children develop and grow up healthy.
- Poster, brochure, and radio spot on basic care for newborns.
- Radio spots on early registration for parents/caretakers of children and on increasing the consumption of liquids for children with diarrhea.
- Poster and brochures on 1) diarrhea and dehydration in children, 2) recognizing danger signs in newborns and getting immediate hospital care, and 3) oral health.
- Poster, leaflet, and radio spot on hand washing to prevent illness.
- Leaflet and radio spot on environmental cleanliness in the home.
- Flyer on using PURIAGUA to protect family health.

**Community/  
family health**

- Manuals on the management system and technical functions of the health promoter.
- Technical guides on using the Integrated Care Model with a focus on family health, on using the health information system for decision making, on staff perceptions of the system, and on standards for health promotion.
- Flip chart on oral health.

**Infection prevention  
and control**

- How-to videos on wearing surgical garments and cleaning a surgical area.
- Flip charts on strategies for the prevention and control of hospital infections and on infection prevention for surgical wounds after an operation.
- Leaflet on recognizing the danger signs of a wound infection.
- Posters on hand washing in clinic settings, on hand washing in hospitals, on the routine before surgery, and on segregating bio-infectious waste in the hospital.
- Poster, flyer, and radio spot on preventing H1N1 flu.

***Southern Africa*****HIV/AIDS/TB**

- Pocket guides for health care workers on PMTCT, antiretroviral therapy, TB, basic health care, and infant feeding.

***South Africa*****TB**

- Instructional materials for employers on how to design TB strategies to protect their workers.
- Information card on identifying TB signs and symptoms.
- TB posters and pamphlets.

***Albania*****Maternal and child  
health (MCH)**

- Instructional materials for health care workers.
- Posters for patients and community members.

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**Technical focus****Materials*****Vietnam***

TB/HIV

- Instructional materials for improving the coordination of TB-HIV services for health care workers.

***India***

TB

- Instructional materials for health workers and community members.

***Philippines***

MCH/FP

- Job aids for health care workers.
- FP posters.

***Other***

- Pocket guides on the integrated approach for priority conditions in sick adults in primary health care, the management of normal pregnancy, management of complications during pregnancy, management of normal labor, immediate care of the new born and puerperium, and syndromic diagnosis and management of STIs.



