

TDLC in **Health** area

Mother and Child **Health** Care Specialists Vocational Training Course



TDLC Phase I (2004 – mid 2010) **Health** area activities

Providing GDLN service for Client initiated health related events
(Avian flu WBGDLN knowledge sharing series etc)

↓ Expanded to:

TDLC Phase II (mid 2010 - 2015) **Health** area activities

Development and delivery of **TDLC** flagship program on **Health**
“to reach unreached” by the effective use of ICTs
and
TDLC’s Public seminar on **Health** (Global Health, Reproductive Health etc)
for general awareness raising/network among participants

- Created strategic alliances with partners in **Japan** and the World for knowledge sharing / capacity building for **Health**
- Created opportunities for outreach of **Japan’s** knowledge and expertise (ex;boshi-techo etc)
- Basic Blended Learning Scheme applied and results/data accumulated from the courses delivered at Phase I period
- Efficiency of the knowledge transfer; cost effectiveness etc etc

TDLC capacity building programs strategy on **Health** area programs

- ***“Keep focused on outcomes that will benefit the needed”***
--- careful needs assessment, and feedback assessment
- ***“Partnership-oriented principle”*** --- Global partnership for **Health** and use of ITCs, Win-Win collaboration
- ***“Based on longer term perspective”*** ---business model, learning design and modality for sustainable course delivery

Mother and Child **Health** Care Specialists Vocational Training



Training for Mongolian Nurses and Midwives

- 5-6 venues within Mongolia connected
- Lectures from **TDLC**
- Webcasts and Moodle use
- Approx 3320 participants joined after 5th course delivery
- Participants encouraged to teach the course to at least 10 practitioners each after the training
- Strong partner organizations on contents (incl. needs assessment) and local arrangement

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Positive outcomes

- Nurses and midwives can access the latest knowledge from **Japan** without concerns of travel and accommodation fees or taking time off from work
- Moodle, used as the Learning Management System (LMS) for the course, provided a much needed tool enabling communication between participants in urban and rural areas
- Less burden on subject experts (no oversea travel etc.)
- Media attention etc

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Lesson learnt

- Strong Capacity Building Needs --- Imperative to decrease IMR and MMR to achieve MDGs
- Strong Incentive --- Valid certificate that would directly contribute everyday life (credit for nurse license renewal)
- Excellent Knowledge--- Share **Japanese knowledge** to contribute to the World **Health**, Win-Win collaboration
- Blended Learning scheme and its Versatility --- Improved efficiency, effectiveness and dissemination, and reduced costs -> Possibility to apply similar model

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Expanded to other countries/other subjects

- Vietnam Nurse Training course with VDIC
 - Mental Health Nursing, Gerontological Nursing
 - BL with Moodle, Video lectures, local sessions & VC
- Disaster Nurse Training course
 - VC-based 2 day intensive training course
 - Certificate together with local collaborating body
- Partograph Training course (**TDLC** initiative with WHO)
 - BL with CD-ROM, local session and VC
 - Certificate from WHO and TDLC