ClarityEnglish Pilot
Wete Hospital, Zanzibar, Tanzania

Background

In 2012, the Human Resources Division of the Zanzibar Ministry of Health[1] devised an E-learning Plan with the following objectives:

- ▸ To improve the basic skills of all health workers in English language and computer skills.
- ▸ To provide (more) health workers with new skills and knowledge through short courses without disrupting service delivery.
- ▸ To provide opportunities for upgrading health workers according to the career ladder.
- ▸ To establish pre-service training on Pemba Island for Diploma Nurses.
- ▸ To introduce informal learning and performance monitoring.

The objectives were to be accomplished through volunteer support and donor-funded computer labs set up across eight public hospitals on two islands: Unguja and Pemba.

Volunteers were recruited through Voluntary Services Overseas (VSO) and Cuso International. In 2013 a volunteer purchased network versions of ClarityEnglish programs and installed them on a Moodle site that was hosted on a local server in Zanzibar, on Unguja Island. However, the Moodle server stopped functioning, and there was no IT capacity to fix the issue or carry on server maintenance after the volunteer departed.

The next volunteer, could not get access to the programs that were previously set up. By this point there was no more project funding. The volunteer determined that it was not feasible to rely on the local Moodle server for the E-learning Plan and started to look for alternate ways to introduce e-learning programs.

During this time, the Ministry of Health's Continuing Education Coordinator (CEC) for Pemba Island expressed a strong desire to make English programming available, especially at Wete Hospital in the town of Wete, where he is based.

ClarityEnglish agreed to sponsor a 3-month pilot at Wete Hospital with 20 online licences for **Tense Buster**, **Active Reading**, and **Clear Pronunciation I**.

Setup

Wete Hospital has a resource centre (i.e., computer lab) equipped with six working PC computers, a relatively stable power supply, and a consistent internet connection. Certain administrative staff own PC laptops, which they can bring to the resource centre to connect to wi-fi. This infrastructure is far superior to that of other hospitals.

In collaboration with the Continuing Education Coordinator (CEC), the volunteer introduced the Clarity programs in two steps. First, there was an induction for the CEC himself and two other staff members who would take on "teacher" roles. The CEC and the two teachers have higher levels of English proficiency than the average Wete Hospital staff. This was followed by a general induction session for the participants who would register as students. An IT staff was available to

assist with account creation. The volunteer offered one-on-one support after the session, but due to language barriers and the brevity of the volunteer's presence in Wete, the vast majority of the support was and continues to be provided by the CEC and the teachers.

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[1] Zanzibar is a part of the United Republic of Tanzania, but Zanzibar's Ministry of Health is separate from the Tanzania Ministry of Health.

Target users and their learning objectives

The Zanzibar Ministry of Health's E-learning Plan targets health workers in general. The CEC surveyed Wete staff on their learning interests and invited 20 individuals to sign up for the English programs. Participants include nurses, midwives, clinical officers, clerks, orderlies, and various administrative staff.

Overall, the participants report that their learning objective is to improve their English fluency for:

▶ personal development;
▶ communication in the work environment;
▶ report writing;
▶ career advancement.

Implementation

After two and a half months, seven participants have completed 100+ exercises. Two out of the seven have completed everything (all the exercises in all levels across the three programs).

The active participants had some basic level of English and computer skills to begin with. They find the Clarity programs enjoyable and particularly appreciate the multiple levels, the engaging stories, and the easy-to-follow instructions. They feel that their English has improved.

The other 13 participants have made very limited use of the programs. They cite the following reasons:

1. Lack of time (there is no time formally allocated for e-learning)
2. Inability to access outside of the resource centre (some of the staff work in buildings that are far away from the resource centre, which is the only spot in the hospital that has internet)
3. Inability to access at home (internet connection at home is rare)
4. Difficulty understanding the instructions in the programs
5. Difficulty with the technology (lack of familiarity with computer technology in general, and lack of familiarity with website and e-learning interface navigation)
6. Inconvenience due to lack of certain accessories such as headphones and microphones

The CEC continues to monitor participants through Results Manager and checks in periodically with them. Those who have very low levels of English and computer literacy desperately need consistent and structured face-to-face instruction, but it simply isn't available at this time.

Lessons learned

1. Although Tense Buster and Active Reading start at the elementary level, the average health worker in Zanzibar has a very low level of English and computer literacy. Difficulties with the instructions and the technology prevent many of them from taking advantage of the programs. The Ministry of Health's E-learning Plan attempts to address both English and computer literacy at the same time, but this has been difficult to implement with severely limited resources and rural locations.

2. It was hoped that the localized assistance provided by the CEC and teachers would encourage more active participation. However, the CEC and the teachers themselves feel that they need more training because they are not fluent in English and do not have sufficient computer skills to provide full support.

3. The volunteer who is supporting the pilot is an instructional designer for adult online learning, but is not a language teacher. It is the volunteer's opinion that in Zanzibar, English E-learning programs should be introduced by an experienced English teacher who can properly assess learner needs, and provide complementary face-to-face instruction. A broad E-learning project that attempts to cover too much ground at the same time with one volunteer (as in the case of the E-learning Plan) dilutes the effectiveness of individual programs.

4. The participants in this context place a lot of value on certificates of completion. The automated Clarity certificates are a motivator, but the effect wears off quickly for the more active participants who go through several levels of the programs. The CEC suggests that for active participants one "culminating" certificate would be more desirable than several individual ones.