

HEAR SUDAN

HEALTH, EDUCATION, AND RECONCILIATION

YEAR I ANNUAL REPORT

OCTOBER 2006 – SEPTEMBER 30, 2007



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**HEAR Sudan:
Health, Education and Reconciliation
EDH-1-00-05-00026-01**

**YEAR 1 Annual Report
October 2006 – September 30, 2007**

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By:
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ACRONYMS

Creative	Creative Associates International Inc
CHW	Community Health Workers
CoP	Chief of Party
EDC	Education Development Center
ERC	Education Resources Center
HEAR	Health, Education and Reconciliation
IRI	Interactive Radio Instruction
JSI	John Snow Inc.
MoH	Ministry of Health
MoU	Memorandum of Understanding
NRRDO	Nuba Relief, Rehabilitation and Development Organization
PRA	Participatory Rapid Assessment
PTA	Parents-Teachers Association
SSIRI	South Sudan Interactive Radio Instruction
USAID	United States Agency for International Development
USG	United States Government
WHO	World Health Organization

Annual Report

Health, Education and Reconciliation

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Executive Summary

The HEAR Sudan project was initiated by USAID to respond to the agency functional objective of investing in people under the program areas of education and health. The objective of the HEAR Sudan is *to provide access to and raise the quality of primary school education and health services for school-aged children* in geographically defined locations within Sudan's Three Areas: Abyei, Southern Kordofan, and Blue Nile. This objective will be met through activities that are designed to promote education, promote health, and strengthen school governance through community groups.

The three overall objectives of HEAR Sudan, therefore, are: 1) promoting education, 2) promoting health and 3) strengthening school governance through community groups. The project has designed activities that collectively *“increase the access of healthy girls and boys to quality education through community support and action.”*

Over the reporting period, the project has achieved significant gains in establishing its presence and rollout of key activities in Abyei for gradual expansion to other geographic focus areas of Southern Kordofan and Blue Nile.

Summary of Major Accomplishments

i) Teacher Training

During the first year of the project, HEAR Sudan developed a teacher training design and facilitation manual and trained **79 (14 female and 65 male) teachers** from ten selected schools in and around Abyei *benefiting a total of 3, 583 students* and their communities. The teachers received technical support through school visits and mentoring. In all the ten schools, HEAR Sudan has introduced IRI for grades 1-3 students and teachers.

ii) Disseminating Vitamin A tablets and De-worming drugs

HEAR Sudan has also been successful in developing the Community Health Workers curriculum and *disseminating over 2000 doses of de-worming medication* to primary school children ages 5 – 20. Likewise, over **1550 Vitamin A tablets** were provided to primary school children in the initial 10 schools in Abyei.

iii) Leveraging additional resources from non-USAID Sources

HEAR Sudan has fostered excellent relations with other NGOs and UN projects in Abyei resulting in the donation of all the de-worming and Vitamin A doses from the WHO and the Irish aid organization, GOAL. In addition, HEAR Sudan has received a verbal agreement from UNICEF to supply insecticide-treated bednets.

iv) PTA Training

As part of the community/PTA development effort, HEAR Sudan provided three-day training to all of the ten schools' PTAs who have in return helped to identify voluntary community health

workers. A summary of performance data against targets during the reporting period is presented in the table below.

Table 1: Summary of Performance against targets for the reporting period

	Results	Targets	Actual	% of Accomplishment	Remark
1	Teachers Trained with USG Support	60	79	132	Exceeded target
2	Students enrolled in USAID supported Schools	1,500	3,583	239	Exceeded target
3	PTAs Strengthen/trained	30	10	33	Will Make up in year 2
4	Health workers trained	60	0	0	Training is scheduled for October 2007
5	Students covered by Vitamin A	1,500	1,550	103	Exceeded Target
	Students de-wormed	0	2,000*		Exceeded Target
6	Schools with Latrines and/or boreholes	5	5	100	Met Target Provided by UNICEF and SC US
7	Bed nets distributed	2,000	0	0	UNICEF has the required bed nets. HEAR Sudan is coordinating with UNICEF for distribution in YEAR II
8	Communities engaged in HEAR Sudan activities	30	20	67	
9	Overall Accomplishment			84%	

***De-worming was not among YEAR I Performance Indicators and targets**

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1. Introduction

a) Background

HEAR Sudan is an initiative of the U.S. Agency for International Development under the Basic Education/Linkages to Education and Health Initiative, known as ABE-LINK. It links community members, state and local authorities, educators and health workers in their efforts to establish sustainable access to quality education and health services.

HEAR Sudan serves the people of the Three Areas of Sudan: Abyei, Southern Kordofan and Blue Nile. The three program components: building capacity, learn and act, and community support link teacher training and student learning to critical reconstruction, reconciliation and development needs in the project's target communities. In focusing on teacher and health worker training at the school level, HEAR Sudan develops resource materials and community-based projects that reinforce student learning, engage service providers in delivering effective health and hygiene messages to community members, and rehabilitating safe schools and health clinics.

b) Objective

The overall objectives of HEAR Sudan are: 1) promoting education, 2) promoting health and 3) strengthening school governance through community groups. The project will design activities that collectively “increase the access of healthy girls and boys to quality education through community support and action.”

c) Program Components

The Creative Team's approach integrates activities under three program components:

- Building the capacity of complimentary education and health stakeholders (local authorities, educators, teachers, health workers, and community members) to plan, implement and monitor education and health services for future sustainability;
- Translating capacity building into action by developing “learn and act” resource materials and community-based projects that reinforce student learning, engage service deliverers in delivering effective health and hygiene messages to community members, and restoring safe schools and health clinics; and
- Strengthening community support for school governance and outreach through conflict avoidance and resolution strategies.

d) Major Activities

Over the life of the project, the Creative consortium plans to implement the following major activities:

- Establish 3 Education Resources Centers: one in each of the 3 target areas
- Design, conduct and manage teacher training activities in 90 selected schools
- Implement Interactive Radio Instruction in 90 HEAR Sudan supported schools
- Design and conduct community health training to 360 volunteers
- Train selected members of 90 Parents Teachers Associations (PTAs)
- Train 180 Head Teachers of 90 HEAR Sudan supported schools
- Train PTAs, Head Teachers, education officials, community leaders, and local authorities in conflict resolution and peace building strategies.
- Distribute Vitamin A tablets and insecticide treated bed nets to 8000-9000 students
- Support PTAs and health facilities with small grants to implement community development projects
- Assist schools and health facilities to improve provision of latrines and clean water.

2. Performance over the past one year

Since the initiation of the HEAR Sudan project in October 2006, numerous design ideas have been discussed and project features have been modified in light of changing events in Southern Sudan. While the project's objectives remain the same, new approaches and timelines have emerged as a result of these ongoing discussions and events on the ground. Accordingly, HEAR Sudan activities are designed and being implemented around two organizing principles: 5-month cycles and long-term interventions. All interventions support the three components of the project mentioned above: Capacity Building, Learn and Act, and Community Support for Peace Building and Service Delivery.

This annual report is organized in five major topics.

- 2.1 Project Start-up: Staffing, setting up project support mechanisms and management system
- 2.2 Capacity Building: Improved skills of teachers, health workers and other stakeholders
- 2.3 Learn and Act: Applying Capacity Building
- 2.4 Strengthening Community Support for Service Delivery and Peace Building
- 2.5 Challenges and Constraints

Major accomplishments during the reporting period are presented in the following sections.

2.1 Project Start-up: Staffing, setting up project support mechanisms and management systems

a) Staff Recruitment

Currently, 80% of HEAR Sudan key program and administration staff are on board. The main project office at Abyei and the office in Kauda are fully staffed with the exception of an IRI Coordinator in Kauda. Interviews have been conducted for all positions in Kurmuk and HEAR Sudan hopes to complete recruitment by October 2007.

b) Staff Orientation

In May 2007, an initial five day staff orientation training was conducted in Abyei for HEAR Sudan employees by Kwaja Yai Arop, (former) HEAR Sudan CoP; Lee Marshall, Program Associate from Washington; and Tassew Zewdie, Senior Technical Advisor to the HEAR Sudan

Project from Nairobi. The orientation covered both administration and program issues. During the orientation, program staff reviewed the overall program design and raised questions for discussion. The team has also familiarized itself with the first session of teacher training guide in preparation for the actual training. This initial orientation was strengthened by a follow on and comprehensive orientation.

In July 2007, senior staff from the HEAR Sudan team—Tassew Zewdie, Mark Lynd (Teacher Training Consultant) and Michael Cacich, along with two SSIRI outreach staff—spent two weeks in Abyei providing a thorough technical orientation for field staff and developing project implementation plans (an overall master plan and a detailed quarterly plan). The quarterly plan was subsequently revised and changed into a six month plan and then submitted to USAID on September 10, 2007 for review and approval.

During this orientation, the HEAR Sudan Team also reviewed the overall training program design and individual sessions. Modifications were made to the training program in response to questions raised by the field team and their on-the-ground experience. The field staff prepared themselves for the actual training by participating in a training-of-trainers review of several sessions.

c) Office Space

Memoranda of Understanding between HEAR Sudan and the Education Office in Abyei, NRRDO in Kauda, and ROOF in Kurmuk have been submitted to their respective offices for review and agreement to share office space for project operations. The Abyei Education Office has already provided two large rooms to be used by the HEAR Sudan Project and the Southern Kordofan Regional Education Office has agreed to allocate facilities for an ERC and to provide an office space and a large training room to the HEAR Sudan Project.

d) Procurement

The majority of materials and equipment has been completed and cargo has arrived in Abyei and Kauda. Abyei and the other sub offices will soon have internet facilities for better communication and program management. The replacement for the HEAR Sudan vehicle have arrived in Juba and will soon be transported to Abyei. HEAR Sudan procured a vehicle through a purchase order and the vehicle was and shipped to Juba by the supplier. By the time the unit reached Juba it was totally damaged. HEAR Sudan requested a replacement as per the agreement and the replacement has now arrived in Juba for subsequent move to Abyei.

2.2 Capacity Building: Improved skills of teachers, health workers and other stakeholders

a) Establishing Education Resources Centers

In all of the Three Areas, the HEAR Sudan Team has identified sites to establish Education Resource Centers. In Abyei, HEAR Sudan has held a series of discussions with Mercy Corps to collaborate in the establishment of an operational ERC. Mercy Corps has established a small resource center through resources from another USAID funded project. HEAR Sudan and Mercy Corps agreed to develop the resources center for multi-purpose use. HEAR Sudan has completed preparations to expand the facility to accommodate HEAR Sudan's Education Resource Center Manager, IRI Coordinator, Health Coordinator and additional space for displaying resource materials. It was agreed that the resources center will remain the property of the Abyei Education/Health Offices after the conclusion of the projects.

In Kauda, the Regional Education Office and HEAR Sudan have signed a Memorandum of Understanding (MoU) which allows HEAR Sudan to use a suitable facility as Resource Center. This facility was being used for a UNICEF-led distance teacher education and needs minor renovation by HEAR.

In Kauda, HEAR Sudan has also engaged with Mercy Corps to share one center with inputs from the two programs funded by USAID. Mercy Corps is implementing a USAID-funded program in the Three Areas.

b) Participatory Rapid Assessment:

HEAR Sudan has completed and submitted a Participatory Rapid Assessment (PRA) in the Three Areas that has informed initial project planning and implementation.

c) The HEAR Sudan Teacher Training

Design and Curriculum Development: The HEAR Sudan Teacher Training Design is complete and the “Profile of a HEAR Sudan Teacher” has been developed in detail. A facilitators guide and session materials of the initial five-day teacher training program have been developed and are being formatted for production.

For easy implementation of the training program, a teacher training guide has been prepared. The guide was conceived by the three major partners – Creative, EDC and JSI – in March 2007 when they met in Nairobi to lay out the overall framework and content areas. Since that meeting, the design has evolved on the basis of the PRA, additional information, discussions with project partners, and staff input during a technical assistance visit in early June 2007 by the Senior Education Advisor and Project Associate. Later, in July 2007, a Teacher Training Consultant and group of senior staff from EDC and Creative visited Abyei and provided invaluable input. During this latter trip which took place between July 9 and 20, 2007, staff received training on Training of Trainers as well as training on a design and facilitation guide.

While the development of the education and peace building component of the teacher training component was led by Creative, JSI contributed to the design and the development of the teacher training guide through identification of relevant health content and the development of a separate health booklet for teachers. A 36-page guide of health information was prepared by JSI which was used as reference material in the development of the teacher training curriculum. The initial plan for the teacher training curriculum allotted 1.5 days for health information and focused mainly on the concept of the “health promoting school”. However, feedback from the trained teachers included requests for additional time dedicated to health information. Given this, JSI identified and developed 14 health sessions (similar to the curriculum for the Community Health Workers) and sent them to Creative’s Teacher Training Design consultant to be included in the teacher re-fresher training. The curriculum for the refresher course sessions is being finalized now for immediate use.

In addition to contribution to the teacher training curriculum, JSI produced a draft copy of the Teacher’s Health Booklet, a 28-page reference booklet for teachers that cover health issues including nutrition, immunization, hygiene, sanitation, malaria, diarrhea, care seeking behaviors, etc. This booklet was designed to provide teachers with additional health information so that they can better plan their health lectures for children. Feedback received on the draft indicated

that the teachers would also like information on first aid and HIV/AIDS to be included in the booklet. JSI will produce and print the booklet in the early part of Year 2 of the project.

Concepts and materials for Interactive Radio Instruction (IRI) for teacher training curriculum have been taken directly from the South Sudan Interactive Radio Instruction (SSIRI) materials already developed and being used by EDC.

Implementation: Initial 5-day teacher training: HEAR Sudan staff conducted teacher training for a first cohort of ten schools in and around Abyei Town. Schools were identified in collaboration with local education authorities. The training design called for an initial 5 days of training on health, education pedagogy and IRI. Local education authorities advised that teachers not be removed from their classrooms. That instead, training should occur on Sundays only (the only day teachers have off) for five consecutive weeks. HEAR Sudan determined that instead of one long training day, they should divide each training day into two parts to be conducted on Saturday (3:00 – 5:30) and Sunday (12:00 – 5:00).

School clustering: In order to reach all teachers in the selected schools in the Three Areas and to deliver training efficiently, the decision was made to explore grouping selected schools in to up to 3 clusters for a group of ten schools. Cluster criteria would include 20-25 teachers, P1-P8, from schools in geographic proximity, the outer limit being a one-hour walk for teachers to reach a common training site (e.g., one of the schools identified as “Cluster Center School”). In Abyei, three school clusters were formed to conduct the first five day teacher training program.



Teachers receiving training in Abyei

Teacher Training: Over the last year, 79 (14 females and 65 males) teachers from ten selected schools received the first 4 of the 5 day teacher training programs in Abyei. In order to avoid pulling teachers out of their classrooms during the school year, the decision was made to provide the initial HEAR Sudan 5-day training over a period of several weekends following the opening of school. The proposed schedule included a one-day introductory workshop (Part 1), with the remaining four days provided in series of one-day workshops (Parts 2 and 3) over subsequent Sundays. Then, the follow-ups and refresher courses would be provided

for the remainder of the school year. It was believed that by providing the training in segments over time, trainers and program personnel would be able to make program decisions and adjust training features accordingly as new information is received. Table 2 below shows participating teachers by schools and gender.

Table 2: Number of teachers in the ten beneficiary schools trained by HEAR

Names of beneficiary schools	#of Teachers in each school			# of teachers trained by HEAR Sudan			% of teachers trained by HEAR Sudan	% of female teachers trained
	Total	M	Fe	M	F	Total		
Abyei Girls	18	7	11	6	10	16	89	63
Abyei Boys	17	11	6	13	1	14	82	7
Comboni	16	15	1	13	0	13	81	0
ECS	18	13	5	13	1	14	78	7
Nyinchuor	5	5	0	3	0	3	60	0
Athoony	7	5	2	3	0	3	43	0
Miyokol	7	4	3	3	1	4	57	25
Louis Nyok	8	5	3	5	1	6	75	14
Awolnhom	11	8	3	5	0	5	46	0
Wunruok	5	5	0	1	0	1	20	0
Total	112	78	34	65	14	79	71	18

As has been presented in table 2 above, 71% of the teachers in the ten beneficiary schools in Abyei have received four of the initial five days of the teacher training program organized by the HEAR Sudan Project. Eighteen percent of the HEAR Sudan trained teachers are female. This low percentage is due to two factors: 1) there were fewer female than male teachers in the target schools (30% of the total teaching force in the ten schools was female); and 2) a smaller percentage of female teachers were trained relative to male teachers (41% females versus 83% males).

School Visits: The first school visit to the ten individual schools was conducted by HEAR Sudan staff following the completion of the 4 days training. During the school visits, HEAR Sudan staff identified gaps in teachers teaching skills and recommended relevant topics for the refresher courses. The staff has also conducted community and PTA meetings to arrange a separate PTA development training and to identify community health workers to be trained.

d) Community Health Workers Training

Over the past year, HEAR Sudan developed the curriculum for the initial CHW training scheduled to take place in early October. This 4-day training will cover basic primary health care (diarrhea, malaria, immunization, nutrition) along with what it means to be a volunteer and adult learning activities (role plays, songs, story telling). The initial training will train

approximately 40 participants comprised of members of the community, members of the MoH and volunteers from other NGOs. The initial training was originally planned for September but due to difficulty in transportation for participants due to the rainy season and the occurrence of Ramadan in September, the training was moved to early October.

After the initial training, the CHWs will meet monthly to discuss ongoing activities, challenges and updates on different health topics. In addition, the CHWs will be completing monthly reports indicating how many community members they spoke to during the month.

2.3 Learn and Act: Applying Capacity

a) Vitamin A Distribution

The Vitamin A distribution of the project has been very successful with HEAR Sudan's health team distributing 1550 doses of Vitamin A to students from ages 5-15 in 8 out of the initial 10 schools (two schools were unable to be reached in Year 1 due to flooding and will be reached in the early part of Year 2 when there is increased accessibility).



HEAR Sudan staff distributing Vitamin A

One to two weeks prior to each Vitamin A distribution, the HEAR Sudan staff visited schools to discuss the distribution with the teachers. HEAR Sudan staff asked teachers to explain upcoming Vitamin A activities to the students and the PTA members so that they could inform the parents of the students. HEAR Sudan also encouraged parents to come to the school on the day of the Vitamin A activities and to bring their young children so that they could also receive the Vitamin A doses. The 1,500 doses disseminated included all children above the age of 1 who were brought to the school on the day of Vitamin A activities.

To date, HEAR Sudan health team has successfully negotiated with the WHO to donate the entire supply of Vitamin A for the initial 10 schools. This successful collaboration has helped to save both time and money and has increased the efficiency of the project since time spent on Vitamin A procurement has been reduced. HEAR Sudan hopes to continue this collaboration within Abyei as well as broker additional collaborations with WHO offices in Kauda and Kurmuk (NB: due to the UN structure, negotiations for Kauda and Kurmuk must take place with the local WHO representatives in those areas).

b) De-worming Tablet Distribution



HEAR Sudan staff distributing deworming tablets

Similar to the dissemination of Vitamin a, HEAR Sudan's de-worming activities have been very successful. To date, HEAR Sudan has disseminated over 2000 doses of de-worming medication in primary school children ages 5 – 20(all children over the age of 1 present during de-worming activities also received a dose). Similarly to the Vitamin A distribution, HEAR Sudan only reached 8 out of the initial 10 schools in Abyei due to accessibility constraints.

To date, HEAR Sudan has successfully negotiated with the WHO and GOAL to donate the entire supply of de-worming medication, thereby saving time and money and strengthening collaboration with other organizations. The HEAR Sudan team hopes to continue this collaboration for both additional schools in Abyei and also in Kauda and Kurmuk (however due to the UN structure, negotiations for Kauda and Kurmuk must take place with the local WHO representative).

c) Bednet Distribution

HEAR Sudan has been in discussions with UNICEF regarding the dissemination of bednets. UNICEF has agreed to supply bednets to JSI for dissemination however, there are certain UNICEF criteria that JSI must follow. The main criterion is that bednets should not go to returnees since UNICEF has already covered these households through their own distribution. This poses a bit of an issue since almost everyone in Abyei is a “returnee” (defined as those having returned to Abyei from other areas during the previous three years). The HEAR Sudan Team is in discussions with UNICEF on how best to adhere to the UNICEF criteria and still ensure that every household with children has a bed net. One suggestion is to use the bednet distribution as a community building exercise whereby the community decides the criteria (including consideration of the UNICEF criterion) by which a child/family would receive a bednet. This would also allow HEAR Sudan to use the activity as an exercise in conflict resolution and community mobilization.

HEAR Sudan has not started bednet distribution given the issues above. HEAR Sudan would rather dedicate sufficient time to include the community in the bednet distribution decision-making process, than to rapidly disseminate the bednets to subsets of the community, only to create conflicts within those communities.

d) IEC Materials

During Year 1, the HEAR Sudan consortium worked jointly to identify pre-existing posters that could be printed and disseminated for the project. JSI provided feedback on the initial health related posters and sent additional posters/IEC materials that are currently being used in JSI’s Sudan Health Transformation Program (SHTP). Creative identified posters relevant to good pedagogy and active learning methodology in language learning. EDC has provided technical feedback. HEAR Sudan hopes to have the initial batch of posters printed in the early part of Year 2.

2.4 Strengthening Community Support for Service Delivery and Peace Building

a) Training of Parent Teacher Association

Apart from the teachers who received the 5-day teacher training, a total of 34 (19 male and 15 female) members of PTAs from the 10 schools have also received a three day training to improve their skills in school management, community mobilization and enhancing girls’ education as well as understanding their roles and responsibilities.



HEAR Sudan Financial Officer facilitating financial training sessions.



Communities around the beneficiary schools have also been sensitized on the importance of girls' education, health, nutrition, environment protection and conflict resolution. During the training sessions, the communities were also able to identify more than 40 volunteers to serve as community health workers after they receive basic training on community health.

Rosa, a PTA member of Athoony primary school in Abyei, suggests criteria to selected Community Health Workers to be trained by HEAR Sudan.

b) HEAR Sudan's Participation in Related Development Initiatives

In April, 2007, HEAR Sudan's Education Resource Center Coordinator participated and facilitated teacher training sessions organized by Abyei. Recently, she was also requested by the Abyei Education Office to facilitate training for Parent Teacher Associations (PTAs) organized by Abyei Education Office supported by UNDP/Abyei.

Recently the HEAR Sudan's Senior Health Coordinator was requested by the WHO to assist with flood victims outside of Abyei. As the only medical doctor available at the time, he was instrumental to responding to the emergency situation.

c) Inter-agency Fora

HEAR Sudan has joined other agencies in Abyei working together on different sectors. There are fora for health, education and general information sharing. HEAR Sudan has been attending meetings and relevant workshops organized by NGOs and UN agencies.

HEAR Sudan continues to engage in discussions with several NGOs, donor and government authorities' to strengthen the coordination mechanisms in education and health—an idea that has been well received by NGOs and UN Agencies.

2.5 Challenges and Constraints

a) Challenges

The Accomplishments of YEAR 1 are many and yet there remains much to be done in the Three Areas. Those challenges include:

- Increasing the coverage of HEAR Sudan project to the most remote part of the Three Areas given limitations in transportation and communication.
- Addressing the huge demand for teacher training and provision of instructional materials
- Building a school support system in an environment where clear policy is not yet agreed up on; where there is no counterpart and whether the Three Areas will follow the North or the South Curriculum is not clarified
- Improving quality instruction and thereby increased quality learning outcomes using unpaid teachers

- Creating a model for an education Resource Center will also continue to be a major challenge. HEAR Sudan staff and local authorities are still learning what is an ideal model for future ERC through the operation of the three Resource centers established by Mercy Corp that have been functioning for a year or so. The ERCs are a major part and critical entities to run a strong school support system in the future. Hence, the model must be carefully planned in order to provide significant support to schools and sustain project inputs. HEAR Sudan will continue to analyze lessons learned and will also step up capacity building opportunities for education staff in the Three Areas.

These are considerable challenges that face the Three Areas of Abyei, Southern Kordofan and Blue Nile and HEAR Sudan will continue to make significant efforts to have an impact on them.

b) Constraints

Political tension in the project areas: Most of the Three Areas are not stable and tension in Abyei and other areas is growing every day. In the past one year, several incidents occurred within the Abyei areas that were witnessed by project staff. These included a shooting and a skirmish among SPLA and Northern Sudanese soldiers. Security issues remain the major concern, particularly after the pullout of SPLM participation from the Government of Unity.

Change in the Critical Assumption: Original project design assumed that all technical staff would be hired from the Three Areas of Sudan; Abyei, Southern Kordofan and Blue Nile, respectively. However, HEAR Sudan has been unable to identify appropriate staff from the Three Areas. Accordingly, staff recruitment continues to be a challenge given the absence of qualified candidates in the Three Areas. HEAR Sudan has been committed to hiring local staff and many efforts have been made with several visits to each area. However, IRI Coordinator positions for Kauda and Kurmuk, a Health Coordinator position for Kurmuk, and an Education Resources Center position for Kurmuk have not been filled to date. Recently, some potential candidates have been identified for these positions. HEAR Sudan hopes to finalize recruitment of the Kurmuk ERC Manager and IRI Coordinators for Kauda and Kurmuk in October. In the absence of having a full staff on the ground, EDC through SSIRI, has been providing on-going technical assistance to HEAR Sudan.

Change in Key Staff: Apart from the positions mentioned above, identifying a strong Chief of Party continues to be a challenge. Following USAID's guidance and approval, HEAR Sudan has been seeking expatriate candidates for the Chief of Party position. Despite several postings of the advert, the responses have been unsatisfactory. Given this situation, it was decided, with USAID's concurrence, to hire an interim CoP, who has since accepted the position for three months. HEAR Sudan will continue to solicit applications for this position until it is filled and hopes to identify a permanent CoP before the end of the contract with the Interim CoP.

Communication and Transportation: A lack of integrated and reliable transportation to and from, as well as within, the Three Areas makes it difficult to monitor and coordinate programs. Direct flights to the Three Areas are limited. For example, there is now only one flight per week from Southern Sudan and Lokichoggio to Kauda. One cannot travel from one location (e.g. Abyei) to another (e.g. Kauda) without traveling first to Rub Kona and/or Rumbek in Southern Sudan or Lokichoggio in Kenya. The airstrips on the Three Areas are frequently closed due to poor maintenance (which is frequently the sole responsibility of NGOs working in the area) or as a result of heavy rains. These factors have resulted in long delays in getting to, and out of, project locations; have had significant cost implications; and have contributed to delays in

project implementation. Communication and transportation challenges also have the potential of effecting monitoring and oversight of each of the different project offices and cross-location learning.

2.6 Lessons Learned and Success Stories

a) Lessons Learned

One of the lessons learned over the past year has been the importance of the strong synergies that HEAR Sudan has developed with other projects, in particular EDC's SSIRI and JSI's SHTP, as well as its effort to adopt many of the lessons learned from the Sudan Basic Education Program to design and implement its activities. HEAR Sudan has used several of the Sudan Basic Education Program products such as PTA and Head Teachers' training manuals and has adopted the Education Support Network Model into the delivery strategy of its teacher training and other capacity building interventions.

In response to the difficulties faced in recruiting staff to coordinate Interactive Radio Instruction (IRI) and provide technical assistance to HEAR Sudan rollout activities, SSIRI project staff has provided technical inputs which have resulted in successful implementation of planned activities. Health posters from JSI's SHTP program has also been adapted to suit HEAR Sudan's health related intervention and advocacy work.

One of the notable successes of the HEAR Sudan during this reporting period has been it's ability to leverage additional resources. The HEAR Sudan Project is a project that is grossly under funded for many of its planned activities. The HEAR Sudan staff has been working very hard to seek additional resources to support and strengthen some of its interventions. As a result, The HEAR Sudan Team was successful in receiving from the WHO donated does of de-worming medication for 2000 students and the Vitamin A tablets for 1,550 students in Abyei. This collaboration will continue over the life of the project. The Team has also negotiated with UNICEF to donate insecticide treated bed nets for distribution to households with students.

The HEAR Sudan Project has established operational office in Abyei and has initiated the opening of the second office in Kauda. In both Abyei and Kauda, office spaces have been provided by the regional education directorate.

b) Success Stories

Please refer to Annex (a) and (b) for success stories on Vitamin A tablets Distribution and De-worming.



SUCCESS STORY

1550 Schoolchildren Receive Vitamin A Supplementation in Abyei

Strengthening learning through vitamin A supplementation



Photo: Santino Jok

Dr. Elrasheed Abdalla, Senior Health Advisor/HEAR, gives a child a vitamin A supplement in Abyei Town, Southern Kordofan, Sudan.

The HEAR Sudan Project, implemented through Contract No. EDH-I-00-05-00026-01, is funded by USAID and implemented by Creative Associates International, Inc. (CAII) in collaboration with John Snow, Inc. (JSI), and the Education Development Center (EDC).

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Abuk stepped up to the desk, unsure of what was going to happen next. "Don't worry, it doesn't taste bad. Just open your mouth and stick out your tongue," said JSI's Senior Health Advisor, Elrasheed Abdalla. The little girl did as she was instructed as Dr. Abdalla squeezed a droplet of Vitamin A—a life-saving nutritional supplement that the girl would have otherwise not received—on her tongue.

Over 1550 schoolchildren living in Abyei Town, Southern Kordofan, Sudan, have recently received vitamin A supplementation through the Health, Education and Reconciliation (HEAR) Sudan Project. The HEAR project is a 3-year initiative to help strengthen teacher training and health education in primary schools in the transitional areas of Sudan.

Vitamin A supplements were distributed by HEAR staff in eight schools in the Abyei area throughout September and October 2007. Prior to dissemination days, community members were told about the HEAR Project's upcoming vitamin A activities and were asked to bring children to schools for supplementation. All students and any additional children between the ages of 5 and 15 years received supplementation.

Prior to administering the vitamin A, HEAR Project staff disseminated health education information to students, teachers, and parents focused on:

- what vitamin A is and the foods that contain vitamin A;
- why people need vitamin A; and
- how to protect children and mothers from vitamin A deficiency.

HEAR Project staff asked mothers present during the vitamin A activities if they would be willing to discuss the knowledge they had gained at the session with their neighbors, and many mothers said they would be happy to do so. Some mothers were in fact so enthusiastic that after their children received vitamin A, they went home and later that day returned to the school with additional children and even neighbors.

Due to strong partnerships forged between the HEAR Project and UN agencies, the World Health Organization has donated all doses of vitamin A to date, and the HEAR Project hopes to receive additional donations for schools in the other project areas of Kauda and Kurmuk.

In addition to vitamin A distribution, the HEAR Project focuses on improving the teaching skills of teachers as well as increasing teachers' basic health knowledge about topics including malaria prevention, sanitation and hygiene, and nutrition. Deworming activities, insecticide-treated bednet distribution, and training of community health workers are also components of the HEAR Project.

"That was easy," said Abuk with a giggle after receiving her vitamin A, a smile lighting up her face. "Don't worry, it is ok," she said to the girl behind her.



Photo: Santino Jok

A schoolgirl patiently receives her vitamin A supplement.



SUCCESS STORY

2200 Schoolchildren Receive Deworming Medicine in Abyei

Access to deworming treatment helps schoolchildren to learn in good health



Photo: John Snow, Inc./Frances Train

Japeth Mugumo, HEAR Health Coordinator, distributes deworming tablets to students at Abyei Basic Boys' School in Abyei Town, Southern Kordofan, Sudan

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The children stood up and said "Good morning, teacher" as the teacher and the HEAR health coordinator entered the classroom. "Good morning" replied teacher. "How many of you know about washing your hands?" Several hands went up in the classroom. "Why is it important to wash our hands?" asked the Health Coordinator. "So we don't get sick" blurted out one student boldly. "Correct" smiled the teacher.

This simple question started a health education session on the importance of handwashing to avoid disease, specifically intestinal worms. In an effort to improve the overall health of primary school children, the HEAR Project (Health, Education and Reconciliation) in Sudan is training teachers and students on basic health.

In addition to improving health information among teachers, student and the community, the project is also administering deworming medicines to all students between the ages of 5-18.

To date, over 2200 school children living in Abyei Town, Southern Kordofan, have recently received life-saving deworming medication.

Deworming tablets were distributed by HEAR staff in six schools in the Abyei area throughout September and October 2007. In addition to the students, teachers also received the deworming medication. Prior to administering the medicine, HEAR Project staff disseminated health education information to students, teachers, and parents focused on:

- the purpose, importance, and advantages of deworming;
- how people become infected with intestinal worms;
- possible side-effects associated with deworming medication; and
- where to seek health services for other related illnesses.

Deworming tablets were generously provided without cost to the HEAR Project through collaboration with WHO and GOAL. The HEAR Project will distribute deworming medicines to an additional 700 schoolchildren in the Abyei area by November 2007. In 2008, HEAR Project staff will continue to deliver deworming services to communities in Abyei, and will also expand their activities to include communities in Krumuk and Kauda.

In addition to administering the deworming medicines, the project focuses on improving the teaching skills of teachers, increasing basic health knowledge of teachers including malaria prevention, first aid, and sanitation and hygiene. Vitamin A administration and insecticide treated bednet distribution, along with training of community health workers are also components of the project.