



USAID | **NICARAGUA**
DEL PUEBLO DE LOS ESTADOS
UNIDOS DE AMÉRICA

Nicaragua Strategic Alliances for Social Investment

Alliances2 para la Educación y la Salud

Systematization Report

February 28, 2014

This publication was produced for review by the United States Agency for International Development (USAID). It was prepared by RTI International.

Nicaragua/Strategic Alliances for Social Investment

Alliances2 para la Educación y la Salud

Systematization Report

Cooperative Agreement 520-A-00-10-00031-00

Prepared for
Alicia Slate, AOR
U.S. Agency for International Development/Nicaragua

Prepared by
RTI International
3040 Cornwallis Road
Post Office Box 12194
Research Triangle Park, NC 27709-2194

RTI International is one of the world's leading research institutes, dedicated to improving the human condition by turning knowledge into practice. Our staff of more than 3,700 provides research and technical services to governments and businesses in more than 75 countries in the areas of health and pharmaceuticals, education and training, surveys and statistics, advanced technology, international development, economic and social policy, energy and the environment, and laboratory testing and chemical analysis.

RTI International is a trade name of Research Triangle Institute.

The author's views expressed in this publication do not necessarily reflect the views of the United States Agency for International Development (USAID) or the United States Government (USG).

Table of Contents

	Page
Abbreviations.....	iv
1. Context and Background.....	1
1.1 Methodology of the Systematization.....	2
1.2 Management Structure	3
1.3 Key Partners	4
2. Description of the Experience.....	5
2.1 Program Design and Strategy.....	5
2.1.1 Alliance-building strategy.....	8
2.1.2 Identification of Technical Projects	9
2.1.3 Monitoring and Evaluation	10
2.1.4 Gender.....	12
2.1.5 Capacity Building of Local Groups	14
2.2 Project implementation – Main Activities	15
2.2.1 Eduquemos.....	15
2.2.2 Fundación Zamora Terán	20
2.2.3 AMCHAM	24
2.2.4 ANF/IDEUCA	26
2.2.5 Juan XXIII	30
2.2.6 COSEP	32
3. Results.....	34
4. Facilitating and Challenging Factors	39
4.1 Successes and Facilitating Factors	39
4.2 Challenges and Areas for Improvement.....	43
5. Recommendations.....	48
Annex A: Geographic Distribution of Alliances2 Projects.....	51
Annex B: Alliances2 Results Framework.....	53
Annex C: Final Performance Monitoring Plan Indicator Results.....	54
Annex D: List of Funding Partners and Implementing Partners.....	58

Abbreviations

AIDS	Acquired Immunodeficiency Syndrome
AMCHAM	American Chamber of Commerce, Nicaragua
ANF	American Nicaraguan Foundation
ANITEC	<i>Asociación Nicaragüense de la Industrial Textil y Confección</i> (Nicaraguan Association of Textile and Apparel Industry)
AOR	Agreement officer representative
APA	<i>Aprendo, Practico, Aplico</i> (I Learn, I Practice, I Apply)
CA	Cooperative agreement
CACONIC	Nicaraguan Chamber of Commerce
CADIN	<i>Cámara de Industrias de Nicaragua</i> (Chamber of Industries)
CAM	Central America and Mexico
CANATUR	<i>Cámara de Turismo de Nicaragua</i> (Nicaraguan Chamber of Tourism)
CANSALUD	<i>Asociación Cámara Nicaragüense de la Salud</i> (Nicaraguan Chamber Association for Health)
CASUR	<i>Compañía Azucarera del Sur</i> (Southern Sugar Company)
CEFODI	<i>Centro de Formación y Desarrollo Integral</i> (Center for Training and Integrated Development)
CHONTALAC	<i>Cooperativa Multisectorial</i> (Multisectoral Cooperative)
CIASES	<i>Centro de Investigación y Acción Educativa Social</i> (Center for Research and Social Educational Action)
CISA	<i>Comercializadora e Importadora S.A.</i>
CODENI	<i>Federación Coordinadora Nicaragüense de ONG que trabajan con la Niñez y la Adolescencia</i> (Nicaraguan Coordinating NGO Federation Working with Children and Adolescents)
COMMEMMA	<i>Corporación Municipal de Mercados de Managua</i> (Municipal Markets Corporation)
COMSALUD	<i>Comunidades Saludables</i>
CONAPRO	<i>Confederación de Asociaciones Profesionales de Nicaragua</i> (Confederation of Professional Associations of Nicaragua)
COP	Chief of Party
COSEP	<i>Consejo Superior de la Empresa Privada</i> (Superior Council of Private Enterprise)
CPA	Certified public accountant
CPC	<i>Consejo del Poder Ciudadano</i> (Grassroots Citizens Council)
CSO	civil society organization
DEC	Development Experience Clearinghouse
Eduquemos	<i>Foro Educativo Nicaragüense</i> (Nicaraguan Education Forum)
EGRA	Early Grade Reading Assessment
FADCANIC	<i>Fundación para la Autonomía de la Costa Atlántica de Nicaragua</i> (Foundation for the Autonomy of the Atlantic Coast of Nicaragua)
FADEM	<i>Fundación de Apoyo al Desarrollo de la Mujer</i> (Foundation for Support to the Development of Women)
FBO	Faith-based organization
FUNIDES	Nicaraguan Foundation for Economic and Social Development
FY	Fiscal year

FZT	<i>Fundación Zamora Terán</i>
GON	Government of Nicaragua
HIV	Human Immunodeficiency Virus
IDEUCA	<i>Instituto de Educación de la Universidad Centroamericana</i> (Education Institute of the Central American University)
INATEC	<i>Instituto Nacional Tecnológico</i> (Nicaragua Technical Training Institute)
INDE	<i>Instituto Nicaragüense de Desarrollo</i> (Nicaraguan Institute for Development)
INPRHU	<i>Instituto de Promoción Humana</i> (Institute for Human Promotion)
INSS	<i>Instituto Nicaragüense de Seguridad Social</i> (Nicaraguan Institute for Social Security)
IP	Implementing partner
IR	Intermediate Result
JNPE	<i>Jornada nacional permanente por la educación</i> (Permanent Education Campaign)
Juan XXIII	<i>Instituto de Acción Social Juan XXIII</i> (Juan XXIII Institute for Social Action), <i>Universidad Centroamericana</i>
KAP	Knowledge, attitudes, and practices survey
LAC	Latin America and the Caribbean
LAFISE	Latin American Financial Services
LOP	Life of project
M&E	Monitoring and evaluation
MARP	Most at risk populations
MCH	Maternal and child health
MINED	Ministry of Education (<i>Ministerio de Educación</i>)
MINSA	Ministry of Health (<i>Ministerio de Salud</i>)
MIFAMILIA	Ministry of the Family (<i>Ministerio de la Familia</i>)
MSM	Men who have sex with men
NGO	Non-governmental associations
OLPC	One Laptop Per Child
PEPFAR	President's Emergency Plan for AIDS Relief
PLC	<i>Partido Liberal Constitucionalista</i> (Liberal Constitutionalist Party)
PMP	Performance Monitoring Plan
PREAL	Partnership for Educational Revitalization in the Americas
PVO	Private voluntary organization
RAAN	<i>Región Autónoma del Atlántico Norte</i> (North Atlantic Autonomous Region)
RAAS	<i>Región Autónoma del Atlántico Sur</i> (South Atlantic Autonomous Region)
RECAMED	<i>Red de comunicadores amigos de la educación</i> (Network of Communicators Friend of Education)
RETE	Educational Reform Support Group to Child Labor
RTI	Research Triangle Institute
SEAR	<i>Sistema Educativo Autonómico Regional</i> (Autonomous Regional Educational Sistema)
SIT	Sexually transmitted infections
TRY	Technical review committee
TOR	Terms of reference
UAM	<i>Universidad Americana</i>

UCA	<i>Universidad Centroamericana</i>
UNAG	Unión Nacional de Agricultores y Ganaderos
URACCAN	<i>Universidad de las Regiones Autónomas de la Costa Caribe Nicaragüense</i> (University of the Autonomous Regions of the Caribbean Coast of Nicaragua)
US	United States
USAID	United States Agency for International Development
USLC	United States Limited Corporation
USG	United States Government
VPCD	<i>Vigilancia y Promoción de Crecimiento y Desarrollo</i> (monitoring and promotion of growth and development)
VSM	<i>venta social de medicamentos</i>
XO	Brand name of OLPC model

1. Context and Background

Nicaragua is one of the poorest countries in Central America with widespread underemployment and nearly half of the population living below the national poverty line. Although the country has made progress to improve health and education coverage during the last decade, some persistent challenges in health and education sectors remain. These include high rates of infant and maternal mortality, insufficient birth attendance by trained medical professionals, and high rates of malnutrition, particularly stunting, among children under age 5. Although relatively low for the region, HIV seroprevalance is growing, with increasing numbers of infected women and high rates of stigma surrounding condom use. Approximately half of all Nicaraguan children never enroll in elementary school or drop out before reaching sixth grade—many before learning basic reading and math skills. About a quarter of the population is illiterate. Vulnerable groups, such as rural and marginalized populations and girls, are proportionally more affected by the lack of access to health services and education: they present some of the worst health and education indicators in the country (e.g., highest maternal mortality and lowest school enrollment rates).

Over the past decade, Nicaragua’s demand for education and health resources has faced an urgent need to attract additional resources to its education and health sectors. In this context, the United States Agency for International Development (USAID)/Nicaragua awarded a cooperative agreement (CA) the Strategic Alliances for Social Investment program (*Alliances1*) to RTI International (RTI) in 2005 to establish private sector alliances to increase social investments in health and education. Leveraged resources raised by *Alliances1* financed new, innovative, and expanded education and health activities targeting the country’s most underserved communities in rural and peri-urban areas. To continue the success of this initial foray into private sector alliance building, in 2010 USAID awarded RTI the *Alliances2* program to continue promoting investment in basic education and health through the creation of strategic public-private alliances, leveraging funds at a ratio of \$2 for every \$1 of USAID investment to augment the impact of financial assistance.

The Nicaragua component, known commonly as *Alliances2*, ran from September 2010 through December 2013. It aimed to identify, develop, negotiate, and implement public and private alliances to support USAID/Nicaragua’s Assistance Objective 3, Investing in People: Healthier, Better Educated People, with Intermediate Results (IRs) as follows:

- IR 3.1, Increased and improved social sector investments and transparency;
- IR 3.2, Increased and improved basic education opportunities;
- IR 3.3, Improved integrated management of child and reproductive health.

Additionally, *Alliances2* responded to the USAID/Nicaragua program areas and elements, especially the Investing in People Education Area, which includes the following Elements:

- 3.1 Health and 3.2 Basic Education,
- 3.1.1 HIV/AIDS

- 3.3 Maternal and Child Health (MCH).

The award also supported AO1, Governing Justly and Democratically and IR 1.6 Civil Society Organizations Strengthened. *Exhibit 1* details the intermediate and expected results of the Alliances2 Program.

Exhibit 1: Intermediate and Expected Results of the Alliances2 Program

Intermediate Result (IR) 3.1: Increased and improved social sector investments and transparency

Expected Result (ER) 1: Involvement of for-profit sector in strategic partnerships and generation of private sector resources for social investments while fostering a long-term development vision that focuses on sustainable impact rather than just short-term results, and contributes to building stronger social capital in Nicaragua

ER 2: Increased private sector funding available for and used in sustainable projects and proven approaches such that the amount leveraged from the private sector over the life of the project is at least a 2:1 ratio on all US Government (USG) funding received, including management costs, with at least half of the leveraging in cash

ER 3: Engagement of civil society with public and private sectors to create quality health and education programs at the national and local levels

ER 4: Improved internal organizational capacity of civil society organizations

IR 3.2: Increased and improved basic education opportunities

ER 5: Increased, improved and more equitable educational opportunities for learning

ER 6: Improved learning environment

IR 3.3: Improved integrated management of child and reproductive health

ER 7: Improved quality and expanded access to maternal and child health (MCH) information, education, counseling, and services

This systematization report shares lessons learned from technical and management approaches for the Alliances2 program in Nicaragua. Specifically, we describe the intent of the program within the context of USAID priorities for Nicaragua, the process and activities implemented to accomplish the goals, the factors that facilitated and complicated the results, and the results of the program during the three years of implementation. We also make recommendations that can be used for future programs.

1.1 Methodology of the Systematization

Several qualitative and quantitative methods were used during the systematization process, which occurred at two levels: the subgrantee level and the overall program level. Each subgrantee conducted their own systematization process as a part of the closing activities of their project. Some partners engaged external consultants, while others conducted the process internally. Methods used include field visits, focus groups, and interviews with key stakeholders

in each project. In addition, an extensive review of program documentation provided critical background and information, especially the documents listed in *Exhibit 2*.

Exhibit 2: Documents reviewed during systematization process

Alliances2 program documents:	Implementing partner project documents:
<ul style="list-style-type: none"> • <i>Quarterly and annual reports</i> • <i>Performance monitoring plans</i> • <i>Life-of-project strategic plan</i> • <i>Annual work plans</i> • <i>Monitoring and evaluation records</i> • <i>Final program evaluation</i> 	<ul style="list-style-type: none"> • <i>Quarterly and annual reports</i> • <i>Performance monitoring plans</i> • <i>Annual work plans</i> • <i>Systematization Reports</i> • <i>Baseline studies</i> • <i>Final evaluations</i>

The intent was to capture information, descriptions, perceptions, and analysis to identify what happened in the program, who were the stakeholders involved, what strategies were implemented, and what lessons were learned that can be applied when adapting the experience to another context.

1.2 Management Structure

RTI International is one of the world’s leading research institutes, dedicated to improving the human condition by turning knowledge into practice. Our staff of more than 3,700 provides research and technical services to governments and businesses in more than 75 countries in the areas of health and pharmaceuticals, education and training, surveys and statistics, advanced technology, international development, economic and social policy, energy and the environment, and laboratory testing and chemical analysis. By establishing partnerships between the private and public sectors as well as civil society and faith-based organizations, RTI has been contributing to sustainable development outcomes through this approach around the world for over 15 years.

RTI served as the managing partner for Alliances2 and had overall responsibility for building alliances that linked private sector funding partners on the one hand with implementing organizations working in the relevant technical areas of education and health on the other. RTI maintained primary responsibility for fiscal and administrative management, technical direction, resource mobilization, communications, and monitoring and evaluation (M&E) of activities. RTI implemented a lean program management structure to keep costs to a minimum yet remain capable of building, monitoring, and evaluating the results of alliances. Throughout the life of the program, the management team varied in size and structure. Within the first few months of the first program year, Alliances2 hired six staff (Chief of Party [COP], M&E/Operations Manager, Accountant, Health Manager, Education Manager, and Receptionist). During the first year, the Health Manager resigned and was not replaced due to reduced funds for MCH programming. After the first year, the M&E/Operations Manager position was eliminated and an

M&E coordinator was integrated into the team. During the final program year, with 8 months remaining, the Education Manager and COP resigned. The COP was replaced by an RTI staff person from the central office, to support a smooth closeout during the final months of the program. The program team was supported from the beginning by a small number of technical experts and program administrative and support staff from RTI's headquarters and regional offices, all of whom were experienced in supporting a complex program such as Alliances2.

The technical activities of the program were managed through subgrants to local implementing partners. Each partner provided whatever technical and administrative management support was required to implement its project. In general, each project had a full-time coordinator that served as the main point of contact with RTI for implementation. Additional subgrantee technical staff served as needed, providing full-time technical assistance at the central level, or field support for implementation of project activities, for example. In the second year, the education-sector partners integrated an M&E coordinator to support project activities—a position that was also included in the HIV/AIDS project implemented in the final year of Alliances2.

1.3 Key Partners

The following organizations participated in the Alliances2 program as major implementing partners.

Juan XXIII: The *Instituto de Acción Social Juan XXIII* was created within the *Universidad Centroamericana* (UCA) as a faith-based research and social action institute more than 52 years ago; for the past 25 years the major focus has been the development of social projects, while the research functions moved to other parts of the university. Throughout its years of experience, the institute has demonstrated strengths in working in rural areas, intervening in more than 60 municipalities and communities in the country. Its programs are oriented toward the most excluded and marginalized sectors of Nicaragua.

Eduquemos. Eduquemos, or the *Foro Educativo Nicaragüense*, is a nongovernmental organization (NGO) founded in 1998 with the goal of positioning education as a priority in the national development agenda. In its initial stages, it was a local partner of the USAID/Partnership for Educational Revitalization in the Americas (PREAL) program, an international think-tank to improve the quality and equity of education in Latin America and the Caribbean, and to promote the improvement of educational policies. The board of Eduquemos includes members of the private sector, who donate their time to support implementation of the strategic plan.

AMCHAM. The American Chamber of Commerce in Nicaragua, as part of its commitment to corporate social responsibility, sponsors a network of schools to improve the quality of education, infrastructure, and training of teachers, as well as to strengthen the components of entrepreneurship, environmental care, school gardens, and educational technology. To date, AMCHAM has assisted 700 primary schools with support from the Nicaraguan private sector. Assistance provided includes refurbishing of classrooms, and delivery of equipment, didactic material, furniture, and computers.

FZT. The *Fundación Zamora Terán* began with a group of family and friends of the financial group Lafise Bancentro, which supported repair and construction of school infrastructure and delivery of school supplies in Nicaragua. Inspired by initial activities, in 2009, María Josefina Terán de Zamora and her husband Roberto Zamora Llanes founded the *Fundación Zamora Terán* with the goal of implementing the “One Laptop per Child” program in Nicaragua and Central America.

ANF. The American Nicaraguan Foundation is a 501c(3) not-for-profit organization founded in 1992 to help the neediest sectors in Nicaragua by strengthening medical assistance, increasing educational attainment, building safe shelters, providing clean water solutions, promoting economic opportunity, and delivering humanitarian aid to impoverished communities throughout Nicaragua. ANF’s general objective is to build sustainable communities by delivering resources to meet basic human needs through a network of more than 2,800 organizations in Nicaragua.

IDEUCA. The *Instituto de Educación de la Universidad Centroamericana “Xabier Gorostiaga, S.J.”* is a center dedicated to educational research, focusing primarily on specialized action research and projection. Its activities include training directors, technical staff, and pedagogical staff in education; supporting schools that aspire to excellence; and helping civil society organizations that work for education to develop educational policies that are sustainable, relevant, and effective.

COSEP. The *Consejo Superior de la Empresa Privada* is a trade organization of the Nicaraguan business community. It was founded in 1972 and consists of 18 chambers, which represent the efforts of both the industrial and health sectors. COSEP’s General Objectives include defending and encouraging the system of free enterprise as an effective instrument for economic and social development; and promoting and defending democracy, liberty, justice, and human rights throughout Nicaragua.

2. Description of the Experience

2.1 Program Design and Strategy

The strategic approach to meeting the technical goals outlined in the CA drew on RTI’s technical expertise and unique knowledge of how to build public-private partnerships in Nicaragua and the greater Central American region—and in particular, how to collaboratively address development challenges through social investment partnerships that extend the coverage and improve the quality of existing services in health and education. The overall strategy comprised the following components: (1) enlisting new public and private partners while demonstrating the benefits of continued social investments to existing funding partners; (2) targeting social investments to strategic geographic areas and priority beneficiaries (e.g., women, girls, and marginalized communities); (3) engaging communities and civil society to enhance development goals and advocate for improved social investments; and (4) supporting sustainable and cost-effective activities that strengthened the capacity of strategic implementing partners (IPs).

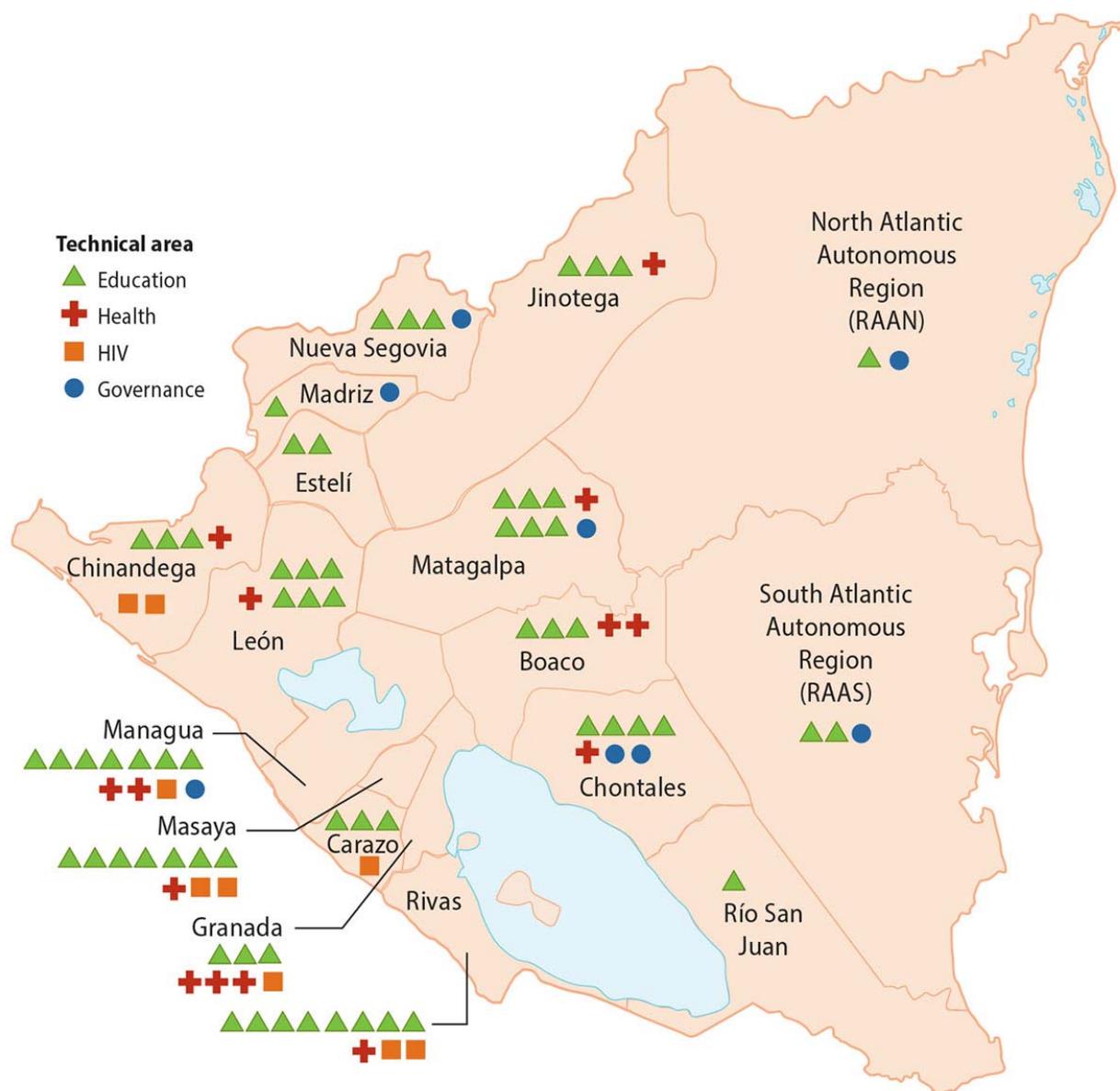
Education. The focus of the education component of Alliances2 was to expand opportunities for learning, particularly through school enrollment and retention, educational reinforcement, and improving availability of textbooks and other learning materials in the classroom. The approach concentrated on increasing access to education and training through technology, promoting new methodologies for teaching, and increasing education coverage among disadvantaged and underserved groups. Alliances2 expanded the successful *Excelencia* Model, utilizing active teaching, community participation, and reformed curriculum with an emphasis on the educational needs of marginalized communities. An additional priority area was strengthening local participation in decision making and the monitoring of education services by supporting civil society stakeholder groups at the municipal level to advocate for greater investment in education. We also looked for potential projects that integrate education, health, and nutrition and that could create synergies to enhance educational performance. In partnership with USAID/Nicaragua, we focused interventions on priority municipalities and communities that were performing below standard, and selected interventions that addressed access, quality, equity, and efficiency of basic education.

Health. Alliances2 forged alliances and partnerships with the for-profit private sector, NGOs, private voluntary organizations (PVOs), and local groups that provide maternal and child health (MCH), HIV/AIDS and nutrition services to complement and expand USAID’s successful health and nutrition programs for women and children. Funds and in-kind support raised from the private sector supported gender-sensitive programs in high poverty areas that increased the coverage and use of quality health services and the adoption of improved practices to prevent disease and malnutrition, and reduced maternal and child morbidity and mortality.

The focus of the MCH component was to expand access to and improve the quality and continuity of child maternal health information and services, especially in rural areas and with the most disadvantaged populations. Alliances2 supported capacity building activities for health service providers to ensure that best practices and *Ministerio de Salud* (MINSa – Ministry of Health) norms were adopted and implemented by providers. Alliances2 also supported projects based in private primary and post-primary schools that promoted nutrition and hygiene practices with children, teachers, and parents. In HIV, Alliances2 supported private sector companies to implement their HIV policies, training health personnel in combination prevention, stigma and discrimination, and providing cascade trainings to workers.

Geographic scope. The program was implemented nationwide; however, Alliances2-sponsored activities primarily targeted low-income people living in rural or peri-urban areas. Women of reproductive age and children under age 5 were direct beneficiaries of alliances supporting health and nutrition projects implemented at the community level; health and nutrition projects implemented in schools directly benefitted students at the primary level. Alliances supporting education projects directly benefitted students (both girls and boys) in formal educational projects at the primary level, as well as teachers, parents, and school directors. HIV/AIDS activities were concentrated in the departments of the country with the highest rates of HIV prevalence. A map illustrating the coverage of the program by department is shown in *Exhibit 3*. *Annex A* includes the detailed list by municipality and partner.

Exhibit 3: Nicaragua Alliances2 program map



Leverage. The leverage target for the program, established in the CA and spelled out in ER 2, sought new social investments in health, education, and HIV/AIDS in Nicaragua at a rate of US\$2:1 on the total amount of United States Government (USG) funds received, including management costs. With a total of US\$3.3 million in funding for alliances and management awarded from the MCH, basic education, governance, and HIV/AIDS funding accounts, RTI’s goal was to leverage US\$6.6 million in non-federal (non-USG) resources, with cash equaling as close as possible to US\$3.3 million; the remaining balance was to be in-kind support. As close as possible to 75 percent of partnerships formed under the Alliances2 program were to comprise

for-profit corporate funding partners, who provided cash and in-kind contributions to leverage USAID funds for social investment and meet USAID/Nicaragua’s goals and objectives in health and education. Nonprofit partners such as civil society organizations (CSOs), NGOs, and faith-based organizations (FBOs) were to make up the remaining 25 percent of partnerships. Partner commitments for leveraged resources were defined in the signed subgrants, which specified the general objective of the alliance, level of resources (both cash and in-kind) committed, timeframe for the proposed social investment, and areas of interest that the partner’s funds would support.

2.1.1 Alliance-building strategy

Composing a wide range of private and public sector entities, each alliance partner committed to achieving the overall goals of the program and shared responsibility for program results. As part of our approach, we identified mutual objectives between USAID/RTI and the partners, matched funding and IPs, leveraged funds and in-kind resources, and facilitated training and other actions to help achieve sustainability.

To raise funds and meet the ambitious leveraging targets, the following types of partnership-development and alliance-building activities were implemented by RTI and by the partners:

- Solicitation of individual corporations through direct contact and the peer-to-peer approach.
- Holding special fundraising events and other activities to generate support for important social causes, target groups, and geographic areas.
- Developing alliances with private corporate foundations.
- Fundraising with nonprofit organizations.
- Generating in-kind resources.
- Reporting on and communicating alliances with partners to generate interest from others.

This process created awareness within the corporate sector of the need to invest in health and education and engage in public-private sector dialogue, including making a connection with how these activities positively affect business interests. By encouraging partnerships among civil society, the private sector, and local governments, Alliances2 sought to create a platform where long-lasting alliance partnerships could be built for sustained social investment at local, regional, and national levels.

Under the Alliances2 program, we focused on high-impact approaches, vetting proposed activities for additionality and weighing the degree to which proposed initiatives targeted vulnerable populations (e.g., women of reproductive age, girls, and at-risk youth) and beneficiaries living in priority geographic areas. We also maximized impact by ensuring that best practices were incorporated into project designs. We focused on larger, integrated projects that promised more benefits in coverage and services provided, particularly in terms of integrating health activities into education projects.

2.1.2 Identification of Technical Projects

USAID/Nicaragua has supported education, MCH, and HIV/AIDS prevention activities through a number of key programs throughout its long history in the country. During the course of developing the Life-of-Project Strategic Plan, RTI reviewed successful technical strategies in the primary intervention areas, approaches, and projects currently being implemented at the local level in Nicaragua, which informed priorities and alliance-building activities. This included holding discussions with USAID and USAID-sponsored development programs.

During the first quarter, Alliances2 staff met with USAID and the staff of USAID-supported health, education and democracy and governance projects to identify health and education priorities and strategies to be addressed under the new program. Partner discussions were held with the Health Care Improvement Project; PASCA; PrevenSida, NicaSalud and FamiSalud, DELIVER, CARE and others. As a result of these discussions, for the Strategic Plan we developed broad “thematic clusters” and potential alliances that would fall under each cluster to achieve USAID goals and objectives, while ensuring collaboration with existing USAID-sponsored projects and programs. The discussions helped to ensure that the program was closely aligned with USAID goals, that funds were used efficiently, and that efforts were not duplicated among different USAID projects. The statement of work noted that alliances could support any of the following areas:

- provide high-quality integrated child health services;
- provide high-quality nutrition education, growth monitoring and promotion, and hunger mitigation services for women and children;
- improve access to education/information and services that mitigate the impact of HIV/AIDS;
- expand active learning pedagogical approaches;
- support activities at the school or community level that improve early reading skills;
- increase citizen participation for improved accountability and monitoring of education and health services;
- support early childhood education; and
- support basic education (primary, lower secondary, and upper secondary school).

Potential health and education interventions were solicited with open calls for proposals as well as through in-person marketing of the program. Alliances2 met with individual partners to learn about their current activities, programs, priorities, and management and administrative systems. An open call for proposals for health and education was published in La Prensa newspaper during the first quarter of implementation, generating expressions of interest from more than 60 organizations. The program team accepted concept papers and proposals for consideration that fit the following criteria established in consultation with USAID:

- Technically sound: Proposed interventions followed established Government of Nicaragua (GON) technical protocols and guidelines, aligned with USAID and GON

- priorities, demonstrated a gender-sensitive approach, and incorporated proven methodologies and best practices
- **Demonstrable results:** Interventions targeted priority beneficiaries and/or geographic areas and would match USAID and GON priorities
 - **Financially feasible:** Funds were available from the program; objectives, goals, and results could be achieved with resources provided. The IP also needed to provide a portion of necessary resources with in-kind or cash support
 - **Sustainable:** The intervention was financially and programmatically sustainable, was appropriate for the Nicaraguan context, and would continue without further support from Alliances2
 - **Additionality:** The intervention represented the addition of new activities, or an extension of coverage of ongoing activities
 - **Innovation:** Interventions incorporated innovative approaches when feasible and appropriate
 - **Location:** Interventions targeted areas underserved by existing health and education services

Program team members gave initial feedback on proposals submitted by potential IPs, based on best practice experience, and made recommendations as needed for further refinement. Once the proposals were complete, a technical review committee (TRC) selected and approved projects for implementing health and education activities. The TRC oversaw the competitive review of proposals, guaranteed efficiency and transparency in resource allocation, and provided guidance on technical strategies and indicators. Members of the TRC included Alliances2 staff (COP and technical manager as well as home office staff where appropriate) as well as USAID representatives, including the Agreement Officer's Representative and others as available.

The TRC was fairly formal in the first year of the program, operating in accordance with the TRC guidelines developed by RTI that included roles, responsibilities, and selection criteria for proposals. In later years, the process became more virtual, with project documents and modifications shared by email, discussed internally at USAID or between RTI and the implementing partner, and final decisions being shared electronically.

2.1.3 Monitoring and Evaluation

The program M&E system helped Alliances2 program staff and USAID determine the extent to which we were able to achieve program goals; identify the key factors that lead to program successes; and discuss the challenges that must be addressed along the way. The Alliances2 Performance Monitoring Plan (PMP) was designed in accordance with the Life of Agreement Strategic Plan and USAID's Operational Plan to track the program's progress, achievements, compliance, and outcomes. The PMP was designed to track results at the alliance project (subgrant) level and aggregate them at the programmatic (country) level through a continuous and systematic monitoring strategy, allowing Alliances2 to demonstrate its contribution to

achieving USAID/Nicaragua’s *SO3* and the related IRs. The program results framework is included in *Annex B*.

In addition to performance monitoring, the PMP was also used to monitor compliance with program-level and project-level objectives, gauge implementation progress, track progress on gender equity and other key issues, and offer timely technical support and guidance, as needed. Comprised of a set of output and outcome indicators adapted or developed for each IR, the PMP facilitated measurement of alliance project-level results and guided overall program performance evaluation. The full list of indicators is attached in *Annex C*.

To measure performance, we used two kinds of indicators: one measured the achievement of “outputs” planned under alliance projects, e.g., number of textbooks and other teaching aids provided with Alliances2 assistance or number of women and men whose need of health services are met. The other measured “outcomes,” or the results of Alliances2 investments, such as percentage of students reading with fluency and comprehension. Some indicators were disaggregated by gender to ensure that we identified gaps and monitored progress in activities with a gender focus. Alliances2’s program staff aligned alliance projects with the appropriate IR and helped IPs select applicable project indicators from the PMP indicator list.

Alliances2 established a series of methodologies for measuring results to gauge the progress toward established objectives. These measurements were based on various primary and secondary sources. Primary data included site visits, direct interviews, spot checks, questionnaires, and IP quarterly reports. Most of the primary data were prepared by the M&E team, comprised of the M&E Coordinator and the M&E staff from partner organizations.

- IP reports were the first data source for Alliances2. IPs gathered and submitted information on a quarterly basis. Training and direct data verification by the M&E Coordinator in conjunction with the technical manager guaranteed the quality and reliability of the information provided.
- Site visits by the program staff allowed verification of goals and results *in situ*. During site visits, a series of data collection techniques were used in the verification process. These techniques included the following:
 - Key informant interviews.
 - Focus groups.
 - Spot checks based on quantitative tools for data verification.
- Different types of evaluations, external and internal, provided critical information at baseline and final stages of the projects. The education projects conducted Early Grade Reading Assessments (EGRA) to evaluate reading fluency at baseline and at the end of two years of intervention. The HIV/AIDS project conducted a knowledge, attitudes, and practices (KAP) survey among their target population to measure any changes after intervention. The MCH project contracted external consultants to conduct a baseline and final evaluation to measure knowledge among their health center clients.

Data was collected across the project sites on a quarterly basis. A quarterly report system of performance monitoring indicators provided a standardized approach to documenting the timing, sequence, and success of the interventions and report on the contents, key activities and initial outputs of the project.

Secondary sources: In addition to the primary data and sources needed for measuring Alliances2 objectives and goals, the M&E team used the following three secondary sources for specific analyses and evaluations:

- 1) Official data that systematized and reported by GON institutions.
- 2) Reports published by international organizations and/or government agencies that have access to and process reliable statistical information.
- 3) USAID/Nicaragua's cooperating agency project databases and reports, when relevant.

Due to weaknesses in M&E demonstrated by education partners at the beginning of the project, RTI proposed integration of full-time M&E staff on the project teams to strengthen their monitoring. RTI coordinated the recruitment and training of new M&E coordinators to make sure each project had qualified personnel with the necessary technological skills and professional background to meet all the requirements of a rigorous M&E program. By doing this, it was possible to free some valuable time for the technical supervisors that were handling M&E activities, so they could invest this time ensuring the quality of the technical implementation of their projects. These M&E coordinators were included in the education and HIV/AIDS projects. In several cases, they became full-time staff integrated into the implementing partners' teams after the conclusion of the project.

Throughout the Alliances2 program, RTI and subgrantee technical staff conducted hundreds of visits to project schools and health centers, providing thousands of hours of technical assistance to medical personnel, teachers and directors as well as to students with the biggest challenges in their achievement. The technical teams used a M&E guide, allowing them to compare their observations from one visit to another. For the education projects, major themes observed during these visits were the presence of an alphabet and other learning materials on the walls of the classrooms, the quality of resources in the learning resource centers, the arrangement of desks in the classrooms, and the actual process of learning related to initiation, development, and culmination phases. For the health projects, M&E and technical staff monitored indicators, verified management of clinical files, coordinated the planning of the counseling sessions, and delivered the printed materials. These visits allowed the project teams as well as RTI to identify accomplishments and challenges in individual schools and provide feedback to the school authorities and project management.

2.1.4 Gender

Alliances2 respected and supported USAID/Nicaragua's principles of gender equity in all its program activities. RTI included the gender approach in all stages of the program: planning, project proposals, project evaluation and approval, project implementation, and monitoring and

evaluation. At the start-up phase, Alliances2 prioritized alliances and IP proposals that sought to reduce gender inequities; had gender-sensitive approaches; and incorporated gender-explicit objectives, outcomes, and measurable results that could feed into the program PMP, especially in regard to disaggregation of indicators by gender. Alliances2 required implementing partners to include a gender component in their applications, and solicited regular reporting from partners on results. By tracking activities and disaggregating data by sex, Alliances2 was able to identify gaps in information and services throughout program implementation.

Specific actions and the results by partner are noted below.

Eduquemos. The governance project did not have specific gender-related indicators to track, since most of its achievements were measured at the deliverable or organizational level (number of letters signed, number of organizations trained, etc.). Qualitatively, the project promoted dialogue and exchange between men and women in all activities and results, stimulating the valuable experience of mutual respect and learning directly about gender equality in public discourse. In addition, women were clearly present in the decision-making bodies of partners involved in the project, which contributed to a more balanced approach to project design and implementation.

AMCHAM. AMCHAM education staff prioritized attention to the 15 schools with the lowest rate of promotion for girls. They concentrated technical visits to improve their diagnostic and improvement plans, increase the quality of management, and optimize application of the *Excelencia* Model. They also emphasized equity in distribution of materials and books to students. During replication trainings for teachers, in some cases fathers participated in supervising classrooms while teachers were out—showing greater involvement of fathers in their children’s education than is typical. AMCHAM noted in its analysis and monitoring that although it had found in many cases that girls performed better in school than boys in the early years, this performance tended to reverse over time due to structural gender inequities in Nicaragua.

ANF/IDEUCA. This project had some challenges with moving beyond a superficial application of a gender focus. Although the two subgrantees regularly reported on gender in relation to the Alliances2 program indicators, it would have required much greater attention than was built into the project to incorporate gender sensitivity into how the schools were organized and managed, how gender was addressed in textbooks or materials as well as in pedagogical discourse, and how the teachers and directors approached their work.

Juan XXIII. The Juan XXIII project integrated gender as a cross-cutting component throughout its educational messages, lectures, and discussion groups, for medical staff as well as with the men and women who participated in counseling sessions. Overall, participants acquired greater awareness about inclusive participation of men and women as well as the importance of equal rights and opportunities. The project prioritized care for women of reproductive age, but educational materials and messages were designed to promote shared responsibility with male partners, starting with care of the pregnant women through birth, and during the process of raising and caring for their children’s health.

FZT. As part of its M&E plan, FZT implemented instruments and verification mechanisms that permitted it to analyze indicators by gender of participants, allowing the team to modify its strategies. Since the majority of the FZT teachers were female, it was difficult to ensure equal male–female participation in events for teachers. However, student participants in reinforcement activities were distributed equally by gender. The project benefitted 100 percent of students and teachers in schools in terms of training, provision of materials, and follow-up. Both fathers and mothers participated in the health and nutrition training, although the male participants were in the minority.

COSEP. In the short time frame for implementation of the HIV/AIDS training project, COSEP was able to implement key activities and collect critical information on gender. A key component was the integration of the gender-based violence module in the training and replication program. In the project’s KAP survey and evaluation, COSEP tracked indicators and responses by gender, demonstrating areas where the population of workers differed by gender. This information will be critical for design of future programming.

2.1.5 Capacity Building of Local Groups

Most of the IPs in the Alliances2 program had no previous experience managing USAID funding. To support them to manage their subgrants as well as to help prepare them for future direct funding opportunities with USAID, RTI trained the partners on administrative and financial management as well as alliance-building techniques. Capacity building took place using two formats: (1) workshops and (2) individual coaching for the partners’ technical and administrative teams. Topics covered in the capacity-building sessions included:

- Strengthening the technical design of proposals to highlight best practices in health and education and to include a gender-sensitive approach, follow GON and technical protocols and guidelines, and ensure compliance with USAID rules and regulations
- Developing clear, detailed budgets that would adequately support proposed technical designs
- Writing an effective proposal that would appeal to potential funding partners and meet their requirements, including identifying sources of in-kind and cash contributions to match outside funds
- Properly managing and reporting on a subgrant project (including complying with USAID rules and regulations) and establishing an accounting system that would properly record funds received and expended
- Establishing an effective M&E system, including selecting indicators, collecting baseline information, and tracking results so that IPs could report back and be accountable to their investors
- Conducting advocacy and improving internal organizational capacity.

Once they had developed an approved proposal and supporting budget, IPs also learned by doing—applying their management, financial, and M&E systems to effectively implement their

program-supported intervention and to report on progress and results. Alliances2 program staff provided technical assistance, monitoring support, periodic trainings, and updates as needed.

2.2 Project implementation – Main Activities

2.2.1 Eduquemos

The Eduquemos project, titled “Educational Alliances for Sustainable Human Development”, was launched in 2012 after a lengthy negotiation process between RTI, USAID, and Eduquemos. It was designed to promote the positioning of education as a priority among key stakeholders at national and regional levels, including the public sector, private sector and civil society organizations. The project promoted sharing and exchanges among these subsectors in order to build consensus on regional educational priorities. The intent was to stimulate increased investment and to improve the quality of all education subsectors (early education, primary, secondary, university, etc.). It was initially designed as an 8-month project; however, the project was extended to accommodate the addition of the Diploma course.

The expected results of the project included the following:

Result 1: At least 15 foundations or major private sector companies participate in an interactive workshop, giving them knowledge to align their projects with the national education strategy, national priorities and goals of the millennium.

Result 2: Seven regional education promotion plans created through consensus.

Result 3: Five partnerships related to education established between private sector institutions and social organizations.

Result 4: Increased awareness of social and political groups of the target population and the need to prioritize education, focusing on issues that have major impact on sustainable human development.

Result 5: 20 journalists, editors and owners of local and national media trained and awarded with a Diploma accredited by a university.

Major activities included the following:

Workshops and seminars to promote education with diverse stakeholders. In the early stages of the project, Eduquemos hosted two workshops, which served to launch the project and drum up support from various subsectors and partners for the objectives of the project. The first workshop, titled “Advocating for Education for Sustainable Human Development,” was attended by 25 different participants from NGOs working in education in various municipalities around Nicaragua, as well as various private sector partners. The second workshop, co-sponsored by Eduquemos, COSEP, and *Fundación Nicaragüense para el Desarrollo Económico y Social* (FUNIDES), covered the theme “Strategic Investment in Quality Education” and was attended by 35 different people from the private sector as well as a large contingent of media representatives.

Multisectoral workshops to develop a consensus on educational priorities in project municipalities. A major activity under this project was the elaboration of consensus-building processes and the development of education promotion plans in participating municipalities. Municipalities for this activity were selected based on their overall indicators under the Millennium Development Goals, demonstrating high rates of dropouts and repetition, as well as a high number of empirical teachers: Jinotega, Matagalpa, Nueva Segovia, *Región Autónoma del Atlántico Sur* (South Atlantic Autonomous Region – RAAS), Leon, Chinandega, and Estelí. These consensus building efforts moved through a series of steps. These includes 1) participant identification and recruitment; 2) process design; 3) problem definition and analysis; 4) identification and evaluation of alternative solutions; 5) decision making; 6) finalization and approval of the strategic educational plan. To realize this process, multi-sectoral workshops were planned and conducted in each territory to discuss the state of education and agree upon local priorities, as well as appoint a representative commission to develop the plan based on final priorities. Throughout the process, partner organizations convened participants and coordinated the activities, while Eduquemos facilitated the workshops.

After each of the workshops, the commissioners appointed in each territory developed the education promotion plans. The plans included an overall objective, expected results based on educational priorities that came out of the workshops, and proposed activities to promote awareness and advocacy for priority educational issues. The resulting plans are briefly summarized in *Exhibit 4* below.

Exhibit 4: Education Promotion Plans by Municipality

Municipality	Participating Organizations	Main themes in their plan
Ocotal (Oct 2012)	<i>Fé y Alegría</i> , Ministry of Education (MINED), <i>Instituto de Promoción Humana</i> (INPRHU – Institute for Human Promotion), adolescent promoters from "Los Cumiches," <i>Ministerio de la Familia</i> (MIFAMILIA – Ministry of the Family); school principals, <i>Fundemos</i>	Stimulate materially and morally the best teaching practices. Create visibility of the good performance and the social image of teachers. Promotion of training in life skills by counselors. Promotion of high school teaching positions and full-time counselors. Promote partnerships with other groups of organizations related to education in the municipality.
Siuna (Oct 2012)	<i>Universidad de las Regiones Autónomas de la Costa Caribe Nicaragüense</i> (University of the Autonomous Regions of the Caribbean Coast of Nicaragua [URACCAN]); Swiss Cooperation Horizontes 3000; Save the Children; Apostolic Vicariate; <i>Sistema Educativo Autónomo Regional</i> (Autonomous Regional Educational System [SEAR]); <i>Instituto Nacional Tecnológico</i> (Nicaraguan Technical Training Institute [INATEC]); <i>Partido Liberal Constitucionalista</i> (Liberal Constitutionalist Party [PLC]); principals, primary and secondary school teachers, Cattlemen's Association, Agricultural Coops, and MINED.	Strengthening pedagogical skills of teachers and encouraging those who have better results. Strengthening family values through the school counseling. Opening of the first phase of Municipal Library. Positive conditions for alignment of demand and supply of skills and technical careers.
District 6 of Managua Nov	<i>Corporación Municipal de Mercados de Managua</i> (Municipal Markets Corporation)	Increased awareness to improve working conditions and living standards of teachers.

Municipality	Participating Organizations	Main themes in their plan
2012	[COMMEMMA]), INPRHU, female police representatives, MIFAMILIA, <i>Consejo del Poder Ciudadano</i> (Grassroots Citizens Council [CPC]), Association of Merchants, neighborhood leaders, <i>Centro de Formación y Desarrollo Integral</i> (CEFODI), Terre Des Hommes-Italia, Sandinista Youth Organization, Mayor's Office in District 6, principals and teachers of private schools, MINED	Better societal and MINED willingness to support for family education and school counseling. Opening of the first phase of an institution for secondary education. Greater willingness of companies to invest in training and vocational education. Increased willingness of MINED and society to create the relevant modalities for overage children and adolescents at risk.
San Pedro de Lóvago Dec 2012	Women's Network of Chontales, 6 municipal associations, <i>Cooperativa de Productos Lácteos</i> , Municipal Development Committee, MINED, Girls-Promoters Movement, Catholic Community, AMAS Association, QUITULÍA Association, and 2 lawyers.	Increased methodological training and better image of teaching. Improve the public library for primary and secondary research, with texts and technological equipment. Improvement of family education. Promoting youth technical training for agricultural and environmental development.
Bluefields Feb 2013	URACCAN; Chamber of Tourism, (<i>Fundación para la Autonomía de la Costa Atlántica de Nicaragua</i> [FADCANIC]), Secretary of Education of the Government of RAAS, teachers and sub-directors from local schools, social communicators, indigenous representatives, MINED.	Raise awareness about the need for family education. Teacher training and encouragement. Closer ties between sectors to build partnerships for education. Strengthened teacher capacity to teach communicative English. Promotion of the reorientation of the technical and professional offerings according to the potential of the territory.
Villa Sandino March 2013	Council members, business people, ranchers, Association of Cultural Patrimony, Pastoral Juvenil, one local judge, two educational center directors, OJAD, Chontales Women's Network, <i>Fundación de Apoyo al Desarrollo de la Mujer</i> (Foundation for Support to the Development of Women – FADEM).	Improved pedagogical abilities for teachers in Spanish and math. Increased awareness of parents, teachers, and students of education in civic and moral values. First phase of rehabilitation of the Municipal Library with texts recommended by MINED and a computer center for students and faculty consultations. Implement plans for ecological latrines and potable water in schools that require it. Public-private consensus to increase allocation for municipal education.

The only plan that was not developed was for the Tuma-La Dalia municipality, which did not participate in the consensus-building workshop due to schedule conflicts.

Signature of letters of understanding. As part of the workshops and the development of the educational promotion plans in the territories, private sector partners and civil society organizations related to education were identified and encouraged to sign commitments to join forces in promoting the plans. In FY 2013, five letters of understanding were signed by partners listed below in each of the following municipalities:

- **Siuna:** URACCAN and the Unión Nacional de Agricultores y Ganaderos (UNAG).
- **Pedro de Lóvago:** Red de Mujeres Chontaleñas and the Cooperativa Multisectorial CHONTALAC.
- **Bluefields:** URACCAN and the Cámara de Turismo.
- **Managua-Distrito 6:** Terre Des Hommes and COMMEMA.

- **Villa Sandino:** Red de Mujeres Chontaleñas and the Fundación de Apoyo al Desarrollo de la Mujer (FADEM).

These commitments represent the beginning of the construction of important regional educational partnerships between civil society organizations, public and private sector companies. The letters of understanding posed a constitutional, legal, and political framework that urged these institutions to actively participate in the national and local educational development. With their signature, the parties committed to support each territorial education promotion plan. Eduquemos signed all of the letters as a witness, as a signal of their support to the first step towards forming these territorial alliances for quality education.

Social communication campaign. To raise awareness among social and political groups in the target communities on the need to prioritize education, Eduquemos hired the publicity firm Argomedia to develop an advocacy campaign for TV and radio. The spots, logos, and slogans, were developed with input from Alliances2 staff and USAID and were field-tested with focus groups in all six territories. The campaign was officially launched at a press conference at the COSEP office on April 17, 2013 with words of support given by the presidents of COSEP and Eduquemos, Dr. Ernesto Medina and José Adán Aguerri, as well as the USAID Mission Director, Arthur Brown. The slogan for the campaign was “*Por una educación de calidad: ¡Yo me apunto!*” (For a quality education: I sign up!). The spots aired on national and municipal media and on Internet social networks in geographical areas where the project was being implemented, and the logo for the campaign was printed on shirts, stickers, banners, and other materials that were displayed around Managua.

The success of the campaign on social networks such as Twitter and Facebook was evident. According to Tweetreach.com, approximately 50,896 separate twitter accounts were exposed to the campaign through tweets and re-tweets. In Facebook, 114,246 people were exposed to the campaign. As a result, 534 new people signed up as fans of Eduquemos on Facebook (they “liked” the page) while the Eduquemos Twitter account gained 158 new followers.

Caminata por la Educación. A major activity for the campaign was the four-kilometer Caminata por la Educación (Walk for Education) held in Managua on April 28, 2013, which coincided with the International Day of Education. The walk was co-sponsored by Eduquemos and COSEP, who both made a commitment to continue the event in future years on the last Sunday in April. For this first annual event, approximately 500 people participated, representing the private sector, NGOs, students, teachers from all education levels, and representatives from USAID. Sponsors of the event included Managua Runners, Universidad Americana, and the American College University. The advertisements and coverage of the event took place in all media formats (radio, television, and press).

Advocacy and lobbying activities. Eduquemos made several proposals during their project to influence legislators in making favorable decisions to increase the education budget. Given the short nature of the project, which took place in the Alliances2 final program year, results were not available by project close.

The "Educational Strategy to Tax Reform" document described the need to raise the budget allocation for education through a bill intended to increase investment in education, in the framework of medium-term tax reform. The document explained the contributions of each educational subsystem and the importance of increasing the budget allocation as an investment in sustainable human development. It included contributions from education and economy experts, and it was endorsed by the Commission of Former Ministers of Education and organizations engaged in education, among them, *Jornada Nacional Permanente por la Educación* (Permanent Education Campaign [JNPE]), *Federación Coordinadora Nicaragüense de ONG que trabajan con la Niñez y la Adolescencia* (Nicaraguan Coordinating NGO Federation Working with Children and Adolescents [CODENI]), and Educational Reform Support Group to Child Labor (RETE).

Eduquemos also submitted a "Proposal to Modify the 2013 Education Budget" to the Production, Economy, and Budget Commission of the National Legislative Assembly. The proposal demonstrates the concerns of Eduquemos regarding the constant budget cuts for primary and secondary school with respect to the general budget for Nicaragua and the Gross Domestic Product. This proposal was delivered by means of an application letter, which was not answered by project conclusion by the Presidency of this Commission at the National Assembly.

A tax incentive proposal for the private sector to invest in education was submitted for consideration by the COSEP Commission negotiating with the GON on tax consensus. According to the Commission members, the theme was addressed in the negotiation in a general way in tax credit agreements relating to income tax.

Diplomado in Journalism and Education. During the second quarter of FY13, Eduquemos designed an additional activity that resulted in a cost extension of their subgrant. This additional project activity focused on design and implementation of a diploma course in education communication, aimed at positioning education as a development priority in the municipalities and the country. Eduquemos contracted a consultant to develop the curriculum and design of the course. Once the curriculum was designed, four universities were invited to submit a proposal to host the course. Two universities submitted cost and technical proposals, which were reviewed by a committee with representation from Eduquemos and RTI. University American College presented the strongest proposal and was thus awarded the opportunity to offer the diploma course.

The course gave participants conceptual tools and approaches for addressing educational information with ethics, quality, and creativity. The enhanced skills taught in the course are essential to improve quality and effectiveness of advocacy and the policy making process. The nine modules focused on themes in education and communication such as: the educational history of Nicaragua; the state of the art of a quality education; education as the engine of development; and specific methods of communication, including print, audiovisual, and Web-based. Each course theme was taught by a selection of educational experts.

The graduates of the course organized and supported the start-up of a *Red de Comunicadores Amigos de la Educación* (RECAMED, Network of Communicator Friends of Education), the

first informal organization of journalists, editors, and owners of local and national media committed to systematic coverage of relevant issues in education. Going forward, this network will engage in advocacy and watchdog functions to increase public and private investment in education. The RECAMED was launched after the Diplomado coursework was completed, with a breakfast event in the Hotel Hilton Princess on September 19th. The event, which was hosted by Dr. Ernesto Medina as the President of Eduquemos and Dr. Mauricio Herdocia Sacasa, Rector of the Universidad American College, was attended by educational experts and members of the media as well as by the Alliances2 AOR.

2.2.2 *Fundación Zamora Terán*

FZT's subgrant for the project titled "Increasing the quality of education through the access of technological resources – One Laptop per Child (OLPC)" was signed on May 2, 2011. The project was intended to help reduce the digital divide in Nicaragua, facilitate creation of spaces for meaningful learning and establish a technological culture in low-income schools across the country. OLPC is an innovative education project using the XO computer as a learning tool in primary schools. The tool is designed to promote interest among children in learning within and outside the classroom. Under Alliances2, the project objectives were as follows:

General Objectives:

1. Improve the quality and equity of education through the implementation of an innovative and transformative project through provision of the XO computer as a learning tool as well as modern learning methodologies to primary school teachers and students in private, subsidized, and public schools with limited resources.
2. Improve information, education and child nutrition practices in schools benefiting from the project.

Specific Objectives:

- Improve the quality and equity of education through teacher training and assistance, promoting new methodologies, participation of the school community and the use of technological resources.
- Improve the environment and learning opportunities for schools by providing an XO laptop to primary-level teachers and students in selected centers.
- Increase opportunities for success in school children with educational opportunities for strengthening, with emphasis on improving literacy in the early grades and basic math skills, fluency, reading comprehension and transverse axes of the curriculum.
- Improve information, education and best practices in project beneficiary families on issues related to child health and nutrition.

Major activities included the following:

Teacher training. FZT designed and implemented a teacher training plan as the cornerstone for the project, complementing the distribution of XO computers and schools supplies and materials

for children. Throughout the life of the project, teachers and principals in project schools were trained using the modules noted in *Exhibit 5*. based in scientific, pedagogical and methodological strategies that ensured the project implementation in the classroom:

Exhibit 5. Module content in the FZT teacher training program

Module Title	Content and Description
Module 1: Educational Innovation	This module lays the foundation to transform pedagogical practice in the classrooms. The module introduces the use and importance of ICT in the classroom through fundamental constructivist theory leading to a paradigm shift to face this new challenge in education.
Module 2: Developing Skills for XO computer use	This module provided teachers with skills in the use and management of the XO computer in the classroom. Teachers learned both theory and practice, including the structure and functions of the XO, software recommendations, and educational planning strategies.
Module 3: Education Strategies that contribute to the development of a School of Excellence	To improve teaching practices, this module covered successful strategies of the <i>Excelencia</i> model. The sessions considered different components such as use of APA in planning, classroom educational projects, teaching circles, collaborative learning, parental involvement, integration of the school and community, and teaching-learning strategies, including with the XO.
Module 4: Building new methods of learning for the development of reading fluency and comprehension with the XO laptop	The module includes different strategies to promote and develop reading comprehension, fluency, vocabulary and writing. Teachers learned a variety of activities favoring the development of literacy, taking into account the EGRA.
Module 5: Educational Reinforcement	This module provided dynamic, interesting and significant strategies to reach children with educational underachievement in the early grades of primary school. These strategies were intended to be applied in the classroom, preventing dropout and repetition of grades by children who have learning difficulties, thereby improving academic performance in different subjects.
Module 6: Joining forces for the health and nutrition of our students	This module provided teachers with basic information on nutrition and health and how to incorporate related lessons in the classroom across subject areas. The course emphasized use of the XO computer for finding information about healthy foods and how to eat to stay healthy.
Module 7: Monitor teachers	The final module introduced the role of the monitor teacher, including the sustainability strategy and the characteristics and functions of the monitor teacher. Monitor teachers ensure replica trainings for other teachers, and the technical monitors ensure proper functioning of the XO computers in the school.

The ultimate goal of the training program for teachers was to allow them to facilitate the teaching and learning process in the classroom, as part of the *Excelencia* model. The process helped the acquisition of skills in reading, writing, fluency, vocabulary, text interpretation in an interesting and dynamic way, thus developing communicative competence that is essential to function in a social environment.

On-site technical assistance to teachers and directors. The FZT technical team provided support and technical assistance throughout each of the major zones of the project (Ometepe, Caribbean Coast, and the Pacific Zone). Through these visits, they monitored progress by teachers in individual classrooms, verified application of skills learned, and collected data needed to classify the schools according to their level of performance in the different components of the project. This process also fomented a close relationship among education officials, principals, teachers and children, and provided a mechanism for feedback to the FZT on the process of the project. In 2012 and 2013, FZT conducted a total 904 visits to schools in 10 departments and 2 autonomous regions, 1,779 classroom visits, and counseled 3,416 teachers and 781 principals.

FZT held workshops with the directors of beneficiary schools. These workshops allowed the team to present strategic plans and promote the objectives and targets of the project – particularly in regards to implementation of strategies to strengthen early grade reading and writing skills.

Information technology for teachers and students. An innovative component of the FZT project was to issue XO laptop computers to 17,666 children in beneficiary schools, and to arrange for Internet connectivity for most of their schools. The XO laptop can facilitate the teaching–learning process by promoting various forms of learning and accommodating different learning styles. The integration of the XO into the curriculum can bring significant advances in the quality of primary education by incorporating activities that develop children’s computer skills as well as cognitive processes. As the project was rolled out in the intervention schools, teachers adopted the computers for use in language arts, math, science, geography, and culture and artistic expression.

In addition to the provision of the equipment in the schools, FZT arranged for technical assistance and maintenance of the equipment throughout the year, mostly through their network of volunteers throughout the country. All of the XO computers are returned to FZT at the end of the school year for maintenance and repair, updating of software, and inclusion of new software as needed, after which they are redistributed to beneficiary schools.

Improved learning environment through materials distribution. FZT sought to support the educational curriculum through different strategies that strengthen classroom environments. One focus was to support teachers to create stimulating learning environments in the classrooms, through use of posters, learning corners, maps, alphabet signs, and other materials. The purpose of this support was to emphasize the role of the teacher as facilitator that stimulates learning through the classroom environment. The idea was to not only provide these materials, but also to encourage active use and interaction with them – such as by stimulating reading habits through visual alphabets and phonological posters, presence of libraries that include magazines, newspapers, and books that serve as resources for activities in reading and writing, and using materials such as artwork and stories developed by the students themselves to decorate the walls.

As a part of this support to an improved learning environment, FZT supplied books and materials to schools. Educational packages were stratified into three categories (large, small and medium)

and distributed according to the size of beneficiary schools. FZT “math baskets” provided manipulatives—such as tangrams, geoboards, abacuses, logic blocks, wooden cubes, and other items—to enhance logical thinking. Other materials that were distributed to schools include copies of the modules developed by the project and monthly planners for the directors.

Educational reinforcement program. The project trained 40 teachers who demonstrated willingness, enthusiasm and commitment to implement an educational reinforcement program for low-performing students. The reinforcement sessions took place during 4 hours a week, outside of the regular classroom hours, and included supplementary activities and personalized support that help students reach their expected learning goals. The project reached a total of 4,289 students who had difficulties in their learning in both literacy and performing basic operations in mathematics.

Story campaign and contest. FZT launched a classroom-level and school-level story-writing campaign. The theme of the campaign was: “*¡Una buena nutrición para mejorar mi educación!*” (Good nutrition to improve my education). The campaign aimed to promote creativity skills, speech, writing and reading comprehension in children in schools served by FZT. Stories were required to have an interdisciplinary focus, and students were expected to include content related to health and nutrition. In each school, the three best stories were selected (one for first and second graders, one for third and fourth graders, and one for fifth and sixth graders). The stories were sent to the next round, where the best stories from each area were selected. A total of 202 students from 84 schools competed in the first round, out of which 21 were selected as finalists. FZT hosted an event at the Financial Center of Banco Lafise in August, attended by Arthur Brown, USAID Mission Director, to select the best story from each category and present prizes to the winners. The stories will be compiled and distributed to the beneficiary schools as a means of providing additional reading material for the permanent reading campaign.

Campaign for daily reading in the classroom. FZT promoted an initiative to encourage 20 minutes of reading every day in the classroom. This strategy encouraged a love of reading, as well as improved fluency and reading comprehension and promoted healthy habits. The FZT teachers were encouraged through technical visits and workshops to use various methods of reading: silent reading, reading aloud, paired reading, reading in teams, reading competitions, “read what you like” time, readings of poems and tongue-twisters, etc. The project supported the schools to provide a variety of interesting texts for children, enabling them to promote the joy of reading and instill good reading habits. Reading comprehension—not just reading fluency—was another goal. It was stimulated through the variety of materials presented, which allowed children to develop micro-processes such as analysis, synthesis, reflection, criticism, imagination, and inference.

Nutrition trainings. After training its internal team in nutrition, FZT developed and implemented a nutrition module as part of its teacher training. The module, which was prepared by a consultant and reviewed by Federación Red Nicasalud (a nonprofit network of health organizations), helped teachers identify the relationship between education and health/nutrition,

especially the causes and effects of malnutrition on education. Participants learned which foods are healthiest; how to identify nutritional needs of students with learning challenges, and propose solutions; how to incorporate health and nutrition as a cross-cutting theme in the classroom, especially using the XO computers; and how to implement strategies to involve parents and tutors in health and nutrition themes in the classroom. The training was especially interactive and participatory: teachers developed mind-maps, drew creative interpretations of the food pyramid, and acted as investigative journalists to compare prices of junk food with health food in the market.

In the early part of FY13, nutrition trainings were geared toward parents in beneficiary schools, focusing on promoting health habits and practices in the home. The people that managed snack stands at the schools were also included in the training. More than 2,100 people participated in these trainings. As a result of the training events, more parents were aware of healthy eating habits and were taking steps to provide healthier food for children. They reported providing breakfast as an important meal, and they included additional foods in the lunch box to mitigate the purchase of junk food. During implementation of the project trained a total of 2,538 people, who were provided with copies of the nutrition modules.

Nutrition promotion in schools. In monitoring visits, the FZT team as well as RTI staff found that educators were promoting good health and nutrition practices, using classroom walls to display murals, posters and messages that emphasized the importance of good nutrition. In addition, they held meetings with parents to emphasize the importance of providing breakfast and an afternoon snack to the children. In the Asuncion de Maria School in Managua, they held a “Gastronomic Fair” with participation from parents and teachers. Some schools promoted hand washing campaigns as in the case of John Paul II in Managua, and Hogar San José School of Chinandega. During monitoring visits, the FZT team as well as RTI staff found that educators were promoting good health and nutrition practices, using classroom walls to display materials that emphasized the importance of good nutrition, and incorporating nutrition themes into their lessons—such as using fruits as the example for word problems in math sessions, asking students to write stories about carrots and apples on their XO computers, and displaying examples of healthy foods.

2.2.3 AMCHAM

Alliances2 awarded a subgrant to AMCHAM in May 2011 to develop the project titled “Improvement of the quality of educational services to children from disadvantaged sectors in 100 schools.” The project sought to improve the quality and equity of education in schools through implementation of the *Excelencia* model, emphasizing the development of reading skills. The project was supported by 20 sponsor organizations that served as benefactors to individual schools to ensure the sustainability of processes.

General Objectives

1. Strengthen the skills of directors and other management personnel responsible for project schools in the components of the *Excelencia* model, including organizational,

pedagogical and administrative management, as well as strategies for early grade reading and gender, so that they can implement, advise and monitor the application of the model in the centers they serve.

2. Provide technical assistance to teachers in first through sixth grade classroom in regards to classroom strategies, educational environment, cooperative learning, learning guides using APA methodology and implementation of activities that promote reading skills of students.
3. Advise the directors in the development and revision of improvement plans, participatory management, and monitoring indicators of coverage, retention and promotion of the project beneficiary schools.
4. Equip teachers of first through third grade with consumable educational supplies and materials and children's stories to help improve reading skills and the quality of student learning.
5. Design the strategy and replication of the EGRA test to monitor the reading skills of children in project schools.
6. Strengthen School Sponsorship Program by signing new agreements and implementing strategies for marketing and social media.

The project benefitted 25,000 children in first through sixth grade in public and subsidized schools in ten departments. The project aimed to improve the quality of management of schools and to develop reading skills in children, providing teacher training to 1,200 teachers and professors organized in two training blocks.

Teacher Training. Teacher training activities were provided in two groups or blocks. The first block focused on teaching reading in first through third grade, emphasizing phonological awareness, alphabetic code, fluency and comprehension. The second block of training focused on teachers in fourth through sixth grade, emphasizing reading comprehension and written production. The modules were as follows:

- Guide for Reinforcement of Early Grade Reading
- Module 1: Fundamentals and Activities for Development of Reading Competency in Primary Grades 1-3
- Module 2: Fundamentals and Activities for Reading Comprehension and Writing in Primary Grades 4-6.

The AMCHAM team focused on training a team of trainers in the *Aprendo, Practico, Aplico* (I Learn, I Practice, I Apply [APA]) methodology. Participants also had hands-on experience with development of reading and writing themes, enabling participants to have an accurate model for the application of this methodology in the classroom. After the initial round of trainings, AMCHAM oversaw replica trainings in schools throughout the project geographic area. All trainings were planned and coordinated with the relevant MINED and school authorities, while private sector partner CISA Exportadoras provided special coordination support for the schools

in Madriz and Nueva Segovia. These trainings strengthened the scientific, technical and methodological knowledge of the teachers, in linguistic sub competencies, early grade reading for first to third grade and reading comprehension and writing for fourth through sixth grade.

Meetings with School Directors. AMCHAM organized decentralized technical meetings with school directors to analyze strategies to improve enrollment and school performance, enabling a more comprehensive and efficient management style to meet the multiple needs of the population served. During the meetings, AMCHAM supported the directors to reflect on key project indicators such as enrollment, promotion, and retention data as well as EGRA results. They encouraged the directors to develop diagnostic and improvement plans for their schools, and promoted priority focus on reading and writing.

Project publicity. AMCHAM has a weekly television program on the local news channel (Channel 15). On February 8, 2012, they broadcast an hour-long program dedicated to the sponsorship program and the project. The program is archived on the web at <http://www.ustream.tv/recorded/29125060>. In addition, AMCHAM received authorization for 15 minutes of air twice a month to promote the progress of the project as well as the contribution of business partners.

Educational reinforcement. The technical team produced a guide for the educational reinforcement program for children in first through third grade, including all of the tools and diagnostic evaluations. Teachers were provided with necessary tools such as attendance registers, tools for evaluating reading skills, and well as results for diagnostic tests and evaluations. The reinforcement system was organized to assist children in 30 schools, which had lower academic achievement and required additional treatment in order to increase their literacy skills.

Improved learning environment. AMCHAM provided a significant amount of educational materials and equipment during the life of the project, such as teacher support books, educational material packets, and furniture, including desks and chairs, tables, and library equipment. Over 1,000 school kits of consumables containing cardboard, scissors, erasers, markers, and crayons were provided. Additionally, AMCHAM stocked reading corners within schools to facilitate continual promotion of reading. In the final year of the project, AMCHAM published three books of stories that were illustrated by graphic design students from a local university

2.2.4 ANF/IDEUCA

Alliances2 awarded ANF a subgrant in 2011 to implement the project titled “Activation of Comprehensive Quality Processes in Basic Education Centers, from the perspective of Equity, Relevance, and Efficiency.” IDEUCA serves as a principle partner for the project, providing technical assistance to a subset of 50 of the total of 200 schools that receive materials and supplies from ANF. The objectives of the project are the following:

General Objectives

1. Contribute to improving equity, relevance and quality of education in beneficiary schools, from the synergistic combination of a set of components and elements, capable of activating quality indicators in the dynamic of a holistic view of intervention.

2. Decrease the risk of child malnutrition in children leading to improved dietary habits and practices from carrying out checks and monitoring of height and weight of students under five years of age, train and support educational actors in case referrals and timely care.

Specific Objectives

1. Strengthen and upgrade teaching skills through theoretical and practical reflection of the components and elements of the *Excelencia* Model, incorporating new strategies and methodologies of teaching and learning, adapting to the needs of students with special emphasis on skills related to fluency and reading comprehension, teaching and learning of math and natural sciences as well as other topics of interest.
2. Strengthen the capacity of quality management from the training of the management staff the centers, so that they become facilitators and leaders of the implementation process of the *Excelencia* model, focused on generating processes quality and innovation, and better outcomes in beneficiary institutions.
3. Improve opportunities for learning for students served by ANF network schools by providing consumable materials, including school supplies, textbooks and other teaching materials.
4. Contribute to the improvement of the nutritional status of students through the provision of food, workshops and counseling to improve eating patterns, hygiene promotion, and growth monitoring of early education students.
5. Create a Quality Observatory, through research and systematization of processes and experiences, that will track progress of established quality indicators and identify key success factors, thus contributing to a new culture of evaluation and accountability, and dissemination of successful experiences encountered in schools.

ANF was responsible for equipping the participating schools, promoting the active involvement of the private sector for the leverage contribution, reporting and monitoring activities delegated to IDEUCA. Under a subcontract to ANF, IDEUCA was responsible for the development and delivery of courses on new and innovative educational methodologies, the quality observatory, and growth monitoring of children in project schools.

To achieve these results, the following activities were performed:

Teacher training. As with the other partners, teacher trainings were a significant component of the ANF/IDEUCA project. In the first year of the project, they created three distinct diploma courses to be offered as follows to three groups of beneficiaries in project schools:

Course on Leadership for Integrated Processes for Excellence and innovation in Education (Directors)

- Module 1 : Leadership and management of the Education Center
- Module 2 : Management of the Education Plan for the Center
- Module 3 : Curriculum Management : Curriculum Plan for the Center

- Module 4 : The Process of Teaching, Learning, and Evaluating with a socio-constructivist focus
- Module 5 : Psychosocial and community management

Course on Integrated Processes for Educational and Pedagogical Quality (Teachers in early primary grades)

- Module 1 : 1-6 Construction of A School of Excellence, Quality and Innovation
- Module 2 : 1-2 Communication Focus on Early Language Competencies: Primary Grades : Let's play with the wonderful world of words
- Module 3 : 1-2 Health and Nutrition Education
- Module 4: 1-2 Mathematics Instruction

Course on Integrated Processes for Educational and Pedagogical Quality (Teachers in Second Cycle of Primary)

- Module 1 : 1-6 Construction of A School of Excellence, Quality and Innovation
- Module 2: 3-6 Communication Focus on Language and Literature : Let's interact with texts for fun and learning
- Module 3: 3-6 Science Instruction with a basis in investigation
- Module 4: 3-6 Mathematics Instruction

These courses were provided to some teachers directly and served as a basis for replica trainings for other teachers throughout the project. The ANF/IDEUCA team, as a part of their comprehensive training strategy, also provided refresher workshops in subsequent years focused on literacy teaching strategies. In addition, they prepared self-learning modules for distribution to beneficiary teachers.

Quality Observatory. The Quality Observatory was a unique mechanism created for the ANF/IDEUCA project. Staffed by researchers from UCA, the Quality Observatory initiative combined two main objectives: (1) conducting research to fully understand the reality of the project schools, and (2) providing systematic and sustained pedagogical advice to all schools. Instruments used in the context of the Observatory included interview guides for directors, teachers, and parents; guides for making direct classroom observations; and tests for assessing student progress in reading, writing, and math. The detailed observations and results were published at regular intervals. Throughout the project, ANF schools demonstrated improvements in the quality of their teaching staff, management skills of their authorities and religious leaders, and availability of resources. Technical staff from the Observatory focused their visits to the schools on planning and organization, assessing improvements to cleanliness and order of the physical facilities, promoting literacy and improved classroom environments, monitoring children's growth as a part of the nutrition component, training in the health and nutrition

module, and overseeing the replication trainings. In addition, the technical staff supported the story contests within the schools.

Educational reinforcement program. The educational reinforcement program was a critical component of the ANF project. All schools implemented the program for first through third graders. Schools applied three different levels of reinforcement: all teachers reinforced specific themes in the classroom, special sessions were held after class hours for students, and specialized attention was given to students with the most significant learning challenges. ANF held workshops for the educational reinforcement program coordinators to help them understand their functions and provide them with a menu of innovative strategies for literacy. The coordinators then developed a plan for their schools and started implementing it as the school year got underway.

Distribution of materials. Through significant support from the private sector partners, ANF delivered different materials to schools through the life of the project, including scholar packets of consumables and textbooks, benefitting more than 34,000 students. Other materials included furniture such as chalkboards, whiteboards, files, shelves, desks, chairs, tables, and other items. ANF also donated a container of notebooks to children in 40 different schools and provided materials for technology rooms such as projectors, screens, and computers.

Health and nutrition training: In this project, IDEUCA developed a technical manual for nutrition that was implemented in workshops with parents and educators, addressing health and nutrition for children as well as appropriate techniques for growth monitoring for children under age five. In the Alliances2 final project evaluation, the evaluation team recommended that the manual be reproduced for teachers in all project schools, as technical reference material useful throughout the country. ANF and IDEUCA also designated part of their budget to incorporate reading material on health and nutrition into the final version of their literacy training modules. This allowed the trainers for the replication trainings to orient teachers to use these readings in class, allowing for a cross-cutting approach to reading and writing.

Growth monitoring. Some ANF/IDEUCA project schools took part in a growth-monitoring component, where students under the age of five were measured for height and weight. Forty teachers were trained in growth monitoring, and school directors also received guidance on how to follow up on children with problems identified by the growth-monitoring process. A baseline and endline study allowed ANF and IDEUCA to analyze the results and present them to the directors of the schools. The most significant finding was that more schools showed problems with overweight and obese children, rather than underweight. In addition, a significant percentage of children demonstrated stunting (low height). Only four schools had any underweight children, while some schools (particularly Academia Santa Maria and San Gregorio) had nearly one third of their children overweight or obese. This problem is related to high consumption of non-nutritional foods, with a high content of sugar and fat, combined with a low consumption of fruits and vegetables.

Project publicity. In partnership with ANF, IDEUCA contributed to social and institutional awareness on issues such as quality and education policy, among others, from weekly articles in the *Nuevo Diario* newspaper and through the broadcast sessions on the “Pulso Educativo” of UCA’s Radio Universidad, broadcast on Saturdays from 1-2 pm. Topics centered on innovation in educational policies and improvement of the management of the process of teaching, learning, and evaluation. As a result of these efforts, principals, teachers and children involved in the project held dialogues and exchanges around literacy as a priority issue.

2.2.5 Juan XXIII

The Juan XXIII project, called “Comunidades Saludables” or COMSALUD, was the first project developed by Alliances2, approved by USAID for a subgrant in the second quarter of FY11. The project was designed to add information, education, counseling and integrated child and reproductive health to its current services in 50 health centers in 22 municipalities. The objective of the project is to improve the quality of health services for low-income populations by improving information services, health education, nutrition counseling, and access to low-cost essential medicines (*venta social de medicamentos* [VSM]) for beneficiaries served by health stations in the network centers of the religious congregations and civil associations. The goal was to prevent malnutrition, improve the quality of obstetric services, increase breastfeeding promotion and support, improve the quality of newborn care and increase access to information, education and communication to promote the adoption of effective health and nutrition practices. Major activities included the follow:

Training for medical personnel and health center staff. Juan XXIII provided six different training sessions to medical and paramedical staff in evidence-based clinical guidelines, which were aimed at improving medical service provision. Two distinct groups received training: directors of the centers, and medical and paramedical staff. In addition to the formal training, follow-up activities included on-the-job training and targeted technical assistance on clinical guidelines to influence medical doctors’ attitudes and ultimately improve their daily practice. Topics covered in both sessions for center staff include the following:

- National health policies and plans
- Norms and protocols for prenatal care and newborn care
- Community-based AIEPI (Atención integrada a las enfermedades prevalentes de la infancia)
- Care and feeding of children under 2 years and children age 2-5 years
- Maternal and neonatal health, including danger signs in pregnancy and for newborns

Medical staff received in-depth training in the following technical topics:

- Pneumonia
- Cough and other respiratory difficulties

- Diarrhea
- Feeding and nutrition during diarrhea and dysentery
- *Vigilancia y Promoción de Crecimiento y Desarrollo* (monitoring and promotion of growth and development [VPCD])
- Clinical records management.

The training program was based on the World Health Organization and MINSA materials and curricula. These training events were considered by program participants to be one of the most beneficial and impactful activities in the project, with visible and direct results in the improvement of services offered. Many of the doctors in the centers were general practitioners, so they appreciated the focused attention on the issues most important to their clientele, such as pneumonia, diarrhea, nutrition, prenatal care, newborn care, and VPCD.

Counseling sessions on maternal health and nutrition for women 15-49 years old. Juan XXIII introduced educational counseling sessions for female clients of the beneficiary clinics, most of which had not systematically implemented them before. The topics covered in the sessions included prenatal care; identification of danger signs in pregnancy, during delivery, and after birth; and the importance of assessing the health of the baby and the mother in the health center in the first three days postpartum. Juan XXIII coordinated with clinic staff to develop the plan, select the dates, and determine the targeted number of participants. The project team developed the methodological guide that supported the facilitators, and provided teaching materials, attendance registers, and other support materials. Through the sessions' participatory methodology, participants had the opportunity to make comments, ask questions, and have some hands-on practice and role plays related to the topics, supported by presentations of audiovisual materials.

During the project's final evaluation, the evaluation team interviewed users of the health centers and recorded an apparent increase in knowledge related to maternal and child health. Areas where improvement was shown included:

- Number of reasons cited why it is important to seek prenatal care;
- Identification of the danger signs during pregnancy and for newborns;
- Knowledge of healthy practices for a pregnant woman; and
- Recognition of the importance of postpartum care and breastfeeding.

Printing and distribution of materials for network clinics. Many of the centers were lacking forms or even the paper necessary to maintain medical records on clients or track indicators for the project or for MINSA. In response, Juan XXIII printed and distributed a stock of USAID-approved forms and materials to network clinics. These materials included evidence-based clinical guidelines, copies of forms for clinical records, and monitoring and evaluation formats. Juan XXIII provided training to the eligible centers on how to use the forms and incorporate

them into their daily operations. Once the training was complete, RTI made follow-up visits to clinics to specifically monitor progress in use of the forms.

Provision of essential medicines to the project clinics. For more than 17 years, Juan XXIII has managed a social medicine sales program (*venta social de medicamentos*, VSM), which provides low-cost, high-quality essential drugs, equipment, and consumable supplies to its network of health centers as an alternative pharmacy for the impoverished population. The Juan XXIII technical team visits the VSM sites for monitoring and on-site technical assistance. The program has a revolving fund that allows the continuation of this strategy benefiting 300,000 Nicaraguans annually. As a major part of the leverage contribution to the Alliances2 project, Juan XXIII continued the direct bulk purchase of medicines for resale in its clinics at reduced prices. In total, the organization provided 212 different kinds of products to its clinics: 109 essential medicines, 71 over-the-counter medicines, and 32 different consumable materials.

2.2.6 COSEP

Alliances2 developed a multi-partner HIV/AIDS alliance with COSEP with the support of USAID programs PASCA and PrevenSida, signing the subgrant in September 2012 titled “HIV Risk Reduction among Workers by Implementing HIV Policies at COSEP Member Companies 2012-2013.” The project’s goal was to implement the combined prevention strategy developed by USAID/PrevenSida recommended for countries that have a concentrated HIV/AIDS epidemic in most-at-risk populations (MARPs). The overall objectives of the project were as follows:

General Objective

- Strengthen the capacities of COSEP member companies for design, implementation and evaluation of workplace policies on HIV with the aim of contributing to the reduction of the HIV epidemic in the economically active population.

Specific Objectives

- Develop internal skills among medical staff, nurses, and health partners to improve their workplace programming for the promotion of healthy lifestyles with emphasis on prevention of STIs and HIV
- Improve the quality and access to information, education and counseling for high-risk populations.
- Train human resources for businesses to improve their knowledge, abilities, and skills to implement behavior change activities even after project completion.
- Promote voluntary counseling and testing.
- Implement education programs for behavior change and promotion of healthy lifestyles among workers in companies.

Training sessions will include discussion of biomedical and behavioral interventions with health promoters at participating companies, who will then replicate the training through a peer education strategy.

The COSEP HIV/AIDS prevention project implemented the following activities:

Development of training modules and brochures. During the initial phase of training, COSEP and Alliances2 staff worked with the USAID|PrevenSida program to adapt their combination-prevention training modules and educational brochures for use by health personnel and key partners in the participating private sector companies. This was a critical activity, since many of the materials were targeted to most-at-risk populations such as sex workers, men who have sex with men, and injecting drug users. The private sector companies preferred language that was targeted more broadly to their general population of workers. The training modules included sections on HIV/AIDS combination prevention, stigma and discrimination, and gender-based violence. The training also included information on the single registry used in Nicaragua to track HIV/AIDS-related services to individuals.

Knowledge, attitudes, and practices (KAP) survey. The first major activity was to conduct a KAP survey for the beneficiary companies. This survey, the first of its kind in Nicaragua, was intended to provide a clearer picture of the target population so that the training could be adjusted accordingly. The survey was conducted in three modes: managed (guided by the interviewer), self-administered, and group interviews with presentations of educational videos about HIV/AIDS. This flexible approach allowed adjustment to the conditions of each business and participant group, some which had low literacy levels. Surveys were given in a conference or meeting room that was arranged with enough space that each subject had privacy to respond. The survey lasted about 95 minutes and was divided into several sections: (1) general background, (2) basic knowledge about stigma and discrimination, (3) attitudes and practices, and (4) care and referral information about sexually transmitted infections and HIV/AIDS.

A total of 876 surveys at baseline and 903 surveys at endline were administered. Some conclusions that could be drawn from the baseline were that the workers held incorrect beliefs about the transmission pathways of HIV/AIDS (for example, about half of those surveyed said they believed that HIV can be transmitted by sharing food or from mosquito bites), they had high-risk behaviors such as inconsistent condom use, and they stigmatized sex work and homosexuality as well as HIV-positive people. Since the timeline of the intervention was extremely brief (about 8 months from baseline to endline), long-term behavior change was impossible to measure. However, the final evaluation recorded an overall increase of 8 percent in terms of correct knowledge of HIV transmission and prevention.

Training of medical personnel and staff. COSEP selected participating companies through a review process launched by an open call for applicants. The review committee, consisting of COSEP and RTI staff, formally evaluated the prospective companies. Eligibility criteria included priority geographic location, key population, number of trainees, number of replication trainings to be offered, and planned leverage. All participating companies are affiliated with COSEP's various chambers and associations.

Once the companies were selected, the COSEP team began implementing trainings for each company. At the end of each training, COSEP requested written evaluations from participants to test how much knowledge they had obtained from the training. Improvement was reflected

mainly in questions about combination prevention, methodological aspects of counseling, and HIV epidemic types (i.e., generalized, concentrated in subgroups, or low level). A total of 127 medical personnel and 164 other staff (health promoters, human resources staff, security personnel, etc.) received training through the project.

Replica trainings. Once the medical and other key personnel at these companies were trained, they entered into the process of providing replication trainings to their workers. Each company had a preset target for the number of workers that should participate. The replica trainings were scheduled according to the individual needs of companies. In the agricultural sector, trainings were carried out directly in the workplace, as this sector already had established educational processes for its workers. In the textile sector, some companies trained over lunchtime while others scheduled separate training sessions. In the tourism sector, human resources staff were the focus of the training. All companies received a standard presentation template which they could adapt to their needs. COSEP technical and M&E staff supervised the replication trainings. A total of 11,192 people participated in replication trainings.

3. Results

In *Exhibit 6* below we highlight the official project indicators and the final project result. Indicators that met or surpassed the life-of-project target are highlighted in green. Indicators where results are within 10% of reaching the goal are noted in yellow. Red indicators fell more than 10% short of the goal. A detailed table including disaggregation by partner, gender, or other factors is included in *Annex C*.

Exhibit 6. Performance Monitoring Plan Indicators and Results

PMP SUMMARY TABLE OF INDICATORS AND TARGETS							
INDICATORS	Total LOP Goal	Executed FY11	Executed FY12	Executed FY13	Executed FY14	Cumulative Total	% LOP Execution
IR. 3.1: Increased and improved social sector investments and transparency							
Expected Result 1: Involvement of for-profit sector in strategic partnerships							
Number of Partnerships established with the for-profit private sector	15	5	36	69	-	110	733%
Expected Result 2: Increased private sector funding available for and used in sustainable projects							
Amount of Cash Contributions leveraged from the partners (US\$)	\$3,870,777	\$2,421,627	\$2,647,722	\$333,962	\$146,128	\$5,549,439	143%
Amount of in-kind contributions leveraged from the partners (US\$)	\$4,995,855	\$1,048,504	\$2,553,625	\$4,476,245	-\$267,139	\$7,811,235	156%
Expected Result 3: Engagement of civil society with public and private sectors							
Number of partnerships established with NGOs, PVOs, and/or CSOs.	5	5	2	-	-	7	140%
Expected Result 4: Improving internal organizational capacity of civil society organizations							
Number of CSOs using USG assistance to Improve internal organization capacity	15	5	12	1	-	18	120%

INDICATORS	Total LOP Goal	Executed FY11	Executed FY12	Executed FY13	Executed FY14	Cumulative Total	% LOP Execution
Number of Consensus building Process assisted by USG	7	-	-	6	-	6	86%
Number of USG-Assisted Consensus Building Processes resulting in an agreement	5	-	-	5	-	5	100%
Number of Groups trained in inclusive consensus building techniques with USG assistance	15	-	17	-	-	17	113%
Number of CSOs receiving USG assisted training in advocacy	15	-	17	-	-	17	113%
IR 3.2: Improved quality and equity of basic education							
Expected Result 5: Increased, improved and more equitable educational opportunities for learning							
Number of learners enrolled in primary schools and/or equivalent non-school based settings with USG-support.	70,000	82,376	99,656	97,563	-	97,563	139.38%
Yearly net enrollment rate for USG-supported primary and secondary schools.	85,689	81,609	80,292	73,608	-	73,608	85.9%
Between-grade promotion rate for USG-supported primary schools.	69,655	N/A	66,261	68,737	-	68,737	98.7%
Number of students in after schools enrichment programs	3,000	678	2,620	2,960	-	6,258	208.6%
Expected Result 6: Improved learning environment							
Number of administrators and officials trained	150	137	180	53	-	317	211.33%
Number of teachers/educators trained with USG-support, disaggregated by gender	2,600	808	2,304	897	-	4,009	154.19%
Number of textbooks and other teaching and learning materials provided with USG assistance.	300,000	56,297	135,992	104,679	-	296,968	98.99%
Proportion of students reading with fluency and comprehension after two years of schooling, disaggregated by gender and urban/rural	53799 (67%)	0	0	0	54%	54%	80.31%
Number of USG-supported schools with improved technology rooms, laboratories or equipment	300	71	120	136	-	327	109.00%
IR 3.3: Improved integrated management of child and reproductive health							
Expected Result 7: Improved quality and expanded access to MCH information, education, counseling, and services							
Number of partner organizations with staff and volunteers trained to deliver comprehensive MCH information, education and communication services	20	31	-	-	-	31	155.00%
Number of antenatal care visits provided by skilled providers from USG-assisted facilities	3,500	575	1,382	1,540	-	3,497	99.91%
Number of cases of child diarrhea treated in USAID-assisted programs	3,700	857	1,328	1,704	-	3,889	105.11%
Number of cases of child pneumonia treated with antibiotics by trained facility or community health workers in USG-supported programs	600	357	839	915	-	2,111	351.83%
Number of children under five reached by USG-supported nutrition programs	1,500	996	3,177	3,578	-	7,751	516.73%

INDICATORS	Total LOP Goal	Executed FY11	Executed FY12	Executed FY13	Executed FY14	Cumulative Total	% LOP Execution
Number of medical and para-medical practitioners trained in evidence-based clinical guidelines	120	29	41	31	-	101	84.17%
Number of newborns receiving antibiotic treatment for infection from appropriate health workers through USG-supported programs	900	24	120	102	-	246	27.33%
Number of postpartum/newborn visits within 3 days of birth in USG-assisted programs	500	-	124	12	-	136	27.20%
Number of people trained in child health and nutrition through USG-supported health area programs	2,500	79	3,290	1,180	-	4,549	181.96%
Number of people with access to essential low-cost medicines	300,000	109,725	146,590	166,882	-	423,197	141.07%
Number of MARP reached with individual and/or small group level HIV preventive interventions that are based on evidence and/or meet the minimum standards required	10,000	-	-	11,192	-	11,192	111.92%
Number of health care workers who successfully completed an in-service training program within the reporting period	100	-	-	127	-	127	127.00%

A major challenge for setting realistic targets in programs such as Alliances2 is that the original goals are often set in the scope of work, which is finalized prior to the negotiation of any alliances, and which is dependent on the programmatic goals of USAID. Alliances are then explored and negotiated using these goals as a guide; however, actual execution depends highly on the commitment, resources, and programmatic interests of the implementing and funding partners.

Below we provide further details for PMP indicators where the LOP execution is significantly above or below the annual target (differences of more than 10% above or below target), in addition to commentary on several other indicators.

- *Number of partnerships established with the for-profit private sector.* The number of partners increased significantly in the final year, from 56 to 110, as a result of the end-of-project documentation process. In **Annex D**, we include the list of all 127 project partners (corporate as well as other kinds), including the type of contribution each partner has provided (cash vs. in-kind).
- *Amount of cash and in-kind contributions leveraged from the private sector.* After signature of the six subgrants that comprised the Alliances2 project, the partners had committed more than the program target, or nearly US\$8.9 million. Throughout the implementation period, additional resources were obtained through inclusion of new partners and identification of additional sources—such as donation of conference room space for trainings, transport for donated materials, and other eligible sources. During the final year, adjustments were made based on the quality of the supporting documentation,

which resulted in some reductions in totals. Total life-of-project leverage equaled more than US\$13.3 million, surpassing a ratio of 4:1 on the USAID investment.

- *Number of partnerships established with NGOs, PVOs, and/or CSOs and number of CSOs using USG assistance to improve internal organizational capacity.* These indicators were a measure of the number of implementing partners established and the number of groups trained; both of which the targets were established before any alliances were negotiated. Since the program signed six subgrants with seven partners, and incorporated a specific training activity in the governance project, we exceeded the targets from the CA.
- *Number of consensus-building processes assisted by USG.* Eduquemos was unable to conduct the final consensus-building process because the municipality that was being prepared for the workshop had scheduling conflicts and needed to withdraw from the program. At that point, it would have been difficult to integrate an additional municipality, since the time needed to lay the groundwork for the workshop was extensive.
- *Number of learners enrolled in primary schools and yearly net enrollment rate.* It was disappointing to note this overall decline in enrollment after more than two years of implementation of teacher training, provision of materials, technical advice, and close monitoring and evaluation in these schools. However, this trend was noted nationally, not only in Alliances2 projects. For future programs, activities should perhaps address enrollment factors directly through provision of scholarships or other approaches that address specific barriers to enrollment.
- *Number of students in after school enrichment programs.* Despite the challenges in getting consistent attendance from students in the reinforcement programs, our partners were successful in getting students identified and enrolled, allowing us to exceed the LOP target.
- *Number of administrators and officials trained.* The LOP goal was reached in FY12, after partners were successful in reaching more schools than originally committed.
- *Number of teachers/educators trained.* The LOP goal was reached early, after partners were successful in reaching more schools than originally committed.
- *Proportion of students reading with fluency and comprehension after two years of schooling.* Alliances2 schools demonstrated a 13% increase over baseline of the proportion of children that can read with fluency and comprehension, for a total of 54% of students. Although this did not reach the target sent in consultation with USAID at project start-up, it exceeds the target in the CA of a 5% increase over baseline.
- *Number of partner organizations with staff and volunteers trained to deliver comprehensive MCH, information, education and communication services.* Since Juan XXIII is actually a network of health centers, each with their own management and

organization, by training staff from these clinics we were able to exceed this target under the one subgrant.

- *Number of cases of child pneumonia treated with antibiotics by trained facility or community health workers in USG-supported programs.* The original target was set in the CA prior to negotiation of the alliance with Juan XXIII.
- *Number of children under five reached by USG-supported nutrition programs.* The original target was set in the CA prior to negotiation of the alliance with Juan XXIII or the inclusion of the nutrition components into the education subgrants.
- *Number of medical and para-medical practitioners trained.* We did not reach the target since many of the original clinics from Juan XXIII were eliminated during the life of the project and staff from eliminated clinics were not eligible for training.
- *Number of newborns receiving antibiotic treatment for infection.* We did not achieve this target since women usually return to a MINSA health clinic or were referred there for newborn care. However, there was an increase in the number of newborns treated in this indicator in Q4 of FY13. This is due to the fact that Juan XXIII encouraged their doctors to administer the first dose more frequently prior to referring the children on to a health center.
- *Number of postpartum/newborn visits within 3 days.* We did not achieve this target due to cultural practices that are difficult to change (women usually return to a MINSA health clinic within 8 days, not to one of the Juan XXIII centers).
- *Number of people trained in child health and nutrition.* The integration of nutrition training in schools as well as the counseling sessions for women of reproductive age in Juan XXIII clinics provided access to more people than expected to project training in child health and nutrition.
- *Number of people with access to essential low-cost medicines.* Juan XXIII integrated new medicines and supplies in their standard list in later years of the project, allowing them to greatly exceed their original target.
- *Number of MARPs reached with individual and/or small group level HIV prevention interventions based on evidence and/or that meet the minimum standards required and number of health care workers who successfully completed an in-service training program within the reporting period.* COSEP experienced unprecedented interest from private sector companies in participating in the project, allowing more of their health workers and employees to participate in the trainings than planned.

4. Facilitating and Challenging Factors

Below we outline by sector the factors that facilitated successes or posed challenges to project implementation. The points noted provide a qualitative context that complements the quantitative results outlined above.

4.1 Successes and Facilitating Factors

Governance Project

Key successes in the governance project include the following:

- The training activities for civil society organizations were well coordinated with stakeholders in the different territories. The participatory methodologies used encouraged dialogue, build consensus, and served to strengthen the institutional partnerships.
- The sectoral representatives selected to develop the education promotion plans had the vision as well as experiences and skills needed to define the scope of these plans and carry them forward.
- The social media campaign, with a clear logo and a multi-media approach, facilitated dialogue and galvanized educational partnerships at the central level, especially with the private sector representatives from COSEP and FUNIDES, as well as with other CSO partners such as Terre Des Hommes and URACCAN. In addition, significant leverage support was mobilized from companies and private foundations to air TV and radio spots, ensure coverage in print and digital media, produce advertising materials, and support logistics for the *Caminata por la Educacion*.
- The creation of a Diploma course in Journalism and Education was a strategy to sustain project results, particularly as the graduates go forth as part of the RECAMED and continue advocating for education in a public space. This contributes to the cause of quality education for sustainable human development in Nicaragua.

The following factors supported the development of the governance component and contributed to the successes that were reported:

- There was a close relationship between EDUQUEMOS, COSEP and FUNIDES during the development of the project, as a result of various initiatives related to education, including a common interest in the national education agenda, and a shared vision of the role the private sector in quality education. The project has capitalized on these positive working relationships in order to expand their reach and impact in various project activities, such as the social communication campaign and the advocacy efforts.
- EDUQUEMOS had pre-established links with journalists and the media for interviews, publication of opinion articles and reports, among others. This served to facilitate the inclusion of educational topics in the media, particularly through the communication campaign they conducted as well as for the Diploma in Journalism and Education.

- The prior experience of Eduquemos staff in project coordination, consultation processes for regional social planning, and training facilitation were all favorable to the development of regional workshops, planning sessions of the diploma course and signing letters of understanding in the territories.

Education Projects

Key successes in the education projects include the following:

- Implementation of new methodological strategies for basic understanding of literacy was based on the APA approach. This dynamic model established an educational setting that was more visual, creative, and participatory from the perspective of the students. The development of the APA strategy in the education projects was highly relevant for the target grades of early primary, since the first three years of basic education are vital to the development of reading comprehension skills.
- Introduction and reinforcement of the *Excelencia* Model not only strengthened outcomes for students, but also motivated and encouraged the teachers and directors. These newly empowered teachers were better able to facilitate meaningful learning for students, and directors exercised their leadership roles in educational management.
- Reading promotion in the classroom and at home through a variety of methods was significantly correlated with better reading skills in students. Implementing reading corners and libraries, adding stories to XO computers, distributing story books, decorating the classroom with the alphabet and other displays, and encouraging daily reading in the classroom and at home all contributed to an environment rich with opportunities to read.
- Involvement of parents in the teaching and learning process and encouraging their commitment to support their children to read and do homework served to strength the learning environment and the relationship between the school and the community, and reinforced the messages being taught at school. This involvement was also correlated with better reading skills in students.
- Provision of computers, particularly the XO computer, reduced the digital divide for the students and exposed them to new ways of learning and exploring. Students with XO computers showed greater progress in reading skills than those who did not use them in the classroom.

The following factors supported the development of the Education component of Alliances2 and contributed to the successes that were reported:

Integration of data-based decision making. A critical factor for project success was the integration of elements such as EGRA evaluations and M&E coordinators in each project, which provided relevant data to partners to inform their technical strategies and aid them in targeting particular schools based on their performance in the project. The baseline study in particular

provided a starting point for schools to develop plans to address the weaknesses and strategize a response. In the ANF/IDEUCA project, the Quality Observatory provided regular analysis and reporting, generating information that was useful for the management of schools. For example, they identified early on that the schools were not progressing quickly, which allowed them to adjust the pace of supervision and support to teachers to promote faster progress.

Consistent technical assistance and support in classrooms and at schools. A key success factor in *Alliances2* was consistent follow-up with teachers in the classrooms, to observe their approach, assess application of new skills, and support them with any challenges they faced. Schools that received more consistent attention from the technical teams of subgrantees showed greater success than those that experienced fewer visits.

Inclusion of the larger community. The process of creating *Excelencia* schools impacted not only the educational community (teachers and directors) but extended to the families and partners who are a part of the larger school community. The extended networks of relationships provided a larger community that could accompany the educational and nutritional support provided to students in the first and second cycle of basic education. The technical staff in the Observatory helped expand this community even further, by supporting school management to attend to needs, developing positive communication practices, and strengthening the relationship between teachers and management. This process established horizontal relationships and supported decentralization of responsibilities and tasks, while also allowing a wide range of voices to be heard and boosting shared authority and commitment to a quality education within the schools. A school where the educational community appropriates or takes ownership of the project fosters greater accountability and commitment to students, teachers, principals and parents.

Creating leadership in the classroom, with teachers as facilitators. Teachers noted the vital relationship between class dynamics and reinforcement activities as part of the teaching-learning process. The teaching aids and classroom environment served as vehicles to consolidate learning, encouraging a climate of skills development and confidence in the students. Teachers served as a strategic element to the school management for achieving educational quality indicators. The management staff of the centers served as facilitators of the process, not only guarantor of it. They provided support to meet the training needs of their teachers as well as to obtain the necessary funds to boost the educational process at school. The roles of both actors (teachers and directors) were critically important for the success of the project.

Integration of pedagogical support with the donation of materials and supplies. The traditional philanthropic approach of donating books and supplies to schools, including the donation of XO computers, was complemented by the integration of capacity building and pedagogical support. Partners and schools noted that both aspects of the project contributed to their successes, and that the same results could not have been achieved with only one component.

Health Projects

Key successes in the health projects include the following:

- The quality of care at the Juan XXIII health centers improved for several reasons. Medical and para-medical staff have been trained in evidence-based clinical guidelines, and maintain access to printed copies of these guidelines. Staff have access to the paper forms needed to better track health of their patients, which not only benefitted the patients to have an up-to-date clinical record, but allowed the clinic to track the services provided and make decisions based on data. The clinics benefitted from additional medical equipment needed to provide basic services, such as scales for growth monitoring, blood pressure cuffs, stethoscopes, and thermometers.
- Provision of counseling sessions was a new activity integrated into the project health centers. These centers not only contributed to preventive health education, but to acquisition of good practices for child nutrition which contribute to improved growth and development.
- The health centers have adopted the project focus of prioritizing children under 5 and women of reproductive age. Throughout the course of the project, 1,116 women benefitted from information and education in MCH, neonatal health, and nutrition. They received critical education on the importance of preventive health, good nutrition during and after pregnancy, appropriate breastfeeding, and proper nutrition of children. The centers improved their coordination with local and national authorities of MINSA, and updated their reputation as providers of community health services.
- The nutrition component in schools united parents, teachers, students, and staff that sell food to incorporate new practices and view food, nutrition, and hygiene in new ways. Parents learned new recipes and techniques for providing healthy food to their children, and the food sellers in schools began incorporating fruits and other items as options. Children reported that the knowledge they learned can be applied in their everyday life, especially in regards to personal hygiene and eating fruits.
- The COSEP HIV/AIDS project served to galvanize commitment from the private sector to address HIV prevention and discrimination in the workplace. Participation in the project surpassed expectations. The project attracted participation of 19 companies from different sectors with a universe of about 24,354 workers; activities reached 129% of the goal for trained health personnel and 117% of the goal for workers.

The following factors supported the development of the health component of Alliances² and contributed to the successes that were reported:

Commitment of personnel. The staff in the health center network as well as in Juan XXIII have a significant commitment to providing health services to underserved populations. They have demonstrated knowledge of the challenges faced by these groups, which are located in remote rural areas, peri-urban areas, or other marginalized places. This commitment fostered trust from their clients and contributed to the increase in knowledge demonstrated in the final results of the project.

Self-sustainability of centers. The centers in the Juan XXIII network work with limited resources, but they benefit from participation in the VSM program which allows them with a consistent supply of medicines for the project. This contrasts with other public clinics who often experience stockouts or who do not have a sufficient supply. In addition, it contributes to the trust demonstrated by clients for the centers, since they can be assured that they will have access to medications.

Design of targeted training program. The training module designed for the COMSALUD project served to motivate staff to attend and learn. By targeting the training to specific health topics rather than as a more generalized in-service training, the medical and para-medical staff were able to focus on the issues most relevant to the majority of their clientele – women of reproductive age and children under 5. These themes included diarrhea, nutrition, pneumonia, and VPCD as well as key reproductive and maternal issues for women. Since many of the doctors in the network are general practitioners, this training model facilitated their focused study on the topics that mattered most.

Support from a wide range of stakeholders for nutrition interventions. In the education projects that incorporated a nutrition component, the involvement of parents in the schools was critically important for success of the activities. The involvement of fathers and mothers was significant for developing better eating habits, improving school promotion levels and to enhancing academic reinforcement. Fathers and mothers from ANF/IDEUCA schools expressed that they can contribute to solutions for the challenges faced by their children, as they are the primary caregivers. Student participation is also important for the sustainability of the school project. One effect of this project was to improve communication between teachers, with children, fathers and mothers.

4.2 Challenges and Areas for Improvement

Governance Project

The following factors posed challenges for implementation of the governance project, and should be carefully considered for future projects.

Changes in partners and locations. The multi-sectoral nature of the Eduquemos project—as well as the heterogeneous nature of the partner organizations, some of which had never worked with Eduquemos before—necessitated a lot of dialogue before implementation in certain territories. In addition, part of the project development occurred during political campaign season or in the aftermath of elections. This affected compliance with the implementation timeline in New Guinea, where disputed election outcomes caused political tensions; and indirectly in Tuma-La Dalia, where the principal partner had conflicting commitments. This also led to changes during implementation in terms of selection of partners and municipalities. Eduquemos maintained ongoing close communication with its organizations, which allowed the project to meet nearly all of its goals. Further efforts should incorporate a stronger vetting process to assess organizations for suitability, reliability, and commitment.

Limited budget and time frame for implementation. The small budget assigned to this project with a medium-term scope worked against it. For example, the resources available were insufficient to support the implementation of the territorial plans that had been devised to address educational priorities. In addition, some activities—such as the diploma in journalism and education and the RECAMED—were added on midway through the project, which limited their planning and operability. Future projects should secure resources for implementation of plans prior to development. This would strengthen commitments from partners and send a clear message regarding importance of the plans.

Education Projects

The following factors posed challenges for implementation of the governance project, and should be carefully considered for future projects.

Challenges working within schools of the *Ministerio de Educación* (MINED, Ministry of Education). Despite the positive aspects of the Alliance2 education projects, there was resistance from MINED authorities in Chontales department, and especially in the city of Juigalpa. They declined to authorize participation of teachers in training activities, and teachers in some schools were reluctant to provide statistical data without authorization. To mitigate this problem, ANF worked individually with the schools to collect statistical data on secondary forms. FZT addressed resistance by creating and signing a collaborative agreement, with the MINED authorities taking public credit for the XO computers. An additional challenge in coordinating with MINED schools was scheduling activities around the busy calendar of official events and trainings. Partners worked closely with MINED delegations at the municipal and departmental levels to coordinate schedules.

Change in schools. In FY 2013, the subset of schools supported by IDEUCA as well as the total list of ANF project schools changed. First, 10 schools were added to the initial 40 that were supported pedagogically by IDEUCA, bringing the total to 50 schools that received both technical assistance and supplies. Of the 200 schools in the ANF/IDEUCA project that received materials and supplies, 21 new schools were incorporated to replace 21 that had been removed: 10 because they were already receiving support from AMCHAM or FZT, and 11 others from the Parroquia San Francisco de Asís (in Juigalpa, Chontales department) because of MINED resistance to sharing statistical data. This changeover in the list of project-supported schools limited the exposure of some schools to project interventions.

Resistance to behavior change. Changing the attitudes of teachers and principals, breaking down educational paradigms, and motivating managers to become leaders were some of the main challenges of education project implementation. Project partners invested significant time observing and advising teachers and directors in the classroom and in the schools, to follow up on strategies and methodologies taught in the training. Despite this challenge, many teachers were pleased and motivated to depart from their traditional methodology of teaching mathematics and literacy and instead use the new teaching strategies they had learned

Attendance in school and in reinforcement activities. Irregular attendance of students in certain areas and at different times of the year, caused by natural phenomena (rain) and children’s work obligations, posed challenges to regular attendance in school and in after-school reinforcement activities. In this situation, the schools promoted meetings with parents to raise awareness about the importance of attending classes every day.

Challenges for meeting enrollment increase targets. All partners recorded an overall decline in enrollment after more than two years of teacher training, provision of materials, technical advice, and close monitoring and evaluation in these schools. Although activities were designed to improve the quality of education, there was no specific component to address barriers such as lack of space in schools for additional students, or learners’ economic constraints. For future programs, activities should perhaps address enrollment factors directly through scholarships or other barrier-focused approaches.

Technology infrastructure and maintenance. In the FZT laptop donation project, there was a continuous challenge to repair and upgrade equipment and to establish and maintain connectivity. To mitigate the issue, FZT conducted awareness campaigns at parent meetings, created videos on the care of the equipment, and implemented radio campaigns in areas with a higher incidence of breakage or loss. They also collected all the laptops during vacation periods. These actions reduced the percentage of damage and loss and achieved greater commitment from the community.

Limited time frame to accomplish project objectives. Although the education projects benefitted from extensions in the final year of Alliances2, their overall time frame for implementation was relatively short for their ambitious goals. Achieving an increase in reading comprehension and fluency and increasing enrollment rates in two years were high bars to meet; in addition, measuring long-term effects of application of new methodologies would require a longer time frame.

Unified literacy module. Under USAID’s direction, RTI implemented a plan in year three to develop a module for teaching reading and writing with the inputs of all partners as well as the support of an international consultant in a joint workshop. This workshop significantly strengthened the knowledge and skills of participants to more effectively train teachers in strategies and methods to teach reading and writing. The workshop resulted in a unified literacy module that partners can use for training teachers in their projects. The module’s core content was completed in Q3, but the process of layout and graphic design as well as editing took longer than expected due to issues with sourcing of providers. At program closeout, the final version was still awaiting clearance by USAID for distribution.

Change in indicators. The Quality Observatory monitoring the ANF/IDEUCA project stated that the objectives at the beginning of the project were very ambitious and needed to be adjusted to focus on education, especially the targets related to reading fluency and comprehension.

Health Projects

The following activities would require additional work or adaptation in the future:

Resistance to changing eating behaviors. Many families and individuals resisted changing their poor eating habits, preferring the convenience and price of less healthy foods such as soft drinks, instant soups, candy, and chips. This was shown in the Juan XXIII project, among the women and men who attended the clinics and counseling sessions; and in schools, among both children and the adults who provided the food choices to the students. These children ended up consuming nutrient-poor and calorie-dense foods, a potential source of the unexpectedly higher obesity rates noted in ANF/IDEUCA's growth monitoring activity.

Resistance to attending postnatal visits within three days. Juan XXIII found it extremely difficult to encourage mothers to come to the nearest medical center within three days after birth for mother and baby checkups. Not only was there a general cultural resistance to this idea, but when mothers did comply, they often went directly to MINSA clinics rather than to the project centers.

Challenges with matching the indicator requirements with the reality of implementation. Juan XXIII struggled to design a counseling session approach that was convenient for attendance by rural women, but that also complied with the amount of time needed to consider it a training session. People were not available to attend a really long counseling session; nor could they attend multiple sessions when the counseling was broken into several different days. COSEP also noted the difficulty of adapting the HIV training sessions in a workplace setting to comply with the basic standards of the indicators, since productivity time was lost when workers attended the sessions.

Turnover in medical staff. Juan XXIII planned to individually provide training to new community health staff, but newcomers did not always receive the same level of training as those who participated in the full training seminars. Although the health centers did benefit from a certain amount of financial stability due to the VSM program and the minimal fee charged for a consultation, they did not have enough income to pay competitive salaries to medical staff—leading to turnover and instability. It was a challenge to keep the clinics staffed with trained personnel, which created difficulties with maintaining the quality of implementation.

Modifications of Juan XXIII project scope. The Juan XXIII project changed significantly over the course of implementation, due to changes in USAID's expectations regarding the eligibility of health centers based on their MINSA registration status and the volume of MCH services provided. The number of centers participating in the project was reduced by half in the last project year, and the remaining unregistered centers were expected to begin the process of formal registration with MINSA. As of project completion, not all of the centers had submitted their registration request to MINSA for approval. *Exhibit 7* below indicates the status of each center.

Exhibit 7: Authorization status of Juan XXIII health centers

Name of Center	Authorized	Request Submitted	Request in Process	No request submitted
Disp. Enrique D´Osso	X			
Clínica Roberto Clemente	X			
Clínica Verde	X			
Disp. Santa María de los Ángeles		X		
Disp. Virgen del Río		X		
VSM Los Jirones		X		
Disp. Madre María Eugenia		X		
Albergue San Vicente de Paul		X		
Disp. El Tepeyac		X		
Disp. San Pascual		X		
Clínica Materno Infantil		X		
Disp. Fray Aquiles Bonucci		X		
Disp. Redes de Solidaridad		X		
Disp. San Martín de Porres		X		
Disp. San José-Diriá			X	
Disp. San Guillermo			X	
Disp. Fray Odorico D´Andrea			X	
Disp. María Auxiliadora				X
Disp San Francisco de Asís (Camoapa)				X
Disp. San Vicente de Paul				X
Disp. San Judas Tadeo-Esquipulas				X
Disp. Padre Ernesto Luna				X
Disp. San Rafael				X
C/S Fe y Alegría				X
Disp. Divino Niño Jesús				X
TOTAL	3	11	3	8

The clinics that had not submitted letters provided a variety of reasons: some had a change in staff, one was refurbishing its facility and could not submit a request until the work was done, another received approval only to distribute medicines, and others simply neglected to submit by the project closing date. As these requirements were not specified at project start-up, it was a source of frustration for the partners and for the staff in the clinics that were eliminated from the project.

Limited timeframe for implementation of behavior change processes. Since the COSEP project was not signed until the final year of the Alliances2 program, there was limited time to

implement the trainings and also create any measurable long-term change in behavior. The KAP survey noted some minor improvements in knowledge and self-reported behavior, but most of the differences were not statistically significant.

Management

Centralized management structure. Although perhaps contrary to the nature of USAID projects, partners would have appreciated more flexibility in management and decision-making in future programs. The highly centralized nature of decision-making under USAID development assistance can be a source of frustration for partners used to working independently or at the pace of the private sector.

Small management team at RTI. The size of the management team with RTI was intended to be lean, primarily to keep management costs to a minimum. This arrangement limited the ability to effectively manage the project, however, particularly in terms of providing adequate technical assistance and oversight in health, education, and gender approaches. It was also detrimental to adequate response times for review and approval of project documents and deliverables.

Insufficient technical staff within the projects themselves. AMCHAM, FZT, and Juan XXIII all identified the difficulty of adequately overseeing their project sites. AMCHAM was able to hire additional technical staff in the final year of its project, while the reduction in scope of the Juan XXIII project eased the burden on the team. However, project teams should plan to include sufficient staff for implementation and oversight.

Financial and administrative management of partners. The administration of the Alliances2 program required the partners to learn regulations and procedures of USAID and RTI. In some cases, IPs had weak administrative processes such as purchasing, accounting, inventory, and other internal controls. Alliances2 staff invested substantial time and resources to strengthen their capacity to overcome these limitations to sustain initiatives beyond the life of program funding. Although all the projects completed their implementation with clean financial reviews, the process of supporting and monitoring subgrantees for financial and administrative compliance was time consuming.

5. Recommendations

The Strategic Alliances (2005–2010) and Alliances2 programs in Nicaragua demonstrated that private sector alliances could be successfully built and could leverage significant funding for education and health. By collaborating with corporate foundations and NGOs, and involving respected companies as funding and implementing partners, Alliances2 continued to move the private sector from focusing on periodic philanthropic activities mainly in education, to longer-term, social investments in integrated education and health projects as well as in HIV/AIDS and governance. For many corporate funding and implementing partners, this was their first experience working with USAID, and Alliances2 served an important role in forming this working relationship and bringing the private and public sectors together.

Key lessons learned under Alliances2 can be applied to future alliance-building programs, whatever the country or context. These lessons are described below.

Integrate technical projects and implement comprehensive approaches to achieve greater impact. Developing alliance projects that integrated several different education and health activities gave beneficiaries a more accessible and broader spectrum of services, and also promoted private sector investments in new or less traditional areas, including those that require longer involvement before improvement and change are noticeable. Besides encouraging private sector partners to invest in new areas, integrated activities supported by Alliances2 stimulated knowledge transfer among implementing partners and cross-fertilized innovations in their projects.

Within each technical sector, Alliances2 partners recognized the increased impact that can be achieved by comprehensive projects—such as education projects that couple donation of materials and supplies with pedagogical support and capacity building, or HIV/AIDS projects that use the combination prevention approach to address HIV prevention within the workplace setting. Partners noted that this complementary approach can enhance the quality of their corporate social responsibility programs and enrich the results they achieve with their beneficiaries.

Ensure adequate staffing for managing and implementing partners. Some implementing partners are much more mature and experienced than others in alliance-building and project development and implementation. Those that lack experience can be challenging to work with and require much more capacity building and hands-on assistance during all stages of alliance building and project implementation, from the technical as well as from the financial and administrative perspective. This factor has staffing implications for the managing partner in future alliance-development programs, especially those that aim to involve a wider range of implementing partners, such as community-based or civil society organizations. Sufficient staff (and the corresponding budget) should be allocated to support technical assistance needs—as well as monitoring and evaluation, and financial management capacity building and support. Implementing partners should also consider the additional staffing needs required to provide technical oversight to comprehensive, integrated programming.

Implement high-quality M&E approaches and evaluation methods to improve strategic planning and project implementation. A lesson learned from the first Strategic Alliances program was the importance of having dedicated M&E staff on the core team to provide technical assistance to implementing partners and ensure quality of data collection systems and reporting. In Alliances2, RTI took this lesson a step further by integrating M&E staff directly into the implementing partner teams. This approach not only improved the quality of data for the program, but also demonstrated to partners how projects can be adapted and improved through use of data for decision-making. A critical factor for project success was the integration of elements such as EGRA evaluations and KAP studies, which produced relevant data for partners to inform their technical strategies and aid them in targeting the most vulnerable beneficiaries. Baseline studies provided a starting point for developing plans and approaches to address weaknesses and to strategize a response. The success of this approach illustrated that private

sector partners can evolve beyond simply tracking outputs and dollars spent, and can begin implementing projects based on evidence that they themselves can generate.

Provide clear expectations for scopes of work and evaluation criteria. Each potential alliance partner—in addition to USAID—had its own social responsibility agenda, set of objectives, and timeline. To build successful alliances, it is important to carefully identify what motivates and interests each partner, and take that into account. To elaborate: Critical steps in establishing an alliance are (1) to clearly outline each partner’s expected contributions and scope of work, and (2) to define and plan evaluation criteria from the start. Once these expectations and criteria are in place, necessary adaptations and changes should be transparently communicated so that partners can adjust together. Each partner has its own mode of operations and the alliance, within reason, should be flexible and adapt as much as possible to the operating needs of each partner. Forcing adaptation without clear communication can be risky for alliance sustainability. Trust and relationships in alliance building begins with individuals and is most effective when supported from the top down.

Plan for long-term implementation with realistic results. Alliances should be established so that partners can maintain or even build their commitment over the long term, allowing them to invest and participate in Nicaragua’s development as good corporate citizens alongside government, donors, NGOs, traditional authorities, and other stakeholders. This requires development of technical objectives and plans with a long-term development focus, with expected results that are in alignment with the plan. As the private sector moves beyond one-off donations to comprehensive development approaches, their strategic plans may not coincide with the standard USAID project cycle. Partners with disparate funding cycles should plan their alliances carefully so that expected results are realistic within the confines of the partnership. Shorter time frames do not lend themselves to impact measurement, while projects with a longer time horizon may conflict with funding and reporting cycles. Keeping these aspects in mind during alliance building will allow for more transparency among partners and clearer expectations.

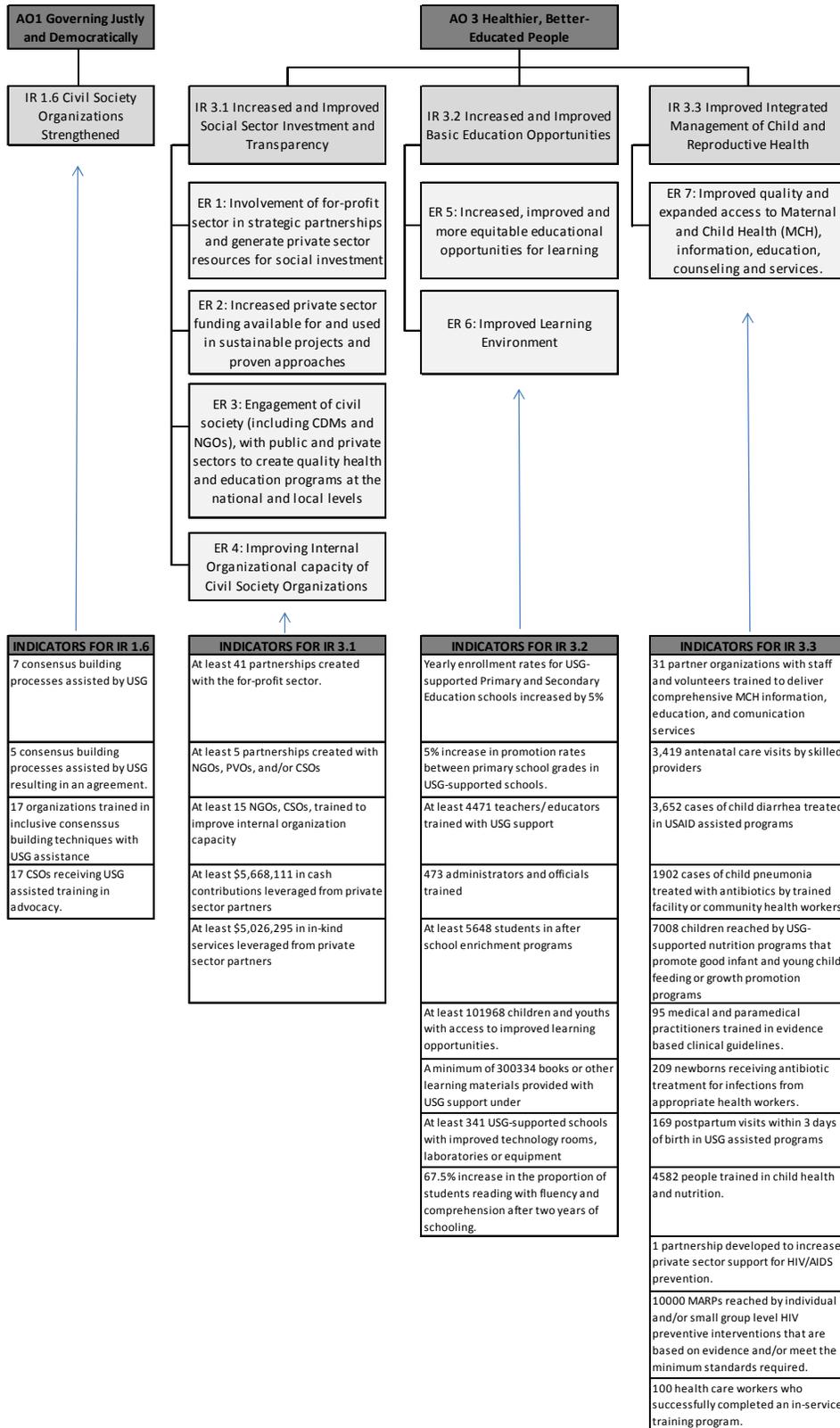
The private sector in Nicaragua is highly engaged and motivated to invest in social development programs, demonstrated through two cycles of USAID funding in which the leverage achievements vastly exceeded expectations. USAID and the private sector, with clear communication, planning, and cooperation, can have an impact on development in Nicaragua by pooling resources and working hand in hand.

Annex A: Geographic Distribution of Alliances2 Projects

Department	Municipality	Implementing Partners	Technical Area			
			Education	Health	HIV/AIDS	Governance
Nueva Segovia	San Fernando	AMCHAM	X			
	Dipilto	AMCHAM	X			
	Quilalí	AMCHAM	X			
	Ocotal	Eduquemos				X
Jinotega	El Cuá	AMCHAM	X			
	San Sebastián de Yalí	AMCHAM	X			
	Jinotega	AMCHAM	X			
	San Rafael del Norte	Juan XXIII		X		
Madríz	San Juan Río Coco	AMCHAM	X			
	Somoto	Eduquemos				X
Estelí	Estelí	ANF	X			
	La Trinidad	ANF	X			
Chinandega	El Viejo	AMCHAM, FZT, COSEP	X		X	
	Chinandega	AMCHAM, ANF, FZT, Juan XXIII, COSEP	X	X	X	
	El Realejo	AMCHAM	X			
León	Larreynaga	ANF	X			
	Telica	ANF	X			
	Quezalguaque	ANF	X			
	León	ANF, FZT, Juan XXIII	X	X		
	La Paz Centro	ANF, FZT	X			
	Nagarote	AMCHAM, ANF	X			
Matagalpa	Tuma-La Dalia	AMCHAM, Eduquemos	X			X
	Sébaco	AMCHAM	X			
	Matagalpa	AMCHAM, ANF, Juan XXIII	X	X		
	San Ramón	FZT	X			
	San Dionisio	ANF	X			
	Ciudad Darío	ANF	X			
	Esquipulas	Juan XXIII		X		
Boaco	Boaco	FZT, Juan XXIII	X	X		
	Camoapa	AMCHAM, ANF, Juan XXIII	X	X		
	San Lorenzo	ANF	X			
Managua	Tipitapa	AMCHAM, ANF, FZT	X			
	Mateare	AMCHAM, ANF	X			
	Villa El Carmen	AMCHAM, ANF, FZT	X			
	Ciudad Sandino	AMCHAM, ANF, Juan XXIII	X	X		
	Managua	AMCHAM, ANF, FZT, Juan XXIII, Eduquemos, COSEP	X	X	X	X
	El Crucero	AMCHAM, ANF	X			
	San Rafael del Sur	AMCHAM, ANF	X			
Masaya	Nindirí	ANF	X			
	Masaya	AMCHAM, ANF, FZT, Juan XXIII	X	X		
	La Concepción	ANF	X			
	Masatepe	AMCHAM	X			
	Nandasmo	AMCHAM, COSEP	X		X	
	San Juan de Oriente	AMCHAM	X			
	Niquinohomo	AMCHAM, COSEP	X		X	
Chontales	San Francisco de Cuapa	FZT	X			
	Juigalpa	ANF, FZT, Juan XXIII	X	X		
	Santo Tomás	ANF	X			
	Acoyapa	FZT	X			
	San Pedro de Lóvago	Eduquemos				X
	Villa Sandino	Eduquemos				X

Department	Municipality	Implementing Partners	Technical Area			
			Education	Health	HIV/AIDS	Governance
Granada	Diriá	ANF, Juan XXIII	X	X		
	Diriomo	ANF	X			
	Granada	AMCHAM, ANF, FZT, Juan XXIII, COSEP	X	X	X	
	Nandaime	Juan XXIII		X		
Carazo	San Marcos	ANF, COSEP	X		X	
	Jinotepe	AMCHAM, ANF	X			
	Diriamba	AMCHAM, ANF, FZT	X			
Rivas	Belén	ANF	X			
	Potosí	AMCHAM, COSEP	X		X	
	Buenos Aires	ANF	X			
	Moyogalpa	FZT	X			
	Altagracia	FZT	X			
	San Jorge	ANF, FZT	X			
	Rivas	AMCHAM, ANF, FZT, COSEP	X		X	
	San Juan Del Sur	AMCHAM	X			
Río San Juan	Tola	Juan XXIII		X		
	San Carlos	ANF	X			
RAAN	Puerto Cabezas	FZT	X			
	Xuna	Eduquemos				X
RAAS	El Rama	FZT	X			
	Bluefields	FZT, Eduquemos	X			X

Annex B: Alliances2 Results Framework



Annex C: Final Performance Monitoring Plan Indicator Results

	Met or exceeded target
	Achievement within 10% of target
	Below target

PMP Summary Table of Indicators and Targets							
Indicators	Total Life of Project (LOP) Goal	Executed FY11	Executed FY12	Executed FY13	Executed FY14	Cumulative Total	% LOP Execution
IR. 3.1: Increased and improved social sector investments and transparency							
Expected Result 1: Involvement of for-profit sector in strategic partnerships							
1.A Number of partnerships established with the for-profit private sector	15	5	36	69	—	110	733%
Expected Result 2: Increased private sector funding available for and used in sustainable projects							
2.A Amount of cash contributions leveraged from the partners (US\$)	\$3,870,777	\$2,421,627	\$2,647,722	\$333,962	\$146,128	\$5,549,439	143%
AMCHAM	\$1,172,847	\$211,112	\$772,540	\$192,550	-\$38,857	\$1,137,345	97%
Fundación Zamora Terán	\$2,540,115	\$2,082,926	\$1,740,840	\$60,641	\$90,638	\$3,975,045	156%
Instituto Juan XXIII	\$0	\$127,589	\$125,289	\$0	\$93,267	\$346,145	
Governance (Eduquemos)	\$33,855	\$0	\$9,053	\$52,860	\$0	\$61,913	183%
HIV/AIDS	\$123,960	\$0	\$0	\$27,911	\$1,080	\$28,991	23%
2.B Amount of in-kind contributions leveraged from the partners (US\$)	\$4,995,855	\$1,048,504	\$2,553,625	\$4,476,245	-\$267,139	\$7,811,235	156%
AMCHAM	\$255,372	\$0	\$238,427	\$503,242	-\$281,480	\$460,189	180%
ANF	\$3,235,221	\$1,048,504	\$1,372,346	\$3,472,871	\$12,987	\$5,906,708	183%
Fundación Zamora Terán	\$402,627	\$0	\$485,315	-\$82,397	\$1,697	\$404,615	100%
Instituto Juan XXIII	\$984,240	\$0	\$457,536	\$468,640	-\$843	\$925,333	94%
Governance (Eduquemos)	\$20,000	\$0	\$0	\$44,707	\$0	\$44,707	224%
HIV/AIDS	\$98,395	\$0	\$0	\$69,183	\$500	\$69,683	71%
Expected Result 3: Engagement of civil society with public and private sectors							
3.A Number of partnerships established with NGOs, private voluntary organizations, and/or CSOs	5	5	2	—	—	7	140%
Expected Result 4: Improving internal organizational capacity of civil society organizations							
4.A Number of civil society organizations using USG assistance to improve internal organization capacity	15	5	12	1	—	18	120%
2.3.1-1 Number of consensus-building processes assisted by USG	7	—	—	6	—	6	86%
2.3.1-4 Number of USG-assisted consensus-building processes resulting in an agreement	5	—	—	5	—	5	100%
2.3.1-3 Number of groups trained in inclusive consensus building techniques with USG assistance	15	—	17	—	—	17	113%
2.2.1-1 Number of civil society organizations receiving USG assisted training in advocacy	15	—	17	—	—	17	113%
IR 3.2: Improved quality and equity of basic education							
Expected Result 5: Increased, improved and more equitable educational opportunities for learning							
3.2.1-14. Number of learners enrolled in primary schools and/or equivalent non-school-based settings with USG support	70,000	82,376	99,656	97,563	—	97,563	139.38%
3.2.1-14a. Number of men		42,012	50,043	47,686	—	47,686	
3.2.1-14b. Number of women		40,364	48,497	49,877	—	49,877	
3.2.1-14c. Goal 1	70,000	82,376	98,540	97,563	—	97,563	139.38%
3.2.1-14d. Goal 2		—	—	—	—	—	

PMP Summary Table of Indicators and Targets							
Indicators	Total Life of Project (LOP) Goal	Executed FY11	Executed FY12	Executed FY13	Executed FY14	Cumulative Total	% LOP Execution
3.2.1-14e. Direct		82,376	80,292	79,194	—	79,194	
3.2.1-14f. Indirect		—	18,248	18,369	—	18,369	
AMCHAM	35,206	25,827	27,747	24,408	—	24,408	69.33%
ANF	48,196	46,340	39,496	38,035	—	38,035	78.92%
Fundación Zamora Terán	10,000	10,209	31,297	35,120	—	35,120	351.20%
3.2.1-30. Yearly net enrollment rate for USG-supported primary and secondary schools	85,689	81,609	80,292	73,608	—	73,608	85.9%
3.2.1-30a. Male students	43,607	41,530	40,776	37,138	—	37,138	85.2%
3.2.1-30b. Female students	42,082	40,079	39,516	36,470	—	36,470	86.7%
AMCHAM	26,548	25,284	24,911	22,496	—	22,496	84.7%
ANF	42,273	40,260	39,496	35,483	—	35,483	83.9%
Fundación Zamora Terán	16,868	16,065	15,885	15,629	—	15,629	92.7%
Between-grade promotion rate for USG-supported primary schools.	69,655	N/A	66,261	68,737	—	68,737	98.7%
AMCHAM	21,245	N/A	20,233	20,179	—	20,179	95.0%
ANF	34,538	N/A	32,817	35,041	—	35,041	101.5%
Fundación Zamora Terán	13,872	N/A	13,211	13,517	—	13,517	97.4%
Number of students in after-school enrichment programs	3,000	678	2,620	2,960	—	6,258	208.6%
ANF	500	—	351	1,043	—	1,394	278.80%
Fundación Zamora Terán	3,000	678	2,269	942	—	3,889	129.63%
AMCHAM	0	—	0	975	—	975	—
Expected Result 6: Improved learning environment							
3.2.1-3. Number of administrators and officials trained	150	137	180	53	—	317	211.33%
3.2.1-3a. Number of men		30	43	40	—	73	
3.2.1-3b. Number of women		107	137	13	—	244	
3.2.1-3c. Goal 1	150	137	180	53	—	317	211.33%
3.2.1-3e. Direct	150	137	180	53	—	317	211.33%
AMCHAM	100	92	135	53	—	227	227.00%
ANF	50	45	45	—	—	90	180.00%
3.2.1-24 Number of teachers/educators trained with USG support, disaggregated by gender	2,600	808	2,304	897	—	4,009	154.19%
3.2.1-31a. Number of men		100	398	88	—	586	
3.2.1-31b. Number of women		708	1,906	809	—	3,423	
3.2.1-31c. Goal 1	2,600	808	2,304	897	—	4,009	154.19%
3.2.1-31e. Direct	2,600	808	2,284	897	—	3,989	153.42%
AMCHAM	1,013	540	840	680	—	2,060	203.36%
ANF	1,000	118	713	166	—	997	99.70%
Fundación Zamora Terán	850	150	751	51	—	952	112.00%
3.2.1-33. Number of textbooks and other teaching and learning materials provided with USG assistance.	300,000	56,297	135,992	104,679	—	296,968	98.99%
AMCHAM	55,421	17,413	6,742	17,781	—	41,936	75.67%
ANF	240,980	36,000	112,315	84,213	—	232,528	96.49%
Fundación Zamora Terán	10,000	2,884	16,935	2,685	—	22,504	225.04%
3.2.1-27. Proportion of students reading with fluency and comprehension after two years of schooling, disaggregated by gender and urban/rural	53,799 (67%)	0	0	0	54%	54%	80.31%
3.2.1-27a. Male students	27,438 (67%)	0	0	0	50%	50%	74.37%
3.2.1-27b. Female students	26,361 (67%)	0	0	0	59%	59%	88.31%
3.2.1-27c. Direct attribution	53,799	0	0	0	54%	54%	80.31%
3.2.1-27d. Indirect attribution	0	0	0	0	0%	0%	0.00%
3.2.1-27e. Numerator	53,799	0	0	0	42,611	42,611	
3.2.1-27f. Denominator	80,292	0	0	0	79,194	79,194	
AMCHAM	16,690	0	0	0	48%	48%	71.56%

PMP Summary Table of Indicators and Targets							
Indicators	Total Life of Project (LOP) Goal	Executed FY11	Executed FY12	Executed FY13	Executed FY14	Cumulative Total	% LOP Execution
	(67%)						
ANF	26,466 (67%)	0	0	0	55%	55%	81.98%
Fundación Zamora Terán	10643(67%)	0	0	0	59%	59%	87.82%
3.2.1-36. Number of USG-supported schools with improved technology rooms, laboratories or equipment	300	71	120	136	—	327	109.00%
AMCHAM	50	—	22	13	—	35	70%
ANF	200	56	36	118	—	210	105%
Fundación Zamora Terán	50	15	62	5	—	82	164%
IR 3.3: Improved integrated management of child and reproductive health							
Expected Result 7: Improved quality and expanded access to MCH information, education, counseling, and services							
Number of partner organizations with staff and volunteers trained to deliver comprehensive MCH information, education and communication services	20	31	—	—	—	31	155.00%
3.1.6-4. Number of antenatal care visits provided by skilled providers from USG-assisted facilities	3,500	575	1,382	1,540	—	3,497	99.91%
3.1.6-6. Number of cases of child diarrhea treated in USAID-assisted programs	3,700	857	1,328	1,704	—	3,889	105.11%
3.1.6-7. Number of cases of child pneumonia treated with antibiotics by trained facility or community health workers in USG-supported programs	600	357	839	915	—	2,111	351.83%
3.1.9-15. Number of children under five reached by USG-supported nutrition programs	1,500	996	3,177	3,578	—	7,751	516.73%
Juan XXIII	1,650	996	2,639	3,055	—	6,690	405.45%
ANF	1,000	—	538	523	—	1,061	106.10%
3.1.6-19. Number of medical and para-medical practitioners trained in evidence-based clinical guidelines	120	29	41	31	—	101	84.17%
3.1.6-22. Number of newborns receiving antibiotic treatment for infection from appropriate health workers through USG-supported programs	900	24	120	102	—	246	27.33%
3.1.6-30. Number of postpartum/newborn visits within 3 days of birth in USG-assisted programs	500	—	124	12	—	136	27.20%
3.1.9-1. Number of people trained in child health and nutrition through USG-supported health area programs	2,500	79	3,290	1,180	—	4,549	181.96%
3.1.9-1a. Number of men		4	347	161	—	512	
3.1.9-1b. Number of women		75	2,943	1,019	—	4,037	
Juan XXIII	1,000	67	737	529	—	1,333	133.30%
ANF	610	12	475	273	—	760	124.59%
FZT	1,500	—	2,078	378	—	2,456	163.73%
Number of people with access to essential low-cost medicines	300,000	109,725	146,590	166,882	—	423,197	141.07%
3.1.1-68 Number of most-at-risk populations (MARPs) reached with individual and/or small group level HIV preventive interventions that are based on evidence and/or meet the minimum standards required (PEPFAR Output - #P8.3.D)	10,000	—	—	11,192	—	11,192	111.92%

PMP Summary Table of Indicators and Targets							
Indicators	Total Life of Project (LOP) Goal	Executed FY11	Executed FY12	Executed FY13	Executed FY14	Cumulative Total	% LOP Execution
Number of men	9,000	—	—	6,068	—	6,068	67.42%
Number of women	1,000	—	—	5,124	—	5,124	512.40%
3.1.1-68d: By MARP type: Other vulnerable populations	10,000	—	—	11,192	—	11,192	111.92%
Number of men	9,000	—	—	6,068	—	6,068	67.42%
Number of women	1,000	—	—	5,124	—	5,124	512.40%
3.1.1-84: Number of health care workers who successfully completed an in-service training program within the reporting period (PEPFAR Output - #H2.3.D)	100	—	—	127	—	127	127.00%

Annex D: List of Funding Partners and Implementing Partners

No.	Implementing Partner	Funding Partner	Type of Partner	Type of Contribution
1	AMCHAM	ACECEN (Association of Evangelical Christian Education Centers of Nicaragua)	NGO	In-kind
2	AMCHAM	Cisa Exportadoras	Corporate	Cash and In-kind
3	AMCHAM	Exportadora Atlantic	Corporate	In-kind
4	AMCHAM	Fundación Leno 2001, Club Rotario	NGO	In-kind
5	AMCHAM	Fundación Nicafrance	Private Foundation	In-kind
6	AMCHAM	Fundación Uno	Private Foundation	Cash
7	AMCHAM	Hacienda Santa Maria de Ostuma	Corporate	In-kind
8	AMCHAM	Hotel Selva Negra	Corporate	Cash and In-kind
9	AMCHAM	Kimberly Clark	Corporate	In-kind
10	AMCHAM	Ramacafé	Corporate	In-kind
11	AMCHAM/ANF	Fundación Coen	Private Foundation	Cash and In-kind
12	ANF	Agricorp	Corporate	In-kind
13	ANF	Alianza Evangélica de Nicaragua	FBO	Cash and In-kind
14	ANF	Casa Pellas	Corporate	Cash and In-kind
15	ANF	Congregaciones Religiosas	FBO	Cash and In-kind
16	ANF	Fundación Arcoiris	NGO	Cash and In-kind
17	ANF	Hermanos Lasallistas	FBO	Cash and In-kind
18	ANF	Vicaria Educación Católica.	FBO	Cash and In-kind
19	COSEP	AMOCSA – CENTEX	Corporate	In-kind
20	COSEP	Barceló Managua	Hotel	In-kind
21	COSEP	Best Western Las Mercedes	Hotel	In-kind
22	COSEP	Camino Real	Hotel	In-kind
23	COSEP	Compañía Azucarera del Sur (CASUR)	Corporate	In-kind
24	COSEP	Compañía Cervecera de Nicaragua	Corporate	In-kind
25	COSEP	Gildan	Corporate	In-kind
26	COSEP	Hansae	Corporate	In-kind
27	COSEP	Hilton Princess	Hotel	In-kind
28	COSEP	Holiday Inn	Hotel	In-kind
29	COSEP	Hospital Central Managua	Corporate	In-kind
30	COSEP	Ingenio Monterossa	Corporate	In-kind
31	COSEP	Intercontinental Metrocentro	Hotel	In-kind
32	COSEP	Kaltex Argus	Corporate	In-kind
33	COSEP	Mansión Teodolinda	Hotel	In-kind
34	COSEP	Rocedes	Corporate	In-kind
35	COSEP	Seminole	Hotel	In-kind
36	COSEP	USLC apparel	Corporate	In-kind
37	Eduquemos	Canal 12	Media	In-kind
38	Eduquemos	Canal 14	Media	In-kind
39	Eduquemos	Canal 15 (100 Por Ciento Noticias)	Media	In-kind
40	Eduquemos	Canal 2	Media	In-kind
41	Eduquemos	Canal 23 (CDNN)	Media	In-kind
42	Eduquemos	Canal 6	Media	In-kind
43	Eduquemos	Fundación Telefónica	Private Foundation	In-kind
44	Eduquemos	Hoy	Media	In-kind
45	Eduquemos	La Prensa	Media	In-kind
46	Eduquemos	Nuevo Carnic	Corporate	Cash
47	Eduquemos	Radio ABC Stereo	Media	In-kind
48	Eduquemos	Radio CIMA	Media	In-kind
49	Eduquemos	Radio El Pensamiento	Media	In-kind
50	Eduquemos	Radio Mundial	Media	In-kind

No.	Implementing Partner	Funding Partner	Type of Partner	Type of Contribution
51	Eduquemos	Radio Sandino	Media	In-kind
52	Eduquemos	Radio Stereo Fe	Media	In-kind
53	Eduquemos	Radio Stereo Siuna	Media	In-kind
54	Eduquemos	Radio URACCAN	Media	In-kind
55	Eduquemos	Radio Zinica	Media	In-kind
56	FZT	Aceros de Nicaragua	Corporate	Cash
57	FZT	Agroalfa	Corporate	Cash
58	FZT	Agroindustrial Mántica, S. A (AIMSA)	Corporate	Cash
59	FZT	ALFAPLUS	Corporate	In-kind
60	FZT	Almacenadora Lafise	Corporate	Cash and In-kind
61	FZT	Amnet	Corporate	In-kind
62	FZT	Arguello Cesar Comercial	Corporate	Cash
63	FZT	Auto Nica	Corporate	Cash
64	FZT	Autos Alemanes Asociados	Corporate	In-kind
65	FZT	BAGSA	Corporate	Cash
66	FZT	Banco Lafise Bancentro	Corporate	Cash and In-kind
67	FZT	Banco Lafise Panamá	Corporate	Cash
68	FZT	Baterías de Nicaragua	Corporate	Cash
69	FZT	Blue Power & Energy	Corporate	Cash
70	FZT	Bombas y Motores	Corporate	Cash
71	FZT	Bright Solution	Corporate	In-kind
72	FZT	La Cámara Nicaragüense del Sector Lácteo (CANISLAC)	Corporate	Cash
73	FZT	Casa Cross	Corporate	Cash
74	FZT	Casa MacGregor	Corporate	Cash
75	FZT	Citibank	Corporate	Cash
76	FZT	Claro	Corporate	In-kind
77	FZT	Club Rotario de León	Corporate	Cash
78	FZT	Comtech	Corporate	In-kind
79	FZT	Constructora Santa Fe	Corporate	Cash
80	FZT	Corcosa	Corporate	Cash
81	FZT	Deli y Chen y Cia. Ltda.	Corporate	Cash
82	FZT	Deshon y Cia.	Corporate	Cash
83	FZT	Dinant	Corporate	Cash
84	FZT	Distribuidora La Universal	Corporate	In-kind
85	FZT	Dumart S.A.	Corporate	In-kind
86	FZT	Emagro	Corporate	Cash
87	FZT	Empremar	Corporate	Cash
88	FZT	Fitel Telcor	Corporate	In-kind
89	FZT	Grupo FORCON S.A.	Corporate	In-kind
90	FZT	Grupo MAG	Corporate	In-kind
91	FZT	Grupo PONCH	Corporate	Cash
92	FZT	Grupo ZOCASA	Corporate	Cash
93	FZT	Hospital Salud Integral	Corporate	Cash
94	FZT	Hotel Charco Verde	Corporate	In-kind
95	FZT	Hotel Finca Venecia	Corporate	In-kind
96	FZT	IBW	Corporate	In-kind
97	FZT	Indenicsa	Corporate	Cash
98	FZT	Insecticidas San Cristobal	Corporate	Cash
99	FZT	IPESA	Corporate	In-kind
100	FZT	Kola Shaler	Corporate	In-kind
101	FZT	KPMG	Corporate	In-kind
102	FZT	La Prensa	Media	In-kind
103	FZT	MACERCAFÉ	Corporate	Cash
104	FZT	MACESA	Corporate	Cash and In-kind
105	FZT	MATURIN	Corporate	Cash
106	FZT	Mega Impresiones	Corporate	In-kind

No.	Implementing Partner	Funding Partner	Type of Partner	Type of Contribution
107	FZT	MEGAREDES	Corporate	In-kind
108	FZT	MULTIREDES	Corporate	In-kind
109	FZT	Navega	Corporate	In-kind
110	FZT	ONICOTUR	Corporate	Cash
111	FZT	OPTIM Nicaragua	Corporate	Cash and In-kind
112	FZT	Parmalat	Corporate	Cash and In-kind
113	FZT	Payca	Corporate	Cash
114	FZT	Proyenicsa	Corporate	Cash
115	FZT	Puma Energy Nicaragua	Corporate	Cash
116	FZT	TECNASA	Corporate	In-kind
117	FZT	Telsa	Corporate	In-kind
118	FZT	Universidad BICU	University	In-kind
119	FZT	Universidad de Ciencias Comerciales (UCC)	University	In-kind
120	FZT	Universidad Nacional Autónoma de Nicaragua (UNAN)	University	In-kind
121	FZT	Universidad Politécnica de Nicaragua (UPOLI)	University	In-kind
122	FZT	Urbanización Santa Eduvigis	Corporate	Cash
123	FZT	Urbanizadora Vistas del Momotombo	Corporate	In-kind
124	FZT	Wackenhut	Corporate	Cash and In-kind
125	FZT/Eduquemos	Canal 11	Media	In-kind
126	FZT/Eduquemos	El Nuevo Diario	Media	In-kind
127	FZT/Eduquemos	Universidad de las Regiones Autónomas del Caribe Nicaragüense (URACCAN)	University	In-kind