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**Nicaragua Child Survival VIII Project
Report: First Quarter FY93**

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**REPORT
FIRST QUARTER FY93
CHILD SURVIVAL PROJECT NICARAGUA**

1. Main Achievements

These will be reported later when the specific execution of each intervention has been initiated.

2. Geographical Growth

At present, work has begun in the following "municipios" of Rio San Juan: San Carlos, Las Azucenas, San Miguel, Morrito, Sabalos and El Castillo. The zones of Managua and Tipitapa have been chosen as new sites for the Child Survival Project (CSP) to replace Nueva Guinea and Chontales.

3. Conferences and Visits

a. October 11-24

Dr. Orestes Zuniga, Director of the Honduras CSP visited and participated in the methodological training of the health promoters and in the execution of the baseline survey carried out in Rio San Juan.

b. October 21 - November 11

Lisa Filoramo, Administrative Coordinator of Child Survival at WRC, visited to help conduct the manual tabulation and computer analysis of the data from the baseline survey.

c. November 9

A feedback session on Rio San Juan baseline survey results was held with Development Associates who have been contracted to work with USAID Mission health projects.

d. December 2

The CSP personnel were invited to the second technical discussion about basic information surveys for Child Survival Projects organized by Development Associates to discuss and share our recent experience in the execution of the Baseline Survey carried out in Rio San Juan. Non-governmental organizations, representatives of the Ministry of Health and similar institutions attended.

4. Training

a. Health Coordinators

A training workshop for Area Coordinators was held October 5-9 with the attendance of three CSP Area Coordinators whose content covered a description of the CSP. The workshop gave participants an explanation of the organizational structure of the CSP, several administrative aspects of World Relief, the strategy and methodology of CSP training, coordination relationships with MINSA and the churches, a revision of the education materials to be used, and the plans for activities to be carried out in the next quarter.

b. Health Promoters

Training was held from November 2-6 in San Carlos, Rio San Juan, for seven Health Promoters and the Area Coordinator in Growth Control and Child Development. The Health Educator of the regional Ministry of Health (MINSA) was present. The following themes were covered: overview of the CSP, importance of participatory educational techniques, activities and strategies for community development, coordination with MINSA and evangelical churches in the zone, and the content of the intervention of Growth Control and Development.

It is still necessary to clarify which churches or development institution in the zone will coordinate with World Relief to execute the CSP.

From October 15 to 17, 14 Health Promoters were trained regarding the methodology and execution of the baseline survey to be carried out in Rio San Juan.

5. Coordination Activities

Meetings with personnel of MINSA at a central level were held November 7 and December 2 to define the work area of CSP, since it was not possible to coordinate with the Regional MINSA of Chontales and Nueva Guinea. Later, a work agreement was signed with the regional MINSA of Managua to work in the Eastern zone of Managua and the "Municipio" of Tipitapa.

In Rio San Juan the coordination with the regional MINSA has continued in the development of the educative strategy and the details of the content of CSP curriculum. Close contact has been maintained with the evangelical churches in the region which have shown special interest in the program.

On November 13 a meeting was held with the pastors representing the evangelical churches of Managua. The purpose and strategy of the CSP was presented to them with emphasis on the close collaboration that should exist between the church and the local health structures.

On two occasions, November 27 and December 2, project staff met with the Director of the Health Program of Project Hope in Nicaragua to exchange experiences about the Health Information System and to review the materials that will be used to educate the village mothers. In the same way, close relations have been maintained with the Health Directors of Managua and Tipitapa. These have served to clarify doubts about the CSP and to deepen the coordination and execution of the program.

Contacts were made in the communities of Tipitapa in December, 1992 to interview candidates that will function as Coordinators and Health Promoters. Two Area Coordinators and 14 Health Promoters were elected to cover the zones of Tipitapa and Managua.

6. Planning Activities

At present the specific activities for each intervention and the strategies to apply them in the community with the support of the health structures and other similar institutions are being coordinated and planned.

7. Community Participation

The Health Promoters of Rio San Juan have been well received by the community and MINSA personnel. They have carried out community assemblies for the selection of Health "Brigadistas" and Local Health Committees in the "municipios" of Las Azucenas, Los Chiles and Sabalos. The Director of the Nursing School of Rio San Juan is interested in learning the participatory methodology and in using the education materials of the CSP as part of her academic curriculum.

8. Plans for the Next Quarter

- a. Initiate the training of the new Area Coordinators in the content, methodology and strategy of the CSP.
- b. Initiate the training of the new Promoters by describing CSP interventions and elaborating the Community Diagnostic and the Amplified Immunization Program.
- c. Continue the training of the Rio San Juan Promoters, sharing with them and with MINSA health personnel the results of the baseline survey.

- d. Prepare the geographic and population data for the next baseline survey to be held in tipitapa and Managua.
- e. Define the Health Information System to be used.
- f. Conduct a population census for each age group.
- g. Look for the information necessary to prepare the DIP.