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L'ANALYSE ET LA RECHERCHE
EN AFRIQUE

Support for Analysis and Research in Africa (SARA)

Annual Report Project Year 4 (FY96)

Submitted to the
Health and Human Resources Analysis for Africa (HHRAA) Project

December 1996



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SARA

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Acronyms

ABEL2	Adult Basic Education and Literacy
ABIC	Africa Bureau Information Center
ACI	Africa Consultants International
ADDR	Applied Diarrheal Disease Research Project
AED	Academy for Educational Development
AFR/SD/HRD	Africa Bureau/Sustainable Development/Human Resources and Democracy
AIDSCAP	AIDS Control and Prevention Project
AIMI	African Integrated Malaria Initiative
APHA	American Public Health Association
ARED	Associates in Research and Education for Development
ARI	Acute respiratory infection
BASICS	Basic Support for Institutionalizing Child Survival
BCEAO	West Africa Central Bank
CAs	Cooperating agencies
CAFS	Center for African Family Studies
CDD	Control of diarrheal diseases
CEAO	Francophone West African States
CERPOD	Center for Applied Research on Population and Development
CESAG	Centre d'Etudes Supérieures en Administration et Gestion
CILSS	Comité intersectoriel pour la lutte contre la sécheresse dans le Sahel
CRHCS/ECSA	Commonwealth Regional Health Community Secretariat/East, Central, and Southern Africa

DAE	Donors to African Education
DDM	Data for Decisionmaking Project
DHS	Demographic and Health Surveys
ECSA	East, Central, and Southern Africa
EHNP	Education, health, nutrition, and population
ENHR	Essential National Health Research
ERNESA	Educational Research Network for East and Southern Africa
ERNWACA	Educational Research Network for West and Central Africa
EU	European Union
FFH	Freedom from Hunger
FGM	Female genital mutilation
FHI	Family Health International
FPMD	Family Planning Management Development
FTP	File transfer protocol
HCF	Health care financing
HHRAA	Health and Human Resources Analysis for Africa
HSR	Health Systems Research
IDRC	International Development Research Center
IEC	Information, education, and communication
IHPP	International Health Policy Program
IMCI	Integrated Management of Childhood Illness
INCLN	International Clinical Epidemiology Network
IRM	Information Resources Management

JHPIEGO	Johns Hopkins Program for International Education in Reproductive Health
LAC	Latin America and the Caribbean
LPA	Legislative and Public Affairs
MAQ	Maximizing Access and Quality
MOH	Ministry of Health
MSH	Management Sciences for Health
MSM	Morehouse School of Medicine
NAPHI	Network of African Public Health Institutions
NGO	Nongovernmental organization
OCCGE	Organisation de la Collaboration et la Cooperation pour les Grandes Endemies
ORANA	Nutrition Research Institute for West Africa
PCS	Population Communication Services
PHC	Primary health care
PHN	Population, health, and nutrition
PRB	Population Reference Bureau
PSAP	Private Sector AIDS Policy
PVO	Private voluntary organization
REDSO	Regional Economic Development Support Office
SAGO	Society for African Gynecologists and Obstetricians
SANA	Sustainable Approaches to Nutrition in Africa Project
SARA	Support for Analysis and Research in Africa Project
SOMA-NET	Social Science and Medicine Africa Network

STDs	Sexually transmitted diseases
STIs	Sexually transmitted infections
TB	Tuberculosis
UNAIDS	Joint United Nations Programme on AIDS
UNESCO	United Nations Educational, Scientific, and Cultural Organization
UNICEF	United Nations Children's Fund
UPIEHR	University Partnerships in Essential Health Research
USAID	United States Agency for International Development
WGESA	Working Group on Education Analyses
WWW	World Wide Web
ZNFPC	Zimbabwe National Family Planning Center

I. Introduction

Support for Analysis and Research in Africa (SARA) is pleased to submit this report for Project Year 4, which describes SARA's activities in support of the USAID Africa Bureau's HHRAA (Health and Human Resources Analysis for Africa) Project. The Report is organized as follows:

The Introduction (Section I) is followed by an Overview (Section II) that briefly sketches activities to be presented more thoroughly in later sections, highlights from these activities, and future directions.

Section III deals with the two major areas of cross-cutting activities that touch on all the analytic areas of HHRAA/SARA: the expanding collaboration with African institutions, and this project year's focus on issues of dissemination and advocacy.

In Section IV, SARA's activities in each analytic area this project year are summarized, with future steps outlined for the next project year. The report, in Section V, concludes with lessons learned.

Overview

II. Overview: SARA Goals, Progress to Date, and Directions for the Future

SARA Goals

- A. Assist HHRAA with the development and implementation of its analytic agenda
- B. Increase the use of research and information through dissemination and advocacy on priority areas of HHRAA concern
- C. Develop linkages with African institutions that foster capacity building as well as producing quality research, analysis, and dissemination (R, A, and D)
- D. Implement activities in R, A, and D for which SARA has a comparative advantage and which complement the efforts of other projects and donors
- E. Develop and promote the use of generic tools/instruments to improve the practice of programs in health and human resources.

Progress Toward Attaining Goals

A. Assist HHRAA with the development and implementation of its analytic agenda

The general directions of the HHRAA analytic agenda were developed over the first two years of the project, and are reflected in the nine Strategic Frameworks for Research and Analysis in the fields of health, population, nutrition, and education, which were developed under the SARA Project and disseminated in 1994–95.

However, as the African context evolves, new issues naturally surface. In addition, current research and problem-solving efforts uncover new problems, or new ways to approach priority issues. The issues identification process has, therefore, continued to receive input through the participation of HHRAA and SARA personnel in meetings, field visits, and interchange with institutions and colleagues in and/or concerned with Africa.

New issues and opportunities have surfaced in the areas of:

- ◆ crisis prevention and mitigation, where SARA subcontractor Tulane University has written a background paper, organized a consultative meeting, and participated in an assessment visit to several partner institutions and countries in Africa.
- ◆ health financing and sustainability, where the Academy for Educational Development (AED) and SARA subcontractor Porter/Novelli organized a meeting to facilitate the updating and further precision of priorities by a core team of HHRAA staff and REDSO personnel and experts from both East/Southern and West/Central Africa.
- ◆ nutrition, where SARA, in company with its new AED-run sister Cooperative Agreement SANA (Sustainable Approaches to Nutrition in Africa), has supported African institutions (ORANA in West Africa and NUTRINET in the ECSA region) and their partners to define priority activities.
- ◆ HIV/AIDS, where SARA subcontractor Tulane University developed an Africa Bureau position paper as well as a policy brief on Women and AIDS.

SARA has continued to work with HHRAA activity managers to systematize the dissemination of HHRAA products and to design advocacy efforts targeted at specific policies and programs. Activities in this area are fully discussed below.

B. Increase the use of research and information through dissemination and advocacy on priority areas of HHRAA concern

As well as working closely with HHRAA staff to assist with the dissemination of products generated by the various agencies and projects that have received HHRAA funding for research and analysis, we have made particularly good progress this year in intensifying our dissemination and advocacy activities, aided by the recruitment of two new staff people in the last six months. These activities include the following:

- ◆ Dissemination Centers in the ECSA Region
- ◆ Advocacy materials and their reception in Africa
- ◆ Collaboration with institutions and networks in Africa for dissemination and advocacy (CERPOD, ECSA, SAGO, RHR Network, CESAG)

Overview

- ◆ Collaboration/leveraging with other agencies/projects/USAID field offices: (PPPD, PCS, REDSOs on the ECSA study on consequences of abortion; BASICS on the *Preparatory Guide for the Introduction of Integrated Management of Childhood Illness (IMCI)* and *Designing by Dialogue*; the World Bank on the Preparatory Guide; UNAIDS and the Universities of Natal and East Anglia on a series of *AIDS Briefs*; PHR on CESAG and health financing; the ABEL2 project on policy dialogue in education; the FPMD and BASICS projects on CESAG and health reform)
- ◆ Journalists and CERPOD network
- ◆ E-mail connectivity, HealthNet users directory

C. *Develop linkages with African institutions that foster capacity building as well as produce quality research, analysis, and dissemination*

SARA linkages with African institutions have widened and deepened this year. While new subcontracts have not been executed, existing arrangements have been expanded and new collaboration initiated in some key areas.

Work with long-standing SARA partners has included:

- ◆ joining with CERPOD to engage gatekeeper editors from press and radio in reproductive health topics and the issue of adolescent reproductive health in particular. CERPOD staff and members of the Reproductive Health Research Network went through the SARA advocacy training, also focused on adolescent reproductive health. A CERPOD orientation is planned for 1996-97 for its country teams planning advocacy efforts on adolescent reproductive health.
- ◆ continuing to support CRHCS/ECSA to supervise the dissemination and advocacy efforts of eight dissemination centers in the ECSA region. On the basis of proposals submitted through CRHCS, these centers received SARA support this year for specified activities in the areas of reproductive health and nutrition.

- ◆ assisting ERNWACA, in coordination with IDRC, to prepare its strategic plan, which should integrate the recommendations of the IDRC/SARA/REDSO evaluation of the network that took place this year, as well as the points of view of its various stakeholders. SARA has also supported ERNWACA coordination and dissemination activities this year.
- ◆ collaborating with the Joint Health Systems Research Project (HSR) to improve the teaching of research in pre-service training settings. SARA has funded an assessment of current teaching practices and materials in use. The recommendations of this assessment, which were discussed at the 1996 Essential National Health Research (ENHR) meeting, are to be incorporated into an updated set of HSR materials for this purpose.
- ◆ working with ORANA, BASICS, and SANA to assess country needs in nutrition training, research, and information exchange, and to design regional initiatives for West Africa in these areas to support national nutrition efforts.

Some new partnerships this year have included:

- ◆ working with CESAG (Centre d'Etudes Supérieures en Administration et Gestion), which was taken over by the West Africa Central Bank (BCEAO) in late 1995, to access technical and financial support for the restructuring of its Master in Health Management program and the development of a new Health Economics degree program. CESAG's new orientation puts emphasis on networking and research in the West Africa region as well as on training, in order to play a useful role in national health-reform processes. So far, SARA has facilitated the establishment of working relations between CESAG and the FPMD, PHR, DDM, and BASICS Projects, as well as with HHRAA and REDSO/WCA health-financing experts.
- ◆ working closely with SANA to facilitate recently signed SANA sub-agreements with NAPHI, SOMA-NET, and the University of the Western Cape to carry out various joint activities to make research and training more program-related and therefore more useful to ongoing nutrition efforts in the region.

Overview

D. Implement activities in R, A, and D for which SARA has a comparative advantage and which complement the efforts of other projects and donors

Presented here by sub-sector are highlights of research, analysis, and dissemination activities carried out this year by SARA as part of the HHRAA analytic agenda:

Child Survival

- ◆ Finalizing of an issues paper on the current state of CDD and ARI Programs in an era of decentralization and integration, to be disseminated for advocacy purposes
- ◆ Revision of the *Guide for the Introduction of Integrated Management of Childhood Illness (IMCI)* and collaboration with BASICS on a new IEC chapter to sensitize countries to the implications of IMCI for communications efforts
- ◆ Ongoing dialogue with SARA partners on the process of preparing for IMCI initiatives. The SARA/BASICS Guide has helped to focus attention on management issues, and has been used in several countries
- ◆ Assistance with the development of a regional child survival strategy for REDSO/WCA

Nutrition

- ◆ Development of an issues paper on Women's Nutrition, in order to get this important issue on the agenda of Reproductive Health and Child Survival initiatives
- ◆ Dissemination of key new findings in nutrition to decision makers and donors working in Africa
- ◆ Assistance to the SANA (Sustainable Approaches to Nutrition in Africa) Cooperative Agreement in establishing working relationships with African institutions for joint activities to make training and research more program-related
- ◆ Assistance to ORANA in developing an action plan based on countries' needs and identifying priority activities to be carried out jointly with BASICS and SANA

- ◆ Testing, revision, and translation of the draft manual on qualitative methods for designing nutrition communications messages, entitled *Designing by Dialogue*. The manual is being used by the BASICS Project in Africa to define nutrition messages for IMCI materials. It will be adapted for regional training courses planned in both East and West Africa.

Population and Reproductive Health

- ◆ Printing and initial dissemination of policy booklet on post-abortion care—already used in South Africa as part of an advocacy strategy, and in Uganda and Zimbabwe as a basis for dissemination/advocacy seminars
- ◆ Joint initiative with CERPOD to work with “gatekeeper” senior journalists/editors and thus increase press and radio coverage of reproductive health issues
- ◆ Follow-up with CERPOD to disseminate findings from research on adolescents and reproductive health, and develop country advocacy plans
- ◆ Advocacy training of key people on Male Involvement in Family Planning and Adolescent Health
- ◆ Increased collaboration with REDSO/ESA and close collaboration with eight dissemination centers in the region to increase awareness of key reproductive health and nutrition issues

HIV/AIDS and STDs

- ◆ Development of a position paper for the Africa Bureau on priorities for HIV/AIDS prevention and mitigation in Africa
- ◆ Development of a policy brief on Women and HIV/AIDS
- ◆ Dissemination of a series of AIDS Briefs on the role of different sectors in the prevention of HIV/AIDS in Africa
- ◆ Dissemination of the NAS study *Preventing and Mitigating AIDS in Sub-Saharan Africa*
- ◆ Support for the development and dissemination of a position paper by the Alliance for Civil-Military Collaboration Against AIDS to guide

Overview

policy dialogue and programs to improve HIV/AIDS interventions among military populations and their civilian neighbors

- ◆ Collaboration with AIDSCAP on dissemination materials for PSAP (Private Sector AIDS Policy) activities

Education

- ◆ Support to ERNWACA in evaluating progress to date, consolidating its strategies and seeking expanded roles for national chapters
- ◆ Planning and management of a consultative meeting on Education and Health Linkages, and preparation of a resource guide on the subject
- ◆ Support for HHRAA studies on the role of conditionality in education reform and the role of the teacher as an agent of change
- ◆ Publication of ERNESA-sponsored studies on girls' education in East and Southern Africa

Cross-Cutting Issues

- ◆ Establishment of close collaboration with CESAG in defining and finding technical and financial support to implement its strategies for improving health management in Francophone Africa through training, networking, research, and dissemination
 - ◆ Development and testing of a training guide entitled *An Introduction to Advocacy*, for use with different professional groups in the health and education sectors in Africa
 - ◆ First draft of a manual to improve the use of information at the periphery level, developed by CERPOD
 - ◆ Collaboration with several African partner institutions in developing a first draft of the manual entitled *Making a Difference to Policies and Programs: A Guide for Researchers*
 - ◆ Support to the Health Systems Research Project in assessing the teaching of research in pre-service training institutions in East and Southern Africa
 - ◆ Development of a framework for analysis for addressing the prevention of crises in Africa, and participation in a needs assessment with a view to supporting disaster preparedness and management in West Africa
-

E. *Develop and promote the use of generic tools/instruments to improve the practice of health and human resources programs*

- ◆ The *Preparatory Guide for the Introduction of Integrated Management of Childhood Illness* was revised this year, in light of input from WHO/AFRO and others. A chapter on IEC for IMCI was developed jointly with BASICS. The Guide has been used in various ways in Madagascar, Zambia, Niger, and Morocco. PAHO has translated the Guide into Spanish for use in Latin America, and the World Bank has introduced the Guide's approach in several Asian countries. The Bank is making the updated version of the Guide available to all its task managers working on Health Programs in Africa.
- ◆ The manual on designing IEC approaches and messages for nutrition programs, *Designing by Dialogue*, was tested in Ghana this year by Freedom from Hunger, and translated into French. It has been partially used in Madagascar by BASICS to design the nutrition messages required for IMCI, and is being tailored for use in regional training programs in both East and Southern Africa, with SOMA-NET, and in West Africa, with ORANA, BASICS, and SANA.
- ◆ CERPOD has proceeded this year, with SARA funding and some technical help, to develop a draft of the manual to increase the use of information at the primary health care level entitled *Indicateurs de base des services de sante primaire: Manuel de reference*. The manual will be tested in Mali in the coming year, and then made available for integration into ongoing work to improve health-information systems both in Mali and in other countries in the region.
- ◆ SARA developed a series of modules on advocacy and worked with two master-trainers in testing them in Francophone Africa. The modules, entitled *An Introduction to Advocacy: Training Guide*, are designed to be used in training settings, for orientation sessions that can be added on to conferences and workshops, for use by groups planning to embark on advocacy activities, and for individual consultation. They have already been used with the Reproductive Health community in Africa, and are being adapted for a training in Nutrition Advocacy to be carried out by BASICS in West Africa. Quite a large demand has already been created for advocacy training using the modules, and SARA proposes to identify and train trainers who can be called upon by different agencies to use the materials in various settings.

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- ◆ SARA has developed a first draft of a booklet called *Making a Difference to Policies and Programs: A Guide for Researchers*, designed to assist researchers in Africa improve the likelihood that their research will be used. The booklet identifies appropriate steps that researchers can take at each stage of their research. Although still in draft form, the booklet has been widely reviewed both in the United States and Africa, and is already being given an enthusiastic reception. In early 1997, it should be published jointly with the Essential National Health Research (ENHR) African Secretariat and the Health Systems Research Project (HSR), both of which played a role in the initial conceptualization and review of the product. These, as well as other research-oriented groups in Africa, will be involved in jointly facilitating the widespread use of the document by researchers at all levels.

Activities Affecting All HHRAA/SARA Analytic Areas

III. Activities Affecting All HHRAA/SARA Analytic Areas

A. *Collaboration with African Institutions and Networks*

Over the past year, SARA has developed further its collaborative relationships with the following regional institutions and networks.

CERPOD - Centre de Recherche en Population et Developpement

The close collaboration with CERPOD has continued this year, although changes in CERPOD management and a period of uncertainty as to the future of the institution slowed down the implementation of activities planned. SARA-CERPOD collaboration has taken place in four areas this year: dissemination and follow-up on the research on adolescents in the region, development of a reference manual for improved utilization of information at the periphery of the health system, creation of a network of senior press and radio editors in the region to improve reproductive health news coverage, and training of CERPOD staff and Reproductive Health Research Network members in advocacy.

Adolescent Reproductive Health

Detailed discussion and review of the qualitative research in three countries and quantitative analysis for five countries, undertaken by CERPOD staff and local researchers, took place in a regional workshop in October 1995. Multidisciplinary groups of journalists, statisticians, and Family Planning Program staff developed preliminary advocacy plans at the end of the workshop. CERPOD was to follow up on these by printing and distributing the final booklet that summarizes the research and provides a basis for advocacy work. CERPOD staff were also scheduled to make country visits to develop further and operationalize the advocacy plans, and also to provide support for activities planned.

All these activities were delayed by the temporary budget freeze at CERPOD, which ended only in the last trimester of the fiscal year. The booklet, entitled *Les Jeunes en Danger* has now been printed, thanks to the tireless efforts of CERPOD staff Sie Some, Mohamadou Gueye, and Mamadou Konate, and SARA/ACI consultant Gary Engelberg. Its initial reception has been highly positive.

The above-mentioned planning visits have been rescheduled for late 1996-early 1997. The Burkinabe who attended the workshop, many of whom

Collaboration with African Institutions

are members of the Reproductive Health Research Network, have been quite active on their own, and have planned dissemination activities in early January. CERPOD staff and Mr. Engelberg will work with the Burkina group to prepare a multi-activity dissemination week, with different activities tailored to different target audiences. This should serve as a model for similar events in the other countries concerned.

Reference manual for improved utilization of information at periphery level

Some delays took place also in the development of this manual. A first draft, entitled *Indicateurs de Base des Services de Sante Primare: Manuel de Reference* was completed in September and is currently under review. CERPOD staff and consultants worked closely with the Ministry of Health in Mali in determining the content of the manual. SARA/ACI consultant Gary Engelberg assisted with its design. The manual will be tested in decentralized training settings in Mali in the coming year.

Networking of senior press and radio editors

SARA/PRB staff Rhonda Smith and Victoria Ebin have worked closely with Sie Some of CERPOD to identify 15 key editors and reproductive health IEC managers, organize a workshop with them focusing on adolescent reproductive health issues, and produce radio and print supplements that will be complemented by local reporting. The editors are committed to having materials produced and ready for in-country distribution by December 1996.

This effort to involve gatekeeper editors in reproductive health topics and create communication channels between them and IEC managers should bear considerable fruit when linked to the advocacy efforts on adolescent health that CERPOD will be supporting in at least four countries in 1997.

PRB has obtained additional funding from the Africa Bureau to continue working with this network. A follow-up workshop will be organized in the first semester of 1997, possibly on the theme of HIV/AIDS.

Training of CERPOD staff and Reproductive Health Research Network members in advocacy

CERPOD staff requested this training as soon as they heard about the SARA advocacy materials in late 1995. Since SARA has always encouraged CERPOD researchers to move further into dissemination and advocacy, in order to increase the utilization of the research and analysis that they produce, we took the opportunity to test the advocacy modules with the CERPOD group in Mali.

Collaboration with African Institutions

The REDSO Family Health Project, USAID/Bamako, and the Family Health Division in Burkina co-funded the participation of two or three members from the seven most active national chapters of the Reproductive Health Research Network, in order to give them skills to carry out advocacy on adolescent health, among other issues. SARA/ACI consultants Barky Diallo and Lillian Baer, along with SARA/Morehouse staff member Lalla Touré, facilitated the process, which was enthusiastically received.

During the training, participants started the identification process of advocacy goals, objectives, and strategies for the improvement of adolescent reproductive health, using data from the CERPOD study. This process will be developed further in each country in collaboration with core groups working on adolescent health issues, created following the CERPOD October 1995 regional workshop mentioned earlier.

CESAG - Centre d'Etudes Supérieures en Administration et Gestion

CESAG, the West African regional management training institute, was created in 1985 as one of the institutions of higher learning under the umbrella organization that grouped the Francophone West African States (CEAO). In the area of Health Administration, CESAG has trained more than 100 professionals at the Master's degree level, from all countries in sub-Saharan Francophone Africa. With the dissolution of the CEAO, CESAG was taken over in late 1995 by the Central Bank of West African States (BCEAO).

SARA collaboration with CESAG was initiated at this time, since it seemed to offer a unique opportunity to disseminate up-to-date information on the management issues that are central to the success of the health reforms being undertaken in all countries in the region.

CESAG has developed a general framework for action to improve the management of health programs in Francophone Africa. As a regional graduate-level training center, one of its key strategies is to train key public- and private-sector managers in an 18-month Master in Health Management. This course is presently being completely restructured to take into account the current context of health reforms, as well as the results of a needs assessment carried out in 1994-95. CESAG is also planning to develop a new degree program in Health Economics and Policy Analysis.

CESAG has identified a series of additional strategies in order to play an active role in addressing ongoing health management/systems-strengthening problems in the countries that it serves. These include:

Collaboration with African Institutions

- ◆ Involvement of CESAG permanent and part-time teachers in technical assistance/research roles in the health systems of the region
- ◆ Development of case studies on current health management issues
- ◆ Development of a framework for research in health management to be carried out in partnership with national researchers, donors, and others
- ◆ Organization of short courses and consultative meetings for practitioners on key health management issues
- ◆ Networking with national public health and management training institutions for information sharing, assistance with curriculum development and teaching, joint research projects, and other activities

As a result of SARA's efforts as a catalyst in helping CESAG to establish partnerships and find the technical and financial support it requires to realize its vision, the following activities have taken place over the past year:

- ◆ CESAG, assisted by Steve Reiman from MSH, François Diop from PHR, and Suzanne Pryor-Jones from SARA, developed a strategy paper for its Health Management Department in December 1995, which was sent to several donor agencies and projects as a first step in finding potential partners.
- ◆ CESAG linked up with the Harvard University Data for Decision Making Project and jointly organized a conference in September 1996 to disseminate HHRAA-funded health-financing studies.
- ◆ CESAG carried out one of the country case studies as part of the DDM research on Resource Mobilization.
- ◆ SARA provided facilitation and financial support for an October 1996 consultative meeting on the Master's degree program in Health Economics and Policy Analysis that CESAG plans to develop in 1997-1998.
- ◆ CESAG has established links with Management Sciences for Health. Laurence Codjia, who is responsible for the Health Management section at CESAG, spent a week at MSH in July 1996, and Dr. Marc Mitchell from MSH took part in a workshop that Ms. Codjia organized in September with CESAG full- and part-time staff to reach a consensus

Collaboration with African Institutions

on the restructuring of the Health Management Master's degree course. Dr. Roger Gosselin of the University of Montreal played an active role in this workshop.

- ◆ The Africa Bureau has provided some funds to the MSH-run Family Planning Management Development (FPMD) Project, thus giving CESAG access to MSH's management-training expertise to help with curriculum development for the Health Management Master's degree course. FPMD and CESAG also plan to work together on developing a regional network in West Africa. CESAG plans to use FPMD expertise in the training of CESAG trainers and also, possibly, for assistance with institutional development.
- ◆ The Africa Bureau has also provided some funding to BASICS, so that CESAG can access additional MSH management training resources in the areas of rational use of drugs, management information systems, and other topics.
- ◆ The Africa Bureau, REDSO/WCA, and the Abt-run Partnerships for Health Reform Project have initiated discussions with CESAG with a view to collaborating on health financing research in the region. CESAG has expressed particular interest in the areas of hospital management, national health accounts, measuring financing effects on quality of care, and community insurance schemes.
- ◆ The Africa Bureau has provided some funding to PHR directly to assist CESAG with the design of its Health Economics and Policy Analysis Master's degree curriculum.
- ◆ JHPIEGO and Tulane University, contractors on the REDSO/WCA Family Health and AIDS Prevention Project, have linked up with CESAG. As a result, CESAG has taken an active part in an assessment of management training courses for reproductive health in the Region. This study is to be presented at the MSH-linked FRAC (Francophone Family Planning Managers) meeting to be held in Mali in November.
- ◆ We have approached the UNICEF Regional Office in Abidjan, WHO/AFRO, and the European Union (EU), among others, to generate additional support for CESAG. CESAG is following up with UNICEF and is already working collaboratively with the EU in Senegal on quality-of-care evaluation issues.

Collaboration with African Institutions

CRHCS/ECSA - Commonwealth Regional Health Community Secretariat for East, Central and Southern Africa

Personnel changes at the Secretariat have made collaboration more difficult this year. Joint activities have in fact been limited to those in the area of dissemination and advocacy. The printing of the policy booklet on the consequences of unsafe abortion, entitled *Addressing Complications of Unsafe Abortion in Sub-Saharan Africa* was delayed for several months. It was finally produced in September (2500 copies) and is currently being distributed. South Africa made a special request for additional copies to inform the current policy debate. A new printing of 2500 copies is anticipated.

Lawrence Gikaru—the SARA-funded Assistant Coordinator for Dissemination at CRHCS—has made good progress this year in working with eight dissemination centers in the region. He has assisted them in developing workplans and applying for AED/SARA funding to carry out dissemination and advocacy in the fields of reproductive health and, sometimes, nutrition. Activities are now underway and are described more fully in the dissemination and advocacy section. Several of the centers are breaking new ground in reaching out to new collaborators to form task forces for advocacy, thus taking a much more proactive role in communicating available information.

ERNESA - Education Research Network for East and Southern Africa

SARA funded the publication this year of a summary of 13 studies carried out under ERNESA on girls' education in the ECSA region.

ERNWACA - Education Research Network for West and Central Africa

ERNWACA has had somewhat of a crisis year. Lalla Ben Barka—its Coordinator—took a year of absence to work on the World Bank-funded development of Mali's ten-year education plan. IDRC recruited Aliou Boly, who had previously worked with ERNWACA as a World Education Training Advisor, to the position of Coordinator for most of this year-long period. Boly worked for several weeks as a SARA consultant while this arrangement was being consolidated. IDRC has been working with the network to pursue actively some avenues to financial sustainability but it is unclear whether this will be accomplished in the short run. The network may have new management at the regional level in 1997, but this is also not yet clear.

An additional issue has been the difficulty for the network's national chapters to find funding to complete the research undertaken under the transnational agenda, funded initially by REDSO/WCA.

Collaboration with African Institutions

An evaluation of the network was carried out by a team of IDRC and SARA consultants and took place mid-year. It pointed out, among other things, the need for a clear ERNWACA strategic plan, improved management, effective skills development and information sharing, and clarification of the relationship between the regional secretariat and national chapters. Several of the national chapters have been active in research and policy dialogue, but this has not always contributed to strengthening the network as a whole. The team concluded that ERNWACA does indeed have the potential to fulfill an important need in the region.

SARA's support to ERNWACA this year has been in the areas outlined below.

Dissemination - SARA consultant Richard Maclure completed the summary of the ERNWACA State-of-the-Art of Educational Research papers from the different countries in the region. This is being prepared for dissemination.

Research - SARA funded a HHRAA-initiated multicenter study on conditionality and its effects on educational reform in four of the study's six countries, which was carried out by ERNWACA Researchers.

Evaluation - SARA funded several weeks of consultant time to assist with the ERNWACA evaluation.

Management and planning - SARA Advisor Jean-Georges Dehasse has continued to assist ERNWACA in its management and planning over the year. He prepared background materials for a strategic plan, which is to be prepared by the Regional ERNWACA Secretariat by December 1996. Aliou Boly, during his period as a SARA consultant, organized the yearly meeting of the ERNWACA National Coordinators, which was SARA-funded, and took important steps to systematize ERNWACA management systems, as well as do some fund-raising.

HSR - Health Systems Research Project

SARA is collaborating with HSR on efforts to improve the teaching of research in public health settings. A proposal, originally drafted by Prof. Stephen Kinoti while he worked at CRHCS/ECSA, was developed that included three stages: a) an assessment of how research is being taught presently in university settings, including a review of the use of HSR training modules, b) a workshop to update and modify the current HSR modules, and c) joint follow-up activities with NAPHI to introduce the modules into public health, medical, and nursing courses.

SARA agreed to fund the assessment stage, the HSR workshop, and funding for printing and follow-up was to be determined subsequently. At the sugges-

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tion of Prof. Gabriel Mwaluko, the HSR Director in Harare, SARA funded an assessment visit to four countries which was carried out by Dr. Sidney Ndeki from Tanzania. The report from this assessment is being finalized. It was presented by an HSR staff member for discussion at the ENHR-Africa meeting in Kampala in late September. The workshop to further discuss the recommendations of the assessment and to review and modify the HSR modules should take place in 1997.

NAPHI - Network of African Public Health Institutions

SARA and SANA initiated the development of a joint proposal with NAPHI to assess the constraints to effective nutrition programs and the training needs to address these constraints, and to support the improvement of teaching and learning in public health training settings. The first activity is a workshop for the East and Southern Africa region, including participants from Uganda, South Africa, Tanzania, and Zimbabwe, to introduce a method for assessing program constraints and training requirements and to implement constraints assessments in four countries. This workshop is being organized by the Makerere University Faculty of Medicine, with assistance from nutritionist Louise Sserunjogi, who is a member of the Department of Pediatrics and who works at the University's Child Health and Development Center.

Other initiatives that were discussed with NAPHI shortly after the installation of its Secretariat in Kampala have not yet come to fruition. Follow-up with the Network has been slow, mainly because of its lack of full-time personnel. Contacts have been made with Prof. Sidi Yaya Simaga in Mali, who is the vice-chairperson for Francophone Africa, but no specific proposals have been developed for this region. SARA/JHPIEGO is working on a proposal to collaborate with NAPHI in improving the teaching of reproductive health in public health schools in Anglophone countries.

ORANA - Nutrition Research Institute for West Africa

In late 1995, an interim Transition Committee was appointed by the Senegalese Minister of Health to assess the future of ORANA and make recommendations for how the organization should be reinvigorated, given that it has not been functioning for the last three years. Dr. Makhtar Mbaye, the Coordinator of this Committee, was confirmed by the MOH and the OCCGE as Director of ORANA in mid-1996.

In late 1995, SARA and SANA jointly funded a consultative meeting organized by ORANA to bring together representatives from the eight OCCGE member states (Benin, Burkina Faso, Côte d'Ivoire, Mali, Mauritania, Niger, Senegal,

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Togo) and Guinea-Conakry. The group discussed the past problems of ORANA and ways to avoid these problems in the future. The mission and role of ORANA in the current context of health reforms was debated, and initial needs for country support from ORANA were identified in the areas of training, research, information exchange, and technical assistance.

SARA has worked quite intensively with ORANA in 1996, jointly with SANA and the BASICS Regional Office in Dakar. Following his mid-year nomination, Dr. Mbaye requested assistance and carried out assessment visits to the nine countries that ORANA covers, in order to identify country focal points and research, training, and information dissemination priorities that could be used to develop an organizational strategy and action plan that reflects country needs.

Apart from this activity, most of the efforts have been centered on the preparation of the joint regional activities identified in the BASICS workplan:

- ◆ regional training on qualitative research for the determination of appropriate infant feeding messages to be used both in health facilities that are doing Integrated Management of Childhood Illness (IMCI) and in other IEC settings. An adaptation of the SARA Guide *Designing by Dialogue* will be developed in French for this course. The technical support of research and development of IEC materials in interested countries is also planned following the course, to be held in the first semester of 1997 with SANA and BASICS funding.
- ◆ regional training on nutrition advocacy and the use of the computer model PROFILES, as well as follow-up to support country advocacy initiatives. The curriculum for this training is under development, and the course should take place during 1997 with SANA and BASICS funding.
- ◆ activities to promote the exchange of experience and scaling up of community nutrition programs, to be carried out with BASICS, World Bank, and SANA funding.

During the assessment visits that ORANA carried out in mid-1996, the need for a national focal point was discussed in each country. These focal points will meet in December 1996, with BASICS, SARA, and SANA support, to discuss ORANA's action plan, the role of the focal points in networking at the country level, and some of the specific activities planned involving ORANA for 1997.

Collaboration with African Institutions

SAGO - Society of African Gynecologists and Obstetricians

SARA is providing support to SAGO for its fourth Congress to be held in Abidjan, December 9–13, 1996. This year's main topic is "Prevention in Obstetrics and Gynecology," with sub-topics on adolescent health, safe motherhood, maternal mortality and morbidity, and socio-cultural aspects of reproductive health.

SARA is sponsoring some participants to the congress and will, in collaboration with CERPOD and JHPIEGO, present and disseminate the results of the CRHCS/ECSA study on the consequences and prevention of unsafe abortion and the CERPOD study on adolescents in the Sahel. A discussion panel will follow each presentation with a view to formulation of recommendations for future steps/actions in which SAGO participants might participate.

SARA followed up with members of SAGO and collaborated on a research proposal to assess the use of the risk approach to prevention of maternal mortality in Africa. It has not, however, been possible to find funding for this proposal.

SOMA-NET - Social Science and Medicine Africa Network

In collaboration with SANA, SARA provided technical and logistic support to the Social Science and Medicine Africa Network to assist them in preparing a proposal and budget for a training course based on the SARA manual *Designing by Dialogue*. SOMA-NET, with the help of SANA Field Advisor Debbie Gachuhi, is now in the process of developing the training curriculum for a course on consultative research methods to improve nutrition behavior change and communications programs, which will be offered to participants from eight African countries in April 1997. The facilitators workshop to develop the training agenda and required materials will be held in January 1997.

University of the Western Cape

In collaboration with SANA, SARA provided technical and logistic support in the preparation of a proposal and budget for the updating of an existing short course in Developing Community-based Nutrition Programs and the development of training modules and instructional materials that will allow this course to be offered at other universities in South Africa and possibly other countries in the region. The first workshop to review the existing course and develop the objectives for the training modules will be held in South Africa, November 3–6, 1996.

B. *Dissemination and Advocacy Activities*

Introduction

As the SARA project finishes its fourth year, dissemination activities have moved to center stage. To achieve our dissemination goals, the SARA project hired two new staff members to augment our dissemination team: Renuka Bery, a dissemination and advocacy coordinator, and Bret Harris, a computer specialist. Ms. Bery is writing and producing materials that have long been on the back burner as well as assisting Judy Brace, the dissemination manager, with numerous advocacy and production activities. She has compiled a complete list of all HHRAA-funded documents and written an annotated bibliography for HHRAA's annual report. Mr. Harris has taken the lead in designing and putting appropriate material on the HHRAA Home Page which will be located on USAID's World Wide Web site. He is also assisting in conceptualizing how the SD home page should look and be laid out, within the Africa Bureau's Web site. For SARA, he is improving, enlarging, and maintaining mailing lists for each HHRAA sector, assisting our African partners to become linked to electronic networks, assisting with the design of all computer presentations, and troubleshooting the increasingly complicated hardware, software, and communications aspects of today's computerized world.

In this section we discuss the various elements of SARA's dissemination and advocacy activities, giving highlights of the past project year.

Support to HHRAA sub-sector activity managers

Dissemination and advocacy are integral parts of each sector's activities, enhancing the output, visibility, and usefulness of the products developed by each sector.

This project year SARA and the HHRAA Project staff jointly focused on and developed strategies to achieve impact from the products and goals of HHRAA's portfolio.

Over the course of the project year, the HHRAA and SARA staff in charge of dissemination met with the HHRAA sub-sector activity managers to discuss dissemination plans for their particular sector. As a result of these meetings, Judy Brace and Subhi Mehdi developed a matrix of options for products, audiences, responsibilities, impact tracking, etc. This matrix should assist the activity managers in forming strategic plans to achieve lasting policy changes.

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With the SD mandate to maximize results from the findings of research undertaken in the initial stages of the project, the sub-sector managers were ready to work with SARA to consolidate their activities—where applicable—around unifying themes; to develop proactive, outreaching dissemination and advocacy plans; and to look for partners (in other USAID projects, and in other donor agencies) to move their sector’s policy agenda forward.

These activities involved identifying:

- ◆ players (e.g., CAs), anticipated outcomes and products
- ◆ partners (e.g., implementation projects with similar goals)
- ◆ forums for dissemination purposes (e.g., conferences, workshops, seminars)
- ◆ networks through which to disseminate (especially in Africa)
- ◆ most appropriate packaging for findings (e.g., analytical summaries, on-line formats, PowerPoint presentations)
- ◆ messages amenable to advocacy training.

In order to identify the steps needed to achieve impact, SARA organized a series of “core” groups, with sector-specific facilitators, so that each sub-sector could see how its portfolio’s work was interrelated, what key messages could be drawn, where impact could best be anticipated, and what steps could be taken to achieve this impact.

This is an iterative process that will continue to evolve over the life of the project. However, HHRAA has made a major effort to articulate and plan for project impact.

Joint activities with African partners

This was a very exciting year in which we saw our African partners move into high gear with the dissemination and advocacy of their respective topical areas. In maternal mortality and reproductive health, and in basic education, a good deal has been accomplished. Partners—recognizing the need to carry out, document, talk about, and act upon local research—are taking steps to do all of this. SARA supported training for journalists, developed policy booklets, gathered unpublished literature and created local bibliographies, analyzed data, promoted advocacy, held dissemination workshops, put health informa-

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tion summaries on HealthNet, and linked up a number of partners to electronic networks.

In particular, the East, Central, and Southern Africa (ECSA) Dissemination Centers have moved forward this year in a number of significant areas, discussed below, and in the sections on connectivity for African partners and ECSA dissemination centers' advocacy work.

ECSA Dissemination Centers overview

Although work in the African dissemination centers began slowly due to unforeseen challenges, eight centers have been established and are moving ahead rapidly. They are located in Kenya, Malawi, Namibia, Tanzania (2), Uganda, Zambia, and Zimbabwe. Lawrence Gikaru, the SARA-funded Dissemination/Communication coordinator for the ECSA Health Community sub-contract, has helped each dissemination center develop a workplan for a one-year dissemination activity for reproductive health and/or nutrition. They will be developing mailing lists, collecting grey literature, and planning advocacy activities, as well as sharing information in-country and regionally. Highlights of the centers' activities are as follows. Among other activities, Uganda and Zimbabwe have scheduled their dissemination seminars in October, and Kenya is planning to hold one around the end of the year. Botswana has produced a bibliography on adolescent reproductive health in that country, while Namibia has completed a first draft of bibliographies on nutrition and adolescent reproductive health. Zambia compiled a summary of complications of unsafe abortion in Zambia, which was featured in a national health information publication. Kenya has developed a synthesis format for summarizing long reports. The first summary projects include a report on maternal mortality and a report on adolescent reproductive health. The center has also started compiling an annotated bibliography on nutrition that is still in production, but already in demand. Lawrence Gikaru has hired two consultants in Kenya to develop advocacy materials on adolescent reproductive health, which will include fact sheets, research summaries targeted to policy makers and program planners, a booklet on youth issues and a profile of program experiences in adolescent reproductive health.

Dissemination innovations

It was envisioned from the first that the SARA Project would serve as a laboratory for testing dissemination approaches to achieve policy change. As the project evolved, SARA identified three promising areas of dissemination innovation on which to concentrate. These are:

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- ◆ electronic information transfer
- ◆ the use of African partners for dissemination and advocacy
- ◆ the development and application of, and training in, basic advocacy techniques.

SARA has found through this project year that the selection of these innovations was sound, and each of them is discussed in detail below.

What SARA experience has shown

SARA's experience has demonstrated that dissemination and advocacy is a collaborative venture. It cannot be done in isolation and without the active participation of all those involved, such as USAID sector managers, implementation projects, researchers, African professional groups, and networks. That this is being increasingly recognized by the wider development community is manifest by the great interest which our dissemination and advocacy activities generate on the part of other projects, donors, and NGOs.

SARA has found that playing a facilitating role in bringing together a wide range of key players and stakeholders in African development sectors has enabled relevant and needed information to enter a variety of channels, and to be considered at the planning and programming stages by many different agencies. It is important, therefore, to involve all interested parties in discussions on the work we and they are doing and to maintain communications throughout the course of the mutually relevant activities. However, SARA has also found that involving all those concerned, and selecting and using the mechanisms and channels required for successful dissemination and advocacy, takes an unanticipated level of effort. Future development assistance projects, focusing on impact, should plan and budget for the effort that this takes.

The selected innovative dissemination approaches make the development and advocacy efforts both challenging and gratifying, particularly as it becomes clear that the project's African partners are gaining confidence, skills, and effectiveness in their efforts to influence the policy-decision process.

In the future

By the end of the project, SARA should be able to state what kinds of approaches are necessary to achieve results through dissemination and advocacy interventions. As social marketing has taught us, it is not a question of "which channel is best" but how *many* channels are used to achieve impact. We hope to be able to show that each of our innovative efforts has played a significant role—alone or in combination—and has contributed to changing policies.

Electronic Communication

The promise of transparent electronic access to information for Africa has been gathering momentum as projects, businesses, institutions, NGOs, international agencies, and countries themselves, begin the process of acquiring electronic information capability such as e-mail and access to the Internet, and of transforming topical networks into electronically-communicating networks using this new technology. There continue to be wide differences in user access and capacities among SARA partners/countries. Nonetheless, wherever feasible and appropriate, we are trying and monitoring electronic applications.

SARA is also addressing information and communication needs of the Africa Bureau in relating to the field, to other Bureau initiatives, and to Global projects.

SARA initiatives

E-notes

Internal USAID communication and information sharing about HHRAA activities were identified as priorities during the mid-term assessment. To address this, SARA developed the concept of periodic "e-notes" that are now being sent through the internal USAID e-mail system to a mailing list of social sector staff in Washington and in Africa. E-notes are short updates on HHRAA findings, meetings, new publications, emerging issues, or other HHRAA-related activities. This project year, some 17 e-notes were written for and sent out by HHRAA.

World Wide Web (WWW)

Gaining a presence on the World Wide Web is a major accomplishment for HHRAA. The visibility will be important for HHRAA in reaching U.S.-based audiences to inform them about HHRAA's unique position in USAID. SARA's computer specialist prepared a presentation on the Internet and the World Wide Web, including a sample HHRAA Home Page, and presented it at a meeting which included most of HHRAA's key decision makers. With approval from HHRAA and USAID's LPA and IRM, he designed the initial HHRAA Home Page, and it is now mounted on the USAID Web site. In doing so, SARA pointed out several shortcomings of the presentation and structure of the USAID Home Page. The goal is for people and organizations unfamiliar with USAID or HHRAA to be able to find information on the project and its activities and to locate HHRAA documents easily. This is not the case at present, and remedying it will require the cooperation of SARA, HHRAA's Subhi

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Mehdi, SD representatives, and USAID's IRM and Webmaster to address and resolve these issues.

Current work on the HHRAA Home Page also includes coding the annotated bibliography of HHRAA-funded documents for WWW access, and creating active links to text-only copies, to abstracts, and to ordering information for full copies of these HHRAA-funded documents. SARA is also working with HHRAA staff to ensure that research prepared by HHRAA's cooperating agencies is referenced or included. Another task in progress is that of linking the HHRAA Home Page to the home pages of other organizations, CAs, and African institutions.

Gopher

Because the level of computer sophistication and resources needed to access the World Wide Web are higher than that available in many sites in Africa, an important part of SARA's electronic information dissemination strategy is to make available text-only versions of its documents, or at least abstracts with ordering references, which can be viewed by those without access to the higher-level Internet services. This involves placing them on the USAID Gopher, where they can be accessed by less sophisticated software through a lower-cost Internet connection, or by making them available via FTP (file transfer protocol), which is similar in function to attaching a file to an e-mail message.

Leland Initiative, other projects and initiatives

Both a blessing and a challenge is the phenomenal growth of the Internet in Africa. Some countries that a few years ago had one or two unreliable e-mail service providers now have full-time access to the World Wide Web. In this time of almost revolutionary changes, it takes considerable effort to stay current with the capabilities of each country and the services that exist within them. Because electronic communication plays an increasing role in its dissemination and advocacy activities, SARA's computer specialist has made it a priority to learn about these services and providers, and about U.S.-based and international development projects devoted to improving African connectivity.

One such project is USAID's Leland Initiative, which is devoted to developing primary Internet access points (gateways) in some twenty African countries. Other projects, such as LearnLink, are looking at the applications side of the facilitating environment created by Leland and others, focusing on expanding the use of these new services into areas such as education and training, health information, and management. SARA is learning the goals and breadth of the

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Leland Initiative and other projects and discussing with them how HHRAA can both benefit from and assist them in their electronic communication agendas.

HealthNet

A resource for computerized information and technical networking expertise, HealthNet is operated by the Boston-based SateLife organization. SARA has collaborated extensively with HealthNet in its efforts to make electronic communications available to its African partners. These efforts included writing and posting summaries of SARA documents on the network, preparing a directory of African HealthNet users, and some direct support of HealthNet activities in Africa.

In May 1996, a SARA-funded work trip by Kerry Galligan, a HealthNet technical representative, and Moussa Fall, a Dakar-based African networking expert, re-established the HealthNet gateway in Bamako. During this trip, the team connected several African institutions (including CERPOD) with HealthNet (giving them e-mail and other services) through this gateway and trained staff in its use. SARA is also working with HealthNet gateways and systems operators in other countries to establish e-mail services for members of the ERNWACA research network and other targeted African individuals and institutions. SARA is continuing to explore ways HHRAA documents can be disseminated via HealthNet to its users, including those on the proposed AFRO-NETS mailing list, now nearing establishment.

Connectivity for African partners

SARA was fortunate to have been able to bring on a new staff person late this project year to focus on computer-related issues. Bret Harris's previous work in Africa has enabled him to understand the challenges of and potential for electronic communications for our African partners. He has expanded our relationships with network providers (systems operators) in all of the countries where we have partner members, and he has negotiated link-ups and payment schedules. As it becomes increasingly possible for our partners to communicate electronically, we are linking them up with other information networks to enlarge the knowledge base in our sectoral areas.

Connecting ERNWACA

Work is progressing on connecting ERNWACA members to e-mail, made more complicated by the availability of new Internet services in some countries, and the continuing unreliability of basic services in others. The first hurdle was to provide modems to those members that lacked them. SARA located and

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purchased special modems that would work with the computer systems already installed in these offices and, through various means, has sent them to ERNWACA members located in Cameroon, Côte d'Ivoire, The Gambia, Ghana, and Senegal. In some of these countries, full Internet access is now available as part of the basic service package. Prices are structured not by amount of messages sent and received, but by total connection time per month. This has forced SARA to restate its policy of only funding the link-up and "base services" charges, and emphasizing that the connection-time costs are the responsibility of the user. This inequality of available services results in inequities in Internet access among the members of ERNWACA that will only be resolved as countries achieve full Internet access. For example, services in some countries, such as Burkina Faso and Togo, continue to be unreliable and the service providers difficult to contact. Nonetheless, SARA expects several members of ERNWACA to have some sort of Internet access by the end of the year.

ECSA dissemination centers

The eight SARA-supported dissemination centers in East, Central, and Southern Africa (ECSA) are overcoming poor traditional communications channels through electronic connectivity. The Commonwealth Regional Health Community Secretariat (CRHCS), where the SARA-funded Dissemination Coordinator is located, and each of the eight centers with which SARA has a direct relationship can now communicate via e-mail. The majority of these are connected to HealthNet, and have access to the health information provided through the system. Because these centers are libraries or information centers, their staffs are computer-literate, and have made a relatively easy transition to e-mail use. This is in marked contrast to other partners with which SARA works. As the ECSA region gains full Internet access in the coming years, we expect that the ECSA dissemination centers will play a leading role in accessing—and sharing—the information available through the Internet.

Other partners

SARA identified country-connection networks for e-mail services for the executive committee of the Network of African Public Health Institutions (NAPHI). This has proceeded slowly, as we do not have an intermediary to assist with the rather difficult communication with the committee members. Because SARA support requires some level of "infrastructure" on the part of the user, and the ability to assume some costs, the committee members or their institutions may not wish to commit these resources at this time.

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CERPOD was linked to HealthNet as part of the reestablishment of the Mali node earlier this year, and two people were trained.

Advocacy

Introduction

Advocacy is about change, and has a role in whatever change needs to occur. Africa is a changing continent with much promise for the future. More than ever before, people are discovering opportunities to become involved in decisions that affect their lives. And advocacy offers people an opportunity to participate in this development process. Although advocacy is a newly defined concept in Africa, people are eager to learn the basic skills they need to effect policy changes in their communities—locally and nationally.

Policy advocacy is not limited to decisions made through open, organized and formal systems of governance; it can also reach situations where decision-making is informal, adaptive or even secluded. Advocacy has many definitions but it always includes identifying problems, offering solutions, building support, and persuading policy makers and program managers to make the changes necessary to resolve the problems. A complex exchange of inputs makes advocacy come alive and includes: selecting an advocacy objective, using research and data to make informed decisions, identifying audiences, developing and delivering persuasive messages targeted to a particular audience, and building support from the community as well as among key influentials who have access to decision makers. Several SARA-supported examples (discussed below in the section on ECSA dissemination centers' advocacy work) are occurring in Africa.

SARA is developing advocacy tools for its African partners that will help them to select and promote improvements in regional and national policies. They have conducted research and analysis activities for several years, and now need advocacy skills to effectively sponsor and support changes that will positively impact health and education outcomes in their communities.

Advocacy Guide

SARA's one-day workshop on advocacy, convened by AED's Public Policy Officer Ritu Sharma last project year, encouraged SARA to develop an introductory training guide to advocacy and Ms. Sharma was tasked with this undertaking. The guide was written this project year, and then taken to the field for testing and modification.

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The guide is divided into ten short modules that give workshop participants a sense of what advocacy is, and how they might use it to improve policies and programs that are important in their work. The first seven modules were translated into French and field-tested at a workshop in Senegal where Anglophone and Francophone representatives from nine countries gathered to analyze data on male involvement in family planning. SARA consultants spent three days training trainers to use the advocacy modules. The trainers then trained the workshop participants to apply advocacy strategies to the results of their own data analyses. The participants were enthusiastic about the training and requests were made from several countries for further in-country training. The guide will be used in another workshop in Bamako in October where the entire ten modules will be field-tested.

Because of the enthusiastic response from participants, the lively interest generated from an e-note on the subject, and conversations with African partners, SARA is planning a strategy for the use of the Advocacy Guide that will build on the initial training-of-trainers work that was done in Dakar, as well as the built-in advocacy network that is resident in the ECSA dissemination centers. That is, SARA envisions a cadre of trainers trained in advocacy who will be available throughout Africa to USAID, African institutions, and other donor projects.

ECSA dissemination centers' advocacy work

In East and Southern Africa the policy booklet based on the regional study of the complications of unsafe abortion, which was developed under the SARA subcontract with the Commonwealth Regional Health Community Secretariat, is being used to stimulate policy discussions to build support within the health community to advocate for policy changes. In fact, several SARA-supported dissemination centers are sponsoring advocacy workshops to address the serious issue of maternal mortality and to promote the integration of family planning into post-abortion care services. Two examples are presented below.

The Center for Child Development at Makerere University, collaboratively with the Ministry of Health, organized a seminar on the policy-related implications of maternal mortality in Uganda. They brought together senior-level participants to present current data on maternal mortality, to discuss the policy implications, and to suggest improvements to current policies. The meeting was very successful, and was covered by national television, two radio stations, and the leading daily newspaper.

In Zimbabwe, the dissemination center of the University Medical Library planned a one-day seminar to raise awareness among decision makers and

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program planners about the consequences of unsafe abortion and to formulate action plans to address the identified problems. The participants were in decision-making positions from the Ministry of Health, the Medical School, educational institutions, women's advocacy groups, religious institutions, consumer rights groups, and the media. Action plans were formulated in two areas: social and medical consequences of unsafe abortion. Specifically, there was a recommendation for reproductive health education from an early age and proposals about how this could be achieved, and a recommendation that various government and other national institutions work together to raise awareness of the problems associated with unsafe abortion in the country.

The seminar received wide media coverage and was one of main news items on that day's national evening television news. The following day it was a major news story in Zimbabwe's national newspaper, *The Herald*.

Materials production and dissemination

SARA/HHRAA materials

A large number of publications were produced this fourth project year, from two-page fact sheets to comprehensive guides, from multicountry study reports to policy booklet summaries. Twenty Trip Reports were also produced, documenting the African field work and technical assistance carried out by SARA staff, consultants, and subcontractors. The complete list will be found in Appendix C.

SARA produces almost all project publications in-house. They are designed and formatted by SARA's desktop publishing specialist, Cindy Arciaga. Depending on the audience, the documents are either reproduced in-house, by a quick press, or by a printing company, and may have a cover designed by an outside firm. Print runs vary based on the document and its planned distribution.

SARA has also been given responsibility for the dissemination of several publications produced by HHRAA's Cooperating Agencies (CAs). SARA staff work closely with these CAs and the HHRAA sub-sector manager to ensure appropriate dissemination of these documents.

This project year, at HHRAA's request, SARA began to systematize the tracking of all HHRAA-funded publications produced by SARA or HHRAA CAs. In order to capture where and how many documents are sent, broad recipient categories were identified (e.g., USAID Missions/REDSOs; USAID/Washington; African organizations; U.S. organizations; donors/NGOs;) and included on a

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tracking form. The form will be distributed to all CAs in order to capture their own dissemination activities.

Mailing list database

Appropriate dissemination needs a well-maintained mailing list. SARA needed to improve its database this project year, and this was the first order of business for Bret Harris, SARA's new computer specialist. Bret has both trimmed the database of non-relevant entries and expanded the listings, especially for educational institutions and AIDS-related organizations in Africa. He is now working with other organizations such as AIDSCAP/FHI and AIDS research organizations in East and West Africa to share listings to the mutual benefit of all parties. As a longer-term activity he is restructuring and reprogramming the entire database in order to make it more "user friendly" with the goal of allowing others to access and use it more easily. The database is now being updated on an ongoing basis.

Materials production and dissemination by African Partners

Co-productions:

Over the past year, SARA/AED and JHPIEGO have worked closely with CRHCS/ECSA to develop a booklet of program and policy activities for post-abortion care entitled *Addressing Complications of Unsafe Abortion in Sub-Saharan Africa*. The booklet, based on the earlier monograph and research conducted on the complications of unsafe abortions in Africa, is a short, succinct synthesis of findings. It presents the magnitude of the problem, the clinical issues, the costs to the health care system, and suggestions for actions for governments and donors. This document has been distributed in each of the ECSA member countries, particularly by the eight ECSA dissemination centers, where it has been the focus of a number of advocacy activities.

SARA/AED, PRB, and ACI worked with and supported CERPOD in the production of an advocacy booklet about adolescent reproductive health, based on research carried out by CERPOD under its SARA subcontract. Unlike most other booklets produced in West Africa, *Les Jeunes en Danger* is an attractive informational booklet that uses humor, cartoons, and an innovative layout to communicate important messages about adolescent reproductive health. There was agreement that core advocacy groups formed in each study country should take the lead in distributing the booklet in those countries, but that CERPOD should target mailings within Africa to the donor and CA communities. SARA will distribute the document to donors and CAs in the United States and Europe.

Dissemination and Advocacy

SARA provided support for the Educational Research Network in Eastern and Southern Africa (ERNESA) to take the findings of a series of country studies carried out in the ESA region on gender disparities in education and transform them into a booklet for decision makers and practitioners. Thirteen brief profiles in *Educational Research Information for Practitioners* lay out the findings from eight countries. ERNESA plans to use the booklet as the basis for advocacy visits to education ministries, and for gender-related workshops to be held in the Network countries.

These booklets, produced by institutions in Africa in collaboration with SARA, are fine examples of how to carry research findings to the policy arena. The level of professionalism and care that these three institutions have given to producing these documents was impressive and we look forward to future collaborations of this kind.

Child Survival

IV. Activities in HHRAA/SARA Analytic Area

A. *Child Survival*

SARA advisors:

Suzanne Prysor-Jones, Academy for Educational Development

Hugh Waters, Academy for Educational Development

Sambe Duale, Tulane University—SARA Research Manager

Objectives for FY96

- ◆ In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
- ◆ Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
- ◆ Assist in disseminating and promoting the use of the Africa Bureau Framework for the Implementation of Child Survival Programs.
- ◆ Organize the dissemination of R, A, and D Strategic Frameworks in the child survival area.
- ◆ Carry out analysis, dissemination, advocacy, and evaluation in support of the child survival strategy.

Issues identification

SARA energies in child survival this year have been mostly focused on trying to address constraints to implementation rather than the further identification of issues for research and analysis. The *Framework for Design and Implementation of Child Survival Interventions in Africa: Focused Interventions for Impact; Systems Strengthening for Sustainability*, developed by SARA in 1994–1995, still serves as a reference for the development of child survival strategies by USAID Missions in Africa, although USAID support for child survival programs in many countries is limited to small-scale and geographically limited interventions. The question thus becomes one of how to promote learning from these experiences and facilitate scaling-up and institutionalization of promising approaches within the budget constraints of national systems.

The improvement of pre-service training has been identified as a pressing need in many forums in Africa, and SARA has participated this year in several discussions of feasible approaches to this problem, with the BASICS Regional Team in West Africa, with WHO/AFRO, and within the context of efforts to improve the teaching of Reproductive Health, by the REDSO/WCA Family Health and AIDS (FHA) Project.

Research and analysis

The Preparatory Guide for the Introduction of Integrated Management of Childhood Illness (IMCI)

The Guide has undergone further revisions this year, and a chapter has been added, with the assistance of the BASICS Project, to assist countries in thinking through the implications of IMCI for Information, Education, and Communications (IEC) efforts. Even though not in its final form, the Guide has been circulating in English, French, and Spanish. So far, it has been used by Ministries of Health and by BASICS personnel in Africa to guide discussions on IMCI in Madagascar, Morocco, Mali, Niger, and Zambia.

Its principal author, Dr. Mariam Claeson from the Child Health Division at WHO/Geneva, is now assigned by WHO to the World Bank. She is making full use of the Guide in her efforts to sensitize Bank Task Managers to the importance of IMCI and to the steps involved in preparing for its introduction in Africa and elsewhere.

WHO/AFRO staff, who kindly spent many hours in mid-1995 discussing modifications to the Guide that have been incorporated this year, have adopted a series of stages for introducing IMCI that are entirely consistent with the approach elaborated in the Guide. An outline of these stages was presented to all CDD and ARI Managers during the two annual meetings organized by WHO. These managers will hopefully find the Guide useful as they start systematically to address each of the stages identified.

Both WHO and BASICS are considering a proposal for a joint activity to orient a number of public health specialists from WHO, BASICS, UNICEF, and other agencies, who would be available to facilitate the process of preparation and introduction of IMCI in each country. This process requires considerable support. It involves the organization of consensus-building forums, data-gathering efforts to assess current practices and problems in health facilities and the home, and working groups to address the adaptation of current policies and tools, design IEC materials, adapt generic training materials, and problem-solve on drug availability and other systems issues. Recently appointed mem-

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bers of WHO country teams, whose job description includes advising maternal and child health programs, might be prime candidates for such a facilitation role, as well as BASICS country and regional staff.

The availability of a pool of resource persons of this nature who could facilitate the introduction should accelerate and improve the preparation process, which some countries have already started in a somewhat haphazard fashion. WHO feels strongly that preparation facilitators should first take the full 11-day standard IMCI clinical course, which has not yet been given in French.

CDD and ARI Programs in Africa: Changing roles and contexts

This "issues" paper, prepared by Hugh Waters, has been reviewed by experts from several agencies, including WHO/AFRO, and a final draft has been submitted to USAID for approval. Its principal conclusion—that countries cannot afford to neglect CDD and ARI Programs while undertaking the lengthy process of preparing for the implementation of IMCI—has been now been clearly articulated by WHO/AFRO. The paper should be disseminated widely to Ministries of Health, donors, and NGOs in the coming year.

Analysis of Tanzania experience with impregnated mosquito nets

SARA contracted with Johns Hopkins University to support the production of a monograph on the sustainability of community-based mosquito-net programs for malaria control, focused on lessons learned from the Bagamoyo (Tanzania) Bednet Project, which was supported by the Africa Bureau. This work, carried out by Dr. Clive Shiff and his colleagues at JHU who implemented the project in Tanzania, is to be turned into a publication for wide distribution.

Dissemination and advocacy

Background work for the REDSO/WCA strategy for child survival

Suzanne Prysor-Jones and Hope Sukin, Child Survival Officer and HHRAA Project Manager at USAID's Africa Bureau, worked with REDSO/WCA personnel to develop strategies and formulate a Results Framework for child survival activities to be carried out in the context of the REDSO/WCA's regional reproductive health initiative. This work was done in Abidjan following consultations with the BASICS West Africa Regional Team in Dakar.

Development of a child survival strategy for Mali

SARA assisted USAID/Bamako to identify appropriate strategies for USAID support to improve the availability and quality of child survival services in the current context of health reforms in Mali. Suzanne Prysor-Jones, after intensive consultations with Ministry, donor agency, and NGO personnel, developed a draft strategy, which was incorporated, with modifications, into the Mission's Strategic Objective on Youth.

Curriculum development on systems-strengthening issues

SARA has worked closely this year with CESAG with a view to disseminating current health systems management issues through curriculum development (see Cross-Cutting Issues in Section IV. G).

Participation in the WHO/AFRO Task Force on IMCI

Suzanne Prysor-Jones participated in the first IMCI Africa Task Force meeting that took place in Brazzaville in February 1996. This occasion offered the opportunity to join in discussions on some of the issues that HHRAA/SARA are eager to promote. These include:

- ◆ a systematic preparation process for the introduction of IMCI
- ◆ acceleration of the process by developing a pool of public health experts who can facilitate it
- ◆ attention to developing ARI activities and maintaining CDD efforts in the region, through the initial years of IMCI preparation, initiation, and gradual expansion
- ◆ systematic attention to improving pre-service teaching in the region.

Sharing community health and IEC experiences in Francophone Africa

SARA staff and SARA/ACI consultant Gary Engelberg spend some time preparing a workshop on IEC in Francophone Africa, which was to be organized principally by BASICS. It was decided, however, to postpone the event and to rethink it in the current context of the work being done by the REDSO/WCA FHA Project on IEC for reproductive health.

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SARA has continued to have input into discussions on how best to share experiences and lessons learned in the region. One outgrowth of these is the initiative being discussed with World Bank staff in West Africa, the BASICS Regional Nutrition Advisor, the SANA Project, and ORANA, to organize a process of learning from community nutrition experiences in the Region (see nutrition section below).

Integrated Malaria Control Strategy

Rapid diagnosis and prompt treatment of malaria with an effective antimalarial is the cornerstone of the Global Malaria Control Strategy and the Draft USAID Integrated Malaria Control Strategy for Sub-Saharan Africa and a key to the success of integrated case management of the sick child. Unfortunately, the number of affordable and effective antimalarials is quite limited and there is widespread resistance to chloroquine, the most common first-line treatment for malaria throughout Africa. On the basis of applied research and clinical experience, Malawi became the first country in Africa to replace chloroquine with sulfadoxine-pyrimethamine as the first-line treatment for malaria. The documentation and evaluation of Malawi's experience is critical to countries in the region which must consider similar changes in their own drug policies and treatment guidelines. Dr. Peter Kazembe of Malawi traveled to the United States with SARA support to present his country's experience, consistent with HHRAA project goals to promote the participation of African researchers in international scientific and policy fora and to disseminate information with the potential to influence policies and programs in the Africa region.

B. Education

SARA advisors:

Jean-Georges Dehasse, Academy for Educational Development
Judy Brace, Academy for Educational Development

Objectives for FY96

- ◆ In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
- ◆ Explore new approaches for achieving and assessing impact.
- ◆ Support ERNWACA in building its role as a research network in West Africa.
- ◆ Assist AFR/SD with the development and management of its analytic agenda.
- ◆ Conduct analysis and dissemination on key issues, through ERNWACA and ERNESA and other African institutions wherever possible.

Summary

This project year, SARA has collaborated closely with HHRAA CAs, the IEQ project, and the Advancing Basic Education and Literacy (ABEL) 2 project, as well as with the Africa Bureau Information Center (ABIC) to develop action plans for results and to design the dissemination and advocacy steps to achieve them. SARA has provided consultants to carry out research, write up research findings, draft background papers, conduct literature reviews, and translate documents. SARA/HHRAA planned and held a successful consultative group meeting on the linkages between health and education, for which a number of background materials were prepared with SARA support. In addition, SARA has worked closely with two regional educational research networks, one for West and Central Africa (ERNWACA) and one for East and Southern Africa (ERNESA), to compile and synthesize selected research findings. SARA has also been in contact with the Association for the Development of African Education (DAE) on various HHRAA-supported publications and their dissemination.

Education

Issues identification

- ◆ This project year SARA and HHRAA Education Advisor Jim Williams planned and held a two-day consultative meeting *Collaborative Programs in Primary Education, Health, and Nutrition*. It focused on three topics: a) health and nutrition interventions and services in the primary school, b) health and nutrition in the primary school curriculum, and c) sectoral reform, organizational issues, and community participation in linking primary education, health and nutrition. The underlying issue was the constraints of poor health and poor nutrition on a child's Active Learning Capacity. The implication: investing in the health and nutrition of the child is an investment that will have direct educational outcomes.

SARA supported the preparation of several background materials for this meeting, including a draft guide of resources in this area, to be finalized with input and feedback from meeting participants.

- ◆ SARA staff, together with ABEL2 staff, met extensively over the course of this project year individually and in groups with members of HHRAA's education unit to identify key issues resulting from research activities; to identify anticipated products, venues for presenting key issues and findings, and personnel needs to accomplish remaining activities; and to develop strategic plans to achieve these goals. Because the education portfolios are quite extensive and are being carried out through a number of different mechanisms, and since the education unit staffing will be changing, it was important for both SARA and ABEL2 to understand the scope and kinds of materials that would need an institutional home for continuity. These planning exercises will be continuing into the next year.

Research and analysis

- ◆ SARA consultants Beckett Mount and Grace Lang spent much of this project year in the field (Namibia and Malawi) where they conducted research on class size, school boards, language of instruction, and school discipline. This work is part of a set of education unit activities to develop a comparative perspective on *the process of implementing policy* and on *the school as a unit of change*. The data are being analyzed, and will inform the reports to be produced by Diane Prouty and Joy Wolf.
- ◆ SARA is supporting a study on of the use of conditionality for education policy formulation that is being carried out through four

ERNWACA national teams: in Benin, Ghana, Guinea, and Mali. They are working with the ERNWACA study coordinator, Urban Dembele, to produce their national reports. At a workshop in Bamako in June, they met with the education unit's Joe DeStefano and received guidance for the final stages of work.

- ◆ SARA consultant Mark Sommers produced a comprehensive report on the decentralization of the education system in Ethiopia and made a presentation on his findings at USAID. Sommers chronicled the initiatives taken in the Tigray region, the successes and shortcomings so far, and anticipated next steps. A SARA-funded writer wrote a summary of this report that will be published in the fall. A companion publication will be a summary version of a literature and project review of decentralization that was produced in Project Year 2.
- ◆ When SARA began to work with ERNWACA, the network's Regional and National Coordinators had completed ten state-of-the-art studies on education research in the region—a crucial step for the development of the network and of its credibility vis-à-vis its members and partners. These ten studies—completed in 1992 by researchers in Benin, Burkina Faso, Cameroon, Côte d'Ivoire, the Gambia, Ghana, Nigeria, Mali, Sierra Leone, and Togo—were reviewed by the evaluator of ERNWACA's Phase I, Professor Richard Maclure of Ottawa University. He and SARA both felt that seven of these studies were unique and worthy of publication. Accordingly, SARA contracted with Maclure to complete a synthesis, in both French and English, of these seven studies of education research in the region. This synthesis will represent a major contribution to the development of education research and educational reform in the region.

Working as a SARA consultant, Richard Maclure has reached the final draft stage, and the document is being translated into French. The Maclure document consists of seven state-of-the-art reviews of research in Benin, Burkina Faso, Ghana, Cameroon, Mali, Sierra Leone, and Togo that uncovered 1056 studies, most of which are unpublished and almost completely unknown to researchers and policy makers. According to the author, the documents “represent a significant step towards improving educational research in West and Central Africa...[and] by providing descriptive summaries of existing educational research housed in national libraries and documentation centers, the seven national research reviews have provided a solid basis for the development of a regional data bank.” Maclure goes on “...the most striking aspect of these documents is that overall, far from indicating a moribund re-

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search environment, they instead reveal a resilience in the spirit of inquiry. Fragmented, and in many cases not without methodological shortcomings, nationally conducted research throughout West and Central Africa nonetheless has yielded an abundance of information about teachers and teaching, factors affecting pupil learning, indigenous forms of education, and the dynamics of community and household engagement in local schooling." Project Year 5 will see the production and dissemination of this valuable document.

- ◆ SARA's purchase order with ERNESA last project year was to support the analysis and synthesis of research carried out in eight eastern and southern African countries on gender disparities in education. Syntheses of 13 research studies were prepared this year and are being published.

Dissemination and advocacy

- ◆ As noted above, SARA has been part of the team to develop action and dissemination plans, and ensure the allocation of responsibilities for writing, publications, and dissemination under ABEL, SARA, or the Africa Bureau Information Center (ABIC). Anticipated impact from members' research and products has been articulated, and joint planning to develop strategies to achieve that impact is being carried out.
- ◆ SARA worked with the education unit to develop a workable mailing list this year for dissemination of their materials. This was accomplished with the cooperation of the DAE, as well as with input from other lists and institutions. SARA provides mailing labels from this list, as needed, to ABIC, for their mailings of education documents, and it is available to ABEL2, as well.
- ◆ SARA's computer specialist for dissemination is working with both ABIC and an education unit staff member on plans to make education documents available on USAID's Web site.
- ◆ As the policy dialogue materials being developed through ABEL2 move to the dissemination phase, SARA has been involved in planning for their marketing and use.

Collaboration with African institutions

- ◆ SARA, as mentioned above and in III. B., Dissemination and Advocacy, has collaborated with the Educational Research Network for East and Southern Africa (ERNESA) to produce a synthesis document of re-

search undertaken in that region on gender disparities in education. The ERNESA Regional Coordinator, based in Botswana, hopes to use this compilation of findings to advocate on behalf of girls' education, gender-sensitive teacher training, women's nonformal education, and education for disabled women, in a series of meetings with key decision makers in ERNESA member countries.

- ◆ The major involvement that SARA has had with an African educational institution has been with the **Educational Research Network for West and Central Africa** (ERNWACA). An overview of the status of the Network follows.

This project year, after three years of SARA support for the institutional development of the ERNWACA Regional Office, it was time to take stock of its evolution and to establish future directions.

ERNWACA's two key strategic objectives since the inception of Phase II in October 1993 were 1) to actively pursue the implementation of four transnational research agendas adopted in Bamako, and 2) to build a dissemination capacity to support education research and to formulate education policies. During the past two years, SARA's education advisor, Jean-Georges Dehasse, has actively supported ERNWACA activities to accomplish these two main objectives and to build the capacity of the regional office. In this endeavor, SARA has worked in close cooperation with IDRC—the main international sponsor of ERNWACA.

The ERNWACA Regional Office has positioned itself as a credible partner with Ministries of Education and with various donors and resource institutions. It has, with financial and technical support from its international partners, contributed to the training, retraining, or skills updating of more than 30 African researchers. However, the impact of these activities, particularly in terms of an increased capacity for education research in Africa, is still to be assessed. Criteria to gauge the impact still need to be developed.

The Network's institutional capacity has improved considerably in three years. Its sustainability, however, is still in question for both managerial and funding reasons. The Regional Office's credibility is currently weak due to uncertain leadership. There is currently an acting Regional Coordinator while the Regional Coordinator is on a leave of absence, and her return to ERNWACA, in six months, is not certain.

Some National Chapters are now showing a real interest in being more than an extension of the Regional Office, are organizing themselves as placement agencies for researchers (some directly execute or sponsor research for the

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MOE or local donors), and are looking for funds from local donors in order to complete the transnational research agenda in their countries.

SARA has provided and delivered modems to almost half of the chapters and has linked the coordinators to in-country systems operators, with the hope that all the networks will be linked and users trained in using e-mail by early next year. In addition, SARA is supporting the printing of the ERNWACA news bulletin (three issues in 1996/97).

Following the evaluation (see below for an evaluation summary), a post-evaluation workshop was held in August 1996. It was a collaborative endeavor by SARA, the ABEL2 project, the DAE/WGESA chaired by UNESCO, the Swiss Cooperation Agency, and IDRC. In addition to reviewing the conclusions of the joint IDRC/SARA/HHRAA formative evaluation, the workshop's emphasis was on how to gather and organize existing or newly collected hard data on the workings of national education systems, how to provide services or participate in the conduct of sector assessments financed by external agencies, and how to organize all relevant material in formats usable for policy debates.

SARA used the workshop to help think through strategy for the next two years and to redefine an adequate approach for developing working relationships with African researchers and for strengthening regional education research.

Based on this year's activities, the evaluation, and the workshop, future SARA activities should focus on:

- ◆ maintaining and developing working relationships with good African education researchers, so as to contribute to a better research environment and stronger research capabilities in the region;
- ◆ promoting policy-oriented research in education, acknowledging the complex nature of the relationship between research results and policy formulation—a relationship that will require researchers and donors to be proactive vis-à-vis policy makers (e.g., policy dialogue and advocacy);
- ◆ continuing to work with—and strengthen—regional networks of researchers so as to achieve the above.

SARA's education advisor also recommends encouraging the development of those National Chapters which demonstrate proactive attitudes toward their own development.

ERNWACA Evaluation

This year, to better understand the evolution of the network and its potential, and to respond to REDSO/WCA's concerns, IDRC and the HHRAA Project supported a joint formative evaluation of ERNWACA that was completed in June 1996.

The aim was to document and assess the ERNWACA presence and impact in the region since the network was established (with IDRC funds) and began undertaking regional research with REDSO and HHRAA funds.

The ERNWACA evaluation team produced a thorough document based on field visits and numerous interviews with researchers, public education officials, academics, and donors. Recommendations center around the overall organization of ERNWACA. Evaluators called for tighter definition of the organization, its internal structures and procedures, especially the particular roles and mutual responsibilities of regional and national offices. They called for greater communication with the education community with countries and regionally and challenged ERNWACA to draw a timetable for financial independence. On the technical side, the evaluators cited the need for greater quality control over the research undertaken by members. Central to quality is the avoidance of duplicative studies; ERNWACA, they urge, should establish a documentation center that will allow members to know where the real research gaps are. They made particular mention of the crucial role of the Regional Coordinator, stressing the need for a strong full-time person, skilled not only technically but in management and the politics of dealing with donors. Finally, the evaluators called upon donors to continue their support, but argued for support that is based on written agreements defining the roles and responsibilities of both parties. The evaluation finds a significant portion of ERNWACA's research useful. Any shortcomings in the technical work is ascribed to the organizational issues cited above, with the thrust of the evaluation being that better organization throughout ERNWACA is the key to excellence in educational research.

Nutrition

C. Nutrition

SARA advisors:

Ellen Piwoz, Academy for Educational Development

Suzanne Prysor-Jones, Academy for Educational Development

Objectives for FY96

- ◆ In collaboration with partner CAs and regional institutions, continue developing and implementing action plans aimed at ensuring research utilization and policy/program impacts for each activity.
- ◆ Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
- ◆ Disseminate the strategic framework on child nutrition, and other relevant materials, in Africa.
- ◆ Conduct advocacy and disseminate information to support nutrition interventions in Africa.
- ◆ Support African institutions and nutrition networks, where appropriate, to improve nutrition policy and research.

Summary

This was a very busy year for the SARA Project in the area of nutrition, with major activities initiated and/or completed in each priority area. These activities include: 1) completion, translation, and dissemination of a brochure on nutrition and child mortality with recommendations on program interventions, produced in collaboration with BASICS and the Nutrition Communications Project; 2) revision, field-testing, translation, and limited dissemination of *Designing by Dialogue*, a field tool for community-based research on child feeding; 3) completion of state-of-the-art papers on complementary feeding and women's nutrition and initiation of a new paper on the cost-effectiveness of nutrition communications programs in West Africa; 4) participation in several African meetings on nutrition; 5) organization and participation in USAID consultative meetings on the dissemination and use of DHS nutrition materials, and priorities for improvement of women's nutrition; and 6) coordination with several USAID-funded projects, including BASICS, the Expanded Promotion of Breastfeeding Program, and the Sustainable Approaches to Nu-

trition in Africa (SANA) Project funded by the Africa Bureau and being implemented by AED.

Issues identification

Strategic framework for child nutrition

The strategic framework for child nutrition was completed in FY95 and disseminated widely. Dissemination of the document continues on a per request basis and as part of a package of HHRAA-produced nutrition materials.

Action plan development

During FY96, considerable time was spent reviewing the HHRAA portfolio and preparing action plans for all HHRAA sectors and sub-sectors, including nutrition. For the annual portfolio review, a complete description of all HHRAA-supported nutrition activities was prepared, including objectives, expected results, major activities and their status, complementarity with other activities, next steps, and resource requirements. For nutrition, the portfolio of activities supported by HHRAA are closely linked to the recommendations outlined in the strategic framework.

The action plan, which was based on the portfolio review, lists expected results from the full range of HHRAA-supported nutrition activities, and articulates key messages, and the materials and actions required to disseminate these messages. The expected results outlined in the nutrition action plan are:

1. Integration of activities to improve child feeding practices and maternal nutrition into USAID child survival or other health programs in at least three African countries.
 - ◆ Increased awareness and sensitization of USAID missions and other partners about the need to integrate child feeding and maternal nutrition activities into child survival and other health programs is an intermediate impact.
2. Improved nutrition policies and programs in ten African countries.
3. Strengthened African capacity for nutrition advocacy and information dissemination through regional organizations.
4. Strengthened African capacity for program-oriented nutrition research and training through regional organizations and centers of excellence.

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The key messages guiding this work are:

1. Because malnutrition is an underlying cause of nearly two million child deaths each year in Africa, direct interventions to prevent and reduce malnutrition must be incorporated into all African child survival and family health programs.
 - ◆ Efforts to improve child feeding practices and women's nutrition during pregnancy and lactation are given highest priority.
2. Malnutrition can be prevented and reduced using existing tools and technologies to develop location-specific programs and strategies.
3. Advocacy is required to increase nutrition programming and investments in available nutrition tools and technologies.
4. Nutrition programs will be made more effective by strengthening program-oriented nutrition training and operations research capacities in Africa.

Paper on women's nutrition

Work was completed on the issues paper entitled *The Time to Act: Women's Nutrition and Its Consequences for Child Survival and Reproductive Health in Africa*. This paper presents data on malnutrition among women in Africa and identifies entry points and policy arguments in favor of integrating women's nutrition improvement activities into child survival, reproductive health, family planning, and HIV/AIDS programs. The paper is co-authored by Jean Baker, Technical Director of NURTURE/The Center to Prevent Childhood Malnutrition; Luann Martin, also of NURTURE; and Ellen Piwoz, SARA Nutrition Advisor. To prepare the paper, Ms. Baker organized a series of informal consultative meetings in Washington to discuss the issues to be addressed. These were followed by a series of key informant interviews reaching a broader audience of professionals working in program settings. An early draft was then mailed to colleagues in Africa (or distributed during field visits) for their comments and feedback.

The Time to Act recommends the following priorities for improving women's nutrition, which are discussed in greater detail in the paper:

1. At a minimum, choose a few key interventions to improve the nutritional status of adolescent girls and pregnant women (including the early post-partum period).

2. Integrate women's nutrition improvement activities with existing health services programs.
3. Mobilize multisectoral commitment and support for women's health and nutrition, and take actions to create demand for services or programs to improve women's nutrition at all levels—from the international, to national, community, and household levels.
4. Use delivery systems outside of health services and build on existing networks, such as agricultural extension, secondary schools, women's groups or cooperatives, ritual initiation groups, and worksites.
5. Always view improvement of women's nutrition in an appropriate time frame. As with other nutrition problems, the selection of interventions to improve women's nutrition, and indicators to evaluate their impact, must consider the time frame that these programs are operating in. Different strategies require different time periods to have an effect. Appropriate strategies for the short (3-5 years), medium (5-10 years), and longer term (more than 10 years) are discussed.
6. Adapt the approach to the local situation, acknowledging that no one model is appropriate everywhere.
7. Select practical and simple indicators for monitoring and evaluating women's health and nutrition.

A meeting has been scheduled for the first week of October to discuss the paper's recommendations and prepare a list of priority and country or program-specific actions that can be taken to implement some of the paper's recommendations. One goal of the paper was to prepare the necessary arguments in favor of including women's nutrition in the new USAID program for breastfeeding that will follow the Expanded Breastfeeding Promotion Program currently being implemented by Wellstart International. This goal was reached: the new program will include breastfeeding, complementary feeding and maternal nutrition.

Paper on complementary feeding

A draft of the state-of-the-art paper on complementary feeding (*Complementary Feeding of Young Children in Developing Countries: A Review of Current Scientific Knowledge*) was prepared for WHO and UNICEF by SARA consultants Dr. Ken Brown, Dr. Katherine Dewey, and Dr. Lindsay Allen, and discussed at a consultative meeting held in Montpellier, France, in November 1995. The SARA Nutrition Advisor, Dr. Ellen Piwoz, attended this meeting and prepared oral and

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written comments on the review. The paper was revised subsequently on the basis of the comments and discussion at the Montpellier meeting. A final draft, with additional contributions by Dr. Patrice Engle, Dr. Joanne Csete, Dr. Namanjeet Ahluwalia, and colleagues from ORSTROM, was submitted to WHO in September 1996. WHO expects to publish and disseminate the monograph. It is possible that SARA will produce a summary of the report's major recommendations and their program implications for dissemination in Africa.

Paper on exclusive breastfeeding

Work continued on a paper on exclusive breastfeeding in the ECSA region by consultant Altrena Mukuria. This paper, based on research findings from a Wellstart Expanded Promotion of Breastfeeding Program-funded study in Nairobi, is directed at policy audiences. It will describe the obstacles to optimal breastfeeding in early infancy in the region, with recommendations for programs directed at improving this critical child feeding behavior. This paper should be completed in February 1997 and will be disseminated by the ECSA dissemination centers.

Paper on the cost-effectiveness of nutrition communications programs

Work began on a paper summarizing the costs and impact of nutrition communications programs in Mali, Burkina Faso, and Niger based on the experience of the Nutrition Communications Project in these countries. This paper, being prepared by SARA consultant Dr. Jay Ross, is intended to summarize the results of these projects and their major lessons learned, and will look closely at the costs of implementing these types of activities in West Africa, the region where there are the fewest examples of successful nutrition behavior-change programs. A draft of the paper was submitted in August 1996. A final version is expected in October 1996. The target audiences for the paper are donor organizations, persons working in nutrition communications programs, and others interested in cost-effectiveness analysis.

Research and analysis

Makerere University workshop follow-up

Follow-up questionnaires were sent and interviews conducted with participants who attended the 1994 Workshop on the Use of DHS and Other Nutrition Data to Influence National Policy Decisions held at Makerere University. Responses were obtained from participants in Kenya, Namibia, Tanzania, and Uganda. Overall, participants found that the skills gained during the workshop were extremely valuable. Participation in the workshop helped to familiarize

Kenyan participants with their DHS findings and the information was used in ongoing projects at the University of Nairobi. The Ugandan participants successfully influenced the Ministry of Health to include development of standard feeding guidelines for pregnant and lactating mothers and for children under three in the Nutrition Division's work plan. They are currently soliciting funds to hold a workshop to sensitize other sectors on the need for these guidelines. In Namibia, the Cabinet approved inclusion of a separate cross-sectoral food and nutrition chapter in the country's first National Development Plan, as outlined in the Namibian action plan developed at the workshop.

Field-test, revisions, and translation of Designing by Dialogue

During FY96 the first draft of *Designing by Dialogue: Consultative Research on Young Child Feeding* was sent to a group of seven African reviewers to provide feedback on the content and presentation. On the basis of their comments, and comments received from U.S. reviewers, who were experts in training, materials development, and qualitative research, major revisions were made to the original draft in terms of both content and format. The revised draft was translated into French and is currently being used in Madagascar by the BASICS Project. BASICS has also translated parts of the manual into Spanish for use in Bolivia and other LAC countries.

The revised draft was field-tested in July and August by the Credit with Education Program affiliated with Freedom from Hunger (FFH) in Ghana. The purpose of this field test was to assess whether the manual was self-explanatory and user-friendly, particularly for persons working at the community level. For this exercise, FFH Vice President for Programs, Ellen vor der Bruegge, mailed the manual to colleagues in Ghana with simple instructions for how to use it to prepare for the research. In June, vor der Bruegge and SARA consultant (and manual co-author) Kate Dickin met with the local research coordinators to discuss the research plan. Both returned to Ghana in August to assist with the analysis of the research findings. The results of the field test were encouraging and consistent with comments received by others who reviewed the document: the language is clear, and the instructions, task boxes, and work sheets are extremely helpful; however, the manual is intimidating to most readers because of its size and users are reluctant to leaf through it casually. Yet, when given instructions to review specific chapters, the users found the manual to be accessible, clear, and easy to use.

Designing by Dialogue has already found multiple uses. It is being used throughout the world and requests for copies have come from Zimbabwe, India, Bolivia, and from various research and training institutions. A two-week training course based on the manual is currently being developed by the Social Science

Nutrition

and Medicine Africa Network with support from the Sustainable Approaches to Nutrition in Africa Project (SANA). The BASICS Project is also planning a regional course in Senegal, with assistance from SARA and SANA.

Dissemination and advocacy

Nutrition and child mortality brochure

In collaboration with the BASICS Project and the Nutrition Communications Project, SARA Nutrition Advisor Ellen Piwoz helped to prepare a brochure entitled *Malnutrition and Child Mortality: Program Implications of New Evidence*, which is available in English, French, and Spanish from the BASICS Project. This brochure summarizes recent research on the relationship between under-nutrition and mortality, published by David Pelletier and colleagues at Cornell University, and recommends specific program actions to reduce malnutrition in women and children. The brochure was initially prepared for advocacy directed at USAID Missions, although it has been disseminated worldwide to government ministries, universities, and non-governmental organizations. Requests for multiple copies of the brochure have been received from UNICEF, the World Bank, and several African institutions.

Nutrition Advocacy in West Africa

In FY95, SARA trained the BASICS nutrition advisor for West Africa in the use of PROFILES interactive software for nutrition planning and advocacy. PROFILES datasets for West Africa were compiled with assistance from Macro International, and the program was translated into French for training and use in the region. Following this, SARA consultant Dr. Jay Ross traveled to Senegal to work with a team of nutrition experts from various Senegalese institutions to discuss the objectives of the PROFILES application and to develop a script for its use in the country. These discussions provided a unique opportunity for coordination of nutrition activities at the national level. This work continued in FY96 with funding from the BASICS Project. SANA and SARA are working with the BASICS Regional Nutrition Advisor to develop a regional course and follow-up activities on advocacy in the region, using PROFILES as a tool, where appropriate.

Advisory meeting on the dissemination and use of DHS nutrition materials

SARA organized a one-day workshop with Macro International on improving the dissemination and use of DHS nutrition materials. The meeting, held on June 11, was attended by 22 representatives of USAID, the World Bank,

UNICEF, and many USAID collaborating agencies who use these materials. The objectives of the meeting were to increase the use of DHS anthropometric, feeding, and related child health, morbidity, and mortality information for program planning in Africa; to review recommendations from a 1995 assessment of the use of DHS-related nutrition materials and to provide guidance for future dissemination activities; to identify strategies for using nutrition materials to influence policies and programs of governments and donor organizations; to make recommendations for future DHS nutrition analysis and dissemination projects; and to obtain feedback on the format and content of existing DHS nutrition materials.

Participants divided into working groups to develop recommendations on each of these subjects. Major recommendations from the meeting include suggestions for how to involve partner organizations in dissemination efforts, how to reformat the materials to improve their use for advocacy purposes, and how to improve communication among DHS nutrition data users to increase the likelihood that this information will be used by and is accessible to persons working in the field. A summary of the meeting recommendations was drafted in July and will be disseminated in early October.

Collaboration with other centrally-funded projects

Throughout the year, SARA has collaborated closely or provided nutrition technical inputs into several USAID centrally-funded projects, including BASICS, the Nutrition Communications Project, the Wellstart Expanded Promotion of Breastfeeding Project, and the PVO Child Survival Support Project (Johns Hopkins University).

Collaboration with African institutions

ECSA nutrition network and dissemination centers

SARA continues to support the ECSA nutrition network through the provision of timely nutrition information to disseminate in the region, support of the region's dissemination centers, and support for regional participation in workshops and meetings, including support for participants from Kenya and Zimbabwe to attend the workshop on HIV and breastfeeding that was held in May 1996 in Durban, South Africa.

Other institutions and networks in East and Southern Africa

In collaboration with the Sustainable Approaches to Nutrition in Africa (SANA) Project, SARA has also worked with the Network of African Public Health Institutions (NAPHI), the Social Science and Medicine Africa Network

Nutrition

(SOMA-NET), and the University of the Western Cape to develop proposals for program-related research and training in nutrition.

BASICS/ORANA

SARA has provided assistance on nutrition advocacy to the BASICS regional advisor for West Africa, and also provided advice on strategic planning for the revitalization of ORANA, the Organization for Applied Nutrition Research based in Dakar. This support has included participation in regional meetings, and in collaboration with SANA, implementation of a regional assessment of research and training priorities.

Meetings attended

- ◆ WHO/UNICEF Consultative Meeting on Complementary Feeding in Montpellier, France—Ellen Piwoz, November 1995.
- ◆ Regional Meeting on the Revitalization of ORANA in Dakar—Suzanne Prysor-Jones, December 1995.
- ◆ ECSA Nutrition Experts Meeting in Namibia—Ellen Piwoz, January, 1996.
- ◆ Workshop on HIV and Breastfeeding in Durban, SA—Rachel Musoke and Mike Mbizvo, May 1996.
- ◆ Wellstart Expanded Promotion of Breastfeeding Program End of Project Meeting in Easton, Maryland, U.S.A.—Ellen Piwoz, July 1996.

Population/Reproductive Health/Maternal Health

D. Population/Reproductive Health/Maternal Health

SARA advisors:

Lynn Gaffikin, JHPIEGO

May Post, Tulane University

Rhonda Smith, Population Reference Bureau

Lalla Touré, Morehouse School of Medicine

Objectives for FY96

- ◆ In collaboration with partner CAs and regional institutions, continue developing and implementing focused action plans aimed at ensuring research utilization.
- ◆ Provide technical assistance to African institutions in implementing approved research, analysis, and advocacy activities.
- ◆ Explore new approaches for achieving and assessing impacts (e.g. utilize a variety of channels such as media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
- ◆ Document and disseminate HHRAA/SARA successes and lessons learned within USAID and to the broader donor community.

Summary

Under the population, reproductive health, and maternal health components, SARA staff has had a productive year continuing to explore collaborative arrangements with regional institutions and networks, developing and implementing action plans for achieving impacts, and working to better document and evaluate dissemination and advocacy activities. Overall, staff has focused on promoting the use of research results for decision-making for a variety of audiences including USAID/Washington, REDSOs, and field missions; regional institutions; collaborating agencies; donors; and country-level policy makers.

The sector has achieved a number of results in FY96 from its ongoing efforts to ensure positive impact from its research, analysis, dissemination, and advocacy efforts:

- ◆ addition of a special workshop devoted to male responsibility in reproductive health to this year's Francophone Reproductive Health

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Research Network's conference agenda (a direct result of SARA staff's presentations and advocacy efforts at last year's conference);

- ◆ continued documentation of changes in family planning policies, protocols, and strategies in three countries (Botswana, Kenya, and Zimbabwe) from the *Improving Quality of Care and Access to Contraception: Reducing Medical Barriers* conference held in Zimbabwe, February 1994.
- ◆ transfer of the SARA Project's successful Anglophone MAQ conference model to the Global Bureau's Francophone regional MAQ conference format;
- ◆ an \$80,000 commitment from USAID/Bamako and \$120,000 from AFR/SD to support follow-on advocacy activities in three focus countries for CERPOD's SARA-funded adolescent reproductive health research study; and
- ◆ documented use of JHPIEGO/SARA's publication entitled *Complications of Unsafe Abortion in Africa* by a women's advocacy group in South Africa, which contributed to a new law passed by Parliament to expand maternal services;

Other notable accomplishments in FY96 include: 1) publication of CERPOD's adolescent study results in an innovative booklet entitled *Les Jeunes en danger*; 2) successful application of SARA's advocacy modules for a variety of audiences; and 3) the launching of a large-scale media initiative designed to increase coverage of reproductive health issues and disseminate HHRAA/SARA's research findings.

Action plans for achieving impacts

SARA has worked closely with SD on the development of their *Population and Reproductive Health Action Plans for Achieving Impact*, which covers the remainder of the Project. Related to the general action plans has been the development of focused dissemination and advocacy workplans for the following priority issues:

- a) FP services in African urban settings;
- b) Programs for young adults and men; and
- c) Emergency maternal care; post-abortion FP services and referral.

The population core group (Bob Haladay, Lenni Kangas, Phyllis Gestrin, Judy Brace, Lalla Touré, and Rhonda Smith) held regular meetings throughout the

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year. The group established expected outcomes, developed a list of key messages, and completed a detailed list of advocacy activities for selected audiences. These workplans include a list of potential spokespersons or policy champions who are enlisted to assist with dissemination and advocacy activities, persons responsible for each action, and a time frame.

Activities completed with SARA assistance are:

- ◆ a presentation on emergency maternal service needs and policy actions to be used for a variety of policy audiences
- ◆ a presentation on the results and recommendations of the urban study
- ◆ a scope of work for follow-on urban study activities in collaboration with John Snow, Inc.
- ◆ participation in multiple meetings with Cooperating Agencies working in adolescent reproductive health, male involvement, maternal services, and post-abortion care

SARA continues to support AFR/SD by responding to ad hoc requests for data and informational needs. During 1996, PRB conducted a POPLINE search and literature review on the magnitude of HIV/AIDS in the medical profession in Africa, prepared a comparative analysis of the status of family planning programs in nine CILSS countries for a Club du Sahel meeting, and produced a briefing paper on adolescent reproductive health issues linked to education for the Education Linkages Workshop.

Dissemination and advocacy

Reaching special groups: adolescents

In 1995, CERPOD completed an 18-month study on the tendencies and determinants of adolescent reproductive health behavior in the Sahel. The study is comprised of two components: quantitative research consisting of a secondary data analysis of DHS data in four countries (Burkina Faso, Mali, Niger, and Senegal); and qualitative data gathered through the use of focus group exercises and key informant interviews in Burkina Faso, Mali, and Niger. The study culminated in an innovative, multidisciplinary workshop attended by statisticians, sociologists, family planning directors (public and private sector), journalists, and other officials representing reproductive health programs for adolescents. Participants reached a consensus regarding the study's policy and program implications and developed preliminary, country-specific advocacy plans.

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Over this reporting period, CERPOD staff published and disseminated the final booklet, which summarizes the research findings and provides a basis for advocacy work. The booklet, entitled *Les Jeunes en Danger*, has a highly original format, which successfully mixes quantitative and qualitative information, newspaper articles, graphs, and boxed text. Designed for policy makers, it will also be used as an advocacy tool by officials who attended the workshop. The booklet's initial reception has been very positive. Due to the high demand, AFR/SD has mobilized resources for a reprint of the French edition and for the translation and publication of an English version.

In addition, CERPOD staff Sie Offi Somé, Mamadou Konaté, and Mohamadou Gueyé were scheduled to make country visits to further develop and operationalize the country-level advocacy plans and to provide support for specific activities. These activities were delayed by a temporary budget freeze at CERPOD, which ended in the last trimester of the fiscal year. Nevertheless, CERPOD was able to reschedule the visits for late 1996–early 1997. In collaboration with SARA/ACI consultant Gary Engelberg, the team is currently organizing a national seminar with the Burkina Faso core group, and a multi-activity dissemination week with events tailored for different target audiences.

Male involvement in family planning

Male involvement, a priority family planning issue for sub-Saharan Africa, remained high on the population agenda for FY96. To stimulate interest and discussion, Dr. Lalla Touré presented the findings of a literature review and analysis of male programs in family planning at two regional meetings: first, at the annual Francophone Reproductive Health Network Scientific Meeting held in Dakar, Senegal (November); and second, at a workshop on *The Male Role in Fertility, Family Planning, and Reproductive Health*, sponsored by WHO/MACRO in Dakar (June). As a result of the RH Network presentation, meeting organizers decided to add a special one-day seminar to this year's agenda focusing on male issues in reproductive health.

In addition to a presentation, SARA took an active role in the WHO/MACRO workshop by providing a two-day advocacy training. The training provided an opportunity for SARA to pilot test its new advocacy module series. Researchers from nine countries (Burkina Faso, Cameroon, Central African Republic, Côte d'Ivoire, Ghana, Haiti, Kenya, Senegal, and Tanzania) participated in the training, which came at the end of a six-week data-analysis course. Just prior to the workshop, SARA staff trained two ACI staff members (Lillian Baer and Barky Diallo), who in turn conducted the training.

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Participant reaction was overwhelmingly positive. Many stated that the concept would be useful for their organizations. Particularly noteworthy were a number of requests for training in participant country institutions, including a request to train 150 MOH staff.

There were several participants with extensive advocacy experience who significantly contributed to the discussion. These individuals will be good sources as potential trainers for future workshops.

Emergency maternal and post-abortion family planning services

The JHPIEGO/SARA-funded study and monograph on the *Complications of Unsafe Abortion in Africa* continues to be disseminated and used in a variety of settings. CRHCS published and disseminated a policy booklet summarizing the monograph's key policy and program recommendations. Main dissemination channels included the networks Dissemination Centers, professional meetings in the region, and policy dissemination seminars organized in Uganda and Zimbabwe. JHPIEGO published a monograph-based article in the journal *Health Policy and Planning*, gave a panel presentation of study findings at the 1995 APHA meeting, and participated in a poster session at the 1996 APHA meeting.

Three hundred copies of the policy booklet were distributed at the Pan-African Federation of Child and Maternal Health Conference held in Johannesburg in September 1996. The conference was attended by researchers, policy makers, practitioners and other health experts from all of Africa. A women's advocacy group, Women in Action, cited the monograph as one of the key publications used to prepare a presentation for a parliamentary subcommittee in South Africa, which resulted in new laws for maternal services.

AFR/SD contributed funds to the Policy Project (The Futures Group) to develop a dissemination and advocacy project on post-abortion care in collaboration with REDSO/ESA. SARA staff plan to work with the Policy Project staff to incorporate an advocacy workshop component into this new regional activity.

Maximizing regional opportunities for dissemination and advocacy

In October, Lalla Touré and ACI's Lillian Baer and Barky Diallo conducted a five-day advocacy training workshop with a focus on adolescent reproductive health in Bamako, Mali. The workshop was well attended by 35 participants from CERPOD; local chapters of the African Reproductive Health Network in Burkina Faso, Cameroon, Côte d'Ivoire, Guinea, Niger, Mali, and Senegal; and representatives from the Population Council in Dakar and USAID/Bamako.

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The workshop opened with an initial exchange of experiences on adolescent research and program initiatives. CERPOD presented *Les Jeunes en Danger* and findings from its adolescent study followed by research presentations from each of the seven countries. Workshop activities included the identification of advocacy goals, objectives, audiences, and solutions through interactive country-specific exercises.

The training generated great enthusiasm among participants, and significant curiosity and interest from the local press (national television, radio, and newspapers). Overall, the reactions underscore how eager researchers and program managers are to learn this new "proactive" communication technique, and how much HHRAA/SARA and others interested in bridging the research-to-policy gap have to do to satisfy the growing demand. One important benefit from this training was building capacity among CERPOD staff, who are positioned to provide training throughout the region.

Mobilizing the mass media

The mass media is a powerful communication tool for reaching decision makers, opinion leaders, and the general public. Journalists play a vital role in creating the environment in which ideas are discussed and decisions made. Improved coverage can accelerate policy actions, help develop new constituencies for population and reproductive health programs, and lead to increased resources for population and health programs.

During 1996, SARA launched a special media initiative entitled *POP'MEDIAFRIQUE*. The project aims to inform senior-level print and broadcast journalists about the implications of current research in selected themes. The project is being implemented by CERPOD with technical assistance from PRB and Africa Consultants International. The purpose of the activity is three-fold:

- ◆ Expand and sustain media coverage of important population and reproductive health issues
- ◆ Enhance south-to-south partnerships between senior ("gatekeeper") print and broadcast journalists and regional research institutions
- ◆ Strengthen in-country linkages between reproductive health officials and the media.

In June, the project team conducted a three-day seminar in Saly, Senegal, on adolescent reproductive health for 15 high-level journalists and health professionals from five participating countries (Burkina Faso, Côte d'Ivoire, Mali,

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Mauritania, and Senegal). The seminar achieved its first success by bringing journalists and health professionals from the same country together, in some cases, for the first time.

Seminar facilitators used a series of interactive exercises to show participants the need to focus on adolescents and to create an active collaboration between media and health professionals. Participants divided into small groups and presented research findings through theatrical dramatization. Journalists, in particular, benefited from in-depth conversations with the CERPOD adolescent study principal investigators, who facilitated these sessions. The skits also showed health professionals how journalists can use a human interest angle to make a theme come alive.

Since the seminar, project staff have received copies of a series of articles from the participating print editor in Burkina Faso, articles from Senegal, and radio programs from Mali and Côte d'Ivoire. In addition to products already received, *POP'MEDIAFRIQUE* plans three follow-up activities in FY97: the production of special local editions and radio broadcasts on adolescent reproductive health problems and needed policy actions; a summary booklet and radio program compilation containing the best excerpts from each country; and a media handbook on reproductive health.

AFR/SD has contributed additional funds through PRB's Cooperative Agreement to support a second seminar early next year. *POP'MEDIAFRIQUE* is being carried out in close collaboration with the USAID-funded Family Health and AIDS Project in West and Central Africa (SFPS), the SidAlerte Journalist Network sponsored by the French Cooperation and USIA, and the Johns Hopkins Population Communications Services (PCS) Project to revitalize a Sahelian network of reporter-level journalists.

Next steps

SARA will continue assisting the HHRAA staff in developing and implementing their action plans for achieving impact. Anticipated objectives for the coming year include:

- ◆ providing technical assistance to the African institutions and networks that are conducting research, analysis, dissemination, and advocacy activities;
- ◆ transferring basic communication and advocacy skills to local groups;
- ◆ exploring innovative approaches to help ensure research utilization;

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- ◆ developing mechanisms to improve the monitoring of expected outputs and policy outcomes; and,
- ◆ concentrating on increasing collaboration with African professional networks and other policy audiences to ensure that more attention is given to addressing the priority reproductive health and maternal issues that are incorporated in the AFR/SD Analytic Agenda.

E. Sustainability and Financing

SARA advisors:

Hugh Waters, Academy for Educational Development

Dana Faulkner, Porter/Novelli

Judy Brace, Academy for Educational Development

Suzanne Prysor-Jones, Academy for Educational Development

Objectives for FY96

- ◆ In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
- ◆ Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
- ◆ Assist HHRAA to move agenda forward through a variety of advocacy and dissemination activities.
- ◆ Continue active dissemination efforts for materials from HSF and DDM projects.
- ◆ Promote integration of HHRAA findings into Mission and REDSO program design; and donor activities.

Summary

Most of the activities in this sector, especially research and analysis, were carried on through other HHRAA-funded mechanisms, but SARA continued in a responsive support role in organizing and facilitating meetings and in dissemination, as called upon and as documented here.

Issues identification

The SARA Project assisted HHRAA to plan and organize a two-week meeting with HHRAA health-financing specialists from REDSO/ESA and REDSO/WCA, a health-financing research expert from the Partnerships for Health Reform Project, and a representative from the USAID Global Bureau. The meeting, which was facilitated by Dana Faulkner and Hugh Waters, was focused on identifying priority activities for HHRAA in the coming years, based

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on an analysis of current problems and opportunities, and building on HHRAA experience to date in both regions.

The group felt that it was necessary first to develop a common framework, which could be used to guide the selection of entry points, and also be an advocacy tool for dialogue with USAID Missions and other partners. The groups thus developed the *USAID Results Framework for Financial Sustainability of Child Survival and Reproductive Health Services in Sub-Saharan Africa*. The framework lays out a comprehensive set of results and activities that need to be addressed in order to:

- ◆ increase the level of public and private resources dedicated to the health sector
- ◆ improve the allocative and technical efficiency of resources employed in the health sector
- ◆ increase access to and utilization of quality health service for the poor, high-risk, and underserved.

The group identified priority activities for HHRAA within this Framework. These have been subsequently refined and further prioritized both for East and Southern Africa and for West Africa.

Research and analysis

SARA participated in discussions in West Africa to plan research and development activities in priority areas. SARA encouraged the involvement of CESAG—the regional management training institution—in these discussions, in an effort to increase local ownership and relevance of HHRAA research. It was agreed that small consultative meetings in West Africa to group together key donor and African experts on each subject will be necessary in order to identify specific activities. Meetings will be organized on the subject of:

- ◆ community insurance schemes - an area where the ILO and the French Cooperation are already working
- ◆ hospital autonomy - an area of particular interest to the French Cooperation
- ◆ national health accounts - the BCEAO (the Central Bank of West Africa and owner of CESAG) is involved in national accounts in all sectors

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- ◆ the impact of cost recovery on the quality of services - an area that the European Union is working on with CESAG

Dissemination and advocacy

HHRAA plans for dissemination and advocacy

Judy Brace and Dana Faulkner have taken the lead in working closely with HHRAA to clarify advocacy objectives and develop dissemination plans for all HHRAA-funded products in the health-financing and sustainability field.

SARA gave some assistance to HHRAA, CESAG, and the DDM Project in preparing the dissemination conference on HHRAA-funded research held in Dakar this year.

Dissemination of the "22 Questions"

SARA carried out the dissemination of this document, prepared in English and French, by Abt Associates under the Health Financing and Sustainability Project. The document has been widely disseminated within USAID, to donor partners and projects, and to decision makers in Africa.

Making HHRAA products available

A section of the SARA-produced annotated bibliography of HHRAA-funded documents is devoted to Health Care Financing. This bibliography will shortly be available through the USAID World Wide Web Home Page. SARA is also a repository for all the HHRAA-funded documents produced by the Health Financing and Sustainability Project, which has now ended, and is in communication with DDM on their HHRAA-funded publications.

Presentation on health financing issues

SARA prepared materials and developed a presentation for HHRAA personnel attending the World Bank meeting on Health Financing held this year in South Africa.

Capacity building

Health economics and policy analysis training for Francophone Africa

Laurence Codjia of the CESAG Health Management Unit and Suzanne Prysor-Jones planned a workshop to follow the DDM-CESAG conference on health financing, in order to obtain input from international and African experts into CESAG's plans to design a new Master's degree in Health Economics for

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Francophone Africa. The workshop was facilitated at CESAG by SARA/ACI consultant Maty Ndiaye and funded by SARA. There were 25 participants, including five experienced decision makers from Ministries of Health or Finance in Burkina, Guinea, Mali, and Senegal; several health economists from universities, Ministries of Health and donor agencies; representatives from USAID/HHRAA and REDSO/WCA, the French Cooperation, the ILO, the French-run EPIGEPS public health course, WHO/Burkina and Senegal, the World Bank/Senegal, and the USAID-funded Projects DDM, PHR, BASICS, and SARA; and CESAG permanent and part-time teachers.

Following introductory presentations on present teaching of health economics in Africa by the WHO Representative and on CESAG plans, working methods included plenary discussions and group work for brainstorming. The use of moveable cards, each containing one idea, facilitated the reaching of consensus on the key issues of the meeting:

- ◆ role of the Health Economist or Health Analyst in the region
- ◆ type of professional that should be admitted into the course at CESAG
- ◆ nature of the course that should be given
- ◆ future employers of the cadre trained
- ◆ numbers of this cadre that will be needed over the next five years.

In brief, the group clearly felt that Health Economists/Analysts are needed in the Region, given present trends in health reforms and innovative methods of health financing. They felt that there should be a good mix of professions in the cadre. Candidates with an Economics background would be given an initial solid orientation in public health, while others with a health background would be oriented in basic economics. The two groups would come together for the second part of a Master's degree course to learn policy analysis skills and up-to-date health-financing approaches.

Many governmental, private, non-government, and donor agencies were identified as potential employers of the cadre. It was estimated that approximately 100 new members of such a cadre would be needed in Francophone Africa over the next five years. It was recommended that some marketing of the concept of the Health Economist/Analyst should be undertaken, so that future employers have a clear idea of how such a cadre can best be utilized. The roles and functions of its members would be quite diverse, but would fall in the following broad categories:

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- ◆ technical advisors to Ministries at central and regional level, hospitals, NGOs, private providers, and Donors
- ◆ teachers in public health and management settings
- ◆ members of multidisciplinary researcher teams

The Partnerships for Health Reform Project has received some funds from the Africa Bureau to assist with the development of CESAG curriculum and teachers. Several other donor agencies and projects have expressed interest and willingness to participate in next steps. SARA will continue to serve as a catalyst in enlisting technical and financial support for this important CESAG endeavor which should improve capacities for analysis and decision making in the region in the medium term, as well as increase the dissemination and use of available research and state-of-the-art information.

Emerging Threats: HIV/AIDS, STDs, and TB

F. Emerging Threats: HIV/AIDS, STDs, and TB

SARA advisors:

May Post, Tulane University

Sambe Duale, Tulane University—SARA Research Manager

Objectives for FY96

- ◆ In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
- ◆ Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
- ◆ Disseminate key findings emerging from HHRAA-funded studies on HIV/AIDS and emerging threats.
- ◆ Promote and advocate the use by USAID Missions and African institutions of key findings and recommendations emerging from the HHRAA portfolio in the formulation of strategies and programs for the prevention and mitigation of HIV/AIDS and other emerging threats (TB, STIs, etc.)
- ◆ Support AFR/SD and REDSO/ESA in the implementation of their initiative on the integration of STI services with FP, MCH, and PHC programs.

Summary

SARA has worked with AFR/SD and a number of its cooperating agencies in disseminating materials emerging from HHRAA-funded studies on HIV/AIDS. International and regional conferences on HIV/AIDS in Africa have been used as venues for the dissemination of findings emerging from the HHRAA portfolio.

SARA has been working with AFR/SD in identifying and developing materials for promoting the concept of introducing HIV/AIDS prevention and mitigation activities into multi-sectoral (health and non-health) development sectors. Position papers and materials have been developed on issues such as HIV/AIDS in civil-military populations, private sector AIDS policy, and Women and AIDS.

Emerging Threats: HIV/AIDS, STDs, and TB

SARA provided support to AFR/SD for its inputs into the development of the Agency's HIV/AIDS results framework and future directions for USAID/G/PHN support for international HIV/AIDS programs.

Research and analysis

Computer model for estimating the spread of TB due to HIV/AIDS

The development of a computer model on estimating the spread of TB due to HIV/AIDS in Africa, funded by SARA, is still in process with Dr. James Chin of UC/Berkeley. The proposed model will complement and be merged into the TB module of EPIMODEL. In addition to the TB module's current capabilities, the new TB module will be designed to (1) make country-specific projections for sub-Saharan Africa of the annual number of active TB cases among HIV-negative adults, taking into account the increased transmission of *M. tuberculosis* to HIV-negative persons from the increasing number of TB cases in HIV-positive and HIV-negative persons; and (2) estimate the cost of health care and drugs needed for patients with TB who are HIV-negative.

For three countries in sub-Saharan Africa, Dr. Chin will provide country-specific projections through the year 2000 of the annual number of active TB cases in HIV-negative persons; these projections will take into account the increased transmission of *M. tuberculosis* to HIV-negative persons from the increasing number of TB cases in HIV-positive and HIV-negative persons. The development of the model is expected to be completed in December 1996.

Position paper on HIV/AIDS strategy: Military Policy and Civil-Military Collaboration in Africa

SARA has funded the Alliance for Civil-Military Collaboration Against AIDS of the African-Caribbean Institute to prepare a paper entitled *HIV/AIDS Strategy: Military Policy and Civil-Military Collaboration in Africa*. The paper will be used as a tool for policy dialogue and program development to improve HIV/AIDS efforts among military populations and their civilian neighbors. The Alliance's purpose is to catalyze cooperation between civil and military authorities to deal with AIDS prevention and care. Although the military are somewhat insulated from civil medical programs within their own military culture, the military certainly comes out of its barracks often enough to have an effect on civilian health, in STDs and AIDS. The draft of the paper has been vetted with U.S.-based experts. The paper will serve as the basis for discussions at two important meetings in Africa that the Alliance in collaboration with AIDSCAP and UNAIDS will convene in 1997.

Emerging Threats: HIV/AIDS, STDs, and TB

Issue paper on Partner Notification for Control of Sexually Transmitted Infections

Partner notification is a critical component of STI control for HIV prevention that to date has not been adequately addressed in Africa. At the request of AFR/SD, Dr. Post has written an issues paper, *Partner Notification for Control of Sexually Transmitted Infections*. The desk study is an initial attempt to bring together available information on documented partner notification experiences and to analyze lessons learned from the experiences to provide guidelines to AFR/SD's strategic approach in STI control for HIV prevention.

A study proposal Role of Nurse-Midwives in Integration in the ECSA Region

A proposal *Role of Nurse-Midwives in Integration in the ECSA Region* has been developed and submitted to AFR/SD and REDSO/ESA. If funded, possible implementors of the study will be the Center for African Family Studies (CAFS) with ECSA collaboration.

Dissemination and advocacy

Strategic and programmatic priorities for HIV/AIDS prevention and mitigation in Africa

An issues paper summarizing the priorities for HIV/AIDS prevention and mitigation in sub-Saharan Africa has been prepared for the Africa Bureau to use in its intra-agency discussions for the development of a new worldwide HIV/AIDS project to succeed AIDSCAP. Highlighting issues such as the increasing number of AIDS patients, the potential social and economic impact of the epidemic, the role of non-health sectors, and the need for usable monitoring and evaluation systems, this paper has been a catalyst for discussions within the Bureau, as it struggles with the particularly challenging characteristics of the AIDS pandemic in Africa. Both this paper and the HHRAA *Strategic Framework on HIV/AIDS, STIs, and Tuberculosis in Africa* by Dr. Post are being used by the core group developing the new project. This policy influence is right on target with HHRAA's and SARA's purposes.

HHRAA advocacy plan for multisectoral approach to HIV/AIDS

SARA has worked closely with SD on the development of an action plan in this sector, covering the remainder of the Project. An HIV/AIDS core group has been working in collaboration with Porter/Novelli to develop an advocacy implementation plan and packaged policy communications materials for the

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introduction of HIV/AIDS prevention and mitigation strategies into multisectoral (health and non-health) development sectors.

Peer review of the Private Sector AIDS Policy (PSAP) materials

SARA has assisted AFR/SD and the AIDSCAP Project of Family Health International in organizing a peer review of the Private Sector AIDS Policy (PSAP) materials. Reviewers' comments were to be addressed by AIDSCAP staff in revising and editing the materials before final production. SARA is supporting the preparation of presentation materials for the promotion of PSAP. It is hoped that the dissemination of PSAP materials and their use will facilitate the development and implementation of more HIV/AIDS prevention programs in African workplaces.

HHRAA-sponsored pre-conference workshop at the IX ICASA

SARA, through its Tulane subcontract, organized a HHRAA-sponsored pre-conference workshop at the IX International Conference on AIDS and STDs in Africa (ICASA) held December 10–14, 1995, in Kampala. Entitled *Policy and Program Implications of HIV/AIDS and STD Research Findings* and co-chaired by Prof. Gilbert Bukonya, the Dean of Makerere Medical School in Kampala, and Bill Lysterly of AFR/SD/HRD, the workshop was attended by close to 100 participants. Representatives of HHRAA cooperating agencies discussed results and implications of their research findings. Participants showed great interest in issues being addressed by HHRAA researchers and presented at the workshop: the economic and demographic impact of AIDS, private-sector role (policies, programs, and other aspects) in HIV/AIDS prevention, and the prevention of HIV/AIDS and STDs among adolescents. SARA also sponsored researchers from Côte d'Ivoire, Cameroon, and France to participate in both the larger conference and the HHRAA seminar.

Dissemination of the NAS report Preventing and Mitigating AIDS in Sub-Saharan Africa: Research and Data Priorities for the Social and Behavioral Sciences

In early December, the National Academy of Sciences Panel released its report entitled *Preventing and Mitigating AIDS in Sub-Saharan Africa: Research and Data Priorities for the Social and Behavioral Sciences*. The Panel's work was funded by HHRAA and the Mellon Foundation.

Dr. Barney Cohen, the Study Director, presented the main recommendations of the report at the HHRAA-sponsored pre-conference workshop in Kampala.

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In addition, SARA has purchased and is disseminating a good number of the bilingual summary of the report and also the full English version of the report.

Briefs and seminar series on multisectoral aspects of HIV/AIDS

The predicted increase in HIV-related illnesses and deaths, and their socioeconomic consequences, will have substantial adverse effects on economic, political, military/security and social stability throughout Africa. A number of productive and social sectors, in addition to health are affected by the HIV/AIDS pandemic: education, agriculture, tourism, mining, manufacturing, security/military, and judicial, among others. Thus, HIV/AIDS prevention and mitigation should be considered by all sectors of development. AFR/SD is promoting policy dialogue and practical **multisectoral** approaches to HIV/AIDS in Africa.

SARA has prepared, in collaboration with Tony Barnett of the University of East Anglia and Alan Whiteside of the University of Natal, the dissemination of a series of AIDS briefs on selected development sectors. The briefs were prepared with funding from WHO/GPA (now part of UNAIDS).

E-note #16 on Women and HIV/AIDS

The publication of e-note #16 *Women and HIV/AIDS*, written by Dr. May Post, generated an immediate series of requests for additional copies and notifications that the paper had been circulated widely to other agencies by those who received it. At AFR/SD's request, Dr. Post will give a presentation of the e-note at REDSO/ESA, Nairobi. The e-note will also be presented under the *PHN Continuing Education Series*, at the request of the Global Bureau Center for Population, Health and Nutrition.

HHRAA/SARA's contribution at XIth International Conference on AIDS

Dr. Duale of SARA was among the estimated 15,000 delegates who descended on the city of Vancouver to attend the XIth International Conference on AIDS. HHRAA/SARA's contribution at the conference consisted of: a) a presentation on the potential link of female genital mutilation and HIV and the role of health workers at a poster symposium entitled "Violence, Women, and the Risk of HIV Infection," b) a poster presentation on priority policy and research issues for HIV/AIDS prevention and mitigation in Africa, stressing the need to broaden HIV/AIDS programs in health and non-health sectors of development, and c) participation at the USAID meeting for the presentation of the HIV/AIDS objective tree and future directions for USAID/G/PHN support for international HIV/AIDS programs.

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Collaboration with African institutions

Prof. Alan Whiteside of the University of Natal, South Africa

Consistent with HHRAA project goals to promote the participation of Africans in policy fora and to disseminate information with the potential to influence policies and programs in the Africa region, Prof. Alan Whiteside of the University of Natal, South Africa, traveled to Washington, D.C. with SARA's support to give a presentation on how to consider HIV/AIDS prevention and mitigation in planning health and non-health sector programs in Africa.

African AIDS Research Network - West and Central African Zone

Dr. Sibili Yelibi, the Executive Director of the Réseau Africain de Recherche sur le SIDA - Zone Afrique Occidentale et Centrale (African AIDS Research Network—West and Central African Zone) based in Dakar, Senegal, met with staff from SARA to explore possible collaboration in research, information dissemination, and/or advocacy on HIV/AIDS in West and Central Africa. The Network covers Benin, Burkina Faso, Cameroon, Cap-Vert, Congo, Cote d'Ivoire, Gambia, Ghana, Guinea, Guinea Bissau, Mali, Niger, Nigeria, Senegal, Sierra Leone, Togo, and Zaire. Network members come from a variety of disciplines and are mainly researchers involved in HIV/AIDS work in Africa. SARA staff discussed with Dr. Sibili the possibility of using the Network as a dissemination channel for selected HHRAA/SARA materials on HIV/AIDS. SARA will also explore the possibility of linking up the network with CERPOD in Mali and ACI in Senegal to conduct joint activities for research and evaluation of IEC interventions for HIV prevention in West Africa.

Next steps

SARA will explore, in collaboration with AFR/SD staff, new approaches to disseminate and advocate the use by USAID Missions and African institutions of key findings and recommendations emerging from the HHRAA portfolio in the formulation of strategies and programs for the prevention and mitigation of HIV/AIDS and other emerging threats (such as TB and STIs).

A number of regional initiatives on HIV/AIDS and STI are in operation in West and Central Africa (WCA). SARA will be exploring with WHO/AFRO and the African AIDS Research Network of WCA ways to improve information sharing among these initiatives.

Regional meetings on HIV/AIDS in Africa will continue to be used as venues for the dissemination of HHRAA/SARA materials.

Emerging Threats: HIV/AIDS, STDs, and TB

SARA will continue its support to AFR/SD and Cooperating Agencies for the development of future directions for HIV/AIDS prevention and mitigation in Africa.

G. Cross-Cutting Issues

Objectives for FY96

- ◆ Assist HHRAA to move agenda forward through a variety of advocacy and dissemination activities.
- ◆ Continue active dissemination efforts for materials from HSF and DDM projects.
- ◆ Promote integration of HHRAA findings into Mission and REDSO program design; donor activities.
- ◆ Support African institutions' work on cross-cutting issues (especially training modules at NAPHI, CERPOD, HSR)

Dissemination and advocacy (see above p. 21)

Manual for the use of data for decentralized decision-making

CERPOD has developed a first draft of a reference manual of indicators for health center personnel, including explanations on how to calculate indicators, and how to use the information thus generated. A manual for workshop facilitators for the introduction of the manual has also been drafted. SARA/ACI consultant Gary Engelberg participated in discussions on the presentation and layout of this work. Suzanne Pryor-Jones discussed the first draft with CERPOD staff in Bamako, where a strategy was developed to select a limited number of indicators for management use at health center and district levels, and to present these in a more graphic form before testing them in the field. A public health physician with periphery-level field experience will be enlisted as a CERPOD consultant to assist with this.

Improving the teaching of health systems research in pre-service training settings in East and Southern Africa

SARA is collaborating with the Joint Health Systems Research Project of the World Health Organization in Southern Africa (Joint WHO/HSR) in Harare, Zimbabwe, on an effort to upgrade health systems research capacity in Africa. As a first step in the process of updating and adapting existing HSR materials, SARA hired Dr. Sidney Ndeki of the Centre for Educational Development in Health (CEDHA) based in Arusha, Tanzania, as consultant to carry out a regional assessment of health systems research training in the ECSA region.

Cross-Cutting Issues

The purpose of the Assessment was to determine needs and recommendations for improving health systems research training curricula and materials for pre-service and continuing education training offered by selected public health, nursing, and medical training institutions in ECSA. Data about health research curricula and teaching in higher learning institutions were collected in Malawi, Uganda, Zambia and Zimbabwe.

The draft report of the assessment indicates that all postgraduate medical training should have a research component in which a dissertation is developed and presented. Students are given theoretical training early to equip them to handle research methods for their dissertations. However most of these research projects are clinically oriented except for the MPH programs which are more oriented toward health systems research. It is interesting to note that selected institutions have included research as an examinable subject, thus giving it considerable importance. However, while many paramedical institutions either provide very little teaching on research or do not teach the subject at all, there are clear indications that they intend to strengthen their research training.

The report of the assessment was discussed at the Essential National Health Research meeting held in Kampala this year, and will serve as the main background document for a workshop that WHO/HSR is planning to organize on updating the HSR training modules. More generally, the report will assist HSR in orienting and implementing its training and dissemination activities aimed at increased involvement of universities in health systems research. The report will be produced and disseminated to institutions and individuals interested in health systems research capacity building in the ECSA region.

Guide for researchers on making a difference to health policies and programs

Discussions over the past two years with colleagues in the United States and Africa pointed to the need to increase awareness among researchers in Africa of the steps that they can take to increase the likelihood that their research will be relevant and used in the decision-making process. In particular, conversations held in 1995 by Dr. Prysor-Jones with Prof. Stephen Kinoti, then working at CRHCS/ECSA, Dr. Luis Gomez Sambo of WHO/AFRO, and Profs. Gabriel Mwaluko and Raphael Owor of the HSR Project and ENHR initiative respectively, showed an interest in the joint production of a guide for researchers in this matter. The conference on the use of research, held in Mexico by the ADDR Project and attended for SARA by Michael Ramah of Porter/Novelli, confirmed the opportuneness of such a tool.

SARA has therefore prepared a first draft of the booklet entitled *Making a Difference to Policies and Programs: A Guide for Researchers*. Robert Porter, at AED, is taking prime responsibility for drafting the guide. The document suggests how researchers can identify and communicate better with their target audiences by involving them as much as possible at every stage of the research process. The guide has been widely reviewed, and was discussed at the Africa ENHR meeting held in Kampala this year. Comments and suggestions from many sources are being incorporated in a final draft, which should be ready for joint publication and dissemination by ENHR/Africa, HSR, and HHRAA/SARA in early 1997.

Improving the teaching of health management in Francophone Africa

SARA has worked closely this year with CESAG—the regional management training school in Dakar—and with the Management Sciences for Health (MSH) Family Planning and Management Development (FPMD) Project on management training issues. The objective of this joint effort is to facilitate the incorporation of current knowledge and research on health systems into the CESAG master's program in health management, as well as into short courses that CESAG plans to organize, and into the curricula of other Public Health and Management training settings, as CESAG develops a networking role in the region (See section on African Institutions).

SARA also supported CESAG in organizing a two-day brainstorming session to discuss the type of training in health economics and policy analysis that would be appropriate for CESAG to develop for Francophone Africa. Workshop participants included African decision makers and health economists, as well as representatives of WHO, ILO, the French Cooperation, EPIGEPS, HHRAA/Washington and REDSO/WCA, Harvard University, and Abt Associates. The Partnerships for Health Reform Project, with HHRAA funding, will be able to give some assistance to CESAG in developing new health economics in long and short-term training programs.

Support for HHRAA-initiated donor coordination meeting

SARA/ACI consultant Gary Engelberg and a small ACI team assisted Hope Sukin, HHRAA Project Manager, and Dr. Rudi Knippenberg of the UNICEF Regional Office in Abidjan, to prepare and facilitate a donors meeting held in Mali to discuss the needs and opportunities for improved donor collaboration in West Africa. The meeting was well attended by the principal multilateral and bilateral donor agencies operating in the region, and a significant step forward was made. It was widely felt that a meeting of this nature should be organized on a yearly basis.

Cross-Cutting Issues

Support for meeting on the Role of Civil Society in Health Reform

SARA/ACI consultant Dr. George Tiendrebeogo assisted Mme. Therese King, of the Better Health in Africa Panel, to prepare and facilitate a meeting on the role of civil society in health reform.

Participation in "networking the networks" meeting

Suzanne Prysor-Jones participated in this one-day meeting held in late January prior to the INCLLEN meeting in Victoria Falls. The meeting was sponsored by Essential National Health Research (ENHR) and was, essentially, a follow-up to the ENHR Africa Regional Meeting that was held in Harare in October 1995. At this October meeting, several regional networks and institutions concerned with health research participated. It was clear that these networks had several overlapping goals and needs, and that further discussions would be needed to explore areas for collaboration and coordination. Dr. Yvo Nuyens of the Council for Health Research and Development (COHRED), which functions as the ENHR Secretariat in Geneva, and Prof. Raphael Owor of Makerere University, who is responsible for the ENHR Africa Secretariat, thus took the responsibility of bringing together the following nine networks and organizations concerned with research in Africa:

- ◆ **The Commonwealth Regional Health Community Secretariat (CRHCS/ECSA)**, located in Arusha, Tanzania and represented by Dr. S. Kinoti
- ◆ **Essential National Health Research African Network (ENHR)**, located in Kampala, Uganda and represented by Dr. R. Owor
- ◆ **Health Systems Research for Reproductive Health and Health Care Reforms in the Southern African Region**, a German Government (GTZ) network, located in Harare, Zimbabwe, and represented by Dr. D. Neuvians
- ◆ **International Clinical Epidemiology Network (INCLLEN)**, located in Philadelphia, USA, and represented by Dr. N. Sewankambo from Makerere University in Kampala
- ◆ **International Health Policy Program (IHPP)**, located in Washington, D.C., U.S.A., and represented by Dr. G. Munishi from the University of Dar es Salam
- ◆ **Joint Project on Health Systems Research (HSR)**, located in Harare, Zimbabwe, and represented by Dr. G. Mwaluko

- ◆ **Network of African Public Health Institution (NAPHI)**, located in Kampala, Uganda, and represented by Dr. G. Bukenya, who was unfortunately unable to attend the January 21st meeting
- ◆ **Social Science and Medicine Africa Network (SOMA-NET)**, located in Nairobi, Kenya, and represented by Dr. A. Pertet
- ◆ **University Partnerships in Essential Health Research (UPIEHR)**, located in Ontario, Canada, and represented by Dr. Victor Neufeld from McMaster University

The following recommendations for networking were put forward:

Information dissemination

- ◆ Networks should come together at a national level to share information among themselves and with policy makers. Mechanisms are needed to do this.
- ◆ A situation analysis of e-mail possibilities and constraints is needed in each country.
- ◆ Workshops are needed to increase the use of electronic networks—a needs assessment for this is probably necessary.
- ◆ An e-mail conference should be set up to link the networks.

Advocacy

- ◆ Health research committees should be enlarged and include networks.
- ◆ There is a need to share what works using research findings for advocacy.

Training and capacity building

- ◆ Training in advocacy is needed as part of research management.
- ◆ Training of students in health research should be increased.
- ◆ Joint planning of courses should be encouraged, and information about courses should be provided to all the networks.
- ◆ An inventory of resources is required, as is a research calendar for 1996.

Cross-Cutting Issues

- ◆ Existing mechanisms need strengthening, e.g., research units, health information units.
- ◆ The need exists to evaluate the effect of research on health programs.

Resource mobilization for research

- ◆ There need to be country-level discussions and proposals developed to convince donors to support research. An example of this type of process was undertaken in Uganda.
- ◆ HSR has some experience in obtaining national budget allocations for research.
- ◆ Experiences such as these should be shared across countries.
- ◆ The importance of accountability and transparency was raised. Potential donors respond well when these are present.

Priority setting

- ◆ There is need to share the experiences so far undertaken in Africa. ENHR is developing documentation on this.
- ◆ The University Partnerships Program has some experience in priority setting with communities in educational settings.
- ◆ AAAS has documented priority setting in four African countries

Crisis prevention, mitigation, and recovery: linking relief and development

Crisis Prevention, Mitigation, and Recovery in Sub-Saharan Africa: Linking Relief and Development through Public Health was the theme of a two-day Consultative Group meeting sponsored by SARA in June 1996. Attended by about 40 participants representing ten U.S., European and African universities; five PVOs/NGOs; five USG departments and agencies; and six different offices of USAID, the focus of the meeting was on how relief and development can be linked. To address the increasing number of crises arising from epidemics, natural disasters, and conflicts in Africa, the participants identified policy, program, and research issues and constraints in linking relief and development as an approach to the prevention and mitigation of crises, and subsequent sustainable recovery.

Cross-Cutting Issues

The group has recommended that relief and development communities should seriously reflect on how to reduce the number of crises in Africa and how to improve relief-development linkages for better prevention and management of health crises in sub-Saharan Africa. SARA is playing a role in this effort by providing technical assistance to AFR/SD to feed the recommendations of the *Crisis Prevention, Mitigation, and Recovery* paper into the design and implementation of selected USAID initiatives in Africa such as the Greater Horn of Africa Initiative (GHAI) and the West and Central Africa Strategy.

Management

H. Management Support to AFR/SD/HRD

SARA staff:

Peter Spain, Academy for Educational Development

Anne McArthur, Academy for Educational Development

Kimberly Hemphill, Academy for Educational Development

Objectives for FY96

- ◆ Continue to support AFR/SD in managing portfolio activities funded under HHRAA
- ◆ Prepare, execute, and monitor subcontracts with African institutions
- ◆ Assist in upgrading and maintaining procedures for monitoring and evaluation of HHRAA activities including SARA
- ◆ Establish and maintain communication systems with REDSOs, subcontractors, and African institutions

SARA management support to HHRAA

SARA has continued to support the portfolio activities funded under HHRAA in a number of areas. This project year, these have included:

- ◆ design, planning, and carrying out of meetings, workshops, and consultative groups in Washington and in Africa;
- ◆ assistance with the development of HHRAA sub-sector action plans;
- ◆ assistance with the development of a number of sub-sector Results Frameworks;
- ◆ assistance with communications with the Missions, REDSOs, and Global Bureau (e.g., e-notes and cables);
- ◆ identification and collection of all HHRAA-funded reports, documents, publications;
- ◆ preparation of an annotated bibliography of all HHRAA-funded reports and publications;
- ◆ development of dissemination and advocacy plans for HHRAA sub-sectors;

- ◆ design and facilitation (through IRM, LPA) of a HHRAA Home Page;
- ◆ participation in Africa Bureau discussions on the Leland Initiative.

Ongoing SARA management activities

HHRAA/SARA activities are tracked by task order, with the products stipulated in each task order. These tasks, now in excess of 325, have their own files along with reports and other products. A subset of activities is tracked for impact.

SARA tracks the status of all task orders and related cables, working closely with HHRAA staff. This is an ongoing activity. All tasks are carried out only on the basis of a signed task order, and all travel is undertaken only on the basis of written concurrence from the destination mission. Both task orders and cables are tracked electronically.

SARA subcontracts and agreements with African institutions that are carrying out aspects of the SARA/HHRAA agendas are carefully developed and managed. All these subcontracts were in effect through PY4, with the ECSA and CERPOD contracts scheduled to conclude on March 31, 1997. The contract with CERPOD will probably be extended till the end of the Project. The subcontract with African Consultants International in Dakar and the purchase orders with the eight dissemination centers in East and Southern Africa continue.

SARA also executed a number of purchase orders with national chapters of ERNWACA for work on the study of conditionality's role in education reform. These ended at the conclusion of the Project Year.

SARA has also given substantial management assistance to SANA in establishing sub-agreements with the University of the Western Cape and SOMA-NET, and in other areas.

SARA produces monthly, quarterly and annual reports on the project's activities, and quarterly financial reports. In addition, SARA provides pipeline analyses, budget projections, workplan reports, and other specific reports as required. A weekly activities report is sent to SARA subcontractors electronically.

Lessons Learned

V. Lessons Learned

- A. The USAID HHRAA initiative and, by extension, the SARA Project, are based on the premise that good quality research and analysis on relevant issues can, if adequately disseminated, make a difference to policies and programs. From our experiences to date, we have learned that:
- ◆ Conducting research on priority issues of regional significance for Africa is not enough to ensure that findings are adequately used by decision makers. For research results to affect decisions at the country level, considerable preparatory work in each country must be done to understand the current context and to involve local stakeholders. Follow-up work with country advocates and decision makers is also required to facilitate the translation of findings into changes in policies and programs.
 - ◆ The “before” and “after” work in individual countries also requires serious attention to make sure that regional or sub-regional training courses have an effect on the ground. A training course in itself is only one step in a capacity-building process.
 - ◆ New tools and guidelines require the same type of effort if they are to be effectively embedded in a country context and, therefore, used to maximum effect.
 - ◆ African regional institutions can play an important role in doing the “before” and “after” work. In order to do this effectively, the regional institution or network concerned must:
 - ◆ perceive the research/training/development of new tools as an integral part of its own mandate, and
 - ◆ be able to access adequate financial and technical support.
- B. An important implication of lesson A, for HHRAA and for regional institutions, is that considerable resources are required beyond the funding of research, the development of tools, or the design and organization of a training course. Since a single agency is unlikely to be able to generate sufficient funds, energy must be directed, preferably from the start, to involving various partners in supporting the “before” and “after” work in individual countries.
- C. There are many unexploited resources—individuals and groups—that are willing to do much more in dissemination and advocacy on specific
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Lessons Learned

issues, often with the addition of minimal technical and financial support. The dissemination centers with which SARA has been working in East and Southern Africa are examples of this. The demand that has been expressed in Africa for the SARA Advocacy Training Guide is a further indication.

- D. The role of networks in Africa is evolving. Lessons need to be distilled and shared on promising approaches to making networks effective. Experiences so far show the need:
- ◆ to establish a stable, full-time regional secretariat;
 - ◆ to encourage autonomous national chapters that take initiative and do not wait for a regional secretariat to set directions, find funding, and organize activities;
 - ◆ to clarify and strengthen relationships between regional secretariats and national chapters;
 - ◆ to understand and promote factors likely to motivate active membership;
 - ◆ to be open to a wider range of functions for "research" networks, especially in the areas of dissemination, advocacy, and policy dialogue, necessitating broader network membership than just researchers.

Appendix A: Subcontractors' Activities

Appendix A—Subcontractors' Activities

Tulane University

- ◆ Overall research oversight
- ◆ Ongoing assistance to USAID in the development of their dissemination and advocacy plans in malaria, reproductive health, emerging threats and crisis response, and HIV/AIDS
- ◆ Organization of a special dissemination session of HHRAA-funded study results at the IXth International Conference on AIDS and STDs in Africa, December 1995, Kampala, Uganda
- ◆ Technical assistance to prepare background materials, to organize and to facilitate, and to document the consultative meeting on Crisis Prevention, Mitigation, and Recovery in Africa and participation in the meeting itself
- ◆ Collaboration with WHO/HSR on the design and implementation of their regional assessment of health systems research training in ECSA
- ◆ Development of a strategy guidance paper for USAID, dealing with HIV/AIDS prevention and mitigation in Africa, with special emphasis on successful approaches used by the health and non-health sectors to slow the spread of HIV and reduce the HIV/AIDS impact on development
- ◆ Review of the monograph being written by Johns Hopkins University on the use of insecticide-treated mosquito nets for malaria control in Africa
- ◆ Attendance at the XIth International Conference on AIDS, July 7-12, 1996, Vancouver, Canada and presentation of the two SARA-supported abstracts: 1) the potential risk of HIV and FGM, and 2) priority research issues for HIV/AIDS prevention and mitigation in Africa
- ◆ Technical support for focused consultations on crisis prevention, mitigation, and recovery in West and Central African (WCA) countries.

Morehouse School of Medicine

- ◆ Ongoing assistance to USAID in the development of their dissemination and advocacy plans in population and reproductive health

Appendix A—Subcontractors' Activities

- ◆ With WHO, DHS/Macro (not through the SARA contract) convened a workshop on “The Role of Men in Reproductive Health,” in Senegal. Led by MSM, SARA played a role in this workshop, by offering two days of advocacy training for workshop participants to develop research proposals that might then be funded by WHO itself or in coordination with other donors
- ◆ Provision of technical support to the Reproductive Health Research Network in Francophone Africa for its scientific meeting on “The Role of African Men in Reproductive Health”; and discussion of how to strengthen its planning, organization, and fund-raising capacities
- ◆ Technical support to the CERPOD Regional Advocacy Training Workshop, October 1996, which is a direct outgrowth of the successful advocacy training provided in Dakar in May; the workshop trained a core group of advocates from the Reproductive Health Research Network and CERPOD on reproductive health issues, especially for adolescents

JHPIEGO

- ◆ Ongoing evaluation of regional impact from the “Monograph on Complications of Unsafe Abortion in Africa,” and related policy documents and country reports, based on SARA-funded research
- ◆ Ongoing evaluation of the regional conference on medical barriers to contraception, sponsored by SARA in 1994, and publication of three bulletins on conference impacts on policy

Population Reference Bureau

- ◆ Ongoing assistance to USAID in the development of their dissemination and advocacy plans in population and reproductive health
- ◆ Ongoing technical assistance to CERPOD on the final analysis and publication of their SARA-sponsored research on adolescent reproductive health in the Sahel
- ◆ Provision of technical assistance to CERPOD for the implementation of a 16-month Francophone Africa media project, the “POP’MEDI AFRIQUE” Project. The project aims to inform senior-level

Appendix A—Subcontractors' Activities

print and broadcast journalists about the policy implications of selected themes in the areas of population and reproductive health

- ◆ Trip to Burkina Faso, Côte d'Ivoire, Mali, Mauritania, and Senegal by a PRB journalist to prepare for the senior-level print and radio journalist seminar under the HHRAA-funded "POP'MEDIAFRIQUE" Project
- ◆ A three-day seminar for eighteen participants including twelve journalists and six program officials

Porter/Novelli

- ◆ Technical support in advocacy training at the DHS-sponsored workshop in Dakar, in concert with the Morehouse School of Medicine
- ◆ Ongoing assistance to USAID in the development of their dissemination and advocacy plans in health financing and HIV/AIDS
- ◆ Active participation at the ADDR Conference on "Linking Applied Research with Health Policy," Cuernavaca, Mexico, February 1996.
- ◆ Facilitation and documentation of Consultative meeting on Health Care Financing (HCF) July–August 1996, to share information about current and planned HCF activities and lessons learned, develop objectives and draft strategies for HCF programs within a results framework, and draw up a workplan for the next two years that identifies roles of all HCF players

DHS/MACRO

- ◆ Organization, facilitation and documentation of an advisory meeting on improving the dissemination and use of DHS nutrition materials
- ◆ Collaboration on the joint WHO/DHS workshop in Dakar to allow advocacy training by other SARA collaborating agencies



Appendix B: Deliverables List

Appendix B—List of Deliverables Over the Life of the Project

Appendix B—List of Deliverables Over the Life of the Project

1. *Four regional issues identification workshops, in first fifteen months (1 in education and 1 in HPN, in both anglophone and francophone Africa). Approx. 20 Africans each. 5 days assumed.*

SARA took advantage of a number of conferences and meetings to hold issues identification workshops or discussions with selected African participants at these larger meetings. The number of Africans with whom discussions were held at these meetings is as follows:

+ICN (International Conference on Nutrition)	Rome	Dec 1992	41 Africans
+HIV/AIDS Conference	Yaounde	Dec 1992	24 Africans
+Basic Education	Abidjan	Feb 1993	83 Africans
+IVACG Meeting (Nutrition)	Arusha	Mar 1993	115 Africans
+CCCD Conference	Dakar	Mar–Apr 1993	36 Africans
+Sustainability for HPN	Nairobi	May 1993	5 Africans
+Women’s Health & Nutrition	Bellagio	May 1993	5 Africans
◆Population and Environment	Baltimore	May 1993	3 Africans
◆ERNWACA Launching Conf.	Mali	Sept–Oct 1993	28 Africans
+ICN Follow-up	Nairobi	Dec 1993	20 Africans
+Medical Women’s International Association (MWIA) Meeting	Nairobi	Dec 1993	20 Africans
+HIV/AIDS Conference	Marrakesh	Dec 1993	16 Africans
◆Basic Education	Kadoma	Jan 1994	11 Africans
◆Medical Barriers Conference	Zimbabwe	Jan–Feb 1994	47 Africans
+Health Financing	Dakar	Feb 1994	22 Africans
◆Medical Barriers Conference	Burkina Faso	March 1995	55 Africans

Appendix B—List of Deliverables Over the Life of the Project

◆DJCC Meeting	Nairobi	Aug 1995	30 Africans
+Second African Essential National Health Research (ENHR) Networking Meeting	Harare	Aug 1995	24 Africans
+14th Conference of the Epidemiological Society of Southern Africa (ESSA)	Harare	Sept 1995	25 Africans
+International Union Against Tuberculosis and Lung Disease Conference	Paris	Sept 1995	15 Africans
+Network of Public Health Schools	Brazzaville	Oct 1995	27 Africans
◆CERPOD summary workshop on the HHRAA-supported study of <i>Tendances et determinants de la contraception moderne, comportement et sante reproductive des adolescentes dans le Sahel</i>	Bamako	Oct 1995	20 Africans
+Seventh Meeting of the African Task Force on Food and Nutrition Development	Abidjan	Oct 1995	15 Africans
+Steering Committee of the Union for African Population Studies Small Grants Programme on Population and Development	Dakar	Oct 1995	10 Africans
+Reproductive Health Research Network in Francophone Africa: Scientific Meeting on the Role of African Men in Reproductive Health	Dakar	Nov 1995	85 Africans
+Annual Meeting of the American Society of Tropical Medicine and Hygiene	San Antonio	Nov 1995	20 Africans
+Strategic Planning Meeting for ORANA	Dakar	Dec 1995	12 Africans

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◆HHRAA session at Kampala AIDS Conference	Kampala	Dec 1995	50 Africans
+ADDR Conference on Linking Applied Research with Health Policy	Cuernavaca	Feb 1996	9 Africans
+Biennial Congress of the Nutrition Society of Southern Africa and the Dietetics Association of Southern Africa	Stellenbosch	Mar–Apr 1996	100 Africans
+Workshop on Human Resources and Health Sector Reform	Liverpool	Apr 1996	30 Africans
+DHS/Macro Workshop on “The Role of Men in Reproductive Health”	Dakar	Apr–May 1996	29 Africans
+Workshop on Breastfeeding Choices for the HIV-Infected Mother	Durban	May 1996	50 Africans
◆CERPOD Workshop: Mobilizing The Mdeia: Seminar for Senior Journalists on Adolescent Health	Saly	June 1996	17 Africans
+Eleventh International Conference on AIDS	Vancouver	July 1996	300 Africans
◆ERNWACA Phase III Strategy Workshop	Abidjan	Aug 1996	9 Africans
+Fifth Congress of the Association for Health Information and Libraries in Africa	Brazzaille	Sept 1996	90 Africans
+Joint BASICS/FHA-WCA Meeting on Improving Pre-service Training in Reproductive Health and Child Survival	Ouagadougou	Sept 1996	200 Africans

Appendix B—List of Deliverables Over the Life of the Project

+CESAG-DDM Meeting to Disseminate HHRAA-funded Results of Research in Health Financing Dakar Oct 1996 25 Africans

<p>◆Partially or wholly organized by SARA +SARA Participation</p>

2. *Six consultative meetings in Africa, three each in first two years, 5–10 Africans each. 5 days assumed.*

+Safe Motherhood (World Bank)	Rwanda	Apr 1993	15 Africans
◆CCCD Preconf. Workshop	Dakar	May 1993	36 Africans
+CRHCS/ECSA Regional Scientific Conference on Reproductive Health Research	Lilongwe	Aug 1993	110 Africans
◆ICN Follow-up (group discussion)	Nairobi	Dec 1993	40 Africans
◆HIV/AIDS Preconference Workshop 12 Africans		Marrakesh	Dec 1993
◆Health financing meeting	Dakar	Feb 1994	22 Africans
+WHO Malaria meeting	Kampala	Sept 1994	33 Africans
+Participation in AEAA meeting	Ghana	Sept 1994	50 Africans
+WHO CDD/ARI meeting	Dakar	Oct 1994	60 Africans
+WHO Weaning foods conference	Alexandria	Nov 1994	40 Africans
◆Educational assessment	Mombasa	Dec 1994	14 Africans
+WINS West African nutrition meeting	Burkina Faso	Dec 1994	40 Africans
+WHO Malaria meeting	Bamako	Feb 1995	27 Africans
+REDSO/ESA Integration Meeting	Nairobi	May 1995	50 Africans

<p>◆Group discussions organized by SARA +SARA participation</p>

Appendix B—List of Deliverables Over the Life of the Project

3. Ten consultative meetings in the U.S. 2–3 days. 4 consultants each.

◆Population	Dec 1992	18 participants
◆Population	May 1993	22 participants
+DDM: Private sector for health	Sept 1993	40 participants
◆Health financing	Jan 1994	25 participants
◆STDs	May 1994	28 participants
◆Nutrition	June 1994	27 participants
+Dissemination Strategies	June 1994	12 participants
◆Education	Oct 1994	20 participants
+Malaria	Apr 1995	3 participants
◆Advocacy	Aug 1995	28 participants
◆Education and Health, Nutrition, and Population	Apr 1996	27 participants
◆Crisis Prevention, Mitigation, and Recovery in Africa	June 1996	40 participants
◆Health Care Financing	Jul–Aug 1996	40 participants

◆Organized by SARA +SARA participation

4. A plan for an R&A issues identification and agenda setting process

See document:

The Process of Developing an ARTS/HHR Analytic Agenda

5. Ten collaborative R&A arrangements with African institutions

1. CRHCS: Funding and TA for dissemination activities and research on the consequences of abortion and on nutrition;

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dissemination partners:

Kenya Medical Research Institute (KEMRI)
University of Namibia's Medical Library
University of Zimbabwe's Medical School Library
Tanzania Food and Nutrition Centre
Centre for Educational Development in Health/Arusha,
Tanzania (CEDHA)
Medical Library at the University Teaching Hospital in
Zambia
Health Research Office of the Ministry of Health/
Malawi
Child Health and Development Centre Library in
Uganda

2. CERPOD: Funding and TA for research on adolescents; five-week meeting with TA on data analysis
3. Makerere University: Joint workshop on DHS nutrition data and advocacy
4. ZNFPC: Joint conference on medical barriers to contraception
5. WHO/AFRO: Collaboration on meetings on weaning foods and malaria; planning meeting for the Network of Training and Research Institutions in Public Health in Africa
6. ACI (PSAP research): Funding for research on HIV/AIDS activities in the private sector
7. IPN, Mali: Joint secondary analysis of data on girls education
8. ORANA: Initial contacts made; reorganization meeting planned for Dec. 1996
9. ERNWACA: Technical and financial support for institutional development, research training, electronic linkages, and dissemination; research on conditionality in four WA countries; meeting with regional Education Ministers
10. AEAA: Joint consultative meeting on educational assessment and reform
11. APAC: Joint preparation of key documents for decision-makers

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|----------------|--|
| 12. AAPAH: | Initial contacts with the African Association for the Promotion of Adolescent Health |
| 13. ENHR/ESSA: | Joint meeting on research and policy |
| 14. WHO/HSR | Joint planning for health reform activities |
| 15. SAGO: | Research priorities for reproductive health |
| 16. RHN: | Support for scientific meeting planned for Nov. 1995 |
| 17. REDSO/WCA: | HIV/AIDS specialists for project design team |
| 18. DAE | Research on educational reform in six African countries |
| 19. ERNESA | Support for synthesis documents of gender-related education research |
| 20. CESAG | Curriculum design and testing for Health Economics Master's degree program at CESAG |

6. *Visit REDSOs*

- | | |
|--------------|---|
| Prysor-Jones | Dec. 1992 (W), Feb. 1993 (W), Dec. 1993 (E), Aug. 1994 (E), Apr. 1995 (E), Aug. 1995 (W), Oct. 1995 (E), Jan. 1996 (E), Mar. 1996 (W) |
| Duale | Apr. 1993 (W), Dec. 1993 (E), Sept. 1996 (W) |
| Spain | Mar. 1993 (E) |
| Brace | Feb. 1995 (E) |
| Post | May 1995 (E), May 1996 (E) |
| Piwoz | Jan. 1996 (E) |

(E)=REDSO/ESA, Nairobi
(W)=REDSO/WCA, Abidjan

7. *25 1-day technical advisory expert committee meetings*

- | | |
|---|-----------|
| +Review of proposals on private sector (health) in Africa | Jan. 1994 |
| +Discussion of Population Council Operations Research | June 1994 |
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◆Discussion on Male Involvement in Family Planning	June 1994
+WHO meeting on research priorities for Integrated Management	June 1994; Jan. 1995
+Basic Education Meeting, Washington	June 1994
+Meeting on integrated vs. vertical family planning	July 1994
+WELLSTART Expanded Program on Breastfeeding	Jan. 1995
+World Bank meeting on Better Health in Africa initiative	Feb. 1995
+JHPIEGO workshop on management of STDs in FP	April 1995
◆Review of proposal for a monograph on bednets by JHU	Sept. 1995
◆Advisory meeting on improving the dissemination and use of DHS nutrition materials, particularly in Africa	Dec. 1995

◆Organized by SARA +SARA participation

8. Dissemination strategies in Africa

1. Development of electronic linkages with partner institutions
2. Training for advocacy (Makerere workshop model)
3. Washington Advocacy workshop; one-day training module being developed
4. Presentations to ECSAHC Health Ministers
5. Training at APHA Informational Outreach workshop for five African information professionals
6. Supported dissemination by African networks (ERNWACA, ECSAHC)
7. ECSAHC regional workshop on Information Dissemination for Better Health, Arusha, February 1995
8. Sending Africans to key meetings for research dissemination [Adelaide (nutrition); Mauritius (education, finance), Bangalore (child survival), Kisumu (malaria), Alexandria (nutrition), Malawi (health reform), Kampala (HIV/AIDS), Geneva (health reform), Cairo (child survival), Harare (health

Appendix B—List of Deliverables Over the Life of the Project

research), Brazzaville (health professional training), Paris (respiratory disease), San Antonio (malaria)

9. Training of high-level key journalists
10. (Indirect method) Presentations for A.I.D. and A.I.D.-funded projects (BASICS on Nutrition, Sahel Office on Child Survival)
11. HHRAA/SARA documents on the HealthNet
12. Participation in USAID's Leland Initiative discussions
13. Advisory meeting on improving the dissemination and use of DHS nutrition materials, particularly in Africa
14. Dissemination plans developed with CERPOD for *Les Jeunes en Danger*
15. Newly developed Advocacy Training Guide drafted and tested with researchers in Dakar and Bamako
16. Appropriate materials sent to ECSA Dissemination Centers for distribution
17. Annotated bibliographies for reproductive health and nutrition and their databases prepared by two ECSA Dissemination Centers; bibliographies disseminated in their countries
18. Dissemination seminar on the consequences of unsafe abortion in Zimbabwe designed and hosted by the Zimbabwe Dissemination Center
19. SARA participation in 5th International Congress of the Association for Health Information and Libraries in Africa, and panel presentation by ECSA Dissemination Centers

9. *8 regional dissemination workshops*

- | | |
|--|-----------|
| ◆1. Financing Sustainability meeting, Nairobi | May 1993 |
| +2. Nutrition strategies for ECSAHC | Nov 1993 |
| +3. Basic education meeting, Kadoma | Jan 1994 |
| ◆4. Medical barriers conference, Zimbabwe | Feb 1994 |
| +5. Research methodologies for education, Gambia | June 1994 |
| ◆6. Nutrition advocacy workshop, Makerere | Nov 1994 |

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+7. WHO Weaning foods meeting, Alexandria	Nov 1994
◆8. Educational testing and reform, Mombasa	Dec 1994
+9. CRHCS Chairpersons meeting on Breastfeeding and Child Feeding, Nairobi	Apr 1995
◆10. CERPOD meeting on Analysis of Data from the Adolescents Study	Sept–Oct 1995
+11. ECSAHC meeting on consequences of abortion	Aug 1995
◆12. SAGO Preconference meeting	Dec 1994
+13. Medical Access and Quality conference, Burkina Faso	Mar 1995
+14. REDSO/ESA Integration Meeting	May 1995
+15. DJCC meeting on Health Reform	Aug 1995
◆16. CERPOD summary workshop on adolescent health in the Sahel	Oct 1995
+17. Reproductive Health Research Network: Role of African Men in Family Planning	Nov 1995
◆18. HHRAA session at Kampala AIDS Conference	Dec 1995
+19. DHS/Macro-WHO workshop: The Role of Men in Reproductive Health	Apr–May 1996
◆20. CERPOD/PRB: Mobilizing the Media: Seminar for Senior Journalists on Adolescent Health	June 1996
+21. 5th Congress of Association for Health Information and Libraries in Africa	Sept 1996

<p>◆Organized by SARA +SARA participation</p>

10. 22 follow-up TA activities involving 2 people for 14 days each

1. TA for non-project assistance (NPA) meeting in Niger
2. TA on presentation of nutrition data to ECSAHC ministers

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3. TA on dissemination strategies to ECSAHC
4. TA on research on consequences of abortion to ECSAHC
5. TA on research design to CERPOD
6. TA on quantitative methods to CERPOD
7. TA on qualitative methods to CERPOD
8. TA on research methodologies to ERNWACA
9. TA on dissemination strategies to ERNWACA
10. TA on development of regional project to REDSO/WCA
11. TA on designing workshop on advocacy to Makerere University
12. TA to ECSAHC to prepare regional workshop on health reform
13. TA to ECSAHC to develop dissemination materials on the consequences of abortion
14. TA to BASICS in West Africa on the use of PROFILES
15. TA to CERPOD to design and facilitate dissemination workshop
16. TA to ERNWACA for the analysis of data gathered by the BEEP Project
17. TA to ERNWACA for the publication of a synthesis of their research studies
18. TA to CERPOD to develop The Indicators Project
19. TA to National African Malaria Program Managers on proposal development
20. TA to ORANA to prepare strategic planning meeting
21. TA to ZNFPC to prepare medical barriers meeting
22. TA to REDSO/ESA for the organization and implementation of two regional meetings
23. TA to ECSAHC for meeting in Nairobi on Breastfeeding and Child Feeding (jointly with WELLSTART)

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24. TA to AFR/SD/HRD on the design of program management software
25. TA on the evaluation of the use of nutrition-related data contained in the DHS Reports and the Nutrition Chart Books in relevant African countries.
26. TA to six African researchers on the production of six case studies on education policy formation in Africa
27. TA to the Association for Educational Assessment in Africa (AEAA) to organize and facilitate Mombasa meeting on educational assessment
28. TA to AFR/SD/HRD relating to their Performance Measurement and Evaluation Systems
29. TA to AFR/SD/HRD to organize and facilitate staff retreat and meetings of cooperating agencies
30. TA to AFR/SD/HRD to produce review of literature on education-health program linkages
31. TA to AFR/SD/HRD to produce computer-based mathematical models of tuberculosis cases linked to HIV
32. TA to AFR/SD/HRD on the development of an assessment tool and a manual for national authorities relating to Integrated Child Management
33. TA to AFR/SD/HRD on the development of an assessment tool and a manual for national authorities relating to Integrated Child Management
34. TA to AFR/SD/HRD to review literature on decentralization of education services
35. TA to AFR/SD/HRD to review literature on the use of conditionality in support of education policy reform
36. TA to AFR/SD/HRD to produce summary of literature on the role of teachers in implementing policy, with annotated bibliography and field-research framework
37. Ongoing Taby ACI to CERPOD for production of “Jeunes en Danger”, the report from the SARA-sponsored research on adolescent reproductive health in the Sahel
38. TA to ORANA for the planning of their regional activities

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39. TA to ERNWACA for the organization of their August 1996 workshop
40. TA to SateLife for installation of HealthNet in West Africa
41. TA to WHO/HSR in Harare for the assessment of regional health-research training
42. Development of a strategy guidance paper about AIDS in Africa for USAID
43. A technical paper and consultation on civil-military collaboration on AIDS in Africa
44. TA to USAID/Bamako on a child-survival strategy
45. TA to ERNWACA for evaluation
46. Peer view of Johns Hopkins monograph on bednets for malaria control
47. TA to SD/HRD for their annual report
48. Literature review of literacy and NFE programs in Africa
49. Background paper for CILSS strategic planning
50. TA to SD/HRD for Consultations on Crisis Prevention, Mitigation, and Recovery in West and Central Africa
51. TA by ACI to the World Bank for the organization of their West Africa BHA meeting
52. TA by ACI to USAID for the organization of a West Africa health donors' meeting
53. TA by ACI to CERPOD on the Indicators Project
11. *24 Technical reports, 20 technical bulletins—200 copies each. Ten documents translated into French.*
 1. Monograph on research on infant feeding*
 2. Strategic framework for integrated case management
 3. African Population Programs*
 4. Impact of HIV/AIDS on Population*

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5. Reliability of Population Data*
6. Proceedings of Population and Environment Meeting
7. Strategic framework for safe motherhood and reproductive health
8. Editing, production, and translation of DFA report*
9. Summary of Educational Policy Formulation in Africa
10. Translation of World Bank Nutrition document on experiences of nutritional programs in Africa*
11. Report of the Zimbabwe Medical Barriers Conference*
12. Report on NPA in Niger
13. Synthesis and dissemination of NAS books on population dynamics*
14. Strategic framework for basic education
15. Electronic linkages in Africa
16. Strategic framework for finance and sustainability
17. USAID Child Survival Strategy for Africa (draft)
18. Education conference report (Kadoma)
19. AIDSCOM report of lessons learned
20. Strategic framework for malaria
21. Strategic framework for nutrition
22. Utilization of knowledge in policy formulation
23. Strategic framework for behavior change
24. Dissemination issues paper
25. Synthesis of Better Health in Africa*
26. Strategic framework for HIV/AIDS, STIs, and TB

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27. Report on qualitative findings relating to adolescents and family planning in the Sahel
28. Female Genital Mutilation and AIDS
29. Report on the use of DHS nutrition data
30. Monograph on consequences of abortion in ECSAHC
31. Policy booklet on the consequences of unsafe abortion in ECSAHC
32. Guidelines for preparation of integrated case management of sick child
33. Monograph on programs to improve infant feeding practices
34. Providing services for STIs within other health programs
35. Strategic framework for population and family planning
36. Summary of HHRAA Strategic Frameworks.*
37. Synthesis of state-of-the-art on education research in West Africa (ERNWACA)*
38. Report on linkages between TB and HIV/AIDS
39. CDD and ARI programs in Sub-Saharan Africa
40. Designing by dialogue: consultative research for improving young child feeding (working draft)
41. Education-health linkages in child development: a guide to resources (draft)
42. Health education in Ghana: a case study of institutional capacity building (draft)
43. HealthNet in Africa: directory of users
44. Integrating family planning and MCH services with STD/HIV prevention: summary of an evaluation of intervention and policy options in Botswana
45. The Time to Act: Women's Nutrition and It's Consequences for Child Survival and Reproductive Health in Africa (draft)

*French version available

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12. 10 innovative dissemination tools, \$15K each

1. Participation of African documentalists in APHA training. June 1993.
2. Presentation (PROFILES) on Nutrition to ECSAHC Health Ministers meeting (November 1993) and in Senegal (August 1995)
3. Electronic connectivity for ECSAHC and ERNWACA networks
4. Workshop for high-level francophone African journalists
5. Use of the Internet for dissemination of HHRAA/SARA documents
6. Use of African information centers for dissemination
7. Development of advocacy training modules
8. Development of HHRAA e-notes
9. Ongoing development of HHRAA home page on the World Wide Web
10. Development of "HHRAA Highlights," occasional technical bulletin

13. MIS

Paul Mannes Software package

Maureen Norton monitoring consultancy

in-house billing number/category tracking

cable tracking system

document tracking system

Appendix C: Dissemination/Publications List

Appendix C—Dissemination/Publications List

Appendix C—Dissemination/Publications List

SARA Project Publications (Year 4)

- Cadres stratégiques HHRAA pour la Santé, la Population, la Nutrition et l'Education de base en Afrique: Un récapitulatif*, Academy for Educational Development, SARA Project, Washington, DC (April 1995) French version (1996) 66 pp.
- CDD and ARI Programs in Sub-Saharan Africa: Redefining Their Roles in a Changing Context (draft)*, Hugh Waters, Academy for Educational Development, SARA Project, Washington, DC (April 1996) 16 pp.
- Designing by Dialogue: Consultative Research for Improving Young Child Feeding (working draft)*, Kate Dicken and Marcia Griffiths, The Manoff Group and Ellen Piwoz, Academy for Educational Development, SARA Project, Washington, DC (March 1996)
- Developing a Framework and Agenda for Sexually Transmitted Disease Research in Africa*, Morehouse School of Medicine, Atlanta, GA; Academy for Educational Development, SARA Project, Washington, DC: Summary Document from a Consultative Meeting (February 1996) 31 pp. + annexes.
- Education-Health Linkages in Child Development: A Guide to Resources (draft)*, Kaaren Christopherson, Academy for Educational Development, SARA Project, Washington, DC; AFR/SD, HHRAA Project, Washington, DC (May 1996) 154 pp.
- Fact Sheet on Malnutrition and Education in Africa*, Academy for Educational Development, SARA Project, Washington, DC (1996) 2 pp.
- Fact Sheet on Reproductive Health Overview and Linkages to Education in Sub-Saharan Africa*, Population Reference Bureau, SARA Project, Washington, DC (1996) 2 pp.
- Health Education in Ghana: A Case Study of Institutional Capacity Building (draft)*, Hugh Waters, Academy for Educational Development, SARA Project, Washington, DC (June 1996) 11 pp.
- HealthNet in Africa: Directory of Users*, Gail Kostinko, Academy for Educational Development, SARA Project, Washington, DC (May 1996)

Appendix C—Dissemination/Publications List

Integrating Family Planning and MCH Services with STD/HIV Prevention: Summary of an Evaluation of Intervention and Policy Options in Botswana, May Post, Tulane School of Public Health and Tropical Medicine, New Orleans, LA; Academy for Educational Development, SARA Project, Washington, DC; AFR/SD, HHRAA Project, Washington, DC (December 1995) 7 pp.

An Introduction to Advocacy: Training Guide (draft), Ritu R. Sharma, Academy for Educational Development, SARA Project, Washington, DC; AFR/SD, HHRAA Project, Washington, DC (1996)

MAQ Bulletin: Issue No. 2, JHPIEGO, SARA Project, Baltimore, MD (February 1996) 8 pp.

Overview of AIDSCOM Lessons Learned, Academy for Educational Development, SARA Project, Washington, DC; USAID, Washington, DC (1993) 14 pp. French version (August 1996).

Policy and Program Implications of HIV/AIDS Research Findings: Prevention and Mitigation of the HIV Pandemic in Africa, Academy for Educational Development, SARA Project, Washington, DC: Summary Report of a Satellite Workshop Held at the IXth International Conference on AIDS and STDs in Africa; Kampala, Uganda (December 1995) 15 pp. + annexes.

The Time to Act: Women's Nutrition and its Consequences for Child Survival and Reproductive Health in Africa (draft), Jean Baker, Luann Martin, Ellen Piwoz, Academy for Educational Development, SARA Project; Washington, DC (July 1996) 41 pp.

Publications in Production

AIDS Briefs, Tony Barnett, Erik Blas and Alan Whiteside, Series editors, produced and printed by Academy for Educational Development, SARA Project, Washington, DC (October 1996)

Approaching Decentralization Research in African Education Systems, Mark Sommers, Academy for Educational Development, SARA Project, Washington, DC

Decentralizing Education: The BESO/Tigray Case Study, A Summary, Paula Whitacre, Academy for Educational Development, SARA Project, Washington, DC

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Educational Decentralization in Africa: As Viewed Through the Literature and USAID Projects, Paula Whitacre, Academy for Educational Development, SARA Project, Washington, DC

Educational Research Information for Practitioners, Educational Research Network in Eastern and Southern Africa (ERNESA) Secretariat and Academy for Educational Development, SARA Project, Washington, DC, (October 1996) 48 pp.

Guide for the Introduction of Integrated Management of Childhood Illness (final draft), Mariam Claeson, Academy for Educational Development, SARA Project, Washington, DC; AFR/SD Washington, DC (September 1996)

Guide for Researchers, Robert Porter and Suzanne Prysor-Jones, Academy for Educational Development, SARA Project, Washington, DC

Health and Health Systems in the Sahel, Hugh Waters, Academy for Educational Development, SARA Project, Washington, DC; in English and French.

An Introduction to Advocacy: Training Guide (draft) — French version, Ritu R. Sharma, Academy for Educational Development, SARA Project, Washington, DC; AFR/SD, HHRAA Project, Washington, DC (1996)

Male Involvement in Family Planning: A Review of the Literature and Selected Program Initiatives in Africa, Lalla Touré, Morehouse School of Medicine, Atlanta, GA; Academy for Educational Development, SARA Project, Washington, DC

Overlooked and Undervalued: A Comprehensive Review of Educational Research in West and Central Africa, Richard Maclure, Academy for Educational Development, SARA Project, Washington, DC; English and French

SARA Project Publications (Years 1–3)

AIDSCOM Lessons Learned: AIDS Prevention in Africa, 1993. AIDSCOM staff.

An Assessment of the Dissemination and Use of DHS-Related Nutrition Documents in Africa, 1995. Martita Marx.

Female Genital Mutilation and the Risk of HIV, 1995. May Post.

Improving Feeding Practices During Childhood Illness and Convalescence (English & French), 1994. Ellen Piwoz.

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Knowledge Utilization and the Process of Policy Formation, 1994. Robert Porter.

The Population Dynamics of Sub-Saharan Africa (English & French) (photocopy only), 1994. Synthesis prepared by Kenneth Hill, Barney Cohen, Karen Foote, and Carole Jolly.

Profiles of Electronic Networking Initiatives in Africa, 1994. Gail Kostinko.

Providing Services for Sexually Transmitted Infections Within Other Health Programs, 1995. May Post.

Regional Initiatives for Capacity Building in the Health Sector, 1995. Hugh Waters.

SARA Advocacy Workshop Report, 1995. Ritu Sharma.

Sustainable Development: Population and the Environment, 1994. Cynthia P. Green, Editor.

Summary and set of 10 Strategic Frameworks, 1995. SARA Project.

Action for Better Health in Africa, 1994 (with the World Bank). Prepared by Victoria Ebin.

Enhancing the Contribution of the Health Sector in the Prevention of Malnutrition (with the World Bank)

Co-produced Publications

Addressing the Complications of Unsafe Abortion in Sub-Saharan Africa:

Programme and Policy Actions, Commonwealth Regional Health Community Secretariat (CRHCS), Arusha, Tanzania and Academy for Educational Development, SARA Project, Washington, DC (August 1996) 18 pp.

Les Jeunes en Danger, Santé de la Reproduction au Sahel, CERPOD, Bamako, Mali and Academy for Educational Development, SARA Project, Washington, DC (August 1996) 49 pp.

Documents produced by SARA for HHRAA during Project Year 4

Annotated Bibliography, Renuka Bery, Academy for Educational Development, SARA Project, Washington, DC (July 1996)

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Dissemination and Advocacy for the HHRAA Project: Guidelines and Strategies (working draft), Academy for Educational Development, SARA Project, Washington, DC; AFR/SD, HHRAA Project, Washington, DC (October 1995) 41 pp.

HHRAA Web Site, Bret Harris, Academy for Educational Development, SARA Project, Washington, DC (September 1996)

Setting Priorities for Research, Analysis and Information Dissemination on Private Health Sector Development in Africa (Reprint), Ravindra P. Rannan-Eliya and Peter Berman, Harvard School of Public Health, Data for Decision Making Project, Boston, MA; Academy for Educational Development, SARA Project, Washington, DC; AFR/SD, HHRAA Project, Washington, DC; Strategic Framework for Research, Analysis and Dissemination Series, No. 11 (May 1995) 47 pp.

SARA 1996 Trip Reports

Côte d'Ivoire, Senegal and Mali. October 1-13, 1995. Suzanne Prysor-Jones.

Third Meeting of the Network of African Post Graduate Training and Research Institutions in Public Health. Brazzaville: Oct 2-6, 1995. Sambe Duale.

Participation in the WHO/UNICEF Consultation on the State-of-the-Art Paper on Complementary Feeding. France: Nov 27-30, 1995. Ellen Piwoz.

Meeting of the Reproductive Health Research Network for Francophone Africa. Dakar: November 27 - December 1, 1995. Lalla Touré and Suzanne Prysor-Jones.

ORANA Strategic Planning Meeting, Meetings with BASICS Regional Staff, CESAG, and the African AIDS Research Network. Dakar, Senegal: December 4-15, 1995. Suzanne Prysor-Jones.

Assistance to ERNWACA. Bamako: December 6-15, 1995. Jean-Georges Dehasse.

Exploratory Assessment of Nutrition Networks and Centers of Excellence. Kenya, Tanzania, Zimbabwe: January 19-26, 1996. Ellen Piwoz and Suzanne Prysor-Jones.

"Networking the Networks" Meeting, WHO/AFRO Integrated Case Management Meeting, Meeting with the HSR Team and WHO/AFRO. Zimbabwe, Congo: Jan 19-Feb 2, 1996. Suzanne Prysor-Jones.

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Meeting with USAID REDSO/WCA, BASICS, CESAG, the Western African Research Network, CERPOD and ORANA. Dakar: March 7-11 and 16-23, Abidjan: March 11-16, 1996. Suzanne Prysor-Jones.

Assistance to ERNWACA. Senegal: March 22-28, 1996. Jean-Georges Dehasse.

Media Project: Population Reference Bureau, SARA, CERPOD. Bamako, Ouagadougou, Abidjan, Nouakchott, Dakar: April 15-May 14, 1996. Victoria Ebin.

Meeting on Human Resources Development at the Liverpool School of Tropical Medicine and Development of a Child Survival Strategy for the USAID Mali Mission. Liverpool: April 16-19, Bamako: April 22-May 3, 1996. Suzanne Prysor-Jones.

SARA Advocacy Training at the DHS/Macro/WHO Sponsored Workshop on "The Male Role in Fertility, Family Planning, and Reproductive Health." Dakar: May 21-31, 1996. Lalla Touré.

Technical Assistance to Initiate a Regional Assessment of Health Systems Research Training in Eastern and Southern Africa. Harare: June 18-25, 1996. Sambe Duale.

Mobilizing the Media in Selected Francophone Countries - Summary of the HHRAA Project's Senior Journalist and Health Professional Seminar on Adolescent Reproductive Health. Saly: July 25-27, 1996. Victoria Ebin.

Meeting with African Partners in Senegal. Dakar, Senegal: August 15-23, 1996. Suzanne Prysor-Jones.

Assisting Education Research Network of West and Central Africa (ERNWACA). Grand Bassam, Côte d'Ivoire: August 19-26, 1996. Jean-Georges Dehasse.

Conferences and meetings in Burkina Faso and Dakar, Senegal. Burkina Faso and Senegal: September 24-October 11, 1996. Suzanne Prysor-Jones.

Trip Reports in Progress

Association of Health Information Libraries Association (AHILA) Meeting in Brazzaville. Brazzaville, Congo: September 23-28, 1996. Judy Brace.

Crisis Prevention and Mitigation trip to West Africa: Liberia, Sierra Leone, Burkina Faso, September 4-27, 1996. Sambe Duale.

Appendix D: Conferences and Meetings Organized

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Consultative meeting on Crisis Prevention, Mitigation and Recovery in Africa	Washington	June 1996
Consultative meeting to identify gaps in current knowledge about programmatic linkages between education and health, nutrition, and population	Washington	April 1996
Consultative meeting on Health Care Financing	Washington	Jul–Aug 1996
Advocacy training for DHS workshop participants	Dakar	May 1996
Advisory meeting on dissemination of DHS materials	Washington	July 1996
CERPOD three-day seminar for journalists and program officials on population issues	Bamako	June 1996
ERNWACA strategy workshop with the participation of ERNWACA National Coordinators and ERNESA representatives	Abidjan	Aug 1996

**Appendix E: Conferences Attended by
SARA Staff and Consultants**

Appendix E—Conferences Attended

**Appendix E—Conferences Attended by SARA Staff
and Consultants**

Third Meeting of the Network of Postgraduate Public Health Training and Research Institutions in the African Region	Brazzaville	Oct 1995
CERPOD “Tendances et determinants de la contraception moderne, comportement and santé reproductive des adolescentes dans le Sahel”	Bamako	Oct 1995
Steering Committee of the Union for African Population Studies Small Grants Programme on Population and Development	Dakar	Oct 1995
Seventh Meeting of the African Task Force on Food and Development Annual Meeting of the American Society of Tropical Medicine and Hygiene	Abidjan	Oct 1995
Annual Meeting of the American Society of Tropical Medicine and Hygiene	San Antonio	Nov 1995
Planning meeting for renewal of ORANA	Dakar	Nov 1995
IXth International Conference on AIDS and STD in Africa	Kampala	Dec 1995
Scientific Meeting of the Reproductive Health Research Network in Francophone Africa	Dakar	Dec 1995
ADDR Conference on “Linking Applied Research with Health Policy”	Mexico	Feb 1996
Biennial Congress of the Nutrition Society of Southern Africa and the Dietetics Association of Southern Africa	Stellenbosch	Apr 1996
WHO/DHS workshop on “The Role of Men in Reproductive Health”	Dakar	May 1996
Workshop on Human Resources and Health Sector Reform	Liverpool	Apr 1996

Appendix E—Conferences Attended

Workshop on Breastfeeding Choices for the HIV-Infected Mother	Durban	May 1996
XI International Conference on AIDS	Vancouver	July 1996
Consultative meeting on Health Care Financing	Washington	July 1996
Advisory meeting on improving the dissemination and use of DHS nutrition materials	Washington	July 1996
ERNWACA Phase III strategy workshop	Abidjan	Aug 1996
Consultative meeting on Civil-Military Collaboration for HIV/AIDS Prevention and Mitigation in Africa	Washington	Sept 1996
Fifth Congress of the Association for Health Information and Libraries in Africa	Brazzaville	Sept 1996
DDM Workshop for the dissemination of health-financing studies	Dakar	Sept 1996
World Bank meeting on its Better Health in Africa initiative	Dakar	Sept 1996
CESAG meeting to review the design of a Masters in Health Economics curriculum for Francophone Africa	Dakar	Oct 1996

Appendix F: Consultant Activities

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Consultants hired under the SARA Project during FY96

Lindsay Allen 10 days

Produce, with Kenneth Brown of the University of California/Davis, a state-of-the-art document on complementary feeding.

Jean Baker 15 days

Review issues paper on maternal nutrition and draft a summary document.

6.06 days

Assist in the advocacy and dissemination of an issues paper on integrating maternal nutrition into child survival, reproductive health, family planning, and HIV/AIDS programs in Africa. Finalize the paper.

Renuka Bery 16 days

Work with Subhi Mehdi to identify those HHRAA publications that should be included in a publications list and warrant an abstract in that listing. The entries for publications list will give consistent information about the document in a standard bibliographic format.

Aliou Boly 47 days

Serve as interim ERNWACA Regional Secretary. Establish appropriate financial systems for ERNWACA; prepare documentation and arrange to fulfill other requirements for ERNWACA's grantee status; prepare and organize August workshop; organize technical assistance for transnational research agenda; assist with organizational development of national chapters and develop up to three proposals for fund raising.

James Chin 25 days

Conduct a study to estimate TB among HIV negative persons.

Mariam Claeson 18 days

Develop an assessment tool and suggest processes to guide national authorities in preparing for an integrated approach to the management of childhood illness, taking into account the specific country context; she will work in close collaboration with WHO

Appendix F—Consultant Activities

and BASICS and with other partners. Work includes preparation of draft assessment tools and guidelines; review by collaborators; finalization of draft; field testing; finalization and dissemination.

Jean-Georges Dehase 89.5 days

Serve as an education/institutional development specialist for the strengthening of educational research capabilities in Africa through the institutional development of ERNWACA and the implementation of the SARA dissemination strategy.

Kathryn Dewey 10 days

Produce, with Kenneth Brown of the University of California/Davis, a state-of-the-art document on complementary feeding.

Katherine Dickin 26 days

Plan the field testing of the *Designing by Dialogue* manual in coordination with Freedom from Hunger representatives in the United States. She will then travel to Ghana to meet with FFH/Ghana representatives to discuss the manual and will assist FFH/Ghana with the analysis and interpretation of their consultative research results. She will prepare a detailed report on these activities with recommendations for improving the manual.

Susan Fisher-Owens 26.63 days

Provide research support for a presentation to be given by Abraham Bekele. The consultant will 1) collect and analyze the latest available data on health financing in sub-Saharan Africa; 2) prepare summaries of examples of 'best practices' in subject areas listed below; and 3) provide bibliographic notes and collect latest publications, in order that Dr. Bekele can incorporate this information into his presentation.

Maurice Garnier 10 days

Collaborate in the ERNWACA evaluation. Discuss evaluation strategies with the ERNWACA Regional Secretary, the IDRC Regional Representative and the IDRC evaluator and develop consensus on the evaluation methodology and sequence. With Luc Gilbert he will work on an implementation plan for the evaluation and they will outline the final report. In the United States, Garnier will continue to gather data from American-based entities and will work with Gilbert to prepare the draft for the final report.

Appendix F—Consultant Activities

Luc Gilbert

35 days

Conduct, with Seguin Compaoré, the ERNWACA evaluation and meet in Bamako with the ERNWACA evaluation team. He will then travel with Mr. Compaore of IDRC to gather data in three ERNWACA countries. He will then work with Dr. Garnier on the draft of the evaluation.

Gail Kostinko

58 days

Assist SARA in the implementation of the information dissemination strategy, with a particular emphasis on working with SARA partner institutions in Africa. Assist in electronically connecting to the appropriate in-country networks and in using this capacity appropriately for information collection and dissemination; assist in identifying and using appropriate CD-ROM resources. Ensure that in-country electronic training capacities are identified and training plans developed for these institutions' designated staff. Work with SARA to make sure it effectively using electronic mediums.

Michelle Kuenzi

35 days

Conduct field research entitled "Empowerment through Nonformal Education in Senegal." This study will look at the relationship between literacy training and a series of variables, including health and family planning variables, related to independence and self-reliance.

Grace Lang

150 days

Provide assistance to conduct research in Namibia and Malawi related to the process of implementing policy and to the school as a unit of change; provide assistance analyzing these research studies and disseminating the findings.

Mildred Morton

4.25 days

Review and edit the draft manual of "Improving Young Child Feeding: Research and Training Guidelines for Planning Community and Household Actions." Will submit edits to SARA.

5 days

Meet with AED and MACRO organizers to assist with planning the agenda for the day-long meeting. She will also facilitate the meeting itself and assist AED and MACRO with the final report.

Appendix F—Consultant Activities

1.25 days

Assist with the planning and facilitation of meetings to develop a workplan for USAID's health financing activities in Africa.

Jeanne Moulton 12 days

Rationalize the descriptions of programs in 12 countries to produce a consistent voice and similar categories of information; edit background sections.

20.5 days

Participate in a conference on "Operationalizing Education-Health, Nutrition, Population (EHNP) Linkages" and will produce the conference report. The report will follow the organization of the conference itself, and will conclude with a recommendations section based on consensus recommendations from the participants themselves.

9.5 days

The consultant will do a survey of professionals in education-health/population/nutrition sectors to identify and document cross-sectoral programs instructive to Africa and to provide an assessment of the status of education-health programming in Africa. The consultant will be given an initial list of contacts; she and SARA will develop a phoning schedule, and will interview the contacts for relevant project information, implementation issues, policy issues, monitoring and evaluation status, etc. This information will form the basis for a series of summaries of these projects or activities and a brief state-of-the-practice overview analysis.

15 days

Carry out a literature review and document the reviews of the research design of the work going on in Senegal. She will search out and comment on empirical studies of the relationship between adult education in developing countries, personal empowerment, and social/economic development indicators.

Lisa L. Bekett Mount 148 days

Provide assistance to conduct research in Namibia and Malawi related to the process of implementing policy and to the school as a unit of change; provide assistance analyzing these research studies and disseminating the findings.

Appendix F—Consultant Activities

Sidney Ndeki

50 days

Collect information about health-research curricula and teaching in higher-learning institutions in Uganda, Malawi, Zambia and Zimbabwe. Target institutions will include Public Health Masters degrees, University Nursing degrees, Masters of Medicine in Community Health courses, and fourth-year medical Community Medicine courses. The consultant will also seek to assess the acceptability and relevance of the health-research curriculum, and its utility for both faculty and student researchers.

Marc Sommers

30 days

Prepare a detailed case study of the education decentralization study in Tigray, Ethiopia bridging activities with BESO.

Paula Tarnapol

28 days

Synthesize an Education Unit report on "Decentralization in the Tigray Region of Ethiopia." Tarnapol will write a synthesis report and produce a desk-top published version of the report. She will reproduce 300 copies of the report to be distributed at the USAID Education Conference in South Africa. She will also summarize information gathered through a literature review of education decentralization, with particular emphasis on Africa and on USAID's role in this effort.

Hugh Waters

4.15 days

Conduct various tasks for the SARA project; most notably, in the analytic areas of Health Financing and Sustainability and Behavior Change, and in writing documents related to Child Survival, NGOs and integration of health education activities.

29.75 days

Provide a copy of the most recent version of the NGO questionnaire and a copy of his draft paper detailing the findings of that survey; gather additional input from PCS personnel in Ghana, and provide a revised version of the paper he has been preparing under an earlier SARA task order; solicit input from Dr. Mariam Claeson at the World Bank, who is completing the Integrated Child Management guide.

Appendix G: Task Order Tracking List

Appendix G—Task Order Tracking List

This is a list of all task orders approved in Project Year 4. Task orders whose numbers are out of sequence (that is, those prior to Task Order 269) are amendments to task orders signed earlier.

85C. Additional days for May Post

PRODUCTS: Dr. Post has completed, finalized and submitted the strategic framework on HIV/AIDS, STDs and Tuberculosis in Africa. The first draft of the strategic framework was presented by Dr. Post at the Consultative Meeting on Priority Research Issues for Prevention and Control of Sexually Transmitted Diseases held at AED. In addition, she has completed and submitted to AFR/ARTS an issues paper: "Adding Sexually Transmitted Diseases Services to Other Health Programs." She also co-developed the strategic framework for Safe Motherhood and Reproductive Health with Drs. Touré and Duale.

Dr. Post also has written a draft issues paper "Providing Sexually Transmitted Diseases Services in Other Health Programs" and is in the process of writing the second draft. She has also drafted a proposal to do a study on "Providing STD Services in FP/MCH Programs: From the Perspective of Service Providers." This would be a small qualitative assessment of integration issues—what works, what does not, what more can be done—from the perspective of service providers already working in integrated clinics. The questionnaire for the survey would be based on the issues raised in the first issues paper, and the information collected from the survey would be useful in the design of integrated service delivery systems and the improvement of the quality of on-going ones. Dr. Post initially intended the proposal for three Anglophone countries, but with the assistance of Lalla Touré, has added three Francophone countries. The proposal has been sent to AFR/SD/HRD.

Dr. Post's paper on "FGM and the Risk of HIV Infection" is now in the third phase of the Delphi survey—that is, the second draft report which incorporates comments and information received during the second phase of the survey has been sent back to the resource persons for additional information and comments. The next step—the last phase—will be the writing of the final report. This paper will also be presented as a poster presentation at the NCIH Conference on Violence in June.

Dr. Post and Duale Sambe attended an STD integration and research meeting at the Africa Bureau with Lenni Kangas, Hal Davis, and Bill Lyerly. There was agreement that the current "disarray" concerning STD-related research

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stemmed from implementing agencies basically doing their own research agendas, and that there is need for guidelines regarding STD integration-related research as well as a need for coordination of activities. With these points in mind, the group agreed on the need for a meeting involving USAID and implementing agencies doing STD-integration related research. STD integration might be with family-planning programs, or with MCH programs, or some other programs, depending on the setting.

An STD-Research Integration Working Group was also formed, consisting of Paul DeLay, Lenni Kangas, Hal Davis, Trish Coffey, and May Post, with Dr. Post to organize a pre-meeting brain storming session for the core group members (plus Bill Lyerly, Jim Sheppard, and Duale Sambe) to identify minimum essential characteristics or themes for STD integration case studies. These case studies will be one of the items on the agenda for the working-group meeting; conclusions from the brainstorming session will be used as guidelines when discussing integration case studies.

In August 1996, USAID circulated e-note #16 "Women and HIV/AIDS," written by May Post. Almost immediately, Dr. Post received a series of requests for additional copies and notifications that the paper had been circulated widely to other agencies by those who received it. Dr. Post has been invited to make a presentation at the Global Bureau, and encouraged to publish her paper in journals reaching the foreign-service community.

144A. Follow-up activities relating to the HHRAA/JHPIEGO/SARA/ ZNFPC-sponsored Zimbabwe Reduction of Medical Barriers re- gional workshop

PRODUCTS: The third MAQ Anglophone Bulletin and an evaluation report have now been produced.

Over 30 changes in policies, procedures, and strategies in three countries have been documented in these bulletins, as workshop outcomes. Zimbabwe, Kenya, and Botswana have changed policies in such areas as reducing client restrictions, improving counseling and management policies, expanding family planning services, decreasing provider limitations, removing age and parity restrictions, removing inappropriate contraindications, and decreasing process hurdles.

156C. Technical assistance for the review of PSAP materials produced by the AIDSCAP project.

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PRODUCTS: Reviewers provided their comments in writing to Dr. Duale who submitted them to AFR/SD for AIDSCAP.

The production of these materials have been delayed. We are expecting them in mid-October. AFR/SD is working with SARA on a dissemination strategy which will include a presentation that HHRAA staff can give to encourage other donors to use PSAP materials in their programs.

173E. To designate Kate Dickin as the SARA consultant referred to in TO 173 and amendments, to carry out the field testing, in Ghana, of the manual *Designing by Dialogue: Consultative Research to Improve Young Child Feeding*.

PRODUCTS: The final evaluation report.

A draft was submitted in September; the final report expected in October 1996.

236. Partial support for research study on exclusive breastfeeding in Kenya

After the ECSA Health Community/Wellstart meeting of Chairpersons from Schools of Medicine, Nursing, and Nutrition (April 1995) identified the need to conduct research to understand why rates of exclusive breastfeeding are so low and how they may be improved as a high priority in the region, SARA decided to add some additional support to a Wellstart-funded longitudinal study by consultant Altrena Mukuria of exclusive breastfeeding in peri-urban Nairobi, Kenya.

PRODUCTS: This report will be based on in-depth interviews on constraints to exclusive breastfeeding and preparing a monograph for dissemination in the ECSA region on this subject.

Final report due in December 1996.

239. Operationalizing Education-Health, Nutrition, Population (EHNP) Linkages

PRODUCT: As a knowledge base to inform subsequent HHRAA activities and as a tool useful to African decision makers in its own right, this task will support the development of an "EHNP Linkage Resources Guide" that will provide the following:

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- a list of HNP or education projects known to be making these links
- a list of experts working in the area of EHNP linkages
- a list of organizations and institutions similarly engaged
- an annotated bibliography on the topic
- a list of identified existing synthesis of knowledge or lessons learned from field experience

269. Publication of final synthesis document, *Strategies for Achieving Health Financing Reform in Africa*, written for HHRAA by the HFS Project

PRODUCT: A print document, of approximately 50 pages. It will be reproduced in black and white, and will have a HHRAA/Abt cover with appropriate credits. Approximately 1000 copies each, English and French, of the document will be printed.

Pending, with A. Bekele for decision on go-ahead.

270. Support for Jean-Georges Dehasse to travel to Bamako for ERNWACA workshop and other ERNWACA business

PRODUCTS: a) a plan (including objectives, agenda, implementation plan and a budget) for the dissemination workshop regarding the results of the four transnational studies, which is tentatively scheduled for January 1996.

b) consultant's report on progress made regarding electronic connectivity, institutional development of the network, publications, and the key issues for a formative evaluation

Jean-Georges Dehasse, SARA Education Advisor, traveled to Mali in December to work with ERNWACA on several of their ongoing and upcoming activities. REDSO/WCA has asked for a formative evaluation of ERNWACA, and Sibry Tapsoba (IDRC), Lalla Ben Barka (ERNWACA), and Nancy Devine (World Education) briefed Dehasse on this evaluation. This REDSO evaluation would be part of the formative evaluation that has been requested by Julie Rea (SD/HRD). Discussions of how to proceed were central to the present trip to Mali. As a result, SARA (Dehasse) and ERNWACA (Ben Barka) will prepare a Progress Report documenting the accomplishments of ERNWACA over the last 28 months (from August 1993 to December 1995), including the operational and financial constraints and lessons learned. Then, a two-day meeting of the financial and technical partners of ERNWACA will be convened in Feb-

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ruary in Dakar to review the draft Progress Report and debate further support and cooperation.

The DAE (Donors to African Education) Working Group on Education Analyses (WGESA) has asked ERNWACA for assistance with the dissemination of its recent review of more than 200 sector analyses, conducted between 1989 and 1995. Entitled "Analyses, Agendas, and Priorities in African Education," this review draws conclusions related to two issues: (a) conducting ESAs and using the results, and (b) the more general issue of promoting "a broader dissemination of information—both substantive and procedural—which ...will improve the quality of research of all sorts, foster dialogue among aid agency personnel, researchers, and policy makers, and thereby contribute to the development of a more solid foundation for education reform and policy making more generally."

In another development, ERNWACA has been confirmed in its role as "observatoire" of educational reform and policies in the region. This took place at the recent Bamako meeting in October where education ministers from the entire OAU launched 1996 as The Year of Education in Africa. "Observatoire" can be best described in English as a monitoring role—in this case, aimed at educational policies in the region.

Bréhima Tounkara, from ERNWACA/Mali, finished the part that Aziz Ly initiated. Dehasse brought back two versions of that section, and these were then sent immediately to Richard Maclure in Ottawa for his review.

Dehasse brainstormed with Aliou Boly of World Education and Lalla Ben Barka on the preparation of a strategic plan. SARA submitted five pages of suggestions for a Strategy Statement, which are now being reviewed by ERNWACA and IDRC. The final version will be submitted to the next meeting of National Coordinators, expected as noted above to be in Abidjan toward the end of March 1996.

271. Support travel of Dr. R. N. Kazembe, Chairman of Malawi's National Malaria Task Force, to attend the 44th Annual Meeting of the American Society of Tropical Medicine and Hygiene in San Antonio, November 17–21, 1995.

PRODUCT: Meeting with representatives of African Integrated Malaria Initiative (AIMI) collaborators. A summary report of the trip.

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Dr. Peter Kazembe, Chair of the National Malaria Control Committee of Malawi, and Dr. Mary Ettling, consultant on malaria with the BASICS and Environmental Health Projects

Rapid diagnosis and prompt treatment of malaria with an effective antimalarial is the cornerstone of the Global Malaria Control Strategy and the Draft USAID Integrated Malaria Control Strategy for Sub-Saharan Africa and a key to the success of integrated case management of the sick child. Unfortunately, the number of affordable and effective antimalarials is quite limited and there is widespread resistance to chloroquine, the most common first-line treatment for malaria, throughout Africa. The presenters discussed the detection and monitoring of drug-resistance patterns in Africa, and how the use of this information is informing drug policy and treatment guidelines in Mali, Malawi, and Zambia. All the presenters have some direct or indirect HHRAA funding for their works.

Dr. Kazembe made a presentation at the 44th Annual Meeting of the American Society of Tropical Medicine and Hygiene. His paper was called "Does Iron Therapy Enhance Hematologic Recovery in Children Treated for Malaria with Sulfadoxine-Pyrimethamine?"; Dr. Kazembe also gave a poster presentation titled "Sustained Efficacy of Sulfadoxine-Pyrimethamine as First-line Treatment in Malawian Children Under Five." These two presentations partially document Malawi's ongoing efforts to enhance child survival and child health through effective control of malaria. On the basis of applied research and clinical experience, Malawi became the first country in Africa to replace chloroquine with sulfadoxine-pyrimethamine as the first-line treatment for Malaria. The documentation and evaluation of Malawi's experience is critical to countries in the region which must consider similar changes in their own drug policies and treatment guidelines. Dr. Kazembe was traveling with SARA support, consistent with HHRAA project goals to promote the participation of African researchers in international scientific and policy fora and to disseminate information with the potential to influence policies and programs in the Africa region.

272. Technical support for the planning, organization, and logistical support to implement a Basic Education Project Africa-wide conference.

PRODUCT: A plan for organizing and supporting the workshop. Preparing the workshop schedule and dynamics, and conducting the workshop. Production of the workshop report and provision of appropriate follow-up.

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The request for SARA support was cancelled.

273. Facilitating electronic connectivity for the Educational Research Network for West and Central Africa's Regional Coordinator in Bamako.

PRODUCT: SARA will have begun the process of linking the education research communities to a viable electronic system, to enable the activities noted above.

During his December visit to Bamako (cf. Task Order 270), Dehasse visited MaliNet. ERNWACA is concerned that National Coordinators might not be able to pay for the use of e-mail, since the operational monthly cost is as much a function of messages received as messages sent. In other words, National Coordinators will not be able to control their monthly bill for electronic mail. Therefore, National Coordinators should be warned before SARA proceeds with installation of link-ups. At least 4 or 5 National Coordinators responded to SARA's request for information related to link-ups.

This has been an issue in Mali (where the MaliNet service is admittedly expensive). SARA is exploring the option of connecting the ERNWACA National Coordinator through HealthNet Mali, now that it is active (thanks to the SARA-sponsored work trip completed in May, 1996 by Kerry Gallivan of SateLife and Moussa Fall of ENDA/Dakar), as well as switching the Regional Coordinator's connection from MaliNet to HealthNet.

SARA has sent a modem to ERNWACA national coordinators in The Gambia, Senegal, Cameroon, Côte d'Ivoire, and Ghana. In Senegal, we are working with an established service (ENDA) that in turn uses Senegal's new international Internet connection provided by SONATEL, the national telephone company. In Gambia, we are working directly with the HealthNet System Operator to install the modem and establish the e-mail account. We are in touch with the HealthNet System Operator in Ghana and are finalizing plans for the actual modem installation and hookup. We are in the process of contacting HealthNet Cameroon, and are researching Internet Service Providers (ISP's) in Côte d'Ivoire.

We have purchased modems for other ERNWACA National coordinators as needed, and are researching ISP's in those countries, as none but Burkina Faso has an existing HealthNet node. In Burkina Faso we are assessing the capacity of HealthNet to adequately service an account for the ERNWACA National Coordinator.

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274. Support for Dr. Mark Sommers to prepare a detailed case study of the education decentralization study recently carried out in Tigray, Ethiopia in connection with the bridging activities of Project BESO.

PRODUCTS: The case study should provide a complete documentation of the research, including but not limited to the following:

- Detailed rationale for the study
- Detailed methodology (why they did what they did; why they did not do what they did not do)
- Data collection instruments
- Detailed findings (from both field research and from workshops)
- Findings about the education system
- Decentralization
 - analysis of findings
 - overall assessment of decentralization in Tigray
 - overall assessment of what we know and don't know about decentralization in Tigray
 - statement of next steps (research, action)
 - detailed recommendations (for Tigray, for BESO, for decentralization research, for USAID in education, for USAID in studying decentralization in education)
 - statement of and reflections on Limitations of the study
 - recommendations for changes if the study is replicated

The case-study report will comprise a substantial and complete document, in addition to necessary appendices. The Executive Summary should be approximately 10 pages single spaced, 10 to 12 cpi. It should be able to stand alone as a summary of the research activity.

Deliverables:

- report (hard copy and electronic in WordPerfect format)
- Executive summary (hard copy and electronic in WordPerfect format)
- two presentations: one in Washington, one in Williamsburg at CIES

Consultant Mark Sommers, working with Jim Williams, has produced a comprehensive draft on the decentralization of the education system in Ethiopia. The situation in Ethiopia has its own unique features, most notably the ebb and flow of regional groups in positions of leadership. Right now, it is the Tigrayans who have power and on the basis of their desire for autonomy in their own region they have instituted the current decentralization program. For example, during the previous Mengistu regime, many, many schools were

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destroyed and education was not available at all in vast parts of Ethiopia. Sommers chronicles the initiatives the Tigrayans have taken, the successes so far, the shortcomings so far, and anticipated next steps. His study took place in the Tigray region; what is occurring in non-Tigray Ethiopia is not covered here. Dr. Sommers is working with Jim Williams to put this document into final shape for presentation to the Comparative and International Education Society meeting in March.

275. Advisory meeting on improving the dissemination and use of DHS nutrition materials

PRODUCTS: A one-day meeting organized by SARA/Macro in collaboration with SARA/AED to be held in mid-December 1995.

After delays due to the government shutdown and other causes, SARA hosted a meeting on June 13 in collaboration with Macro International and the IMPACT Project on the dissemination and use of DHS-related nutrition documents in Africa. The meeting was attended by 22 representatives of USAID, the World Bank, UNICEF, and many USAID collaborating agencies who use these materials.

The objectives of the meeting were to increase the use of DHS anthropometric, feeding and related child health, morbidity, and mortality information for program planning and programming in Africa; to review recommendations from a 1995 assessment of the use of DHS-related nutrition materials and to provide guidance for future dissemination activities; to identify strategies for using nutrition materials to influence policies and programs of governments and donor organizations; to make recommendations for future DHS nutrition analysis and dissemination projects; and to obtain feedback on the format and content of existing DHS nutrition materials.

Participants divided into working groups to develop recommendations on each of these subjects. Major recommendations from the meeting include suggestions for how to involve partner organizations in dissemination efforts, how to reformat the materials to improve their use for advocacy purposes, and new ideas for improving communication among DHS nutrition data users to increase the likelihood that this information will be used by and is accessible to persons working in the field.

275A. Advisory meeting on improving the dissemination and use of DHS nutrition materials—to retain Millie Morton as the facilitator, and to extend the period of performance for the entire task order 275 through the end of April.

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Cf. #275.

- 276. Support travel from Cleveland to Washington, D.C. of Prof. Gilbert Bukenya, Dean of Makerere Medical School and the President of the Network of African Training and Research Institutions in Public Health.**

PRODUCT: Dr. Bukenya meeting with HHRAA/SARA staff, and a summary of potential follow-up activities.

Following Dr. Duale's return from the meeting of African public health schools in Brazzaville (cf. Task Order 257), and as part of the continuing involvement of African institutions with the implementation of the HHRAA Project, SARA took the opportunity of a visit to Cleveland by Prof. Gilbert Bukenya, Dean of Makerere Medical School and the President of the Network of African Training and Research Institutions in Public Health, to invite him to Washington on Thursday for discussions with AFR/SD/HRD and HHRAA/SARA staff on the network of African training and research institutions in public health, with the intend of identifying potential collaborative activities to increase the HHRAA project impact. Dr. Bukenya took part in lengthy discussions about the recently held (October) 3rd Meeting of the Network of African Training and Research Institutions in Public Health in Brazzaville, Congo, and the possibilities of SARA collaboration with and support for the network.

- 277. Support for Mead Over and Martha Ainsworth to travel to East Africa to prepare and deliver presentations on their HHRAA-funded research on the economic effects of adults deaths due to HIV/AIDS in Tanzania.**

PRODUCTS: Two presentations: one by the Tanzanians to the full AIDS conference and one by Over and Ainsworth to the HHRAA-sponsored special session.

Over and Ainsworth made their presentations as planned.

- 278. SARA staff time devoted to the SANA (Sustainable Approaches to Nutrition in Africa).**

PRODUCTS: The results of this application of SARA people will be the accomplishment of the SANA objectives.

This task order was not approved.

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- 279. Editing of most recent draft of *Overview of A.I.D. Basic Education Programs in Sub-Saharan Africa* for publication by consultant Jeanne Moulton.**

PRODUCT: A final draft of the *Overview...* that is ready for publication after being circulated for comments.

This task has been transferred to another Africa Bureau mechanism.

- 280. Travel by Suzanne Prysor-Jones to Dakar for the strategic planning meeting for ORANA (Organisme De Recherches Sur L'alimentation Et La Nutrition Africaines) and the Scientific Meeting Of The Reproductive Health Research Network (RHN) In Francophone Africa, Dakar, November 27–December 10, 1995.**

PRODUCTS: Dr. Prysor-Jones will produce a trip report that documents the progress and promise of the ORANA reorganization and that also makes her recommendations about ongoing AFR/SD/HRD involvement with the RHN.

During the week of December 4th, Suzanne Prysor-Jones worked closely with the ORANA interim Management Committee in Dakar to provide the Senegalese Minister of Health with recommendations on ORANA's role, structure, and modus operandi, that could be presented to the OCCGE meeting of Health Ministers to be held in January 1996. ORANA (Organisme De Recherches Sur L'alimentation Et La Nutrition Africaines) is one of the eight research institutes run by the OCCGE (Organisation de la Collaboration et la Cooperation pour les Grandes Endemies) in Francophone West Africa. ORANA is being revived after its decline in the early 1990s. This meeting was designed, with plenary and small group sessions, to provide participants with an introduction to current thinking in the Nutrition field (the International Conference on Nutrition, the OAU resolutions, the Bellagio Meeting) and to facilitate their identification of the main areas of activity that ORANA should now undertake. The next step must be taken by the Minister of Health from Senegal and his colleagues from the member states, who should be meeting in Bobo-Dioulasso early in 1996, and will hopefully give the go-ahead to proceed with selection of a Director and a core staff for ORANA.

Prysor-Jones also held discussions were held with the four BASICS Regional Advisors stationed in Dakar. Some thinking had progressed since our previous meeting in October 1995, but proposals for specific priority regional activities had not yet been formulated. There was some feeling that the staff should wait to hear the Child Survival priorities that REDSO may have in mind, to complement their Family Planning/AIDS regional program. Dr. Kone is planning to

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visit REDSO in January to discuss this. Prysor-Jones was able to inform the Advisors of the general orientation and interest of REDSO (identification and dissemination of best practices, health financing and drug supply issues, quality of care, etc.), and it was agreed that it would be preferable to prepare some short descriptions of the activities that BASICS staff have already identified as priority for the region, and to have these ready for discussion with REDSO. Some areas where BASICS thinking is advancing are: Nursing school curricula, integrated casemanagement, cold chain assessment and improvement, collaboration with regional institutions on IEC issues, building capacity for qualitative research in the region, nutrition activities, and the Nutrition/Child Survival Information Center that had formerly been run by ORANA.

281. ADDR Conference on “Linking Applied Research with Health Policy,” Cuernavaca, Mexico, February 25–28, 1996.

PRODUCTS: Four major outputs of the workshop are anticipated: a) A conceptual framework of research-to-policy linkage on the basis of an in-depth analysis of facilitating factors and impediments; b) Potential interventions with demonstrated effectiveness in improving the use of research findings in policy making; c) Future research agenda to further study and improve the research-to-policy linkage; d) A report summarizing the proceeding, findings, and recommendations of the workshop; and e) A set of guidelines for the design, implementation, and dissemination of policy-relevant research.

Two African researchers, Dr. Stephen Kinoti and Dr. Raphael Owor, are attending with SARA support.

281a. ADDR Conference on “Linking Applied Research with Health Policy,” Cuernavaca, Mexico, February 25–28, 1996—substitute Dr. Max Price of South Africa for Dr. Baah of Ghana, at the request of ADDR. Dr. Baah is being supported by another donor.

281b. ADDR Conference on “Linking Applied Research with Health Policy,” Cuernavaca, Mexico, February 25–28, 1996—substitute Dr. Ebrahim Rasool of South Africa for Dr. Max Price of South Africa, at the request of ADDR. Dr. Price is unable to attend. Dr. Rasool is the Provincial Minister of Health and Social Services for the Province of Western Cape, based in Cape Town.

281c. Travel through Washington by Drs. Kinoti and Owor.

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PRODUCTS: Useful meetings in Washington by both Drs. Kinoti and Owor. Dr. Kinoti would document his meetings in his overall Mexico/Washington trip report.

Dr. Owor made this trip, but Dr. Kinoti was prevented from doing so due to conflicts at ECSA headquarters.

281d. Travel of two additional participants to the ADDR conference on “Linking Applied Research With Health Policy,” Cuernavaca, Mexico, February 25–28, 1996: Dr. Helen Schneider

Senior Researcher, Center For Health Policy, Department Of Community Health, Witwatersrand University, Johannesburg, South Africa, and Dr. David Mamejja, Assistant Director, Health Systems Trust, Johannesburg, South Africa. The Health Systems Trust is an NGO involved in health systems research.

Complete. Reports received.

282. SARA support for an evaluation of the impact of the “Monograph on Complications of Unsafe Abortion in Africa” and related policy documents and country reports (Task Orders 108, 215, 216)

PRODUCTS: A technical report.

These reports have been produced and received.

283. Francophone Africa Media Project—POP’MediaAfrique

PRODUCTS: Anticipated products include (1) a three-day seminar for 18 participants including 12 journalists and 6 program officials; (2) six print supplements and six programs for radio broadcast (one for each media outlet per country) comprised of global, regional and local perspectives on a selected theme; (3) a summary booklet and radio program compilation, which will present the best excerpts from each country for regional distribution; and (4) a media handbook.

The PRB part of the Journalists Project. Fully documented in the section on African participation.

283A. Francophone Africa Media Project—POP’MediaAfrique

PRODUCTS: Anticipated products include (1) a three-day seminar for 18 participants including 12 journalists and 6 program officials; (2) six print supplements and six programs for radio broadcast (one for each

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media outlet per country) comprised of global, regional and local perspectives on a selected theme; (3) a summary booklet and radio program compilation which will present the best excerpts from each country for regional distribution; and (4) a media handbook.

The CERPOD part of the Journalists Project. Their subcontract is being modified to accept more money and to incorporate this task.

283B. Trip to Mali, Burkina Faso, Mauritania, Senegal, and Ivory Coast by PRB journalist Victoria Ebin to prepare for the senior-level print and radio journalist seminar under the HHRAA-funded "POP'MEDIAFRIQUE" Project. Trip dates are o/a April 14–May 5, 1996.

PRODUCTS: A trip report which will include (1) a seminar agenda; (2) a summary of discussions and description of selected media outlets which will be participating in the seminar; and (3) a list of potential presenters and "experts" who will be assisting with the seminar

Victoria Ebin, assistant director for media at PRB, and Some Sie of CERPOD carried out these interviews from April 15 to May 14, 1996.

Journalists and health professionals consistently brought up certain points that block communication. These obstacles to creating a well-informed public on health issues were one focus of the seminar. Some of the frequently heard comments are noted below.

According to journalists, health experts do not understand journalists' needs and methods. Journalists need anecdotes and information to attract their readers' interest. Instead, health experts often give them data and statistics and expect them to make readable, newsworthy stories. Journalists also say health officials sometimes withhold information and do not respond to their calls. They contact the press only for publicity purposes, i.e., for the opening and closing of public events. Some journalists cited a lack of information or a source among health professionals. An important factor in getting the information, according to journalists, is the presence of an effective IEC person within the health community who understands journalists' needs, time constraints, and economic difficulties.

Health experts often said journalists were too sensational in their presentation of information. Sidibe Lansina, director of a family planning association in Mali, said he gave an interview on the need to space births. It appeared in a local paper with the headline, "Limit Population."

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In some cases, health experts' distrust of the press is so deep they fear that reporting on health issues will lend credibility to opponents of family planning and offend religious leaders. Another complaint heard everywhere, particularly in Mauritania and Mali, is that the press focuses too much on politics. The strongest complaint about journalists is that they demand too much money. While health organizations accept that they have to cover journalists' travel and expenses, they object to paying the high sums some journalists demand just to write the story. The potential of radio as a source of information on family planning was frequently mentioned. Oscar Koalga, director of ABBEF in Burkina Faso, pointed out that intellectuals read papers but they are not the primary targets for family-planning services. Potential clients are far more likely to get their information from the radio. Along with other health experts, he stressed the need for more radio programs in local languages.

In Mali, the new, privately owned Radio Kledu has already become the principal radio in the capital. They have a weekly program on women and daily information on AIDS. Journalists said they can inform the public more effectively about condom use than television with its potentially controversial visual images. Radio Côte d'Ivoire is also seen as an important source of information on reproductive health, broadcasting programs on profiles of people with HIV and AIDS.

All in all, among those interviewed, responses to the proposed seminar were very positive.

On this basis, then, PRB and CERPOD carried out a seminar on adolescent reproductive health at Saly, Senegal, from June 25–27. Participants were senior-level journalists and health professionals from Senegal, Mali, Burkina Faso, Cote d'Ivoire and Mauritania. In all, 10 journalists (one radio and one press journalist from each country) and five IPPF-affiliate staff (one from each country) came together to discuss how to improve coverage of adolescent health issues in the media.

The objectives of the seminar were to create a setting where high-level journalists and health professionals could exchange views and develop a stronger working relationship. We wanted to sensitize journalists on population issues and provide information. Establishing a dialogue between the media and health organizations also required making the IEC aware of journalists' needs.

The seminar concluded with a list of recommendations from participants on developing a long-term strategy to ensure on-going, working relationships between media and health organizations in each country. The special supplements on adolescent reproductive health that journalists will produce for their

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papers and radio stations in the next three months will draw on these relationships.

The research component of the seminar was based on CERPOD's recent report on adolescent reproductive health, *Jeunes en Danger*. Though not planned as an interactive exercise, discussions of the report during the seminar benefited both parties. Journalists will use the report as the basis for their articles. At the same time, their comments will contribute to improving the final version of the booklet.

- 284. Additional technical work by Hugh Waters, dealing with NGOs, with the PCS experience in Ghana, and with the status of CDD/ARI programs.**

PRODUCTS: Three papers, dealing with the three topics noted above.

The three reports have been or will be produced and disseminated to the appropriate audiences pending comments from reviewers and approval from AID.

- 285. Facilitation support for the BASICS IEC workshop, scheduled for April 1996 in Dakar, to be provided by SARA subcontractor Africa Consultants International.**

PRODUCTS: ACI will produce a design for the workshop agenda and dynamics, in concert with BASICS, will facilitate the meeting itself ensuring that goals are met and the sessions are on time, and will design and implement an evaluation instrument for the workshop.

Postponed.

- 286. Travel By Dr. Suzanne Prysor-Jones and Dr. Ellen Piwoz, Director of the AFR-funded Sustainable Approaches To Nutrition In Africa (SANA) Project, between January 20 And February 3, 1996.**

PRODUCTS: This trip is seeking to produce collaboration with African institutions on issues of regional nutritional programming.

Suzanne began an extended African trip by meeting with the Drs. Bukenya and Matchaba of the Network for African Public Health Institutions (NAPHI) in Lake Victoria, Zimbabwe; they discussed the next steps to operationalize the proposal for NAPHI-AED collaboration in nutrition under the SANA Project, mostly for improving nutrition teaching in public-health training settings. NAPHI is also interested in other areas, such as health reforms, disaster pre-

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paredness, and reproductive health. Drs. Bukenya and Matchaba were in Victoria Falls attending a meeting of networks concerned with health research in Africa, and the meeting was an important first step to coordinating on several fronts: information sharing, training and capacity building, advocacy, priority-setting for research. HSR, ENHR, SOMANET, UPP (University Partnerships Program), IHPP, INCLN, CRHCS/ECSA, and the GTZ Reproductive Health and Health Reform network were present. SARA was the only other agency there. Next steps were identified. One is that GTZ is working with HealthNet to set up AFORNETS (African Forum of Networks in Health Research for Development) for electronic conferencing.

Suzanne also held meetings with the Health Systems Research Project based in WHO/Harare served to clarify next steps on updating the HSR training modules with a view to their integration into NAPHI settings.

Suzanne then joined Ellen Piwoz in Nairobi and Dar es Salaam. Ellen and Suzanne first met with Dr. G. Maritem of the Applied Nutrition Program, University of Nairobi and then with the Director and staff of the Tanzanian Food and Nutrition Center to discuss the Sustainable Approaches to Nutrition in Africa (SANA) Project and potential areas of collaboration to promote and improve program-oriented nutrition research and training in the ECSA region. While in Nairobi, Prysor Jones and Piwoz also met with Dr. Festo Kavishe, Regional Nutrition Advisor for UNICEF/ESARO (East and Southern Africa Regional Office) to discuss SARA and SANA activities and how to best coordinate with the UNICEF regional and country programs, and with REDSO to discuss, among other things, the logistics for hiring the SANA/AED regional advisor.

Suzanne traveled on to Brazzaville for the WHO/AFRO meeting on ICMI (Integrated management of childhood illness—the new WHO name for ICM, integrated case management) was attended by both UNICEF Regional Offices, GTZ/Tanzania, BASICS Washington and Dakar Regional Offices, as well as by WHO/Geneva/CDR and several WHO/AFRO units. The latest version of the SARA/BASICS Guide for the Introduction of ECM was given out. AFRO is to get back to us with a decision on how they wish to use it. Some agreement was reached on the steps for implementing ICM, and coordination mechanisms were discussed for early-use countries, which include Mali, Senegal, Niger, Madagascar, Zambia, Uganda, Tanzania, Ethiopia and, possibly Eritrea, Botswana, Congo, Ghana, and Sierra Leone.

287. Computer Specialist for Dissemination Activities

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PRODUCTS: The person filling this position will be responsible for a number of SARA Project activities to assist the Dissemination Manager in fulfilling the Project's dissemination mandate. These activities include:

- managing the SARA mailing lists for:
 - education
 - population/family planning
 - nutrition
 - health financing
 - health (AIDS, child survival, etc.)

This will involve assisting the HHRAA activities managers in focusing the lists, deleting redundant or non-target names, keeping the lists updated, cleaning up and adding new mailing lists, ensuring proper coding of lists for retrieval. This function will be 20 percent LOE.

- Preparing all SARA and some HHRAA materials for placement on the USAID gopher. This will involve putting them into ASCII files, stripping them of all codes, ensuring their conformity to USAID's gopher standard. This function will be 10 percent LOE.
- Working with SARA/HHRAA documents to turn them into searchable hyper-text documents for USAID's World Wide Web site. This will involve close cooperation with IRM's Division of Consulting and Information Services to meet coding specifications, ensure proper and adequate public access to documents, and ensure that entries are regularly updated with new materials. This function will be 15 percent LOE.
- Working with SARA and HHRAA staff to develop presentation (advocacy) materials using PowerPoint or other presentation graphics software. Each sub-sector manager will be provided with a set of presentation materials that will be updated as new information is received. This function will be 15 percent LOE.
- Developing the West African electronic connectivity network. This will involve working primarily at a distance (from Washington) with various systems operators who will take major responsibility for in-country hook-ups, but will require some African travel in order to identify local consultants with whom we can work. This function will be 20 percent LOE.

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—Training of African institutions' staff in the use of computerized models that have been developed in a number of HHRAA activities (logistics, TB incidence, PROFILES, etc.), in order to disseminate these models to African professionals. This function will be 20 percent LOE.

Bret Harris hired for this position.

288. Organization of a dissemination strategy workshop with the participation of ERNWACA and ERNESA researchers and policy makers, and in cooperation with the DAE Working Group on Education Sector Analysis, the ABEL2 project, and the Swiss Development Cooperation Agency.

PRODUCTS: 1) operational strategies, and action plans to conduct effective monitoring of educational policies and reforms, and to collect hard data for that purpose, and to identify or set up sites for policy debates;

2) listings of resources (financial, technical) available for the execution of ERNWACA research tasks;

3) arrangements between partners regarding these two matters.

Thirty-two participants attended the workshop.

The Regional Office was unable to present to the National Coordinators its strategic proposal for the next three to five years as scheduled in the workshop agenda. Suggestions of a framework to assist the National Coordinators with their own national plans were not heeded. Prior to the workshop, the National Coordinators received only an abstract of the June/July 1996 evaluation; they did not receive a framework or a strategic plan.

As a result, the first and fifth days of the workshop were spent debating a document prepared by the Regional Coordinator and discussing the strategy to finalize the transnational agendas. The participants accepted the Regional Coordinator's proposal to respond to an orientation document that will be sent to them by the end of the year. The Regional Coordinator promised a new strategic plan before the end of his mandate in March 1997.

The discussions on finalizing the transnational research agendas revealed that completing the research is a high priority for the National Chapters. Some have already contacted other sources for funding and made arrangements to finish the job. The REDSO representative who attended the workshop prom-

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ised to consider a new request by ERNWACA to fund \$60,000 to that effect, but was without further commitment.

Activities during the three days on Sector Assessment and Policy Dialogue were useful in allowing National Coordinators to develop contacts with the DAE Working Group and the ABEL Project.

Three modems were distributed to the National Coordinators of Ghana, Côte d'Ivoire, and Cameroon as a first step to installing the Internet to their chapters. The electronic connectivity project is advancing and SARA is arranging modem installation with local networks. Almost half of the modems have been delivered to the National Chapters and SARA is hoping to have all the networks linked by early next year.

- 289. To move ahead with SARA's mandate to develop innovative dissemination channels by assisting HealthNet to put in place a functioning HealthNet node in Mali—thereby demonstrating the feasibility for West Africa to fully participate in the information revolution that is far more advanced in East and Southern Africa.**

PRODUCTS: Once a functioning HealthNet node for Mali is established (which currently does not exist because for many technical reasons, West Africa is under served by electronic networks) the following will be established:

- low cost e-mail communication links with partner institutions' colleagues throughout Africa and the world;
- HealthNet information products including: HealthNet News, the WHO Library Digest for Africa, the AIDS Bulletin, Mothers and Children, and the African Medical Librarians Bulletin;
- access to electronic conferences such as ProMED, the conference on emerging diseases;
- the ability to develop their own electronic conferences for discussion and exchange of information on issues of specific relevance to their activities;
- access to the U.S. National Library of Medicine databases, through the use of the HealthNet search software BITNET.

HealthNet service in Mali was re-established through the successful May 1996 work trip (cf. #273).

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- 290. Participation by Ugandan Nutritionist Louise Sseronjogi in the Biennial Congress of the Nutrition Society of Southern Africa and the Dietetics Association of Southern Africa, to be held in Stellenbosch, South Africa, from 30 March to 5 April 1996.**

PRODUCTS: Paper presented and trip report by Sseronjogi

Trip complete, report received.

- 291. With WHO, DHS/Macro is convening a workshop on “the role of men in reproductive health,” in Senegal from April 15 to June 7, 1996. This is a 8-week workshop planned for the analysis of data from DHS survey in 9 countries (Burkina Faso, Cameroon, Central African Republic, Côte d’Ivoire, Ghana, Haiti, Kenya, Senegal, and Tanzania), with at least two or three participants per country.**

PRODUCTS: A trained cadre of reproductive-health professionals who will be alert to the linkages between research and policy, and open to next steps in the advocacy process. These professionals will be in a position to call upon SARA from technical assistance to move research findings into policy, through focussed advocacy efforts.

Lalla Touré and Dana Faulkner provided a briefing on the SARA Advocacy Workshop held in Dakar on May 28–29. Attended by Bob Haladay and Lenni Kangas of SD/HRD’s population section, the meeting reported on some very gratifying outcomes and cited some useful next steps. Dana summarized the overall outcomes:

- ◆ **Participant Involvement:** The training worked extremely well, especially for a pilot test that used new trainers (Lillian Baer and Barky Diallo). The participants were enthusiastic about the subject matter, participated actively in the discussions, and were invested throughout the workshop. This is additionally noteworthy because the Advocacy Workshop took place at the tail end of what had been six weeks of training in the DHS/Macro data-analysis course for most participants.
- ◆ **Evaluations.** The participants evaluations were very positive. In fact, all participants said they would use ideas and concepts from the workshop in the future, and everyone said that it would be useful for other individuals from other organizations to have similar training. All the participants recommended the training for other organizations in their countries. At least, two participants had specific plans or requests for additional advocacy training.

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- ◆ **Timing.** The delivery of the curriculum was somewhat constrained by the fact that it was necessary to compress 4–5 days of materials into a two-day workshop. This meant that some sections of the curriculum were treated only briefly, and that some of the participant discussions had to be limited. In addition, the trainers had to work very hard to absorb a lot of new material in a short time and prepare themselves to present it.

- ◆ **Potential Future Resources.** There were several participants with extensive advocacy experience who contributed mightily to the discussion. These individuals will make a good source of potential trainers for future workshops.

A useful next step will be to seek to involve the regional AID health and reproductive health project in an upcoming Advocacy Workshop at CERPOD. Also, follow-up of these participants will be carried out to see if the lessons from the workshop have been put into practice.

In a remarkable outcome from the Dakar Advocacy Workshop, Lalla Touré received notice from the Director of Family Health in Burkina Faso that his Ministry intends to offer advocacy training to at least 150 reproductive-health staff, program directors from local NGOs, and key administrators. The Ministry would like to have financial and technical assistance from SARA and UNFPA to do so, and the Director said a detailed request would be forthcoming. SARA will explore options for response, which will certainly include leveraging support from other sources. What is most gratifying is the grasp of and commitment to the process of advocacy in the policy arena that the Burkina delegation seems to have acquired from two jam-packed days in Dakar working with the SARA advocacy modules.

291A. Substitution of Dana Faulkner for Ritu Sharma at the DHS workshop, which is described in Task Order 291.

PRODUCTS: cf. Task Order 291

292. Purchasing copies of the full NAS report on AIDS in Africa, as well as reproducing additional copies of the French-English executive summary.

PRODUCTS: The dissemination of 200 copies of the full report and 1500 copies of the executive summary in both English and French.

This activity was slow in getting started, however, the documents have been purchased and dissemination of the reports has begun with the USAID mis-

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sions. As SARA continues to update its mailing lists for appropriate HIV/AIDS contacts, the overview will be sent to them.

293. Travel by Suzanne Prysor-Jones to Senegal and Côte d'Ivoire in support of Africa Bureau child survival objectives.

PRODUCTS: In her trip report, Dr. Prysor-Jones will provide a comprehensive account of activities in the two work sites, with a discussion of next steps and recommendations for HHRAA.

In Côte d'Ivoire, Suzanne worked with Hope Sukin on developing a results framework for REDSO's regional Health and Family Planning Project. The results framework for REDSO focused on improvement of access to and use of family planning, MCH, and HIV/AIDS preventive services in the project coverage area. This improvement was spelled out in terms of increasing demand for services, increasing availability of services, and increasing quality of services. In Senegal, she assisted the Centre Africain d'Etudes Superieures en Gestion (CESAG) on the preparation of a proposal for CESAG to expand their regional role as a center for capacity building for health reform in West Africa. CESAG, founded in 1985, has been a major training center in health administration for the Sahel region. Now managed by the Central Bank of West African States, CESAG is emerging as a regional management training center for West Africa and a technical resource for the support of management training in individual countries in the region. Suzanne was joined in Dakar by Steve Reiman of MSH to craft a proposal for donor assistance in several priority areas.

294. Synthesis of costs and lessons learned from communications programs to improve child feeding practices in West Africa.

PRODUCTS: A paper on costs and lessons learned from IEC programs to improve child feeding in West Africa. A draft was presented at the West Africa IEC meeting organized by BASICS in April.

Draft submitted in August. Final paper has been submitted and is being reviewed.

295. Technical support to the Emerging Threats and Crisis Prevention (ETCP) sector for the dissemination phase of its work.

PRODUCTS: As requested by the core group, products would include technical advice, recommendations for action, assistance with presentations or making presentations in concert with, or on behalf of, the core group.

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This assistance has been ongoing, mainly from Dana Faulkner of Porter/Novelli.

295A. Additional technical support to the Emerging Threats and Crisis Prevention sector for dissemination and advocacy on HIV/AIDS

PRODUCT: cf. TO 295

296. Travel by Jean-Georges Dehasse to Dakar on behalf of ERNWACA

PRODUCT: An agreed-upon scope of work for the evaluation; draft strategy for ERNWACA's Phase III.

The planning was done, and incorporated into the research design. Cf. # 306.

297. The publication of a three issues of the ERNWACA news bulletin.

PRODUCTS: Three issues (1000 copies per issue) of ERNWACA Bilingual Newsletter published and distributed between June 1996 and August 1997.

For the next project year.

298. Travel for two Cameroon population officials to South Africa

PRODUCTS: The product would be a work plan for an innovative adolescent reproductive health activity in Cameroon. The purpose of including the government homologue is to create support for adolescent reproductive health activities in Cameroon. The product of Dr. Nkodo's travel would be increased collaboration between the government and PSI in the design and implementation of the adolescent project and, perhaps, increased likelihood of the eventual inclusion of similar adolescent reproductive health activities in other government and NGO programs in Cameroon.

Reports have been received from Drs. Nkodo and Dipoko. They summarized their observations in South Africa, citing the program's strengths and weaknesses, and made recommendations for improvements in their own work in Cameroon based on this study/observation tour.

299. Suzanne Prysor-Jones participation in a Workshop on Human Resources and Health Sector Reform, Liverpool, April 15–18, 1996.

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PRODUCTS: The workshop is geared to three products: guidelines for the human-resources component of health-sector appraisal studies; a strategic document on support in the area of human resources for submission to the European Health Experts Group; and an agenda for research in human resources for the health sector. Dr. Prysor-Jones will prepare a trip report documenting the process and products of the workshop, focusing on these three product goals.

Suzanne Prysor-Jones attended a meeting organized by the Liverpool School of Tropical Medicine on the issue of human resources development in an era of health reform. The objectives of the meeting included identification of funding and research priorities for HRD and outlining an instrument to look at HRD issues as part of a country health-sector assessment exercise. The meeting was conducted under an European Union grant to the Liverpool School, and there were participants from the EU, French Cooperation, Dutch Tropical Institute, and ODA. Key issues discussed included motivation/incentive systems for health workers, training for HRD management, experiences with new cadres of personnel, the role of donor agencies in supporting HRD-related transitions involved in health reform. This meeting provided SARA with the chance to interact with a new set of players, especially the EU, on issues of health reform and human resource development.

- 300. Regional assessment of health-research training to prepare for updating Health Systems Research (HSR) modules and their introduction into public health pre-service training sessions, in concert with WHO/HSR, Harare, and NAPHI, Uganda.**

PRODUCTS: Assessment (document) of research teaching experience in selected institutions in four countries.

Inventory of materials used for research teaching in these settings

- 300A. Support Dr. Duale's travel to Harare, Zimbabwe, June 15–25, 96 to provide technical assistance for the initiation of the regional assessment of health systems research training in ECSA.**

PRODUCT: Study protocol, assessment tools developed and pre-tested, implementation plan and initiation of the study.

Dr. Duale traveled to Harare, Zimbabwe, June 16–25, 1996 to work with Prof. Gabriel Mwaluko of the Joint Health Systems Research Project of the World Health Organization in Southern Africa (Joint WHO/HSR) in Harare, Zimbabwe, and Dr. Sidney Ndeki of the Centre for Educational Development in

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Health (CEDHA) based in Arusha, Tanzania, in initiating a regional assessment of health systems research training offered by institutions of higher learning in Eastern and Southern Africa. The purpose of the assessment is to review the current teaching of health systems research in pre-service offered by selected public health, nursing, and medical training institutions in ECESA and to determine needs and recommendations for improving health systems research training curricula and materials.

Dr. Ndeki is hired as a SARA consultant to implement this assessment. Dr. Ndeki worked together with Duale and Mwaluko to develop and come to a consensus on the followings:

1. Study design: purpose, methodology, and expected outcomes
2. Interview Guide (questionnaire) for Training Institutions
3. Interview Guide (questionnaire) for Lecturers/Tutors of Research-related Subjects
4. Self Administered Questionnaire for Final Year Students
5. Implementation Plan for the Assessment
6. Letter of Notification (2nd notification) to Country Contacts
7. Draft Table of Contents for the Report of the Assessment.

The time table for the implementation of the study is as follow:

June 17–21: Development of tools, Implementation plan and briefing

June 24–28: Data collection in Zimbabwe

July 8–12: Data collection in Malawi

July 15–19: Data collection in Zambia

July 29–August 6: Data collection in Uganda

August 7–22: Data analysis and report writing

August 22: Final draft of the report to SARA and Joint WHO/HSR

August 30: Written comments from SARA and WHO/HSR due in Arusha

September 7: Final Report presented to HHRAA/SARA and WHO/HSR

September 29–Oct 2: Workshop to discuss the report . Present the report in
Kampala during the AFRICLEN and ENHR Scientific Meeting

October 2–.....: Dissemination and follow-up action

March 1997: Joint WHO/HSR Technical Advisory Committee meeting

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Dr. Ndeki has submitted the first draft of his report, and will incorporate feedback into the next version. Duale will bring back additional feedback from the AFRICLEN meeting (cf. next item).

300B. Presentation of findings of the Regional Assessment of Health Systems Research Training in ECSA at the AFRICLEN meeting in Kampala, Uganda, September 29–October 2, 1996

PRODUCT: Successful dissemination of the assessment findings at the AFRICLEN meeting. A summary report of the discussions, including recommendations for follow-up actions, will be prepared and disseminated to interested parties.

The AFRICLEN meeting was attended by participants from African Medical Schools which have the Public Health School Without Walls programs and also from African countries that have the Essential National Health Research coordinating groups. The implications of the assessment findings and recommendations for strengthening health systems research capacity in Africa were discussed with these participants, who are among the most important implementers of improved health-systems research training in Africa. Dr. Duale was unable to attend the AFRICLEN meeting in Uganda, but Ms. Mokhomokha Mohale presented Dr. Ndeki's HSR training assessment results at the meeting in early October 1996, and we are awaiting feedback from her and other participants.

301. Development of a Strategy Guidance Paper on HIV/AIDS Prevention and Mitigation in Africa.

PRODUCT: A strategy guidance paper on HIV/AIDS prevention and mitigation in Africa with special emphasis on successful approaches used by the health and non-health sectors to slow the spread of HIV and reduce the HIV/AIDS impact on development.

The paper was completed, and submitted to USAID, and then served as the keynote for a consultative meeting on "Crisis Prevention, Mitigation, and Recovery in Sub-Saharan Africa: Linking Relief and Development through Public Health" a two-day meeting, June 5–6, 1996 at the Tulane Institute for Development Studies in Rosslyn, Virginia. The meeting was attended by about 40 participants representing 10 US, European and African universities, 5 PVOs/NGOs, and 5 USG departments and agencies. Six different offices of USAID were represented at the meeting.

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The focus of the meeting was to reflect on how relief and development can be linked, to address the increasing number of crises arising from epidemics, natural disasters, and conflicts in Africa. Analyzing lessons learned from recent crises such as famine and drought in East and Southern Africa, the Rwanda crisis, and the Ebola outbreaks, the participants identified policy, program, and research issues and constraints in linking relief and development as an approach to the prevention and mitigation of crises, and subsequent sustainable recovery. Within most of the international agencies, relief and development are two separate entities, with different planning, funding, and implementation mechanisms and a different corporate culture. The group recommended that relief and development communities should seriously reflect on how to reduce the number of crises in Africa and how to improve relief-development linkages for a better prevention and management health crises in Sub-Saharan Africa.

The policy, program, and research recommendations developed by the Group will be used to revise the position paper that Dr. Nancy Mock has prepared on the subject. The recommendations will feed into the design and implementation of the USAID Greater Horn of Africa Initiative (GHAI). GHAI will be a test case of linking relief and development for USAID in Africa. The representatives from REDSOs, present at the meeting, expressed the need to involve professionals and institutions in Africa in discussing the prevention and management of health crises, and in promoting policy dialogue through operational workshops and ad hoc task forces in order to facilitate consensus, commitment, and development of operational guidelines for crisis prevention, mitigation, and recovery.

The results of the meeting were presented last Friday at an International Forum entitled "From Humanitarian Assistance to Human Development." The Forum was organized by the George Washington University in collaboration with PAHO/WHO. The results were also presented today to a well-attended (about 60 participants) round-table discussion at the National Council for International Health Annual Meeting being held in Crystal City. The theme of the NCIH conference—Global Health: Future Risks, Present Needs—and various presentations address some of the issues that came out of the Consultative Group Meeting.

In addition to the position paper, a summary report of the Consultative Group meeting will be prepared and made available for continuing discussion and raising awareness on issues of health crises in Africa.

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301A. Visit in Washington, D.C. by Prof. Alan Whiteside to provide technical assistance for HHRAA/SARA activities on HIV/AIDS prevention and mitigation in Africa.

PRODUCT: One hour presentation during the AFR/SD HIV/AIDS Crisis Situation Update Seminar Series at States and technical inputs into the development of the issues paper on HIV/AIDS prevention and mitigation in Africa.

Completed.

302. Support the Organization of a Mini-Symposium on Successful Behavioral Interventions for HIV Prevention.

PRODUCT: A successful one day mini-symposium and a summary report of presentations.

Expected for the coming project year.

303. A Position Paper on Civil-Military Collaboration for HIV/AIDS Prevention and Mitigation in Africa.

PRODUCT: A position paper that will inform policy dialogue and agenda setting for civil-military collaboration to combat HIV/AIDS in Africa.

Imagine a national AIDS program that was prohibited from working with some of the main HIV vectors, such as sex workers or truck drivers. According to the Civil-Military Alliance to Combat HIV and AIDS, "African militaries currently report seropositivity averaging between 20 and 40 percent, with up to 60 percent in countries where the virus has been present for over 10 years. African militaries rank among the continent's three core transmitting groupings, the other two being commercial transport workers and sex workers." But national AIDS programs, run out of the MOH, cannot reach into military installations and, according to a survey just done by the Alliance, the military medical services have a spotty track record in mounting AIDS programs, and no documented successes in reducing infection.

This was the scenario that emerged from a session sponsored by the Alliance at PAHO in September to review two of their publications: "An International Survey on HIV/AIDS Policies and Programs: Strengths and Weaknesses in Current Practice" and the SARA-funded paper "HIV/AIDS Strategy: Military Policy and Civil-Military Collaboration in Africa and Latin America."

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304. Support an Inventory of Training Courses on HIV/AIDS Prevention and Mitigation in Africa.

PRODUCT: A report that will guide HHRAA/SARA efforts in targeting dissemination of HIV/AIDS information for improving continuing education training of program managers in Africa.

Expected for the coming project year.

305. Two-week trip for Suzanne Prysor-Jones to Bamako o/a April 22, 1996.

PRODUCTS: A child-survival strategy for USAID/Bamako

Strategy developed. Trip report submitted.

306. ERNWACA Evaluation

PRODUCTS: A completed evaluation document, fully in accord with the terms of reference (attached), submitted to HHRAA by July 31, 1996.

On schedule, SARA received the full report on the ERNWACA evaluation, carried out jointly by IDRC and SARA. SARA consultant Luc Gilbert took the lead on this, and the team produced a thorough document based on field visits and numerous interviews with researchers, public education officials, academics, and donors. Recommendations center around the overall organization of ERNWACA. Evaluators call for tighter definition of the organization, its internal structures and procedures, especially the particular roles and mutual responsibilities of regional and national offices. They call for greater communication with the education community in countries and regionally, and challenge ERNWACA to draw a timetable for financial independence. On the technical side, the evaluators cite the need for greater quality control over the research undertaken by members. Central to quality is the avoidance of duplicative studies; ERNWACA, they urge, should establish a documentation center that will allow members to know where the real research gaps are. This center could provide technical and methodological material to assist researchers as well. On policy dialogue, the evaluators recommend that "to ensure that research results are considered in drafting and implementing policy, the Network should first make certain that the research projects undertaken respond to the concerns of the most influential decision makers and they are designed, implemented and completed in partnership with them." They make particular mention of the crucial role of the Regional Coordinator, stressing the need for a strong full-time person, skilled not only technically but in management and the politics of dealing with donors. Finally, the evaluators call

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upon donors to continue their support, but argue for support that is based on written agreements defining the roles and responsibilities of both parties.

What about ERNWACA's research work? The evaluation does discuss ERNWACA's research activities, finds a significant portion of the data useful, and credits ERNWACA with demonstrating the potential usefulness of a network. Any shortcomings in the technical work is ascribed to the organizational issues cited above, with the thrust of the evaluation being that better organization throughout ERNWACA is the key to excellence in educational research.

This document is in French, with a lengthy summary published in English

306A. Modification of evaluation team for ERNWACA evaluation

PRODUCTS: A completed evaluation document, fully in accord with the terms of reference (attached), submitted to HHRAA by July 31, 1996.

306B. Modification of evaluation team for ERNWACA evaluation

PRODUCTS: A completed evaluation document, fully in accord with the terms of reference (attached), submitted to HHRAA by July 31, 1996.

306C. Modification of evaluation team for ERNWACA evaluation

Background: Consultant Maurice Garnier, upon reviewing the terms of reference under Task Order 306, strongly recommended that more time be allotted to the task, particularly the in-country visits; given the vagaries of African travel, he advised that these visits should not be assumed to be possible on the tight schedule described there.

PRODUCTS: A completed evaluation document, fully in accord with the terms of reference (attached), submitted to HHRAA by July 31, 1996.

306D. Five additional days for Luc Gilbert

PRODUCTS: Evaluation report

Report received. Summary translated into English.

307. Workshop on Breastfeeding Choices for the HIV-Infected Mother, May 20–21, 1996, Durban, South Africa

PRODUCTS: Guidelines rather than fixed policy recommendations.

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Meeting held in May and consensus statement produced by workshop participants.

308. Peer review of the monograph on the use of insecticide treated mosquito nets for malaria control in Africa.

PRODUCT: Reviewers will be asked to submit their comments in writing to Dr. Duale at SARA.

The reviewers included: Dr. Susan Zimicki, Center for International Health and Development Communication, Annenberg School for Communication; Ms. Jacqueline Cattani, Division of Tropical Disease Research, World Health Organization; Dr. Robert Northrup and Dr. Rose Macauley, BASICS Project; Prof. Carl Kendall and Prof. Donald Krogstad, Tulane University School of Public Health and Tropical Medicine. Review completed; comments forwarded to JHU for consideration.

309. Hiring Aliou Boly on a consultant basis to serve as ERNWACA Regional Secretary

PRODUCTS: Financial system in place at regional office (installation of user-friendly computerized system, possibly the same as CERPOD's); application developed for ERNWACA grantee status; workshop document prepared and report written; SOW for TA developed (for the completion of transnational research); reports on work done with national chapters; proposals submitted for fund raising.

All of these products await the submission of Boly's final report, expected in November 1996.

310. Support Dr. Duale's attendance at the XI International Conference on AIDS, July 7-12, 1996, Vancouver, Canada.

PRODUCT: Attendance at the meeting, presentation of the two SARA accepted abstracts - 1) the potential risk of HIV and FGM, and 2) priority research issues for HIV/AIDS prevention and mitigation in Africa, and a summary report on main issues discussed at the meeting and contacts made.

Dr. Duale of SARA was among the estimated 15,000 delegates to attend the 11th International Conference on AIDS. HHRAA/SARA's contribution at the conference consisted: a) a presentation on the potential link of female genital mutilation and HIV and the role of health workers at a poster symposium entitled "Violence, women, and the risk of HIV infection", b) a poster presenta-

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tion on priority policy and research issues for HIV/AIDS prevention and mitigation in Africa, stressing the need to broaden HIV/AIDS programs in health and non-health sectors of development, and c) participation at the USAID meeting for the presentation of the HIV/AIDS objective tree and future directions for USAID/G/PHN support for international HIV/AIDS programs.

Duale provided a lengthy and detailed report on the conference proceedings.

- 311. Research support by consultant Susan Fisher-Owens (CV attached) for preparation of presentation to be given by Abraham Bekele in South Africa on June 24, 1996, at the Southern Africa Health Care Financing Conference.**

PRODUCTS: (1) A series of summaries of examples of 'best practices' in some, but not necessarily all of the topics listed below (to be determined collaboratively with Dr. Bekele), backed with bibliographic notes, and copies of latest publications where available, (2) latest data on source and destination of resources in the health sector, (3) a series of presentation overheads to be used by Dr. Bekele during his presentation. Most of the information for items (1) and (2) will be submitted by May 28, with refinements by June 10th, while the presentation materials will be due by June 14th.

Task completed. Product submitted.

- 312. Review of all materials produced for the "Policy Dialogue" activity, carried out under Task Order 194, of the AFR/SD Education Unit by RTI under the ABEL contract.**

PRODUCT: A set of written recommendations identifying gaps and areas that are not explicit, suggesting improvements in organization, continuity, and comprehensibility.

Working closely with Joe DeStefano and Luis Crouch, Bob Porter reviewed the inter-related series of concept papers which sets out a new framework for education policy reform. The task was to review the overall conceptual organization of the documents, with an emphasis on their analytic content and the logic and flow of the ideas presented (as distinct from more narrow editorial or stylistic issues). A careful reading suggested that the set of papers as a whole succeeds in presenting a comprehensive overview of the processes and tools through which institutional environments supportive of sustainable innovation and improvement in African school systems can be created. With some reorganization and further elaboration of specific ideas and illustrative cases, the

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documents can be read as a series of chapters in an extended monograph. It was recommended that the papers as a whole be desk-top published and disseminated as a single package. The package should also be submitted to selected publishing houses for further review and eventual publication.

313. Support to HHRAA in the development of a publications list and abstracts of selected publications.

PRODUCT: An annotated bibliography, submitted on diskette (WP5.2 or 6.1)

A list of all HHRAA-funded publications was compiled and annotations were written for each publication. This annotated bibliography was used in the 1995 HHRAA Annual Report which was prepared by Subhi Mehdi.

313A. Three additional days for Renuka Anjali Bery, per Task Order 313 (attached)

cf. Above #313.

314. Reprinting the French summary booklet of Better Health in Africa—not approved

315. Literature review and field research on literacy training and nonformal education as empowerment tools.

PRODUCTS: The literature review and a summary document that reviews the research design of the work going on in Senegal.

Completed and submitted by consultant Jeanne Moulton.

316. Participation of SARA to the presentation of the conclusions and lessons from the formative evaluation at ERNWACA headquarters in Bamako, and finalization of the preparation of the ERNWACA workshop in August 1996.

PRODUCTS: trip report and the agenda for the August ERNWACA workshop

Trip cancelled

317. To provide a consultant writer to synthesize an Education Unit report on “decentralization in the Tigray region of Ethiopia”

PRODUCT: A synthesis report—some 20 pages—of the major findings and messages of the decentralization experience in Tigray. The writer will

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deliver a diskette with the synthesis in WordPerfect 6.1. SARA will then undertake to desk-top publish the synthesis, give it a simple, attractive cover, and reproduce it in 300 copies that will be available for distribution at the USAID Education Conference in South Africa in mid-July. Subsequently, the work will be translated into and produced in French.

(This synthesis may later form a chapter in a broader document that will capture the findings of all the Education Unit's work on decentralization.)

This document has been completed and submitted. It was taken to the conference in South Africa where a few minor changes were made. The document is being produced in English and will be translated and produced in French. This synthesis document will be disseminated to appropriate contacts on SARA's education mailing list.

317A. To extend the work on education decentralization of consultant writer, Paula Tarnapol

PRODUCT: A document consisting of an analytic summary of the findings of the literature review on education decentralization, tables illustrating country cases, and an appendix containing elements of the literature review such as the analytic framework used.

This document has been completed and submitted. It will soon be produced and distributed.

318. Partial support for field research in Senegal on "Empowerment Through Nonformal Education In Senegal" by Michelle Kuenzi of Michigan State University (CV attached). This study will look at the relationship between literacy training and a series of variables, including health and family planning variables, related to independence and self-reliance. The primary hypothesis of the study is this:

that the participation of formally uneducated, low-income Pulaar-speaking villagers in ARED's [the Associates in Research and Education for Development, based in Dakar] literacy program empowers these villagers, rendering them more independent and efficacious in conducting their affairs and economic activities than they previously were, thereby increasing their self-esteem. Moreover, those who have complete ARED literacy training are more active, effective participants in the political and economic development process than they would otherwise have been.

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PRODUCTS: A report submitted to HHRAA based on research carried out according to the following scope of work.

Final report due in February 1997. Field work, however, was completed successfully in August; data-analysis and report preparation are ongoing.

319. Planning for and facilitation of meetings between AFR/SD/HRD health-financing staff and their counterparts from REDSO/WCA and REDSO/ESA.

PRODUCTS: A workplan for USAID's health financing activities in Africa for the remainder of the HHRAA Project period

Abe Bekele and Hope Sukin convened a two-week meeting of USAID staff concerned with health care financing, hosted and facilitated by SARA. The Core Working Group included representatives from REDSO/E (Oscar Picazo, Dan Kraushaar), REDSO/W (Bineta Ba, François Diop), G/PHN/HN/PSR (Suzanne McQueen), and AFR/SD/HRD (Abraham Bekele and Alex Ross), SARA (Suzanne Prysor-Jones) and was facilitated by Dana Faulkner of Porter/Novelli, Hugh Waters (SARA consultant). Over the course of the two weeks there was a good deal of interaction with and input from external experts (World Bank, UNICEF), Cooperating Agencies with projects in HCF, and the core group had a chance to present their work-in-progress to a number of Africa Bureau and Global Bureau staff for feedback.

There were two main outputs expected from their work: 1) a **Results Framework** setting forth the goal, subgoal, strategic objectives (SOs), first and second level results, and illustrative activities; and 2) a **workplan** for achieving the hoped-for results.

The "USAID Results Framework for Financial Sustainability of Child Survival and Reproductive Health Services in Sub-Saharan Africa" is laid out as follows:

Goal: Stabilize world population and protect human health in a sustainable fashion.

Subgoal: Country health systems and programs function effectively and equitably over time with a minimum of external resources.

SOs:

Resource Mobilization: Increased level of public and private resources dedicated to the health sector. Under this SO, there are four first-level results, 13 second-level results, and multiple specific illustrative activities.

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Efficiency: Improved allocative and technical efficiency of resources employed in the health sector. Under this SO, there are five first-level results, 17 second-level results, and multiple specific illustrative activities.

Equitable Access: Increased access of and utilization to quality health services for the poor, high-risk, and underserved. Under this SO, there are two first-level results, eight second-level results, and multiple specific illustrative activities

The core group identified the following broad priority areas for “coordinated action and follow-up:

1. Promote a comprehensive approach to national planning
2. Implementation of cost sharing / user fees
3. Hospital autonomy
4. Private sector partnerships, with a focus on health care provision
5. Networking and capacity building
6. Managed care and risk pooling
7. Strengthening financial management skills at the district level

The core group participants ranked these in terms of priority from first to seventh place. Both the HHRAA participants and the REDSO/E participants ranked topic #2 their first priority, while REDSO/W gave first place to topic #7.

A number of documents have emerged from this meeting that will be integrated into a single overview, and this next report from the HCF meeting should be available for you next week.

The facilitation work was done by Dana Faulkner and Hugh Waters.

320. Travel by Suzanne Prysor-Jones and Senegal, August 1996

PRODUCTS: 1. Recommendations for next steps for ORANA (Organisation de Recherche Africaine en Nutrition Applique) with SANA/SARA collaboration, based on assessments carried out by ORANA.

2. Recommendations for the recruitment of a SANA-funded advisor for the region

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3. Assessments of and recommendations for possible collaboration with SARA/SANA and for networking activities with other institutions (e.g., ORANA, CESAG, Centre Africain d'Etudes Superieures en Administration et Gestion), where there are common interests that may further the Africa Bureau agenda for Francophone Africa.

Suzanne work in Dakar with CESAG and ORANA. Maty Ndiaye, who is helping SARA facilitate events with both institutions, worked with Suzanne to plan the CESAG 2-day meeting to be held in October 1996, to brainstorm on what the CESAG planned Masters Degree in Health Economics should look like. There should be no more than 20 participants, half African and half representing donor and technical institutions. We hope to have representatives from the EU, the World Bank, WHO Geneva and AFRO, the French Cooperation, UNICEF. This meeting will be held following the DDM-CESAG HHRAA conference at the end of Sept. to dissemination HHRAA-funding studies on health financing.

Work with ORANA was done jointly with the BASICS Regional Nutrition Advisor, Serigne Diene, SANA Consultant Lamine Thiam, Dr. Mbaye, ORANA Director, and Maty. We did the initial planning for the December meeting of the ORANA focal points from 9 countries to be funded by SANA, and the training course on advocacy and the use of PROFILES for two people from each country to be held in March, 1997. BASICS will fund most of the PROFILES/advocacy workshop, though SANA will contribute facilitation for preparation and organization of the course.

321. Background paper on health systems for the Comité permanent Inter-Etat de lutte contre la sécheresse dans le Sahel (CILSS).

PRODUCTS: A document not to exceed twenty-five pages, in accord with the following scope of work. The document will be written in English, and submitted to SARA in WordPerfect 5.1 or 6.0 format, on or before August 31, 1996.

This paper has been drafted and submitted to AID for review by SARA consultant Hugh Waters. Though brief, the paper touched upon the following themes:

- ◆ Some background on health status, causes of mortality, morbidity, nutritional status, drawing up the DHS comparative data across countries, and making some comparison with other regions/sub-regions in Africa.

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- ◆ Some background on present constraints to health delivery and issues (human resources—quantity, distribution, pre-service training, financial resources and devaluation, low coverage of systems, hazy outreach strategies, drug-supply issues, quality-of-care issues, cost recovery/containment/sharing, etc)
- ◆ Ways in which countries are dealing with these constraints, through reforms (decentralization, cost sharing, public private partnerships, increased community ownership and involvement)
- ◆ Approaches of the major donors and their contributions (World Bank and its Sector Investment Programs, USAID, the EU, and UNICEF).
- ◆ Role and potential of some Regional Institutions—OCCGE (including ORANA), CERPOD, CESAG for capacity building on health systems
- ◆ Gaps and/or areas needing more support (e.g., capacity building for health management in decentralized systems; behavior change for HIV and reproductive health; nutrition; information sharing and networking to exchange experiences and best practices; applied health systems research to monitor and evaluate reforms; development of overall financing strategies for the health sector, improved teaching in training schools, etc.)

This document has been translated into French and is being reviewed. It will be produced and distributed in French and English in the next one or two months.

322. Multisectoral approaches to HIV/AIDS Prevention and Mitigation in Africa

PRODUCT: A series of *AIDS Briefs* for sectoral planners and managers covering the following topics:

- Commercial Agriculture (see attached example)
- Education Sector
- Health Sector
- Manufacturing Sector
- Military Populations
- Mining Sector
- Subsistence Agriculture Sector
- Tourism Sector

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SARA is producing the *Briefs* in English. They will be available for dissemination in October, 1996. French translation support is being sought by M. Claude Raynaut at the Societé d’Afrique et Sida in Bordeaux. SARA will provide folders in French for the French version when it has been translated.

323. Participation at the Fifth Congress of the Association for Health Information and Libraries in Africa (AHILA) at the WHO Regional Office for Africa by Judy Brace, related to SARA dissemination work with ECSA dissemination centers

PRODUCT: A trip report covering the AHILA Congress, the ad hoc meeting with the ECSA Dissemination Center coordinators and Lawrence Gikaru, and the meeting with Dr. Nhiwatiwa.

The Regional Office of WHO, AFRO, was the sponsor of the Congress which was convened to “provide an opportunity for a cross-section of the health information professionals of the Region to contribute to the planning of strategies for improving access to health literature and information.” In addition, AHILA looked to “improve [its] functioning by creating mechanisms for the formal institution of national chapters of the association” and to formulate “a concrete plan of action to assure the sustainability of the African Index Medicus”—an annotated bibliography, by country, of studies, articles, books, and reports produced in Africa.

A panel on **New Networks** was presented by Lawrence Gikaru, the SARA-funded Coordinator for Dissemination at CRHCS/ECSA in Arusha, along with five of the national dissemination coordinators whose centers are funded through SARA purchase orders. There were, in addition, representatives from other of our dissemination centers, making possible a good SARA/CRHCS meeting with Nancy Kamau of Kenya, William Kazembe of Malawi, Wilson Lendita of Tanzania, Fred Kalyowa of Uganda, Regina Shakakata and Nora Mumba of Zambia, Helga Patrikios of Zimbabwe, and Lawrence.

The dissemination centers are really breaking new ground by beginning a process of outreach and advocacy in their communities on issues of reproductive health. Lawrence is in the process of preparing a new issue of the bulletin, **Update**, that will describe these new activities.

324. Workshop at CESAG in Dakar, Oct. 4–5, 1996, following the DDM-run dissemination workshop

PRODUCTS: A set of recommendations to CESAG on the development of this degree program.

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Twenty-five people—decision makers from Ministries of Health, donor personnel, practicing health economists, USAID advisors and project personnel—reached consensus on what the region requires in terms of a cadre of health economists/policy analysts. The role of cadre members, their potential employers, the number of such economists/analysts needed, and the content of their training were all outlined. This exercise is part of CESAG's strategy for designing a Masters Degree in Health Economics. Collaboration between CESAG and Harvard University, Abt Associates, and others is expected to follow this initial step in curriculum development.

325. Technical Support for Focused Consultations on Crisis Prevention, Mitigation, and Recovery in West and Central African (WCA) countries.

PRODUCT: In addition to his inputs into the team's report, Dr. Duale will prepare a trip report that provides recommendations: a) for revising the HHRAA paper on "Crisis Prevention, Mitigation and Recovery: Linking Relief and Development through Public Health", b) on potential activities for HHRAA/SARA support in the area of epidemics preparedness, prevention, and management in WCA, and c) on African institutions and individuals who should be considered for collaboration.

Dr. Duale's trip extended well into the next project year.

326. Support to the World Bank meeting in Dakar on its Better Health in Africa initiative, September 16–20, 1996. This SARA support would be provided by subcontractor African Consultants International in Dakar.

PRODUCTS: A meeting plan, a successful meeting, and a final report.

SARA support through ACI was central to the meeting and its outcomes. ACI was praised by the Bank.

327. Ongoing support to HHRAA from Lynne Gaffikin

PRODUCTS: Completed documents for both activities.

Task order withdrawn.

328. ACI support to meeting of health donors in West Africa, Bamako, October 24–26, 1996

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PRODUCTS: A successful meeting and input into the meeting documents.

Approved. Preparations underway.

329. ACI support to CERPOD on the Indicators Project

PRODUCTS: The three documents noted above.

Some delays took place also in the development of this manual. A first draft, entitled *Indicateurs de Base des Services de Sante Primare: Manuel de Reference*, was completed in September and is currently under review. CERPOD staff and consultants worked closely with the Ministry of Health in Mali in determining the content of the manual. SARA/ACI Consultant Gary Engelberg assisted with its design. The manual will be tested at decentralized training settings in Mali in the coming year.

330. CERPOD Regional Advocacy Training Workshop, October 14–19, 1996

PRODUCTS: A trained core group of advocates on reproductive health issues, especially for adolescents, with plans outlined for each country.

Approved. Preparations underway.

331. Support for up to eight African delegates to the Consultative Group Meeting of the Children's Vaccine Initiative (CVI), Dakar, December 9–10, 1996.

PRODUCTS: A brief trip report from each participant giving his/her reflections on the meeting and its implications for their own efforts.

Approved. Preparations underway.

332. West Africa travel by Suzanne Prysor-Jones, to Burkina Faso and Senegal

PRODUCTS: Ouagadougou: Identification of promising approaches to improving in-service training and ways with which to collaborate with BASICS and FHA-WCA in Francophone Africa. Dakar: Trip report: Recommendations for follow up by USAID on curriculum development for the CESAG masters in health economics, and an outline of a strategic plan for ORANA.

In Burkina, she attended the Forum on Reproductive Health Teaching in Medical and Paramedical Schools in Francophone Africa, held in

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Ouagadougou by the REDSO/WCA Family Health Project. Chief organizers were Alain Damiba of JHPIEGO and the Reproductive Health Research Network's Burkina branch. There were over 200 participants at the forum, and country delegations were of up to nine people. Most countries came to the Forum with a plan to improve teaching in Reproductive Health. This is an achievement in itself. University professors, teachers from nursing schools, and Ministry of Health personnel worked together, often for the first time, to produce these plans. During the Forum some progress was made in reaching a shared vision of what needs to be done to improve teaching in reproductive health. Child-health issues, although included in the new definitions of reproductive health, received less attention. The key issue is the ability of the Family Health Project and other donor partners to follow up in helping countries to refine, find funding, and implement their country plans.

Also, cf. # 324.

- 333. Travel support for Dr. Manuel Carballo, the Director of the WHO International Centre for Migration and Health, from New York to Washington (RT).**

PRODUCTS: Travel logistics.

Cancelled.

- 334. Support for participants' travel to Ethiopia for November conference on health-care financing, in concert with the World Bank and UNICEF.**

PRODUCTS: Travel logistics.

Conference delayed to 1997.

Appendix H: Workplan FY96

Appendix H—Workplan FY96

SARA WORKPLAN FOR 1996-1997

INTRODUCTION

This workplan builds upon the activities and accomplishments of HHRAA and SARA's work during the previous three years and on the recommendations of the HHRAA Midterm Assessment. The main focus of the activities will be on dissemination and advocacy to ensure that the key findings and messages emerging from the AFR/SD/HRD portfolio are reaching the appropriate audiences. Of necessity, SARA is a project responsive to the Africa region's needs, and USAID and REDSO requests channeled through AFR/SD, so additional activities may gain priority during the year. SARA will seek to be responsive to AFR/SD/HRD requests relating to:

- dissemination and advocacy opportunities
- consultative and professional meetings
- collaboration with other A.I.D. projects or donors
- work with African institutions

As a result of this flexibility, activities might be dropped from or added to this workplan during the year. But whatever changes are made will be in accord, and consistent, with the SARA contract and approved by the SD CTO for SARA.

OVERALL OBJECTIVES FOR 1996-1997

1. Support AFR/SD systems for portfolio management and evaluation of HHRAA activities.
2. Develop and maintain innovative channels of communication with the field (A.I.D. Missions, REDSOs, and African institutions).
3. Collaborate with various HHRAA cooperating agencies in packaging, disseminating, and advocating the use of information generated by the AFR/SD Analytic Agenda.
4. Strengthen and oversee African institutions' participation in the implementation of HHRAA activities.

AREA I: CHILD SURVIVAL**Objectives for 1996–1997**

1. In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
2. Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
3. Assist in disseminating and promoting the use of the Africa Bureau Framework for the Implementation of Child Survival Programs.
4. Organize the dissemination of R, A, & D Strategic Frameworks in the child survival area.
5. Carry out analysis, dissemination, advocacy and evaluation in support of the child survival strategy.

Activity	Output/Indicator	Action Date	Responsible Person
1. Assist AFR/SD in the selection of key messages and development of specific dissemination and advocacy action plans for priority issues.	Advocacy plans, advocacy initiatives		
2. Develop a monograph on the sustainability of community-based programs for the use of insecticide-impregnated mosquito nets for malaria control.	Monograph developed, reviewed, produced and disseminated	final product by 7/31/96	Clive Shiff (JHU) S. Duale
3. TA to AFR/SD/HRD in the implementation and monitoring of its collaborative work with WHO/AFRO in strengthening malaria prevention and control programs in Africa.	Provide resource persons for meetings, and activity reviews	ongoing	S. Duale

4.	Finalize and disseminate the African Bureau's "Framework for Child Survival Programs" document.	Document final and disseminated per SD direction	June 1996	S. Prysor-Jones
5.	Finalize and disseminate the Guide for Integrated Case Management, and promote and monitor its use with key agencies (BASICS, WHO/AFRO, UNICEF, NAPHI).	Printing of 500-1000 copies of the final version of the ICM Guide in English, final version of French translation; printing of 500 copies of Guide in French. Distribution of publication in Africa.	June 1996	S. Prysor-Jones
6.	Training of facilitators in the use of the Guide .	Trainings held	ongoing	M. Claesson
7.	Preparation of presentation materials about the Guide (overheads, slides) for HHRAA use with donors, CAs, etc.	Materials produced when called for	ongoing	SARA dissemination person
8.	Provide facilitation assistance to the BASICS-sponsored IEC conference in West Africa.	Workshop held, facilitation provided	April-May 1996	ACI
9.	Finalize and disseminate Hugh Waters' paper on the status of CDD and ARI programs in Africa.	Document final and disseminated per SD direction	June 1996	H. Waters S. Prysor-Jones
10.	Provide technical assistance to HHRAA on the design and follow-up of African child-survival activities.	Requests for TA met	ongoing	S. Prysor-Jones S. Duale
11.	Assist in the development of advocacy strategy, including selection of messages.	Core groups formed, messages chosen	August 1996	S. Prysor-Jones S. Duale P/N

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|---|--|----------------|---------------------------------|
| 12. Advocacy materials (e.g., Powerpoint) to use with USAID, CAs, and other donors to promote comprehensive approach in designing health programs (including health policy reform, health care financing, systems strengthening, community outreach). | Materials produced when called for | ongoing | SARA dissemination person |
| 13. Organize a workshop to promote and monitor the adoption and use of systems for commodities logistics management (CLM). | Workshop held | TBD | S. Prysor-Jones
M. Harvey |
| 14. Training in the use of the CLM software in four countries. Translation of the MSH training materials and the essential drug book into French. | Trainings held | ongoing | SARA consultant for translation |
| 15. Presenting findings from TDR care-seeking behavior study in appropriate package. | Materials produced when called for | TBD | S. Duale |
| 16. Editing, printing (500 copies) of Nutrition Practices Manual ; translation into French; printing (500) copies of Manual in French. Distribution of publication in Africa. | Publication, translation, dissemination complete | September 1996 | E. Piwoz |
| 17. Preparation of presentation materials about the Manual (overheads, slides) for HHRAA use with donors, CAs, etc. | Materials produced where needed | September 1996 | SARA dissemination person |

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|--|------------------------------------|-------------|---------------------------|
| 18. Preparation of presentation materials illustrating key points of EPI paper for presentation to other donors—as needed—to promote donor coordination. | Materials produced when called for | August 1996 | SARA dissemination person |
| 19. Guide developed and used for action planning at six training meetings on EPI management. | Guide in use as indicated | ongoing | S. Prysor-Jones |
| 20. Interagency coordinating meetings (two over two years) planned and held. | Meetings held | TBD | SARA staff |

AREA II: POPULATION, FAMILY PLANNING, AND REPRODUCTIVE HEALTH

Objectives for 1996–1997:

1. In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
2. Provide technical assistance to African institutions in implementing approved research, analysis, and advocacy activities.
3. Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
4. Document and disseminate HHRAA/SARA successes and lessons learned within USAID and to the broader donor community.

Activity	Output/Indicator	Action Date	Responsible Person
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General Assistance for Africa Bureau Activities:

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|---|--|--------------------------------------|---|
| <ol style="list-style-type: none"> 1. Assist AFR/SD in the management of their portfolio, including literature reviews, organization of consultative/briefing meetings, and assistance with the development of impact action plans. <ol style="list-style-type: none"> a) Vertical and integrated family planning service delivery. b) Urban family planning programs. c) Social marketing of reproductive health services to adolescents. d) Impact of HIV on health care providers. | <p>Plans developed and monitored for HHRAA research and analysis activities; study results reviewed; impact action plans implemented</p> | <p>March–
September
1996</p> | <p>L. Gaffikin
R. Smith
L. Touré
S. Duale</p> |
|---|--|--------------------------------------|---|

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|----|---|---|---------|---|
| 2. | Assist AFR/SD in the selection of key messages and development of specific dissemination and advocacy action plans for priority issues: | Resources leveraged from other donors, NGOs; publications, meetings, workshops, press releases, e-notes, etc... completed; changes in policies, programs and strategies documented and disseminated | ongoing | L. Gaffikin
R. Smith
L. Touré
J. Brace |
| | a) improving FP services in African urban settings | | | |
| | b) expanding programs for adolescents | | | |
| | c) emergency maternal care; post-abortion FP services | | | |

Cluster A - Improving Service Delivery for Family Planning & Reproductive Health:

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|----|---|---|-----------------------------|---|
| 3. | Assist AFR/SD with production and dissemination of summary policy booklet (fact sheets, etc.), of case study findings from urban studies. | Study findings produced and disseminated; policy, program, and strategy changes documented and disseminated | March–
September
1996 | R. Smith
L. Touré
J. Brace |
| 4. | Continue follow-up actions re: | Resources leveraged from other donors, NGOs; publications, meetings, workshops, press releases, e-notes, etc... completed; changes in policies, programs and strategies documented and disseminated | March–
September
1997 | L. Gaffikin
L. Touré
S. Duale
ECSA |
| | a) dissemination of abortion monograph and promotion of improved policies and programs for emergency maternal services | | | |
| | b) summary policy booklet on consequences of unsafe abortion, to be finalized and disseminated by ECSAHC | | | |

- c) additional activities include three country reports (Malawi, Uganda, Zambia) to be produced and disseminated
- d) three in-country workshops
- e) coordinating meeting for donors
- f) presentation of findings at the SAGO 4th Conference

5. Continue assessing and documenting the impact of Anglophone medical-barriers workshop held in Zimbabwe.

Third newsletter produced and distributed; comprehensive documentation of process completed; impact assessment completed and results widely disseminated in variety of formats

March–
September
1996

L. Gaffikin
L. Touré

Cluster B - Target special Groups: Young Adults and Men

- | | | | |
|---|---|----------------------------------|---|
| 6. Provide technical and financial support to CERPOD for follow-up activities re: study on tendencies and determinants of contraception and reproductive health in adolescents. | | March 1996–
September
1997 | R. Smith
L. Touré |
| a) Dissemination of policy booklet | Technical reports and policy booklet completed and disseminated | March–July
1996 | R. Smith
L. Touré
J. Brace |
| b) Advocacy training for CERPOD staff (+Reproductive Health Network members) using the findings from the Adolescents study | Advocacy training for CERPOD staff completed | September
1996 | L. Touré
R. Smith
S. Prysor-Jones |
| c) Carry a session on the results and policy implications of the adolescents study during the SAGO 4th Congress | Study summarized and results presented to SAGO | December 1996 | L. Touré
S. Duale |
| d) Carry selected activities from country-level action plans in conjunction with the REDSO West Africa Project and other donors | Selected activities from country-level action plans implemented; additional resources leveraged from other donors, NGOs, Projects (YAP); impacts documented | June 1996–June
1997 | L. Touré
R. Smith
S. Prysor-Jones |

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|---|--|-------------------------|-----------------------------|
| 7. Participate in and provide follow-up support to the MACRO/WHO workshop on male involvement in family planning. | Four participants sponsored; Basic advocacy training completed for all participants; one or more of the identified priority actions on male involvement implemented in collaboration with RHNetwork | April-June
1996 | L. Touré
R. Smith |
| 8. Support the revitalization and coordination of the Reproductive Health Network and their efforts with "male involvement" and "adolescent" research and advocacy. | One priority activity (male involvement or adolescents) from selected country-level action plans implemented; advocacy training completed for network members; selected countries visited by Executive Secretary with SARA support to coordinate regional efforts; impacts documented and disseminated | May 1996-
March 1997 | L. Touré
S. Prysor-Jones |

Cluster C - Using the Media to Improve the Policy Environment

9. Establish a senior-level radio and print journalist board from six Francophone countries to increase media coverage of HHRAA priority population and reproductive health issues.

Seminar conducted; local production of supplements/radio broadcasts completed; regional summary of print and broadcast programs produced and disseminated; media guide published and disseminated; usefulness of media as a tool to improve the policy environment assessed, documented and distributed

March 1996–
March 1997

V. Ebin
R. Smith
G. Collinet

AREA III: NUTRITION**Objectives for 1996–1997**

1. In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
2. Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
3. Disseminate the strategic framework on child nutrition, and other relevant materials, in Africa.
4. Conduct advocacy and disseminate information to support nutrition interventions in Africa.
5. Support African institutions and nutrition networks, where appropriate, to improve nutrition policy and research.

Activity	Output/Indicator	Action Date	Responsible Person
1. Assist AFR/SD in the selection of key messages and development of specific dissemination and advocacy action plans for priority issues.	Plans developed, advocacy initiated	ongoing	E. Piwoz
2. Assist AFR/SD in the management of their analytic agenda, including organization of consultative meetings and assistance with review and oversight committees (priority areas: maternal nutrition, dissemination, and use of DHS materials).	SOWs developed and monitored for HHRAA research and analysis activities; study results reviewed; consultative meetings organized, as appropriate.	April– September 1996	E. Piwoz S. Prysor-Jones P. Haggarty
3. Assist AFR/SD in the advocacy and dissemination of key messages and research findings through publications, workshop/meetings, media reporting, targeted communications, etc.	Publications, meetings, workshops, press releases, e-notes, etc...	April– September	E. Piwoz J. Brace

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|----|---|---|-----------------------------|--|
| 4. | Disseminate the strategic framework on child nutrition to African institutions. | Paper disseminated | April–
September
1996 | E. Piwoz
J. Brace |
| 5. | Assist the implementation, monitoring and evaluation of selected analysis and dissemination and advocacy activities of the ECSA nutrition network. | Information packaged and disseminated | April–
September
1996 | E. Piwoz |
| 6. | Monitor and evaluate the impact of the Makerere workshop on the implications of DHS and other data for nutrition plans and strategies. | Monitoring and evaluation plan developed and implemented, impact documented | April–
June 1996 | E. Piwoz
E. Sommerfelt
ECSA |
| 7. | Assist the implementation of selected advocacy and dissemination activities on nutrition in West Africa, including technical support and collaboration with ORANA. | Analyses done, information packaged and disseminated | ongoing | S. Prysor-Jones
E. Piwoz
AED
BASICS |
| 8. | Field test revisions, and printing (300 copies) of the <i>Designing by Dialogue</i> Manual; translation into French and printing (200 copies). Distribution of publication in Africa. | Fieldtest complete, manual produced, packaged, and disseminated. | April–
September
1996 | E. Piwoz
Freedom from Hunger
BASICS |
| 9. | Preparation of presentation materials about the manual (overheads, slides) for HHRAA use with donors, CAs, etc. | Materials ready as needed | ongoing | SARA dissemination
person |

10. Completion and editing of papers on complementary feeding, exclusive breastfeeding, and maternal nutrition. Produce (250 copies) and disseminate.

Papers produced, discussed, and disseminated

April–July

E. Piwoz
J. Ross
A. Mukuria
J. Baker

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AREA IV: EMERGING THREATS AND CRISIS RESPONSE

Objectives for 1996-1997:

1. In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
2. Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
3. Disseminate key findings emerging from HHRAA-funded studies on HIV/AIDS and emerging threats.
4. Promote and advocate the use by USAID Missions and African institutions of key findings and recommendations emerging from the HHRAA portfolio in the formulation of strategies and programs for the prevention and mitigation of HIV/AIDS and other emerging threats (TB, STIs,...)
5. Support AFR/SD and REDSO/ESA in the implementation of their initiative on the integration of STI services with FP, MCH, and PHC programs.

Activity	Output/Indicator	Action Date	Responsible Person
1. Assist AFR/SD in the selection of key messages and development of specific dissemination and advocacy action plans for priority issues.	Plans developed, advocacy initiated	ongoing	S. Duale
2. Produce and disseminate the report of the HHRAA-sponsored workshop on HIV/AIDS in Kampala.	Report produced and disseminated	December 1995-February 1996	S. Duale
3. Develop and produce debriefing materials on HHRAA-sponsored studies on HIV/AIDS (Cluster A).	Executive summaries, slides/overheads produced	March 96-	S. Duale J. Brace SARA dissemination person

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|--|---|----------------------------------|----------------------|
| 4. Develop a lessons learned paper on Partner Notification Strategies for STI control. | Paper developed, produced and disseminated | March–
August 1996 | M. Post
S. Duale |
| 5. Develop an issue paper on crisis prevention, mitigation and recovery. | Paper developed, produced, and disseminated | October 1995–
June 1996 | N. Mock
S. Duale |
| 6. Consultative meeting on crisis prevention, mitigation, and recovery: linking relief to development. | Consultative meeting planned and organized, meeting recommendations used to finalize the issues paper | June 1996– | N. Mock
S. Duale |
| 7. Promote use of PSAPP materials for improving workplace HIV/AIDS programs in Africa. | TOT workshop on adaptation and use of PSAPP materials | March 1996– | S. Duale
J. Brace |
| 8. Develop a short term course in collaboration with NAPHI on managing future HIV/AIDS programs in Africa. | African institutions contacted (NAPHI, NARESA, NARWCA, WHO/AFRO) curriculum developed, course and promotional materials developed, faculty and sites identified, course offered | March 1996–
September
1997 | S. Duale |
| 9. Support an update on HIV/AIDS and STIs workshop for Journalists in West and Central Africa. | Workshop planned and organized | September
1996– | R. Smith
S. Duale |

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|--|---|----------------------------------|----------------------|
| 10. A study on the role of nurse midwives in integration of STI services into FP and MCH programs in the ECSA region. | Study protocol developed and reviewed, study implemented and data analyzed, report produced and disseminated, policy and program recommendations promoted and implemented | March–
December 1996 | M. Post
S. Duale |
| 11. Support AFR/SD/HRD and REDSO/ESA initiative on integration of STI services into FP, MCH, and PHC programs. | Working group meetings organized as required, studies and results reviewed, TA assistance for future integration conference, syntheses prepared and disseminated | March 1996– | M. Post
S. Duale |
| 12. Develop computer model on estimating the spread of TB due to HIV/AIDS in Africa. | Computer model developed, training of designated USAID/W staff in the use of the model | October 1995–
June 1996 | S. Duale
P. Spain |
| 13. Purchase and distribute about 200 copies of the NAS report on Preventing and Mitigating HIV/AIDS in Sub-Saharan Africa. Possible printing of a combined English/French publication of the short policy document. | About 200 copies of the report purchased and distributed to African institutions | February 1996–
December 1996 | J. Brace
S. Duale |
| 14. Support dissemination of findings emerging from the HHRAA-funded studies on TB. | Technical review of reports submitted by HHRAA CAs working on TB, syntheses and executive summaries prepared and disseminated; cables, e-notes | March 1996–
September
1997 | S. Duale |

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|---|---|----------------------------------|---|
| 15. Hiring health economists and social scientists to review <u>both</u> NAS and World Bank studies to identify a common set of key messages/lessons from them. | Technical working groups organized, key messages/lessons identified | March 1996–
December 1996 | S. Duale
R. Porter |
| 16. Preparation of presentation materials about epidemic dysentery and cholera for meetings/workshops/TDYs. | Technical reports reviewed and presentation materials prepared. | March 1996–
September
1997 | M. Post
S. Duale
J. Brace
SARA dissemination
person |

AREA V: EDUCATION**Objectives for 1996--1997:**

1. In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
2. Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
3. Support ERNWACA in building its role as a research network in West Africa.
4. Assist AFR/SD with the development and management of its analytic agenda.
5. Conduct analysis and dissemination on key issues, through ERNWACA and ERNESA and other African institutions wherever possible.

Activity	Output/Indicator	Action Date	Responsible Person
1. Assist AFR/SD in the selection of key messages and development of specific dissemination and advocacy action plans for priority issues.	Plans complete, advocacy initiated	ongoing	J. Brace J. Dehasse/ERNWACA
2. Provide technical support to SFR/SD analytic agenda activities.	Protocols developed, annotated bibliographies, syntheses	April 1996– October 1996	P. Spain Consultants
a) review of decentralization issues in the education sector	Document complete	August 1996	
b) study of teacher as broker	Study complete and documented	September 1996	P. Spain Consultants
c) study of the use of conditionality for education policy formulation	Studies complete and documented	June 1996	ERNWACA

d) review of health and education interface experiences	Resource guide complete	August 1996	S. Prysor-Jones J. Brace K. Christopherson J. Moulton
3. Assist AFR/SD in the dissemination of research findings through publications as follows (a-y):	Publications, meetings, workshops, press-releases, e-notes, etc.	April 1996– March 1997	J. Brace
Reform Strategies (Joy)			
a) Preparation of synthesis policy document; design, translate, print, and distribute 300 copies (200 English, 100 French).	Tasks complete	TBD	SARA dissemination person J. Brace
b) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French).	Tasks complete	TBD	SARA dissemination person J. Brace
Educational Decentralization (Jim)			
c) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French).	Tasks complete	TBD	SARA dissemination person J. Brace
d) Preparation of two synthesis policy documents from the report; design, translate, print, and distribute 300 copies each (200 English, 100 French)	Tasks complete	TBD	SARA dissemination person J. Brace

Policy/Program Formulation (Karen, Ash)

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|---|----------------|-----|---------------------------------------|
| e) Preparation of case studies and analysis: editing, production, printing, distribution of 200 copies. | Tasks complete | TBD | SARA dissemination person
J. Brace |
| f) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
| g) Preparation of synthesis policy document: design, translate, print, and distribute 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |

Fundamental School Quality Indicators (Ash)

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|---|----------------|-----|---------------------------------------|
| h) Preparation of two synthesis policy documents: design, translate, print, and distribute 300 copies each (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
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Education Program Impact Assessment (Karen)

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|---|----------------|-----|---------------------------------------|
| i) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
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|--|----------------|-----|---------------------------------------|
| j) Preparation of two synthesis policy documents: design, translate, print, and distribute 300 copies each (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
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Education Program Design Process (Karen)

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|---|----------------|-----|---------------------------------------|
| k) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
| l) Preparation of two synthesis policy documents: design, translate, print and distribute 300 copies each (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |

Conditionality in Education Sector Programs (Joe)

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|---|----------------|-----|---------------------------------------|
| m) Preparation of background paper: editing, production, printing, distribution of 300 copies. | Tasks complete | TBD | SARA dissemination person
J. Brace |
| n) Preparation of report: editing, production, printing, distribution of 300 copies. | Tasks complete | TBD | SARA dissemination person
J. Brace |
| o) Preparation of four country case studies: editing, production, printing, distribution of 300 copies each. | Tasks complete | TBD | SARA dissemination person
J. Brace |

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|--|----------------|-----|---------------------------------------|
| p) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
| q) Preparation of two synthesis policy documents: design, translate, print, and distribute 300 copies (20 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |

Educational Incentives Program (Karen)

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|---|----------------|-----|---------------------------------------|
| r) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
| s) Preparation of two synthesis policy documents: design, translate, print, & distribute 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |

School as Unit of Change/Policy Implementation (Joy/Diane)

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|---|----------------|-----|---------------------------------------|
| t) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
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|---|----------------|-----|---------------------------------------|
| u) Preparation of synthesis policy document: design, translate, print, and distribute 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
|---|----------------|-----|---------------------------------------|

Learning Assessment (Ash)

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|--|----------------|-----|---------------------------------------|
| v) Separate translation, production and distribution of report's executive summary, 300 copies (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
| w) Preparation of two synthesis policy documents: design, translate, print, and distribute 300 copies each (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |

Education/Health Linkages (Jim)

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|---|----------------|-----|---------------------------------------|
| x) Preparation of five synthesis policy documents: design, translate, print, and distribute 300 copies each (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
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Pupil Flow (Jim)

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|--|----------------|-----|---------------------------------------|
| y) Preparation of synthesis policy document: design, translate, print, and distribute 300 copies each (200 English, 100 French). | Tasks complete | TBD | SARA dissemination person
J. Brace |
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Other

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|--|---|-------------------------|---------------------------------------|
| • Revise, "finalize" Education mailing list, and maintain it. | Tasks complete | TBD | SARA dissemination person
J. Brace |
| • Mail out Education Documents list to mailing list. | Tasks complete | TBD | SARA dissemination person
J. Brace |
| • Reprint Basic Education policy paper, making it more appealing. | Tasks complete | TBD | SARA dissemination person
J. Brace |
| • Host Education/Health Linkages meeting. | Meeting held | May 1996 | P. Spain |
| 5. Assist ERNWACA and ERNESA with dissemination activities, including <ul style="list-style-type: none"> • dissemination strategy development • e-mail connectivity where possible • printing of ERNWACA News bulletin (three issues in 1996/97) • synthesis and dissemination of key documents (e.g., state-of-the-art) | Strategy developed; documents packaged and disseminated; news bulletin disseminated | March–
December 1996 | J. Dehasse |

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|--|--|-------------------------|------------|
| 6. Build ERNWACA capability to raise money for research using various techniques—including the participation of ERNWACA commissioned researchers to externally funded research programs—and in particular to set up a small grant fund aimed at strengthening educational research capabilities of young African researchers and to maintain them in Africa. | Mechanisms identified; funds raised; small grants fund operational | May 1996–
April 1997 | J. Dehasse |
| 7. Collaborate in the evaluation of ERNWACA and assist them to develop an operational strategy based on the results. | Joint SARA/ ERNWACA progress report submitted to evaluators and donors | March 1996 | |
| | Evaluation report | April 1996 | |
| | Suggestions for an operational strategy for the development of ERNWACA during the next phase | May 1996 | |
| | New strategy approved by ERNWACA at Strategy Workshop | June 1996 | |

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|--|---|-------------------------------------|
| <p>8. Develop ERNWACA national chapters capabilities to gather and organize existing or newly collected hard data on the workings of national education system, to provide services or participate in the conduct of sector assessments financed by external agencies, and to organize all relevant material in formats usable for policy debates.</p> | <p>Formats to organize material jointly produced (SARA/ERNWACA/DAE-WGESA)</p> | <p>June 1996–
February 1997</p> |
| <p>9. Develop ERNWACA national chapters capabilities to initiate and/or to participate in relevant educational policy debates at the national and regional level, and to enrich these debates with materials collected and organized under 8.</p> | <p>Strategy to initiate policy debates at national level fully developed at a strategy workshop, existing resources to conduct policy debates identified and informed (alerted); formats developed (SARA/ERNWACA)</p> | <p>June 1996–
February 1997</p> |

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AREA VI: HEALTH SECTOR FINANCING AND PRIVATE SECTOR DEVELOPMENT
Objectives for 1996-1997:

1. In collaboration with partner CAs and regional institutions, continue developing and implementing action plans for each activity aimed at ensuring research utilization and policy/program impacts.
2. Explore new approaches for achieving and assessing impact (e.g., utilize a variety of channels such as the media, develop policy-level advocacy strategies, leverage HHRAA/SARA follow-up activities with other donors).
3. Assist HHRAA to move agenda forward through a variety of advocacy and dissemination activities.
4. Continue active dissemination efforts for materials from HSF and DDM projects.
5. Promote integration of HHRAA findings into Mission and REDSO program design; donor activities.

Activity	Output/Indicator	Action Date	Responsible Person
1. Assist AFR/SD in the selection of key messages and development of specific dissemination and advocacy action plans for priority issues.	Plans complete, advocacy initiated	ongoing	P/N
2. Produce a short summary report that will include the methodology for assessing the private sector, as well as the results of four case studies and the proceedings from the Nairobi conference (English and French).	Report done	TBD	P/N
3. Prepare presentation materials based on this information.	Materials ready on time	ongoing	SARA dissemination person
4. Publish, translate, and disseminate guidelines for assessing the private sector (prepared by DDM and BASICS).	Dissemination complete	ongoing	SARA staff

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|----|---|--|---------|---------------------------|
| 5. | Continue dissemination of 22 Questions , English and French versions. | Dissemination complete | ongoing | SARA staff |
| 6. | Prepare presentation materials derived from 22 Questions and Strategies to Promote Health Financing Policy Reform . | As needed | ongoing | SARA dissemination person |
| 7. | If decision is made to continue with the document, Strategies to Promote Health Financing Policy Reform and Implementation in Africa , assist in preparation of the document for publication (incorporate suggestions by review panel, write executive summary), produce the publication, and its dissemination. | Dissemination complete | TBD | SARA dissemination person |
| 8. | Print and disseminate health care financing guidelines, once these guidelines have been prepared by DDM and BASICS. | Dissemination complete | TBD | SARA dissemination person |
| 9. | Develop a manual on Monitoring and Evaluation of Health Reform Initiatives in Africa | Manual drafted, vetted, tested, produced, and disseminated | TBD | D. Hotchkiss
N. Mock |

AREA VII: CROSS-CUTTING ISSUES

Objectives for 1996–1997:

1. Assist HHRAA to move agenda forward through a variety of advocacy and dissemination activities.
2. Continue active dissemination efforts for materials from HSF and DDM projects.
3. Promote integration of HHRAA findings into Mission and REDSO program design; donor activities.
4. Support African institutions' work on cross-cutting issues (especially training modules at NAPHI, CERPOD, HSR)

Activity	Output/Indicator	Action Date	Responsible Person
1. Develop a manual to be used for the promotion of research for use by groups such as WHO/AFRO, ENHR, HSR.	Manual in use	TBD	M. Ramah R. Porter S. Prysor-Jones
2. Work with REDSO/ESA to foster and leverage regional support for ECSA-region initiatives, especially capacity building for key health-reform issues.	Regional training underway	ongoing	S. Prysor-Jones
3. Broker the development of CESAG as a regional technical resource for capacity building for health reform.	CESAG providing training in health-reform issues	ongoing	S. Prysor-Jones

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AREA VIII: AFRICAN INSTITUTIONS**Objectives for 1996–1997:**

1. Solidify existing partnerships with African institutions and identify areas of collaboration.
2. Oversee African institutions carrying out specific HHRAA/SARA analytical activities.
3. Develop and maintain a list of selected African experts for each analytic area.

Activity	Output/Indicator	Action Date	Responsible Person
1. Implement and evaluate contracts with partner African institutions:			
• CERPOD (subcontract)	Contracts executed, reports received.		R. Smith S. Prysor Jones
• Continue oversight of CRHCS/ECSA dissemination sub-contract, and manage the processing of new national dissemination centers.	Centers producing outputs as per their purchase orders; final set of centers' workplans approved by SARA and purchase orders prepared and signed	February 1996– ongoing	J. Brace L. Gikaru
2. Provide support and technical assistance to:			
• ERNWACA (purchase order)	Documents packaged and disseminated.		J. Dehasse
• ERNWACA national researchers (purchase orders)	Documents packaged and disseminated.		J. Dehasse

	<ul style="list-style-type: none"> • Monitor ERNESA purchase order for deliverables; review output 	Set of education profiles packaged; series of advocacy meetings held in region	ongoing through February 1997	J. Brace
	<ul style="list-style-type: none"> • APAC 			L. Touré
3.	Explore joint activities with:			
	<ul style="list-style-type: none"> • ORANA 	Joint activities identified and implemented		S. Prysor-Jones E. Piwoz
	<ul style="list-style-type: none"> • Networks and professionals association as advocacy groups for reproductive health (e.g., skills-building workshops) 	Joint activities identified and implemented		L. Touré R. Smith
	<ul style="list-style-type: none"> • Network of Public Health Training Institutions. 	Joint activities identified and implemented		S. Duale
4.	Explore mechanisms to involve African experts in the HHRAA implementation process.	African involvement indicators show progress		SARA staff
5.	Foster professional linkages with:			
	<ul style="list-style-type: none"> • The Society of African Gynecologists and Obstetricians (SAGO) 	Financial and technical support to SAGO Conference	December 1996	L. Touré S. Duale
	<ul style="list-style-type: none"> • The West African Reproductive Health Network 	Joint activities underway	ongoing	L. Touré
	<ul style="list-style-type: none"> • The Network of African Public Health Institutions 	Joint activities underway	ongoing	S. Duale
	<ul style="list-style-type: none"> • The World Bank's Better Health in Africa Initiative 	Joint activities underway	ongoing	S. Prysor-Jones

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| • Networks of AIDS Research in Africa (NARESA, NARWCA) | Joint activities underway | ongoing | S. Duale |
| • WHO/AFRO | Joint activities underway | ongoing | S. Prysor-Jones |
| • WHO Health Systems Research Group | Joint activities underway | ongoing | S. Prysor-Jones |
| • Council on Health Research and Development and the Essential National Health Research Initiative (COHRED/ENHR) | Joint activities underway | ongoing | S. Prysor-Jones |
6. See above (Area VII) for electronic linkages with African partner institutions.

AREA IX: MANAGEMENT**Objectives for 1996-1997:**

1. Continue to support AFR/SD in managing portfolio activities funded under HHRAA
2. Prepare, execute, and monitor subcontracts with African institutions
3. Assist upgrading and maintaining procedures for monitoring and evaluation of HHRAA activities including SARA
4. Establish and maintain communication systems with REDSOs, subcontractors and African institutions

Activity	Output/Indicator	Action Date	Responsible Person
1. Support the management, monitoring and the evaluation of the HHRAA/SARA activities	Impact evaluation of key SARA activities, management system in place, reports produced	Through September 1997	P. Spain L. Gaffikin
2. Prepare, execute and monitor subcontracts with: a. CRHCS/ECSA b. CERPOD c. Other African institutions	Subcontracts executed; financial and technical reports received	Through September 1997	S. Prysor-Jones P. SPAIN
3. Support AFR/SD portfolio reviews and follow-up actions under the HHRAA project.	SARA participation in working groups and implementation of follow-up actions	Through September 1997	SARA staff and focal persons
4. Maintain reporting schedule per contract		Through September 1997	P. Spain AED Contract
5. Draft and track task orders and cables		Through September 1997	P. Spain SARA staff