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# Desarrollo Juvenil Comunitario

A Save the Children Program

Casilla 15120 (Calle Luis Crespo No. 2031) La Paz Bolivia

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## ANNUAL REPORT

### PROGRAM FOR THE REPLICATION OF THE REPRODUCTIVE HEALTH METHODOLOGY WARM IN BOLIVIA

#### MOTHELCARE/SAVE THE CHILDREN BOLIVIA

Title of Project	"WARM NACIONAL"
Provinces, Country of Project	All nine Departments of Bolivia
Duration of Project	10/20/94 to 10/19/95
Total In-Country Budget	\$93,984
Key Personnel	Richard Embry Fernando Gonzales Elizabeth Arteaga
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#### I PROJECT BACKGROUND

The following annual report for the project WARM Nacional is presented to MOTHELCARE by Save the Children Bolivia following the completion of the one year subcontract No 5024-25 signed by Save the Children and John Snow International and dated October 20, 1994. The subcontract supports the AID contract to JSI known as "The Maternal and Neonatal Health and Nutrition Contract". The subcontract period extends from 20 October 1994 to 19 October 1995. The purpose of the WARM project is to provide technical assistance and training to the National Secretary of Health and the 24 member health consortia of PROCOSI in the replication of the WARM methodology. The WARM methodology originates from a successful project initiative undertaken by SC and MOTHELCARE in Inquisivi Province in which a participative, gender sensitive methodology for reproductive health was tested and validated over a four year period.



This report will synthesize the activities and advances made during the year which have been previously described in the four Technical Quarterly Reports presented to MOTHERCARE this year. The report will follow the basic format of the quarterly reports.

The WARM National program was designed by Save the Children for the replication of the successful reproductive health methodology, known locally as "WARM". In 1994 the methodology was accepted as a national level program by the Government of Bolivia and incorporated into its national health plan PLAN VIDA. The participative methodology now serves as the recommended methodology of PLAN VIDA for community based interventions in reproductive health.

Shortly after signing the subcontract agreement with MOTHERCARE, SC/Bolivia also signed a project agreement with the National Secretary of Health on November 25, 1994 which provides official status and the Government's endorsement to Save the Children's technical assistance and training initiative. The agreement stipulates in general terms the parameters of collaboration between SC/Bolivia and the SNS and the expected responsibilities of each party. Since no counterpart funds are involved from the SNS and the contribution of the project is primarily one of technical assistance to the SNS and PROCOSI members, the agreement is simple and straightforward.

The project also extends technical assistance and training to PROCOSI members as a complementary program to the \$1.2 million cooperative agreement funded by USAID Bolivia for reproductive health. The PROCOSI health consortia now has a membership of twenty-four international and national NGO's operating child survival and maternal health programs in Bolivia. By the end of Year I, eight members of PROCOSI were actively involved in the replication of WARM within their respective institutional contexts.

In May 1995 SC/Bolivia signed agreements with GTZ and CCH, both well known bilateral institutional strengthening programs of the German Government and USAID Bolivia which extends the influence of the project to 24 districts in six departments covered by GTZ, and 6 Districts covered by CCH in three departments. (A list of districts is provided in the appendices.) This unanticipated collaboration has given the project added recognition and important new financial and personnel resources for implementing the WARM methodology at the District level. With the bilateral and NGO coverage reinforcing the NSH, the technical assistance project will reach in 1996 an estimated 50% of the total number of health districts currently extending health services to the Bolivian population.

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The WARMI National technical assistance and training project has advanced according to plan and is now operational in all nine departments of Bolivia. An extensive network of regional level offices of the National Secretary of Health, bilateral partners GTZ and USAID Bolivia and at least eight members of PROCOSI are now working in an inter-institutional collaboration that promises to be an even stronger mechanism for planning and problem solving in District level reproductive health programming.

The program concludes Year I having succeeded in operationalizing the project at the regional level in all nine departments and in consolidating our work with inter-institutional WARMI teams functioning in each department. The technical teams are headed by a SRS WARMI Regional Coordinator, named during the project start up phase, and representatives of each institutional partner. The work teams are in various stages of validating WARMI training materials and planning the initial workshops of the Community Action Cycle. The project team had completed one day orientation sessions for SRS and potential partners in Santa Cruz, Cochabamba and Oruro by the end of the reporting period. CARE, PLAN INTERNATIONAL, and ANDEAN RURAL HEALTH PROJECT all continued to advance in their pilot projects replicating the WARMI methodology in a total of 62 communities in the Altiplano region of the country.

The project in the final quarter of 1995 also formed new working relationships with four more NGO's, three of which are members of PROCOSI - PROJECT CONCERN, APROSAR, (both operating in Oruro) and SACOA which operates in Santa Cruz. A fourth NGO CEPAC also joined the inter-institutional technical team in Santa Cruz. In Sucre important links were established with UNISUR, a consortia of health implementing NGO's operating in Chuquisaca Department that includes CARE, PLAN and various national NGO's.

## II. PROJECT PURPOSE

The purpose of this Save the Children/Bolivia Technical Assistance Project is to improve maternal and neonatal health nationwide, especially in rural Bolivia, through the replication of the WARMI Project model by improving training and technical assistance to interested PVOs and NGOs.

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### III. OBJECTIVES

1. A minimum of 7 PROCOSI PVO's will be trained in the Warmi Project Methodology and will apply it in their work in rural areas of Bolivia nationwide reaching approximately 100,000 women of reproductive age
2. SC/Bolivia will provide technical assistance in the field to all participating PROCOSI members
3. The PROCOSI PVO network will document the process and results of this project and will disseminate this information to key institutions in Bolivia (Government of Bolivia, universities, donors, other PVO's).

### IV. SPECIFIC PROJECT RESULTS ACHIEVED DURING THE YEAR

#### 1. Personnel

SC/Bolivia recruited a five person training team in September 1994 who were selected from the Inquisivi health team of field supervisors. All five persons had at least three years experience with the process of developing the WARMImethodology. The team was involved from the beginning in the development of the training modules for the replication of WARMI. Based in La Paz during the first eight months of the project, the team refined their skills as WARMI trainers working with PLAN, CARE and ARHP in the initial replication activities of the project. By the end of the third quarter the SC WARMI training team had been assigned to the nine departments with small offices established within the premises of the SRS in Santa Cruz, PROJECT CONCERN in Cochabamba; and CARE in Potosí.

The distribution of WARMI trainers for covering all nine departments is the following

Romelia Antonio	Santa Cruz, Beni/Pando
Glicerio Quispe	Cochabamba, Tarija
Elsa Ramos	Sucre, Potosí
Marcellino Brañez	La Paz, Oruro

Given the increasing complexity of the WARMI Nacional project, especially in terms of the unanticipated growth and complexity of inter-institutional relationships with the SNS and other partner organizations, SC/B decided to name a new project coordinator, Lic Elizabeth Arteaga, who brings to the project ample experience in reproductive health, non



formal education, materials development, and inter-institutional coordination. The former coordinator accepted an offer to remain in the project as a Trainer in Sucre/Potosi. SC/B believes that this change strengthens the project's relationship with the SNS and its regional offices as well as the PROCOSI association. Dr. Fernando Gonzales, SC Health Advisor provided technical backstopping to the project throughout the year during the implementation of the program in 1995.

## 2. RELATIONS WITH THE NATIONAL SECRETARY OF HEALTH

With the signing of the project agreement, WARMI Nacional received its official status and endorsement from the Government of Bolivia and in particular the National Secretary of Health. Following the signing of the agreement, in late January 1995, the Secretary of Health named Dr. Alberto De La Galvez as the National Coordinator for the WARMI Nacional project and the project began to take on a more operational focus. By the end of the second quarter the NSH had named WARMI coordinators in the nine departments.

Despite the delays in the project start up process, the project has continued to receive positive support by NSH senior officials. The National Start Up workshop in June served to crystallize the collaboration with the NSH as the methodology gained attention from health professionals from the various regions of the country. The signing of technical cooperation agreements with GTZ and CCH were also key events which solidified the collaboration with the NSH.

Since the completion of the National Start UP workshop in late June, the project has built momentum that extends to all nine departments. Collaboration with the SNS National Coordinator for WARMI continues to be both timely and substantive in moving the process forward. At the Departmental level relationships with the nine SRS offices are constructive in all cases, but more varied in productivity and results. Per the work plan developed during the Start Up Workshop, the regional teams are primarily engaged in a review and validation of the WARMI materials in their diverse cultural contexts, orienting professionals to the methodology who did not attend the Start Up Workshop and planning the initial workshop on the Autodiagnostic phase of WARMI.



In those departments with the strongest SRS/PVO or Bilateral collaboration, one observes the most progress in operationalizing WARMI at the District and community level. The case of the SRS and CARF in Potosi in Yocalta District is a good example.

In La Paz Department, PLAN and ANDEAN RURAL HEALTH PROJECT have made impressive strides in training their own staff in the methodology but the SRS has been slow to move. With a new Regional Director coming into office in October, SC/B will renew its contacts with the SRS during the next month so that the current stagnation of WARMI in La Paz Department is broken. The current budgetary problems of CCH are expected to be resolved before the end of the year so that its activities with the SRS in La Paz will be intensified in January.

In Santa Cruz and Cochabamba the introduction of WARMI has been problematic due to its perceived competition for the time of SRS staff in other PHC obligations. Each Regional office has a broad menu of interventions and special programs that are already being implemented during budget year 1995. Both the SRS and CCH have expressed concern for the over commitment of their staff. This problem is being resolved with a letter from the SNS WARMI National Coordinator to all SRS Directors advising them of the importance of WARMI, its relevance to attaining the objectives of PLAN VIDA and the need to insert WARMI as a priority in the calendar of activities in the new annual operating plans for 1996.

In the Departments of Sucre and Tarija the project is advancing steadily with the organization of regional work groups and validation of the WARMI materials.

Orientation sessions of one day duration were organized in Santa Cruz, Cochabamba, and Beni/Pando to orient those professionals from the SRS, GTZ/CCH and PROCOSI members about the WARMI National project.

### 3. COMPLETION OF TRAINING MODULES FOR NATIONAL AND REGIONAL WORKSHOPS

During the first quarter of the project the staff completed training designs and materials that have been used in the national level start up workshop and regional workshops with PROCOSI partners. An external consultant located in Bolivia

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was recruited prior to the subcontract signing to assist SC/Bolivia in the development of training modules for facilitating the transfer of the Warmi methodology in its various components to participating institutions. The modules were completed as scheduled and staff spent two days in a workshop in September to critique the modules. Revisions have subsequently been made to materials

The four essential training modules for each phase of the WARMI Community Action Cycle have been fully developed and have been tested successfully with the personnel of PVO partners, some of which, such as CARE, ARHP, and PLAN, have completed the full cycle of training for key staff. They now have core technical staff which are able to facilitate other WARMI training activities in support of the NSH in Potosí and La Paz Departments, as well as the supervision of WARMI community level application. All three partners have continued to receive technical support in workshops and field visits by WARMI staff throughout the year. SC has been able to use this initial NGO collaboration to critically analyze with its partners the training designs, the skills of the WARMI team and problems of application at the community level. With the subsequent recommended revisions the WARMI team has been able to incorporate necessary adjustments in the training and technical assistance program that is being offered to its "client base" in 1996.

During the period of June 19-22, Warmi Nacional implemented the National Start-up Workshop which was held June 19 through June 22. The workshop was widely attended by representatives of the PROCOSI member institutions, the bilateral health projects of GTZ and CCH and representatives from the National Secretary of Health (NSH) and all nine SRS offices. MOTHERCARE was represented by the Director of the La Paz office. A total of 64 professionals participated in the inauguration of the event. The field level part of the workshop included a total of forty professionals from eighteen members of PROCOSI and all nine departmental offices of the NSH.

This event marked the first of a series of national and regional level activities that the Warmi Nacional Project plans to implement over the next two years. One of the most impressive results of the workshop was the successful uniting of health representatives from the public sector with those from non-governmental organizations and private sector medical services to discuss participative, community

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based methods of reproductive health programming. The replication of this inter-institutional coordination in each region is expected to result in a synergistic diffusion of the Warmi methodology in all nine departments of Bolivia. The workshop provided a significant forum for initiating and establishing the basis for collaboration and follow-up planning and implementation of subsequent training events at the regional/departmental level.

This start-Up Workshop was designed to inform the managers of the represented institutions about the goals and strategies of the Warmi methodology and the WARMI Nacional project and to enable health professionals to assess its potential applicability in diverse institutional and multi-cultural contexts of Bolivia. The Workshop methodology included brief discussions covering the theoretical and philosophical basis of the Community Action cycle, as well as field level observation and interaction with participants applying the WARMI methodology in the Inquisivi rural context. Discussions and an open critique of the methodology were encouraged to enable participants to know the methodology and to assess its applicability in different institutional contexts. The final session of the workshop in La Paz was dedicated to regional team building and work plans which were designed to create momentum and commitment to follow-up activities at the regional level. Key follow-up activities have included an intensive review of educational materials and planning of regional level workshops to introduce the methodology, initially to key technical personnel of the NSH and PROCOSI, who will become co-facilitators with SC staff in the four workshops designed for WARMI community based implementors.

The start-up workshop facilitated the clear delineation of functions of the SC, SNH and NGO professionals in the implementation of the project at the regional levels. The workshop served to create a "buy in" from participants regarding WARMI's significant potential to systematize inter-institutional coordination and collaboration among the SNH and NGO partners intervening in reproductive health at the community level. (For more detailed information please refer to the Start Up Workshop Report which includes action plans for each department)



#### 4. TECHNICAL ASSISTANCE COMMITMENT TO PROCOSI AND BILATERAL PARTNERS

Given the delays in signing the subcontract with Mothercare and the negotiation of a project agreement with the SNS, the project staff focussed its time during the project start up phase on refining the training modules and developing a technical assistance collaboration with PLAN INTERNATIONAL and later CARE and ARHP. When SC/Bolivia was requested to initiate a collaboration with PLAN for technical assistance in reproductive health and the Warmi methodology, the Field Office eagerly accepted the commitment and immediately went to work with PLAN staff.

PLAN began its process with piloting the WARMImethodology in six communities during the period beginning in October with the "autodiagnostic" phase. The Warmi team was charged with providing training to PLAN staff and community health promoters in how to conduct the diagnostic process. A three day workshop was implemented 5-7 October with 15 participants. Following the workshop Warmi staff accompanied PLAN facilitators in the pilot communities to conduct the diagnostic phase of the methodology.

A second workshop was implemented by the Warmi team with PLAN staff 6-8 December as the pilot project advanced to the next phase of "planning together". The Warmi team again provided community level follow-up to ensure the quality of implementation of the methodology. The following summary indicates the level of support provided to PLAN in this preliminary technical assistance role that the Warmi team assumed:

- 2 workshops (duration three days)
- 2 planning/coordination meeting between the two staffs
- 3 coordination meetings between health coordinators of PLAN and Warmi;
- 21 person days in field work with PLAN staff in the pilot communities

The collaboration with PLAN facilitated a rapid introduction of the Warmi team to its new technical support and training role. Rather than being direct implementors they have progressively learned their roles as facilitators and trainers of other institutions' personnel in the area of reproductive health. The experience has enabled them to perfect their facilitation skills, to work with women's groups in another cultural context, and to test the use of



materials developed for the upcoming workshops. This experience has also served as an important practical experience for the team in terms of how to work effectively with another institution with different norms, resources, and program policies and procedures

A Technical Cooperation Agreement was signed with CARE for Warmi technical assistance, including training beginning in April on the Diagnostic process with their Potosí office. A calendar of events has subsequently been successfully carried out with CARE during 1995. At the moment CARE is implementing the methodology in 50 communities of Potosí. CARE's partnership and collaboration have been exemplary for other PROCOSI NGO partners.

Given the delays in regional level implementation of WARMI, SC/Bolivia followed its two prong strategy nurturing the protocol process of operationalizing WARMI in each department, but at the same time responding to its PROCOSI partners on a demand basis. By the third quarter the project was working intensively with three PROCOSI members

In May agreements were signed with the Child and Community Health Project (CCH) of the COB/USAID and with GTZ/PSF, providing the WARMI Nacional project with greater coverage and access to new complementary resources both financial and in personnel. These two large institutional strengthening and integrated health services projects have provided an intensification of resources for WARMI in 30 of the country's 86 Health Districts.

The strategy directed at each individual institution has continued to gather momentum over the year as the institutions currently coordinating with the WN team require more detailed and continued technical assistance in the regions where they are implementing reproductive health programs. During the third and fourth quarters, the WN team has actively traveled in the regions to meet growing technical assistance needs of its partners

##### 5. FORMATION OF REGIONAL TECHNICAL TEAMS

Probably the most important product of the fourth quarter has been the organizational steps required to operationalize the project at the departmental level. Within the WARMI PROCOSI collaboration, the NGOs continue to demonstrate a different capacity to work quickly and efficiently than the SRS offices testing the new methodology. The NGOs' funding is often much more readily available and program scheduling



and adaptation to WARMÍ training schedules are more efficiently carried out by the NGO'S. Nevertheless, as the SRS offices have begun to progress with the Work Plan, the emergence of inter-institutional work teams is evident. SC has facilitated the organization of an inter-institutional Departmental team composed of representatives from the SRS, one of the two bilateral programs, and NGO'S. The first task of the regional teams has been to revalidate the WARMÍ materials to ensure that the manuals, illustrations, and transparencies are culturally appropriate for the diverse contexts of Bolivia. They will continue with other more complex tasks that include the planning and implementation of the WARMÍ workshop schedule, the review of the draft Monitoring and Evaluation system for WARMÍ Nacional, the implementation of Quality Circles and Quarterly Evaluations and field level supervision WARMÍ. As these teams learn how to work more effectively together, they will not only advance WARMÍ in their departments but they will use their skills as planners and problem solvers in other aspects of reproductive health programming.

#### V. OTHER RESULTS OF WARMÍ NACIONAL DURING THE YEAR

##### 1. Inquisivi Staff Training

A workshop was held in Inquisivi to reinforce SC/Bolivia field supervisor skills in the WARMÍ methodology. With the departure of five key field staff to become members of the WARMÍ NACIONAL training team and subsequently the hiring of new personnel, it became apparent that SC staff needed further training with the methodology. The three day workshop included 35 SC/Bolivia participants. The workshop also validated the final module or phase of the WARMÍ methodology: "Participative Evaluation". This module is the fourth and final module in the training and technical assistance package being offered to collaborating partners in WARMÍ.

##### 2. Materials Development

The reproductive health volunteer completed a six month project developing a manual for training midwives and women in the use of the Women's Health Card, developed during the implementation of Warmi 1 with Mothercare support. In collaboration with the SC Health Advisor the Women's Health Card has been slightly modified to facilitate more easy training and use of the card by community women. The revision of the Women's Health Card was completed by the end of April and subsequently, a training module and trainer's



guide were developed which incorporates the revised Women's Health Card and guide. The women's health card has now been fully tested, validated and modified by the volunteer. The health card is currently in the process of being reproduced.

This material is being shared with WARM partners for possible incorporation in the project.

### 3. Development of Project Information System

The project staff have developed a simple but comprehensive monitoring and evaluation system that permits measurement of project progress and impact from three perspectives:

a. Tracks basic process indicators such as # of participants trained in the WARM methodology per institution, # field visits of WARM staff, etc.

b. Indicators that demonstrate the effectiveness of the partnership established between SC and each "client."

c. Project impact on the communities being served by the NSH and project partners.

The information system consists of a set of basic instruments to be administered each month in training activities, monthly quality circles, field visits and quarterly evaluations. The MIS provides easily accessible information to SC, NSH and other partners that is synthesized and can be shared with the donor and partners to demonstrate project effectiveness and impact. Impact indicators consist of four indicators currently being tracked by the NSH through its system known as SNIS. (National Health Information System) The indicators include the following:

1. Prevalence in the use of modern contraceptive method as a form of family planning.
2. Use of health services as reflected in the number of prenatal controls and toxoid/tetanus coverage in women of reproductive age.
3. Number of births attended by trained personnel.
4. Number of high risk pregnancies currently diagnosed and referred to health centers.



These indicators will be shared with the nine SRS offices and partners in the project during the first quarter with ratification coming in the February 1996 semestral evaluation meeting. Additional data collection for the purposes of evaluating WARMI has been avoided at the advice of SNS professionals. Information for measuring the Process Indicators will be the responsibility of the SC WARMI training team. The indicators will form the basis of the quarterly evaluations occurring in each department.

#### 4 Reformulation of the Methodology

One of the key products of the National Start Up Workshop was the formation of a multi-institutional committee composed of La Paz based professionals from the SNS and PROCOSI members, who have energetically addressed the issue of reformulating certain parts of the methodology. The committee met four times during the quarter and has prepared a document which will be circulated in late November to all partners participating in WARMI. In the semestral evaluation scheduled for February 1996, the partners will have a chance to debate the proposed changes and/or ratify the document. The types of changes being considered include the following examples: revalidation of the materials according to cultural context, the incorporation of a "pre-WARMI" phase in communities where the SRS and NGO may be little known; gender and leadership training for men and women community leaders.

#### VI. Problems encountered and their resolution

1. Despite the delays at the NSH level during the start up phase of the project, the project continued to make important advances. The Field Office modified the original implementation strategy to allow for a two-prong approach to project start-up: one, directed at accelerating the technical support to PROCOSI and interested members and thus, avoiding further delays at the PVO level, and second, a more "patient, slow but steady" approach with the NSH. The modification was necessary to ensure solid ground with the NSH in terms of the project protocol and startup, and at the same time, establish immediate responsive support to PROCOSI. The latter strategy implied that the WARMI team enter planning dialogues and new training activity commitments with PROCOSI members. PLAN INTERNATIONAL, CARE International in Bolivia and ANDFAN RURAL HEALTH PROJECT. This strategy allowed Save the



Children to continue on a steady course toward reaching the goals and objectives established in the Mothercare subcontract agreement

2. The most serious problem encountered that has not been covered in other parts of this report is the negotiation that continues with UNICEF regarding the printing of WARM materials for use in this project. The Mothercare/SC subcontract does not contemplate expenses for the printing of WARM materials due to the verbal agreement made with UNICEF. The same agreement applied for the PROCOSI reproductive health cooperative agreement. UNICEF unfortunately, has had budget constraints and issues regarding some of the WARM materials. Some PROCOSI members are already handling their own printing such as CARE, but this problem requires further discussion with PROCOSI, MOTHERCARE La Paz and UNICEF to work out an acceptable compromise.

3. As already alluded to, the WARM project operates at the departmental level as one of many interventions carried out by the Regional Health Offices. Quite normally the interventions established for the budget year 1995 have taken on certain priority over a new intervention such as WARM. The investment of time in WARM is significant and must be treated carefully if not to intrude on SRS commitments to other health programs or contrarily, for WARM to be diluted in its effectiveness. Both tendencies must be prevented by engaging in careful planning of WARM training activities within the overall context of developing annual operating plans for each SRS. Once the SRS plans are developed with fixed objectives for WARM workshops, the 1996 program should advance more predictably with an avoidance of serious implementation delays this coming year.

4. In developing the project monitoring and evaluation system, the SNS and SRS offices advised SC to not overly burden personnel with more information collection than what is currently required for the SNIS. SC has tried to respect that request. Process indicators will be measured with information collected by its own staff of WARM trainers.

5. The program has been adversely affected by the budgetary problems of CCH and GTZ/PSR. Delays in implementing the first WARM workshops have resulted. Meetings with the heads of both bilateral programs have been concluded and the prospects of releasing funds to GTZ are positive for November. CCH has a less certain situation and will require more monitoring in November.



6. In several departments most notably La Paz and Sucre, the project has not advanced as smoothly as anticipated, due largely to a lack of information from the SNS, SC and partner organizations. Steps are being taken in November to reestablish contacts with each regional team to break the stagnancy observed during this period. Both relationships should be carefully monitored this period.

VII. Activities planned for the next year

As WARMI Nacional begins its second year of implementation the following activities are anticipated:

1. Submit a new proposal and work plan for FY96 to be reviewed by Mothercare and a new subcontract for year II funding is successfully negotiated
  2. Circulate a document to project partners regarding the reformulation of certain parts of the WARMI methodology,
  3. Circulate a draft of the process and impact indicators being proposed for the WARMI information system
  4. Assist the SRS in the development of their 1996 annual operating plans that incorporate the various workshops required to implement WARMI in the nine departments.
  5. Monitor the solution of present budgetary problems in PSF and CCH which are hindering the timely implementation of initial autodiagnostic workshops in the nine departments.
  6. Complete an analysis of training materials that must be reproduced this year and submit a proposal to UNICEF and/or other prospective donors to cover the deficit between supply of materials on hand and demand
  7. Implement at least 75% of the workshops for the WARMI Community Action cycles in all nine departments.
  8. Continue the capacity building process with eight PROCOST members who will demonstrate capacity to facilitate WARMI training activities and field based supervision.
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### VIII. Conclusions

The WARMI Nacional project has concluded a successful first year of implementation in spite of the difficulties of starting up a project of this sort with multiple partners. The project is now well grounded in each of the nine departments with regional technical teams being formed and oriented to the methodology. The operational relationship with the SNS and SRS has progressed to the point of having revalidated WARMI materials, orientations have been carried out, and plans made to initiate the "autodiagnostic" phase of the C.A.C. early in year II in each department

The NGO collaboration has advanced even more positively with two members of PROCOSI having already concluded the training of technical staff in the entire C.A.C. methodology. CARE and PLAN now are evolving experiences with WARMI that warrant their own documentation and further dissemination.

At the national level an active special commission for studying the possible reformulation of the methodology has nearly completed its work and will be submitting in November a document for the review of the SNS and partners. The project information system has advanced to a stage so that data can be collected systematically and used in future quarterly and semi-annual evaluations. Finally, SC/B has concluded a proposal and work plan for year II funding consideration which is being submitted now to SC headquarters and subsequently to Mothercare La Paz and Washington

The program in Year II focuses on implementing at least 75% of the 22 workshops projected for the nine departments to train field personnel in the four phases of the Community Action Cycle. The workshops in Beni and Pando will be conducted as a single unit, thus, giving the project eight departmental teams to train and focus the efforts of replication. Given the competing priorities of each SRS, it is not realistic to project the completion of all four WARM workshops in each department during 1996



The emphasis in Year II will be in preparing the professional staff of the SRS and NGO's to be effective WARM trainers and supervisors. Each team will be expected to organize other workshops for community level implementors with the support of the SC WARM trainer in the region. They will also be trained in how to conduct field level supervision of WARM activities as it is applied at the community level

During Year II SC/Bolivia will seek complementary funding from PROCOSI for more intensive work on the WARM methodology in Inquisivi and the dissemination of the WARM experience in general. The WARM experience is perceived to be an evolving experience that now has multiple actors, each with the potential to make its imprint on the methodology. SC intends to maintain its leadership position in this process with careful analysis of the experience of other institutional partners and with its continued work on the model in Inquisivi.

The "reformulation" work being conducted by the special commission of SNS/NGO representatives in La Paz will provide inputs to the process SC pursues in Inquisivi. The model in Inquisivi is most subject to continued research and experimentation in the areas of gender training, leadership development among women, the sustainability of the methodology when SC is no longer in Inquisivi (end FY98) and the linkages of the methodology with the Law of Popular Participation

The proposal presented to PROCOSI will explain more explicitly how SC proposes to implement this aspect of its continued work with the WARM methodology in Inquisivi. The WARM model has been inspired by long arduous field work in Inquisivi and SC believes that in the final phase of SC programming in Inquisivi, it must continue to enrich the WARM model with innovative changes and additions to the methodology. The innovation should come about through a dynamic interaction with WARM partners in Inquisivi as well as its partnerships evolving in each department of the country

In conclusion SC/Bolivia wishes to express its appreciation to MOTHERCARE for the financial and technical support being made to this exciting initiative. The Field Office has made a good start in Year I in implementing WARM Nacional but we believe the process is potentially even richer and we look forward to a continuing active dialogue with MOTHERCARE in Year II.

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