

## **Mobility International USA (MIUSA)**

### **Building an Inclusive Development Community: Technical Assistance to InterAction Member Agencies on Inclusion of People with Disabilities**

**USAID Cooperative Agreement Award No. GEW-A-00-01-00012-00**

**Performance Report  
January – March 2007**

#### **Project goals**

To increase participation by people with disabilities, including women and girls, in US-based international development programs as participants, agents, administrators and consultants.

#### **Accomplishments**

This quarter MIUSA conducted a second technical assistance field visit and opened a small grants competition in Ecuador; initiated a new relationship with USAID/Indonesia; and began focused planning for 2007 field visits and small grants competitions in Albania and Guatemala.

#### **Technical Assistance to USAID Missions, Contractors and Disabled Peoples' Organizations (DPOs)**

##### **Ecuador**

Working closely with USAID/Ecuador and with MIUSA's DPO partner, FENEDIF, MIUSA consultant Cara Galbraith conducted a field visit to Quito, Ecuador, from February 11 to 18, 2007. Consultant Han Kok of the Netherlands (please see attached CV), selected for his specialized experience in DPO capacity building and disability and development partnerships, joined Cara and Xavier Torres, FENEDIF Director, to facilitate technical assistance workshops and trainings to diverse audiences including USAID Mission staff, Guatemalan government entities, private sector businesses, NGO contractors and DPO associations. The focus of the field visit was to strengthen DPO networks and increase capacity of DPOs, including women with disabilities to advocate for inclusion in multi-sectoral development activities, and to build capacity of USAID grantees and contractors. Since the field visit, MIUSA has conducted follow-up communications with FENEDIF, USAID and USAID Contractors/Grantees, including IOM, who has expressed interest in working with a DPO "advisor" to promote inclusion within their organization and programs; CARE International, who has requested assistance from FENEDIF to retain employees with disabilities and to improve their recruitment system; and Junior Achievement and the Juntos Program. FENEDIF reports that their Workplace Insertion (SIL) program has gained four new business customers following the MIUSA / FENEDIF training for private sector businesses. Please see attached outline of field visit technical assistance and training activities.

##### **Guatemala**

This quarter, MIUSA proposed technical assistance and training activities to USAID /Guatemala and DPO partner, COPDIGUA, for the second field visit to Guatemala, outlining main events, key stakeholders and potential regional trainers. The field visit, originally scheduled for April, was rescheduled for August, due to a schedule conflict for COPDIGUA. The field visit focus remains on

technical assistance to USAID contractors to incorporate inclusive education policies and practices in the development of a national education system; to involve school-based community, DPOs, development organizations and local government stakeholders in promotion of inclusive development activities focused on education and employment; and build capacity of DPOs, including women with disabilities, USAID grantees and contractors to facilitate for inclusive development.

This quarter MIUSA arranged for the Association of Training and Technical Assistance on Education and Disability (ASCATED), a Guatemalan NGO, to coordinate a review of education standards design for grades K-6 being conducted by the Education Standards and Research Program, a USAID-supported project administered by Juarez and Associates, together with the Guatemalan Ministry of Education. ASCATED will convene a team of experts to review the standards and, in April 2007, submit a report to Juarez and Associates and the Ministry of Education, offering specific recommendations for inclusion and education of students with disabilities within the standards design.

### **Albania**

MIUSA is working closely with USAID / Albania and our DPO partner, ADRF, to plan a second technical assistance to Albania, scheduled for June 2007. MIUSA and ADRF are composing an outline of technical assistance and training activities, priority stakeholders and potential trainers with expertise in building a national alliance on inclusive international development. MIUSA has contacted and conducted initial interviews with potential consultants, and will make a final selection in April.

### **Indonesia**

MIUSA is pleased to have initiated communications this quarter with USAID/Indonesia, our fourth Mission partner, and with our DPO contacts in Indonesia.

### **Support for Innovative Projects (Small Grants)**

This quarter, MIUSA announced a Small Grant program in Ecuador, and assembled an international panel of proposal reviewers. We received and screened proposals from seven DPOs. After careful review of the proposals, MIUSA invited two of the applicants to submit revised proposals, and offered to work with the DPOs to redesign the projects to meet the grant criteria, specifically by incorporating the participation of a development organization. We provided specific examples of projects, and offered to help DPOs link to organizations who might welcome an opportunity to collaborate. We anticipate that we will have revised proposals for review by the end of April.

MIUSA worked closely this quarter with USAID / Albania and DPO partners ADRF in preparation to open the small grants competition in Albania in April 2007. We expect to announce the Guatemala competition in May 2007.

### **Activities planned for next quarter**

**Technical assistance: Ecuador, Albania and Guatemala:** Finalize plans for second TA field trips to Albania and Guatemala, including selection of consultants with relevant expertise to meet priorities of USAID Mission and DPO partners. Conduct field visit to Albania. Continue follow on activities with DPO, USAID/Ecuador and USAID Contractors/Grantees in Ecuador.

**In Indonesia**, we will continue to communicate with USAID/Indonesia to clarify the goals and strategies of the BIDC project; develop a scope of work and timeline; identify stakeholders including key contractors and DPOs; and begin to plan for a first field visit.

**Small grants:** Continue to work with finalists in Ecuador Small Grants competition; Announce grant competition in Albania and Guatemala.

**Monitoring and Evaluation:** Review benchmarks and impact indicators; review and revise evaluation plan for each technical assistance field visit and for overall project.

**Dissemination:** Plan participation in meetings with USAID personnel and other professional meetings to be held in 2007.

### **Conclusion**

We look forward to continuing to work with USAID to plan and implement intensive technical assistance to USAID Missions, USAID grantee organizations and contractors, and disabled peoples' organizations in selected countries. Thank you once again to USAID for support and cooperation to make this important work possible.

***MIUSA Building an Inclusive Development Community***  
***Report on Field Visit Activities***  
***Ecuador, February 10-18, 2007***  
***Submitted by Cara Galbraith, Technical Assistance Specialist, Consultant to MIUSA***

**Saturday February 10, 2007**

**Arrivals:** Consultants Cara Galbraith and Han Kok.

**Sunday February 11, 2007, 10:30 AM -5:30 PM**

***Event: Planning and Preparation Session***

***Format:*** Discussion and work-session.

***People in attendance:*** Xavier Torres (FENEDIF), Heidi Bedore (DPI/FENEDIF), Han Kok (Consultant), Cara Galbraith (MIUSA Consultant), Sonia Vila (La RED)

***Topics discussed:***

- Workshop sessions and audience awareness level regarding the issues;
- MIUSA BIDC small grants administration and solicitation;
- Federation structure and decentralization;
- New presidential administration of Ecuador, including Vice President who uses a wheelchair;
- USAID LAC follow-up on request for proposal; and
- FENEDIF women's commission and National Tour.

***Outcomes:***

1. Established working relationships with FENEDIF, La Red staff and MIUSA consultants,
2. Identified key training concepts and activities for main sessions during the upcoming week, and
3. Gained baseline information on current activities and future strategic plans of FENEDIF and associations throughout Ecuador.

***Interesting aspects and/or challenges:***

***A Key Lesson Learned: A community inclusive view of development:***

International development agencies such as USAID and USAID contractors work in conjunction with local governments, community actors, and the public, private and business sectors to implement their programs and reach the communities with whom they work. As such, each stakeholder is a partner and actor in international development work. Additionally, many of these stakeholders implement development programs for the government or municipal agencies they represent.

**Lesson Learned:** Primary stakeholders in the Building an Inclusive Development Community are DPOs, USAID contractors and USAID personnel. To foster long-term, sustainable inclusive development practices, the primary stakeholders must engage the full range of counterparts and community actors the process.

FENEDIF has demonstrated a community-based approach to inclusive development by consistently engaging public, private and government sectors in addressing challenges to inclusion in human development sector work. Examples offered by FENEDIF include that representatives from the Ministry of Labor and the Ministry of Education are in discussion regarding possible collaboration

between a school-to-work transition program and FENEDIF's Labor Insertion project. Another example: several businesses made contact with the SIL ((Economic Insertion) project, seeking to hire people with disabilities and train HR staff on accommodations, language/terminology and retention.

***Issues discussed and key information:***

1. Capitalize on current administration. Xavier Torres is the director of FENEDIF and an advisor to Congress on disability issues. FENEDIF has organizational capacity; international support, including USAID and La Red among others; and forward-thinking leadership to influence implementation of federal disability rights laws as well as policy, planning and implementation in federal, provincial, public and private sectors.
2. USAID LAC Request. In Summer 2006, USAID/Ecuador was visited by a delegation of USAID staff from Washington DC and the LAC region. At that meeting, FENEDIF gave a presentation on the USAID-supported work they are doing on inclusive development, including FENEDIF's Workforce Labor Insertion Program; collaboration with Citizen Participation on voting access; and the Building an Inclusive Development Community project with MIUSA. Representatives from the LAC regional desk were impressed by FENEDIF's work and encouraged them to submit a proposal for regional work. MIUSA Consultant Cara Galbraith shared information with FENEDIF about the process of submitting an unsolicited proposal to the LAC desk of USAID and offered suggestions for what a "regional inclusive development" program might possibly look like.
3. Involving the private sector in inclusive development. The private sector is becoming an increasingly important development partner in USAID's work. Involving businesses in development work is critical to promoting the social and economic change that is at the heart of inclusion. In Ecuador, FENEDIF has engaged the private sector through the Labor Insertion program.

**Monday February 12, 2007**

**Training: Building an Inclusive Development Community**

**Audience: Government of Ecuador, Congress and Office of Vice President** including three high level government representatives, Ministerial representatives, members of CONADIS, and leaders of several DPOs.

**Agenda:**

- |       |  |        |        |
|-------|--|--------|--------|
| 9:00  | Opening and Welcome<br>Objectives of the event<br>Presentations of the speakers and participants | Xavier | Torres |
| 9:30  | International Context<br>Concepts and models of disability                                       | Han    | Kok    |
| 10:00 | National context<br>Work of the Federations  | Xavier | Torres |
| 10:30 | Coffee Break   |        |        |

10:45	Work in Small Groups (identifying disability based prejudices, barriers and solutions)	Cara Galbraith
11:30	Group presentations and discussion	Han Kok
12:00	Concept and advancements in international development	Cara Galbraith
13:00	Lunch	
14:30	Questionnaire/self-analysis	Cara Galbraith
15:00	Discussion of potential actions in groups	Cara Galbraith
16:00	Group presentations/discussion	Xavier Torres
16:45	Evaluation	
17:00	Closing	

## **Presentations:**

### ***International Context of Inclusive Development***

Consultant Han Kok conducted a discussion and a presentation on the status of inclusive development internationally, using examples from a highly developed nation and from underdeveloped regions of the world. Han described strategies being piloted and provided a contextual framework of community based rehabilitation.

### ***National Context***

Xavier Torres provided an overview of the FENEDIF Workforce Insertion (SIL) Program and accomplishments to date including work with USAID funded micro-enterprise and voting access initiatives.

### ***Small Group Work***

Cara Galbraith facilitated an interactive activity to assist participants to conceptualize the relevance of inclusive development to individuals with disabilities and their communities, and to identify the barriers that impact the participation of people with disabilities in development. In small groups, participants were asked to imagine in detail the daily activities of a 10-year old girl from a rural area of Ecuador and then again for the same girl at age 15. The participants were then asked to repeat the exercise for girls with various disabilities. Discussion of the exercise addressed differences and similarities between the lives of the two girls, including options for education, family and income; and generated ideas for development to equalize opportunities for girls with disabilities.

### ***Group Discussion of Questionnaire Action Steps:***

- Ten teachers who have disabilities: move these teachers out of the special education setting into standard classrooms (Ministry of Education)
- Focus on employment of young people with disabilities (Ministry of Labor)
- Explore collaboration between Ministry of Education and Ministry of Labor on a transitions-to-workplace education/employment program for young people with disabilities

- Increase collaboration and frequency of meetings with FENEDIF and Federations (CONADIS, Association of the Blind)
- Continue training in sector specific areas (USAID)
- Prioritize inclusion in planning and activity stages with all partners (DPO Federation)
- Train employees, personnel on disability (Implementing partner)
- Work with mass media to disseminate information on disability (Implementing partner)
- Suggest block of questions for permanent census survey (Statistics unit at Census Bureau)
- Address disability as a family issue that affects employment, underemployment and long-term economic viability of family unit (Statistics unit at Census Bureau)

**Tuesday, February 13, 2007**

**Business Sector Disability and Development Training ---9:00-1:00  
USAID Staff and Contractors—2:30-5:30**

**Event:** Business Sector Disability and Development  
**Format:** Large group training, Open forum discussion, Small group work  
**Audience:** HR representatives or Communication's Officers of businesses

Agenda

9:00	Opening	and Welcome	Xavier
	Set	Objectives, Introductions	Cara
9:15-10:00		Re-Defining Business Excellence	Cara
10:00-11:15		Micro-Enterprises and SIL Project	Xavier
11:15	Coffee	Break	
11:30-12:30		Small Group work: Community/Business relationship?	Han
12:30-12:45	Report	back	Han/Heidi
12:45	Evaluation		

**Audience:** Very diverse group of businesses, ranging from six employees to over 2,400. Some businesses had multiple locations across Ecuador, others just in Quito. Many businesses were large customer service type businesses, food industry, hotel, communications etc. One business was just opening and hadn't hired any staff as of yet.

**Presentations:**

Cara Galbraith gave an overview of the BIDC project and presentation on the business sector as a key to inclusive development in Ecuador.

**Re-defining Business Excellence:** Ppt./Discussion.

Cara Galbraith presented information from business case studies in the United States and responded to audience questions and concerns. Three representatives of businesses that had hired individuals with disabilities through the FENEDIF SIL project (Economic Insertion) described their experiences with and Xavier Torres contributed additional examples and information.

In a follow- audience discussion, audience members asked questions regarding laws addressing employment of people with disabilities, including enforcement and penalties, Xavier Torres addressed this and explained tax benefits of hiring people with disabilities and how to utilize the SIL services. Questions also addressed financial outlay for worksite accommodations. Cara Galbraith discussed advantages for businesses of outlining a strategy and fiscal plan to implement modifications to make structures accessible. Cara also discussed and gave examples of workplace accommodations, and the importance of hiring an individual for her/his skills, and then designing or implementing accommodations to support the worker to perform job functions.

**Presentation: National Context: Micro-enterprise and Workforce Insertion Program**

Xavier Torres made a presentation on the successful experience of FENEDIF associations conducting micro-enterprise activities and the workforce insertion program.

**Presentation: Business and Community Case**

Han Kok presented fictional business case studies, and facilitated small group activities to explore strategies to promote equal employment opportunities in the business community.

**Tuesday, February 13, 2007**

**Meeting with USAID Staff and USAID Contractors:**

**Format:** Discussion, Short Presentation

**Audience:** USAID Staff and USAID Implementing Partners, including Citizen's Participation Fundacion Esquel, Proyecto Gobernabilidad local, IOM, IMAGCOM-Juntos, CARE Internacional and Junior Achievement.

Each participating organization reported accomplishments and challenges following the 2006 MIUSA technical assistance visit:

**Fundación Esquel:**

Since last meeting, they focused on hiring individuals with disabilities: hired three people in Guyaquill, one of whom is a lawyer working in their legal program. Fundacion Esquel would like to expand their work with FENEDIF. They requested technical assistance and support to convince upper management of the importance of inclusive programming.

**CARE International:**

CARE conducted an awareness campaign on disability inclusion for all staff of regional offices. Two individuals with disabilities have been hired as staff members. CARE is working with a DPO on issues that are outside CARE's current priorities but CARE believes that project is a good venture through which to build a relationship. CARE representatives noted that it has been difficult to find people with disabilities who have the required skills and technical competencies for the majority of program and office positions at CARE.

Representatives of other organizations, (IOM and Fundacion Esquel) agreed that this was what they too experienced. Xavier invited them to work with him on the SIL project to identify potential candidates.

WOCCU (World Organization Consortium of Credit Unions):

WOCCU's new telecenters are accessible, and some offer technology for access such as JAWS and other screen readers for blind users.

USAID/Ecuador: All USAID/Ecuador staff and new managers have taken the e-learning course on inclusive development. A clause on inclusion of people with disabilities is not incorporated in all contracts.

Citizen Participation:

Have recently included "disability" as one of 17 emergent issues that they debate in community.

IOM:

They provided information to their regional offices on 1) how to reach people with disabilities in the regions, and information on the design and infrastructure considerations for accessibility of water supplies.

Junior Achievement (JA was not at the first workshop)

Although JA was not at the first workshop, they have experience working with the disability community through community volunteers. JA has volunteers with disabilities and a business mentor with a disability.

**February 14, -15, 2007**

**DPO Capacity Building Workshops**

Format: two-day workshop

Audience: FENEDIF Women's Commission and Regional Association Leaders

Trainers: Han Kok and Cara Galbraith.

**Day One**

A group of 19 people from throughout Ecuador participated in the workshops. The group was comprised of two smaller groups: leaders of the regional associations of FENEDIF and the Women's Commission of FENEDIF.

The initial goal of the workshop was to prepare this group of people to be as multipliers or conveyers of information to the regions through training programs and activities. Xavier requested that we design community based, audience specific, training programs and work with the participants on the theory, content and training methodology skills so they will be equipped to return to their homes, join forces with each other and travel the nation to convey "inclusion".

However, it became clear to the facilitators that the participants did not themselves have the conceptual knowledge or practical experience to implement a national level training program. Participants in the group had varying levels of knowledge of disability rights, social and human rights

model of disability, concepts of inclusion and the methodology background to plan and conduct participatory training activities.

The workshop curriculum was modified to address goals of increasing participants' understand of the theory and practice of inclusive development. In interactive activities, participants explored such questions as: Who do you make alliances with in your community? Why be part of development projects in your community? What does "development" mean? How does it look?

Han Kok led a role play exercise in which individuals with competing agendas and roles in the community were assigned to form alliance and advocate together for inclusion to a business, school or health service. Upon completion, participants articulated insights from the exercise about cross-disability alliance building, the process of negotiation, consensus, and the comparative values of confrontation, compromise and persuasion.

For homework, participants were assigned to develop personal and organizational SWOT (Strengths, Weaknesses, Opportunities and Threats) charts. The task was to: create a mission statement, create a vision statement for 2015 (what you plan to change/do, and what the end result will look like), and identify personal and organizational/team issues.

## **Day 2**

Cara Galbraith and Han Kok facilitated a report-back discussion based on the SWOT exercise, in which FENEDIF and Women's Commission leaders agreed upon a common vision: a stable and sustainable group of trainers to inclusive development by 2015. Participants explored the feasibility of this idea, and discussed steps for planning a successful project, such as developing common goals and standards, a strategic plan and a "job description" outlining required skills/knowledge of trainers. Other practical questions were considered, such as: How does a diverse group achieve a mutual commitment? Will trainers work in their regions or travel the entire country? How will the group be sustained? Will new trainers be brought into the coalition, and if so, how will they be developed?

Cara Galbraith facilitated an interactive exercise on coalition-building to affect inclusive social change in the community. Participants were guided through a process of creating a "marketing plan" to bring key community development stakeholders, including government, church, school, business center or health service, into an initiative group to advocate for inclusion of people with disabilities in community development services and programs.

Workshop outcomes:

- DPO leaders increased conceptual understanding of inclusive development.
- DPO leaders practiced advocating for an issue, working with others with competing or different approaches to the problem; and applying knowledge in practical situations.
- Initial plans established for developing a group of DPO trainers on inclusive development

## **Friday, February 15, 2007**

Cara Galbraith and Han Kok participated in a summary meeting with the FENEDIF Women's Commission, and then met with Xavier Torres and Sonia Vila of La RED to review lessons learned and outcomes, and to plan follow-on activities.

Key Results observed immediately include:

- Involvement of new stakeholders, especially from the private sector and government
- New and strengthened relationships between FENEDIF associations and USAID programs
- Junior Achievement made concrete plans to expand inclusion of young people with disabilities in mainstream programs.
- Nestle, Domino's and a flower shop contacted the SIL and set meetings.
- A large private sector business in Guyaquil called to request a SIL training for IDE, a business coalition of over 80 companies.
- Businesses and individuals with disabilities are calling the SIL project because of the TV coverage.
- Positive responses from the Ministry of Labor and the Ministry of Education and their interest in further collaboration.

## Curriculum Vitae

Han Kok

**Name:** [REDACTED] n Marcel Kok [REDACTED]  
**Nationality** Dutch  
**Civil status** [REDACTED]  
**Company Address** Public Health Consultants  
Huddestraat 3-5, 1018 HB Amsterdam, Netherlands  
[www.phc-amsterdam.nl](http://www.phc-amsterdam.nl)

**Communication** Mobile phone: \* [REDACTED]  
Tel. \*.31.24- 6631290  
Fax \*.31.24- 6423974  
Personal email: [REDACTED]

### *Key qualifications*

Han Kok is a physiotherapist by profession and a Master in public health, with additional training in water and sanitation, epidemiology and project management. He has 20 years of professional experience from work done in the Netherlands, Africa and Latin America, where he was involved in emergency ventures and development aid through bilateral agreements and international NGO's.

After a period of working in emergency and post conflict situations in the eighties and early nineties, he became fully involved in developmental processes. Over 10 years, he was the director of a large primary health care project financed by the Peruvian, Dutch and Swiss governments in the northern highlands of Peru. Being the advisor of several public and private organisations, he knew well how to combine political, strategic and operational levels. As such he was crucial in helping implement pilots for the initial phase of the health reforms, with a special emphasis in defining national policies in water and sanitation at the regional and provincial level. Han was co-ordinator of the first decentralised MPH in the north of the country. Finally, he guided an extensive documentation process of the projects' experiences, and published various other papers.

Han joined Public Health Consultants in 1992. He does consultancy work abroad for (inter)national NGOs and is active in capacity building, policy development and advocacy work regarding the integration of HIV-AIDS and SRHR, disability as well as health systems development and poverty related issues in developing countries. His strengths are in the fields of project monitoring and evaluations, participatory planning and human resource development. As such, he acquired skills in facilitating group work and intercultural communication. Specific areas of interest include organisational development, mainstreaming processes (gender, disability, HIV/AIDS) and CBR ( community based rehabilitation ) strategies for people experiencing disabling conditions.

## **A. Education**

### **1. Degrees**

1989 Master in Public Health, Royal Tropical Institute in Amsterdam, Netherlands

1978 Professional degree in physiotherapy, Academy of Physiotherapy in Enschede, Netherlands

### **2. Diplomas and short courses**

2004/5 Share-Net conferences on Sexual behavioural change and HIV-AIDS, experiences and challenges; workplace programs; human resource management

2002 Teacher-student at Community Based Rehabilitation course by Enablement, in Soesterberg, Netherlands

1998 International course in water and sanitation management at CINARA, Universidad del Valle, Cali, Colombia

1995 Public health course, Universidad Cayetano Heredia, Lima, Perú

1989 International course in epidemiology, Liverpool School of Tropical Medicine, UK

1986 Specialized course in project management, MDF, in Lunteren, Netherlands

## **B. *Work experience***

2002 – now: Associate member of Public Health Consultants, ( PHC) Amsterdam, Netherlands

### **Consultancy experience as partner within Public Health Consultants:**

2006

- ✓ Backstopping of consultancy on training need assessment of key NGO staff in the Netherlands on HIV AIDS and sexual and reproductive health
- ✓ Preparation of policy document to be presented at the Regional conference on CBR in Santiago de Chile, by PAHO and Ministry of Health of Chile
- ✓ Design of tentative human resource plan in disability for the Andes region, together with Christoffel Blinden Mission ( CBM)
- ✓ Preparation of in-depth workshop on disability and HIV AIDS in the Netherlands
- ✓ Formulation of new HIV AIDS program of Handicap International in Angola
- ✓ Technical support mission for Handicap International to PRC Kandahar, Afghanistan
- ✓ Evaluation of NGO “KORD” and its network of Physical Rehabilitation Centres in Kurdistan, for Handicap International Belgium
- ✓ Formulation of MFS financial proposal 2007-2010 of Share-Net, Dutch networking organization in HIV-AIDS and sexual and reproductive health and rights, for the Dutch Ministry of Foreign Affairs
- ✓ Formulation and initiation of a HIV AIDS awareness and prevention program for youth in the Dominican Republic, for the Dutch and Dominican Red Cross

2005

- ✓ Formulation of HRD strategy for Share-Net, Dutch coalition on HIV AIDS
- ✓ External evaluation of Physical Rehabilitation Centre, Kandahar, Afghanistan and formulation

- of national strategy of disability in Afghanistan, for Handicap Int. Belgium
- ✓ Technical advisory missions for CORDAID emergency health projects in Darfur; Community based health care training in Kordofan; exploratory mission to the Nuba Mountains, Sudan
- ✓ Continued technical assistance in HIV-AIDS to College of Medicine, Malawi
- ✓ Development of training modules in HIV-AIDS and CBR for Dutch NGO portfolio holders

2004

- ✓ Formulation of strategic medium-term health plan for Sierra Leone, on behalf of Cordaid, Dutch co-financing agency
- ✓ Assessment of health situation in Darfur emergency, Sudan, formulation of programmatic support by El Obeid Diocese, organizing, training and starting up of interventions;
- ✓ In depth inventory of Dutch organisations active in CBR, desk studies on HIV AIDS and human resource development for Cordaid; technical support to College of Medicine, Malawi; elaboration of advocacy paper for Share-net;
- ✓ Evaluation of Primary health care programme in South Sudan for ICRC

2002-2003

- ✓ Permanent technical advisor for Sudanese National Catholic Health Secretariat (SUDANAID), with implementation of CBHC in Kosti and Jubba areas;
- ✓ Exploratory mission for Cordaid to Sierra Leone;
- ✓ Technical support in the field of HIV/ AIDS to Cordaid and GOM partners, preparing participatory assessments and planning of partner organizations;
- ✓ Responsible for development of health in emergency manual of Cordaid;
- ✓ Short term missions to Malawi and Ethiopia to advise MOH on health development, with strong emphasis on community health.

2001 Co-founder and (ex)President of CER AGUA, new regional NGO in water and sanitation in Cajamarca, Peru.

NGO advises local governments, NGOs and water committees in technical and organisational matters and trains staff in integrated and sustainable water and sanitation management.

1991 -2000 International Director of “APRISABAC”, multinational project in public health between the governments of Peru, the Netherlands and Switzerland in Peru for: “Interaction in Health”, Dutch company and official counterpart of the Ministry of Health of Peru, through its decentralized unit in Cajamarca (DIRESC). Other stakeholders included provincial and district municipalities, local NGOs and community based organizations.

Principal lines of intervention: institutional building, health care management and service delivery, water and sanitation; local planning and community participation

Prime responsibility: general project management; counterpart relationship at national and regional levels; human resource development.

1998-2000 Transfer of responsibilities

- \* Guide transferral of different project components to the indicated authorities according to national policies
- \* Document extensively on project components, esp. water and sanitation
- \* Assume local coordination of decentralized Masters study in public health between the Ministry of Health, Faculty of Public health of the Cayetano Heredia University and the project

1993-1997 Construction of operational proposals

- \* Orient and reinforce health sector and other local actors to increase coverage and improve

- quality of health service, water and sanitation provision
  - \* Train communal organizations and its members in applying primary health care methodologies. Includes the development of management models in health, water and sanitation for its use at the intermediate levels
  - \* Evaluate/ formulate project phases in participative manner with all stakeholders, with innovative methods and instruments to stimulate performance and debate
- 1991-1992    Emergency phase APRISABAC
- \* Lead the regional team to combat large cholera epidemic
  - \* Acquire additional funding for focalized assistance in Cajamarca
- 1990 -1991    Project director of drought emergency project in Sandia province, Puno, Peru for: MSF Holland, a Dutch emergency oriented NGO, counterpart of CARITAS Peru in the drought emergency program, PES
- Assume general management of MSF Holland in Peru and specifically, of the emergency project; institutional policy development, finances
  - Apply extensive nutritional survey in under-5s
- 1989 -1990    Member of medical department team at headquarters of MSF Holland in Amsterdam, Netherlands
- Formulate, monitor and evaluate projects under execution by MSF Holland in Latin America and East Africa: Nicaragua, Ethiopia, Sudan, Djibouti, Uganda; Coaching of project staff.
  - Develop institutional health policies and represent the Direction at international meetings and forums, special assignments
- 1986 -1987    National Director of MSF Holland in Sudan and of the PHC project in Northern Darfur province ; counterpart of MOH at national and regional level
- Assume general management of MSF Holland in Sudan: represent NGO officially, monitor other national activities and start emergency projects in the south
  - Manage Darfur project in its construction phase
  - Formulate and negotiate mid-term proposal with (inter)national authorities
- 1985 – 1986 regional    Director of emergency project for refugees in Hargeisa, Somalia; counterpart of MOH
- Manage and develop emergency project in its acute phase, building camp facilities for basic health care for 60,000 people in Gannet refugee camp
  - Develop refugee health policies and strategies in a participative manner using community leaders, health promoters and traditional midwives
  - Coordinate technical assistance to combat cholera epidemic
- 1982-1984    Social therapist in Intensive Care Unit in Groningen, Netherlands for: TGV Groningen
- Provide therapeutic guidance to emotionally and pedagogically neglected children
- 1979 –1981    Director of Terre des Hommes childrens home and physiotherapist at the Cheshire Home for physically handicapped children in Addis Abeba, Ethiopia for: Terre des Hommes Netherlands, in coordination with the RRC ( Relief and Rehabilitation Committee), a special Ministry in Ethiopia
- Manage orthopaedic clinics at the Black Lion University Hospital; train clinical staff

- in physiotherapy and rehabilitation
- Rehabilitate handicapped children at two Cheshire Homes
- Close coordination for surgery/follow-up with ALERT Leprosy Hospital

### **C. Other relevant experience**

- 2004- Chairman of HIV-AIDS working group of SHARE-net, the Dutch expertise network on sexual and reproductive health and HIV-AIDS
- 2003- Member of DCDD (Dutch Coalition on Disability and Development) and its CBR task force; member of WEMOS ( health and development)
- 1997- 1998 Co-founder of Ombudsman services in Cajamarca, Perú  
Promote civic conscience and institutionalize mechanisms to defend consumer interests in Cajamarca; install surveillance schemes in provinces

### **D. Publications**

- Human resources for health: International developments and experiences of CORDAID partners in Africa, 2004
- Series of books containing the documentation of the different experiences of the APRISABAC project in Cajamarca, Peru 1993-'97 ( 4 volumes) with focus on applicability of Primary health Care in health reform processes.
- Further documentation of the APRISABAC project in Cajamarca, Peru, 1998-2000
  - Management model for provincial health care, with different supporting documents: local planning, methodology of registration and follow-up, evaluation of health center performance, comprehensive supervision, quality assurance, individual performance measuring and human resource planning, costing, gender
  - Management model for provincial water and sanitation services, with different supporting documents: Manual for technical procedures, water system designing, supervision and evaluation, health and hygiene education, adult training for water management, water quality surveillance, case studies on water committees
  - Management model for health and development, with different supporting documents: training of health promoters and midwives, implementation of community pharmacy, participative planning for local development, experiences with co-management of health services, the healthy villages concept and the gender approach.

### **Languages skills:**

Spanish: conversation, writing and reading excellent  
 English: conversation, writing and reading excellent  
 German: conversation good, writing and reading excellent,  
 French: conversation acceptable, writing and reading good  
 Dutch: m other tongue

Regular drivers license B/D

Computer literacy: Word, Excel, Access, Powerpoint, Internet