

**SCALING-UP *TOGETHER WE CAN*:
A Proven Peer Education Program and
Community Mobilization Strategy
for Youth HIV Prevention**

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Guyana, Haiti, and Tanzania

**Semi-Annual Report
October 1, 2008 – March 31, 2009**

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In collaboration with
**The Tanzania, Haitian, and Guyana Red Cross Societies
The International Federation of Red Cross and Red Crescent Societies**

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LIST OF ACRONYMS AND ABBREVIATIONS

ABC	<u>A</u> bstinence, <u>B</u> e faithful, and correct and consistent <u>C</u> ondom use
TAYC	Trusted Adult – Youth Communication (formerly referred to as Adult Child Communication or ACC)
ARC	American Red Cross
CC	Community Council (local coordinating body for the project)
CME	Community Mobilization Event (also referred to as edutainment events)
CWE	Community-Wide Event (term to replace Community Mobilization Event)
Federation	International Federation of Red Cross and Red Crescent Societies
FM	Field Manager (interchangeable with Coach)
FUI	Follow-up Intervention
GRCS	Guyana Red Cross Society
HRC	Haitian Red Cross Society
IFRC	International Federation of Red Cross and Red Crescent Societies (Federation)
ITs	Instructor Trainers (interchangeable with Master Trainers or MTs)
NRCS	National Red Cross Society
NT	National Trainer
OD	Organizational Development
PEs	Peer Educators
PLWHIV	People Living with HIV
SO	Strategic Objective
TRCS	Tanzania Red Cross Society
TWC	“Together We Can”
TWC Workshops	PE-led workshops based on the 12-15 hour TWC curriculum
YM	Youth Multiplier (youth participants in PE-led TWC workshops)
YP	Youth Participant (youth beneficiaries reached by YMs via TWC take-home assignments [peer to peer outreach] and/or via community wide/ edutainment events)

I. EXECUTIVE SUMMARY

A. INTRODUCTION

The *Scaling Up Together We Can* program is a PEPFAR-funded and USAID-supported 6+ year, \$9+ million effort to reach more than 1,060,000 youth ages 10 to 24 with curriculum-based and peer-to-peer outreach, and interpersonal community wide events in Guyana, Haiti, and Tanzania. The project has already reached more than 920,000 youth through these interpersonal and participative approaches to relaying HIV prevention messages, and many more through general diffusion “edutainment” events and mass media-based outreach. Through the project, we are mobilizing youth and young adults to deliver HIV prevention messages, offer life skills training, and provide education and support to youth to encourage them to reduce or eliminate risky sexual behaviors. The program’s primary recipient, the American Red Cross (ARC), is responsible for providing funding and technical assistance to the program’s implementers--the Guyana, Haitian, and Tanzania Red Cross Societies.

Peer education, community and social mobilization, and capacity building for the three national Red Cross societies (NRCSs) are the primary strategies used to promote positive behavior change among youth. The peer education component of this program is based on the 12-15 hour, 17-22 activity *Together We Can* curriculum that has been used by ARC and the International Federation of Red Cross and Red Crescent Societies (Federation) with over 30 NRCSs in Africa, Central America, and the Caribbean since 1993. The curriculum, which has undergone an intensive adaptation in both Haiti and Tanzania, uses dynamic, participatory techniques to improve youth’s knowledge, attitudes, and skills related to HIV and AIDS and unintended pregnancy and parenthood. Prevention messaging emphasizes abstinence (including secondary abstinence), being faithful to one’s partner and reducing multiple partners (particularly overlapping multiple partners), and other healthy behaviors including condom use and accessing sexual and reproductive health services.

In addition to working directly with youth, TWC creates an enabling environment for youth behavior change by actively seeking the participation of parents, teachers, religious leaders, host-country government officials, non-government organization (NGO) staff, and other community leaders. In this manner, ARC and its sister NRCSs in Guyana, Haiti, and Tanzania capitalize on the synergy of working at the individual and community level, assuring a holistic, grassroots response to the HIV pandemic.

Another critical strategy — improving NRCSs’ ability to manage and expand youth HIV prevention programs — is accomplished through formal trainings, individual coaching, systems development, and the dissemination of best practices. Focus areas include volunteer management, curriculum adaptation, monitoring and evaluation, community mobilization techniques, and establishing accurate and agile management information systems.

This report was prepared by ARC in tandem with its sister NRCSs in Guyana, Haiti and Tanzania. Each of these NRCSs is run and staffed by citizens of that particular country. They are sovereign, nationally recognized entities with extensive grassroots volunteer bases and possess intimate knowledge and longstanding experience in responding to public health emergencies in their local communities.

**B. Emergency Plan Indicators Table: TWC FY09 Semi-Annual Results
(October 2008 – March 2009)**

Indicator	Guyana			Haiti			Tanzania			Project Total		
	Planned Target	Actual	% of Target Met	Planned Target	Actual	% of Target Met	Planned Target	Actual	% of Target Met	Planned Target	Actual	% of Target Met
Prevention/Abstinence and Be Faithful												
Community Outreach												
<i>Total number of individuals trained</i>	12	0	0%	44	65	148%	0	0	-	56	65	116%
Number of female youth (10-24) reached	1,668	1,759	106%	16,286	22,711	139%	11,475	16,578	144%	29,428	41,048	139%
Number of male youth (10-24) reached	1,668	1,440	86%	16,286	19,347	119%	11,475	17,254	150%	29,428	38,041	129%
<i>Total number of youth (10-24) reached</i>	3,335	3,199	96%	32,571	42,058	129%	22,950	33,832	147%	58,856	79,089	134%

C. Emergency Plan Indicators Table: TWC Life of Agreement Results *(Figures reflect revised targets (as of September 08) to accommodate 16 month project extension. New Life of Agreement targets = original life of project targets reached through FY08 + workplan targets for FY09 and FY10 through June 2010)*
(February 2004 - March 2009)

Indicator	Guyana			Haiti			Tanzania			Project Total		
	Planned Target	Actual	% of Target Met	Planned Target	Actual	% of Target Met	Planned Target	Actual	% of Target Met	Planned Target	Actual	% of Target Met
Prevention/Abstinence and Be Faithful												
Community Outreach												
<i>Total number of individuals trained</i>	284	263	93%	444	425	96%	927	827	89%	1,655	1,515	92%
Number of female youth (10-24) reached	44,783	40,637	91%	220,071	182,455	83%	261,574	236,652	90%	526,428	459,744	87%
Number of male youth (10-24) reached	44,782	34,834	78%	220,314	179,334	81%	270,605	246,359	91%	535,701	460,527	86%
<i>Total number of youth (10-24) reached</i>	89,565	75,471	84%	440,385	361,789	82%	532,179	483,011	91%	1,062,129	920,271	87%

D. PROGRAM OVERVIEW AND PROGRESS TO DATE

Strategic Objectives, Key Approaches, and Activities Overview—ALL COUNTRIES

In order to achieve its goal of **reducing the incidence of HIV among youth**, the TWC program has three primary strategic objectives (SOs).

Strategic Objective 1

The first SO is to **strengthen HIV related life skills for 10-24 year old youth**. This is accomplished by setting up viable and well-managed peer education structures through the recruitment and training of field managers (FMs) (as well as instructor trainers- ITs and master trainers- MTs) who train and supervise peer educators (PEs). Youth reached through the Together We Can project will benefit from the following outreach strategies:

Curriculum-based interventions via 12-15 hour, 17-22 activity TWC workshops

These highly participatory workshops are designed to help youth avoid HIV infection by providing them with opportunities to build knowledge and skills so that they are empowered to make informed and healthy choices concerning their sexual behavior. Each workshop is facilitated by a pair of PEs for approximately 20 youth and generally takes one month to complete. The TWC project is making use of enhanced curricula in Haiti as of the end of FY08 and in Tanzania as of mid FY09.

Peer-to-peer outreach

PEs ask each participant in the TWC workshop to share HIV prevention messages with the same ten peers at different intervals as “take-home assignments.” This outreach strategy is referred to as the “multiplier effect” due to the vast networking power of using youth as a vehicle for transmitting key behavior change messages to their siblings, schoolmates, and friends. In this manner, youth attending TWC workshops are not passive learners but are directly involved in HIV prevention in their communities. In Tanzania and Haiti, youth multipliers in TWC workshops deliver four complementary, reinforcing knowledge and self-efficacy building messages and activities for the same 10 peers at four different junctures during the course of the TWC workshop.

Edutainment events

Edutainment events (also referred to as community-wide events) include concerts, street theater, film viewings, and sports events. They are designed to disseminate vital prevention and solidarity messages to small or large groups of youth ranging from several dozen to several thousand per event. Interpersonal Community Wide Events are defined as edutainment events or outreach where youth are active participants in the HIV-related outreach by, for example, asking questions, giving opinions, playing games or activities, practicing a skill, or discussing a topic. As such, there is a 2-way dialogue and youth are interacting directly with TWC representatives or with one another for approximately 3 minutes or more with guidance from TWC representatives. General diffusion Community Wide Events are defined as edutainment or outreach events where messages are diffused in one direction – from Red Cross volunteers and/or staff to youth with no feedback or response from the youth. In these instances where messages are broadcast in one direction, the youth who are reached do not interact or participate to any significant degree – e.g. they lack at least a 3 minute conversation with a PE, the implementation of a participative activity, and/or opportunity for an interactive question and

answer period. Interpersonal CWEs, typically consisting of no more than 500 youth attending, are counted as part of the number of individuals reached by the Emergency Plan according to the community outreach indicator. Events that do not afford a high level of interaction between Peer Educator/Field Manager and youth are counted separately as general diffusion CWEs and are not included in the overall tally of individuals reached.

Follow-up interventions (FUIs)

Follow-up interventions target at least 70% of youth “graduates” of TWC workshops three to six months and nine to 12 months after they have completed their last TWC curriculum-based session. FUIs are intended to provide a “booster effect” to increase the likelihood of long-term message retention. Program staff tailors messages to local needs by analyzing the results of pre- and post-tests administered during TWC workshops, population-level national youth behavioral studies, and the expressed needs of youth beneficiaries. In order to maximize the quality of these interventions, participant numbers are limited in size with multiple activities scheduled during each event including small group breakout and skills-building practice.

Youth clubs

Existing youth clubs (often school-based) are targeted for specific interventions such as interactive educational exercises and film viewings. Since many of the club members have already benefited from TWC workshops, this method allows for continued post-curriculum follow-up and message reinforcement.

Mass media

The program primarily uses radio shows and public service announcements to share TWC messages with the majority of youth living in target areas. With primary emphasis placed on interpersonal communication (curriculum-based interventions, peer-to-peer outreach, and FUIs), less than 1% of program funds are spent on mass media programming and diffusion. In Tanzania, the program receives donated air time lowering costs even further. Currently, the Tanzania, Haitian and Guyana Red Cross Societies focus on referring their youth beneficiaries to the US Centers for Disease Control or USAID partner sponsored mass media programming and generally avoid developing and implementing mass media programs of their own.

Strategic Objective 2

The second SO - capacity building - focuses on **strengthening each NRCS’s capacity to manage and expand youth HIV prevention programs**. This is accomplished internally through organizational development (OD) trainings offered by ARC, the Federation and other NGO partners. Training topics include volunteer supervision, program planning, finance and compliance, monitoring and evaluation, curriculum adaptation, and content development. Externally, capacity is built by encouraging partnership building with other NGOs and national youth HIV prevention taskforces. These partnerships allow the NRCSs to learn from and leverage each partner’s expertise in the domain of HIV prevention, care, and treatment. Common goals, strategies, and messages are established and duplication of effort is reduced, leading to a more efficient and rational use of program resources. Lastly, to identify and disseminate best practices, exchange workshops are held between Red Cross branches within the same country and between Red Cross societies and International Red Cross and Red Crescent Movement (Movement) partners at the regional and cross-regional levels.

Strategic Objective 3

TWC's third SO is to **enhance the community environment for the adoption of safer sexual practices**. Community is defined as adult stakeholders who directly or indirectly influence the environment in which youth make safe or unsafe sexual decisions. These adult stakeholders include parents and teachers as well as religious and secular community leaders from the public, non-governmental, informal, faith-based, and private sectors. The TWC program informs, seeks permission to operate, and solicits direct involvement of adult community members in the fight against HIV and AIDS and in fostering the safer reproductive lives of youth by organizing **town hall meetings**. These meetings are held in schools, churches, and town centers. TWC NRCS staff invites core groups of adults, who are already members of existing **community councils (CCs)**, such as parent teacher associations and local AIDS taskforces, to become involved in day-to-day program implementation. Examples of direct CC engagement include help in planning TWC workshops in schools, consensus building on appropriate messaging for younger youth ages 10-14, in-kind contributions to program activities, promoting TWC sessions via letters to parents, and offering feedback after observing program activities.

Key Accomplishments

As the Semi-Annual Emergency Plan Indicators Table demonstrates, the Together We Can project has exceeded its six month objective of youth trained and youth reached, meeting 134% of the youth reached target and 116% of youth trained. Having reset TWC's life of the project targets in response to the program's extension, the project has reached 92% and 87% of life of project youth trained and youth reached targets, respectively, to date. In order to minimize double counting issues, these figures include a 50% reduction in youth reached by edutainment and peer to peer outreach in Tanzania and approximately 40% reduction in peer to peer outreach in Guyana. Double counting among TWC's three main outreach interventions is most pronounced in rural areas where high numbers of youth are being reached. Currently, for the most part, these factors apply to the Tanzania and Guyana (hinterland areas) portions of the program. Beneficiaries are split evenly by gender with a slightly greater proportion of females reached in Haiti and Guyana, and males reached in Tanzania.

There were several important project developments during the semi-annual reporting period. First, the adapted curriculum in Tanzania underwent rigorous evaluation through the feedback of critical readers spanning the public and private sectors in and beyond Tanzania, as well as field-testing in both in and out of school settings. Now complete, the curriculum is currently being rolled out to newly recruited peer educators in Shinyanga by program managers together with field managers who were recently trained in the content and delivery of the adapted curriculum. Meanwhile, the formal and final version of the adapted curriculum in Haiti was mass-produced. Second, the TWC program in Haiti expanded to two new sites in Haiti and new FMs and PEs were recruited and trained. Similarly, in Tanzania, the program formally moved to Shinyanga, leaving one of four sites in Kigoma operational. In one of the three new sites in Shinyanga, the TWC project will comprise the prevention portion of an integrated prevention, care and support program for PLWHIV and OVCs. Third, with follow-up activities underway in all three countries, and now equipped with a follow-up intervention development and content guide, the Together We Can teams are working on improving their relevance and responsiveness to local needs as observed and as interpreted from various data sources from pre/post-test results and monthly reports to PE/FM monthly meetings and new research. Fourth, the TWC program developed the tools and determined the sites for free condom distribution in Haiti, and distributed its first condoms. Fifth, the trusted adult-youth communication curriculum underwent an adaptation process eliciting feedback from critical readers in and beyond Tanzania. Finally, the project continued to share expertise, including in monitoring and evaluation systems and adaptation tools, among NGO partners within and beyond the Movement including the GRCS offering training and programmatic assistance to the Miami chapter to set up the TWC program and providing TWC training to the Curacao Red Cross.

Major Issues/Constraints

The majority of youth reached through TWC sessions were in-school youth. While Tanzania has the largest proportion of out-of-school youth completing TWC sessions, only 25% of their youth multipliers fell within this category compared to the 50% target, and the proportion in Haiti and Guyana were 13% and 10%, respectively, both short of their 15% target. With the support of the technical team from ARC, the project is working on better targeting and retaining OSY through reaching out not just to organizations that set out explicitly to serve OSY but also organizations that reach more mainstream OSY populations such as young mothers through nutrition programs.

Only in Tanzania did the project exceed the goal of reaching at least 70% of youth completing the TWC curriculum with follow-up interventions. Other than the 72% reached by Tanzania, the project in Guyana reached only 40% and only 24% in Haiti. The low proportions in Haiti and Guyana can be attributed to the slow start in reaching youth with the TWC curriculum in the first quarter of FY09 and low numbers reached in the last quarter of FY08.

Despite positive results in Tanzania, a three month void between one health delegate who left in December and her replacement who came on board in March put strain on the program, contributing to slight delays in moving to Shinyanga. In Haiti, communication and coordination issues posed challenges to project implementation during a period of expansion. Concerted efforts, including the involvement of USAID Washington and the Mission, and senior leadership of ARC, are assuaging these difficulties.

Finally, a two year long effort to secure funding in-house for an impact evaluation (at the behavioral outcomes level) of the TWC project concluded with an unsuccessful outcome largely due to cost. However, the TWC team will continue to use the pre/post tests to look at knowledge, attitude, and skills outcome levels, and the ARC Monitoring and Evaluation advisor will be assessing the project's tools and offering recommendations by the end of the FY.

Planned Activities

During the remainder of FY09, the HRC and TRCS will look to strengthen the presence of TWC in two new regions in Haiti and Shinyanga, respectively. The HRC will also ensure that the free condom distribution occurs in a responsible and tracked manner. The project will strive to reach FUI targets while ensuring high quality interventions that refresh not just the knowledge of facts and key messages of YMs but also provide the opportunity for each youth to further practice or hone his/her communication skills. The project will further its effort to continually update and highlight its referral systems, with FMs and PEs - as well as YMs in the case of Haiti and Tanzania - tasked with visiting referral sites to be able to better speak from experience to the type and quality of services. The TRCS will field-test and finalize the trusted adult-youth communication curriculum, and HRC will draw from this curriculum in preparation for initiating adult-youth communication outreach in early FY10. GRCS will ensure that messages and referrals around preventing mother to child transmission are integrated into TWC outreach. Finally, while each country team continues its business development efforts and build sustainability, concrete contingency plans for a June 2010 close out will be developed.

Budget

Funding requested under the FY09 Workplan totaled \$2,043,553 including ARC (\$873,860) and sub recipient (\$1,169,693) projected expenditures. Actual project expenditures for the first six months of the year totaled \$789,789 (ARC - \$326,080 and Sub-recipients - \$463,709). During FY08, the TWC project received an obligation amount totaling \$1,502,414 (\$463,361 in May 2008, \$689,053 in June 2008, \$350,000 in September 2008). During FY09, the TWC project received an obligation totaling \$892,240.

II. GUYANA PROGRESS REPORT

FY09 Semi-Annual Results for Guyana

SO	Key Country Level Workplan FY09 Indicators	OCTOBER 08 – MARCH 09		
		Planned Semi-Annual Target	Actual	% of Target Met
SO1	Number of age, gender and culturally appropriate adaptations to TWC curriculum	2	0	0%
	Number of Field Managers (MT/IT) and Peer Educators trained	12	0*	0
	Number of youth completing entire TWC curriculum	550	680	124%
	Number of youth reached by peer to peer outreach	1,650	1116	68%
	Number of youth reached by interpersonal community-wide events	1,000	1096	110%
	Number of youth completing entire TWC curriculum in previous FY reached through follow-up interventions in current FY	135	307	227%
	Total youth reached with community outreach programs	3,335	3199	96%
	Number of youth completing entire TWC curriculum in current FY reached through follow-up interventions in current FY	140	0	0
	Number of youth reached by general diffusion community-wide events	1,500	1500	100%
	Number of youth reached by mass media programs			
SO2	Number of operational partnerships	0	10	>100%
	Number of operational national project task forces	0	1	>100%
	Number of staff trained in organizational development	0	7	>100%
SO3	Number of adults attending Town Hall meetings	250	196	78%
	Number of operational community councils	0	1	>100%

* 40 PEs were trained with funding from the Federation, and 10 PEs were refreshed.

Key Accomplishments

The Guyana Red Cross (GRCS) was just shy of reaching its six month objectives for youth reached with community outreach programs; however, GRCS exceeded goals for youth reached with the TWC curriculum, interpersonal community-wide events and follow-up interventions. In addition, more time was spent on TWC sessions as a result of successful negotiations with site coordinators for more scheduled time, and FUIs helped to reinforce messages. Slightly more than half of youth reached were female (55%) due to females' slightly higher rate of completion of the entire curriculum. In order to better reflect local community gender sensitivities, field managers working in hinterland communities continued to modify the curriculum slightly by separating males and females during condom use and negotiation activities. Approximately 10%

of youth completing the curriculum were out of school, a category that included a group of vocational students from the Agricultural School of Guyana, the Sophia Special school targeting youth without high school completion, and the Dorothy Bailey Youth Center for at risk youth. Compared to a target breakdown by age cohort of 30:50:20 for 10-14, 15-24, and 20-24 age brackets, the actual breakdown was 44:40:16, with a higher number of youths 10-14 year olds due to the greater ease of targeting this typically in-school group. The project was active in all three program sites: Regions 1, 4 and 9. In response to significant PE drop out, and GRCS' ability to secure funding from the Federation, GRCS recruited and trained 40 new PEs, and 10 pre-existing PEs were re-trained.

The GRCS collaborated with one national project task force (National Blood Transfusion Service) to ensure a secure and safe blood supply as well as three regional task forces during this reporting period including the Region 1 Regional AIDS and Region 9 Regional Multisectoral AIDS Committees to discuss the region's upcoming events for World Aids Day 2009, as well as Region 4's Regional Democratic Council Education Committee.

The GRCS has maintained several operational partnerships. The GRCS has existing partnerships with the Ministry of Education, Ministry of Health, Region 9 Regional AIDS Committee, St. Ignatius Secondary School, UNAIDS, South Central People's Development Association, UNFPA, Dorothy Bailey Youth Center, Health Sector Development Unit, and Peace Corps. The project has one Peace Corps volunteer who assists the program in Region 1 and another who works with and supports the Peer Educators at the Dorothy Bailey Youth Center.

Supervision continues to be strong with a ratio of 1 FM to 8 active PEs, and FMs supervising at least two of the four sessions, selected either at random or as a function of the PEs' strengths. PEs and FMs continue to update referrals through referral site visits and liaising with the Ministry of Health.

Over 190 adult stakeholders attended GRCS TWC town hall meetings and one community council in Moruca actively participated in TWC programming. While the project has one active community council in Region 1, the project has not been able to reach out to a couple of community councils in region 9 due to distance and limited radio contact. GRCS will reach out to them to inquire into their activity status in the next six months and try to arrange a visit. The GRCS is in the process of developing a Community Council with local NGO Sophia's Mothers Group in Georgetown, Region 4.

Interpersonal community wide events to celebrate World AIDS Day included outreach during a HIV/AIDS Conference, Guyana Red Cross AIDS Day parade, delivering activities and poetry-readings during school assemblies, and launching a Federation-supported stigma and discrimination campaign (called "0%" consisting of images in the form of a 0 like soccer balls that illustrate types of contact that have a 0% chance of transmission of HIV). Other interpersonal community wide events included outreach at hair dressers, sports grounds (to sports clubs), and the Guyana Prison Service (to prison officers and relatives of prisoners). General diffusion Community Wide events included GRCS education and awareness booths at Ministry of Health fairs and at recreation/sports halls.

The TWC team ramped up efforts to strengthen organizational development and build partnerships and networks to encourage sustainability. One TWC FM continues to be a member of the Global Fund Country Coordinating Mechanism and the GRCS applied for Global Fund resources in the fall of 2008 to support elements of its Federation-sponsored Global Alliance strategy, which includes TWC and youth prevention.

GRCS leveraged its membership with the Red Cross movement to secure support for TWC trainings from the Federation and for three FMs to participate in Federation-sponsored regional TWC training. Furthermore, the Federation recently approved funding for a series of organizational development trainings for branch development and strengthening which could roll out in the next six months. Meanwhile, one FM is representing the Federation as a member of a five-person committee to develop a youth network, the Caribbean Youth Forum, to expand the role of youth in preventing HIV in the region. She will be facilitating workshops on the topic during an international Red Cross youth conference in both Geneva and Solferino, Italy (the birthplace of the Red Cross) this summer. Another FM co-facilitated a training of National and Instructor Trainers in Curacao to help the movement scale up TWC in the region. Additionally, two FMs helped the Miami chapter launch their TWC program by training up Peer Educators and orienting the program coordinators from the Miami Chapter's respective partner organizations.

Six staff members were involved in various organizational trainings that included: first aid instructor trainings in Guyana; PAHO and MOH-sponsored training of trainers on adolescent health and adolescent pregnancy-prevention in Guyana; Federation-run National and Regional Instructor trainings in Antigua and Jamaica; and HIV in Emergencies training in Jamaica.

Major Issues/Constraints

Only 10% of the 20% target of OSY were reached due to the difficulties targeting and then retaining OSY for the length of the curriculum. The team will continue to focus on OSY, with support from ARC-coordinated discussions among the three-country project partners. Peer to peer outreach rates are on average two peers reached by youth multipliers. This figure includes an approximately 40% discount rate (applied by PEs by hand by assessing the overlap in each roster) due to double-counting that results from the small scale of communities and abundance of boarding schools in the hinterlands of regions 1 and 9. Despite the discount rate, the numbers reached by YMs are still relatively low compared to the 10 that they're tasked with reaching. Meanwhile, approximately 90% of youth multipliers who start the curriculum complete it and, as mentioned earlier, completion rates tend to be higher among females.

The ratio of youth who completed the TWC curriculum who were reached with follow-up interventions was only 40% compared to the 70% target due to challenges in scheduling these interventions as well as expenses in conducting FUIs in hinterland communities. As such, in the next six months, FMs will coordinate to include other health and disaster-related outreach to make the trip cost-effective in hinterland communities.

While the GRCS conducted an extensive review of the curriculum and offered multiple recommendations for adapting the curriculum, the Federation's TWC faculty is holding off on decision-making until it completes a reorganization, expected to be completed in the next six months.

Peer Educator retention is highly variable by region with 20 of the 50 PEs that were trained in October considered inactive (inactive defined as conducting no outreach over the past three months) due to scheduling conflicts with other commitments related to jobs or studies.

During this reporting period, GRCS was unable to receive condoms from National AIDS Program Secretariat (NAPS) due to the expiration date of available condoms that was less than one year away which GRCS requires due to the humid climate. Condoms expiring in 2012 are now available, but in reduced quantities – GRCS in the past used to collect an average of nine cartons per quarter, and are now given two cartons every two months or upon request.

Club outreach was slowed this reporting period due to the inactivity of Club 25, and scheduling conflicts with Dorothy Bailey Youth Center. Newsletter reproduction was hampered due to printers being down. The budget did not allow for new printers to be purchased for each region, so this activity was put on hold. Many of the National Task Forces, such as NAC and PEPFAR-USG, are presently inactive.

Due to PTA agendas, poor attendance at meetings, and budget constraints, GRCS was unable to reach goals set for adults at Town Hall Meetings. GRCS intends to aggressively pursue this during the upcoming months, focusing on Region 4, and as much as possible in Region 1, where efforts will be made to conduct Town Hall Meetings simultaneously with TWC sessions, in an effort to cut costs.

From November 2008 to present, Moruca in Region 1 has been affected by a mysterious illness that affects young girls, and to date, no official medical explanation has been given. Due to the number of youths affected, parents have taken the decision to take their children out of school and allow them to study at home until this illness abates. The illness seems to cause blackouts, seizures and hallucination in the affected population, and the first cases were seen among the girls in the school dormitories.

Planned Activities

The targeted number of youth to be reached for the latter half of FY09 is very slightly less than those set for the first half of the fiscal year. With the entry of pre and post test results into the database, project staff and field managers will work on better using data analysis to guide follow-up activities, supervision and programming, and will also start collecting and inputting data from follow-up interventions. In response to declines in ability to negotiate condom use which persisted from earlier periods illustrated by pre/post tests, the project will focus refresher trainings on skills-building of PEs to deliver the condom-related activities, and shape follow-up interventions to highlight condom (negotiation) skills development. In addition, GRCS plans to scale up and strengthen follow-up activities using guidance issued in January. GRCS will also increase messaging around PMTCT, and will resume condom distribution in Region 9 and one

part of Region 1 (in the other area of region 1, Moruca, the community's catholic orientation continues to translate into resistance to both education around condom use and the distribution of condoms).

GRCS hoped to hold a leadership camp where PEs would be brought together but due to funding constraints within the project, they are focusing instead on raising funds to support PE attendance of a regional Red Cross youth camp occurring in St. Vincent this summer. Efforts will also be made to reach out to former and strengthen existing Community Councils during the next reporting period. Having explored outreach to two new communities in Region 9 to fill a gap left by an HIV outreach organization whose funding has come to an end, the team will make a decision whether it can make the investment in this remote and small (300 persons) but under-served community. Region 9's newsletter and Region 1's attempts to replicate this activity met with obstacles in the form of faulty printers. Region 9 and Region 1 intend to get the newsletter up and running next reporting period.

Monitoring and Evaluation

Table 1: Guyana Red Cross Pre/Post-Test Results (October 2008 – February 2009)

<i>Question/Indicator</i>	<i>Pre-test</i>	<i>Post-test</i>	<i>% Increase</i>
Knowledge			
Comprehensive correct knowledge. UNAIDS. (female)	25%	56%	124%
Comprehensive correct knowledge. UNAIDS. (male)	11%	50%	355%
Attitudes			
HIV+ female teacher allowed to teach in school (female)	42%	58%	38%
HIV+ female teacher allowed to teach in school (male)	29%	66%	128%
Accepting attitudes towards people living with HIV. UNAIDS. (female)	16%	34%	112%
Accepting attitudes towards people living with HIV. UNAIDS. (male)	14%	31%	121%
Skills			
Ability to negotiate abstinence (female)	42%	52%	24%
Ability to negotiate abstinence (male)	30%	58%	93%
Ability to negotiate condom use (female)	84%	80%	-5%
Ability to negotiate condom use (male)	75%	84%	12%

Table 1 above shows results for 113 pre-tests and 133 post-tests (57 pre and 71 post for females, and 56 pre and 62 post for males) administered by peer educators to youth beneficiaries during the first and last days of TWC workshops during the period between October 2008 and February 2009. Given the small number of tests administered, we cannot draw meaningful results when

broken down by gender. However, the table shows significant gains across the board with the exception of male's ability to negotiate condom use which showed mild gains, and decreases in female's ability to negotiate condom use. While the sample size is small, the positive results for male's ability to negotiate abstinence mark an encouraging shift from past periods.

Program Management

No change in key personnel occurred during this reporting period.

Budget

Guyana Red Cross project expenditures from October 2008 through March 2009 total \$71,682. This amount does not include American Red Cross headquarters expenses.

Story from Field: Empowered through Helping Others.

Since 2004, over 260 youth have been trained as TWC peer educators by the GRCS team. Over the years, field staff and community members have seen these peer educators apply and devote themselves to making their fellow peers and community members aware of the facts of HIV/AIDS and other STIs. Peer Educators have traveled under challenging conditions which included walking to sessions, canoeing rivers, traveling by bull-carts, bicycles, motor cycles, and hiking mountains to deliver knowledge to remote locations. To date, peer educators have sensitized thousands of vulnerable youth in Guyana.

While these young people have enjoyed being peer educators, a number of them have realized significant goals and relocated to pursue their dreams which many believe were shaped by their role as GRCS TWC peer educators. Currently, eight PEs are pursuing studies in medicine in Cuba while others are pursuing studies at the University of Guyana, dental school, nursing school and other technical institutes. Quite a number of them are actively pursuing careers in the fields of education, carpentry, mechanics, health, environment, and business. Others remain in the Red Cross family both as staff and volunteers.

What do they all have in common? Their hope that they can live by the motto of PEs from Region 9: "to change the world one person at a time."

Mandessa:

At the age of 14, Mandessa enrolled to become a Peer Educator of the GRCS. At the time of her training, she was one of the shy and reserved participants. However, training and involvement not only in Peer Educator training but also other GRCS programs including Club 25 and Communication and Health has boosted her self-esteem to the point where she has garnered praise for being bold. Through these experiences, she also forged friendships, and has felt empowered to share her skills with and help others.

In 2007, Mandessa was honored as one of our 'best performing' and 'most reliable' peer educators. She has been a great influence and role-model to many of our Youth Multipliers, many of whom aspire to follow in her footsteps starting with becoming a trained PE themselves.

It's no surprise: with her five years experience with 'Together We Can', she has become nearly flawless in her work as a Peer Educator.

Today, three years later, Mandessa is a young professional dancer with the Edge Prophetic Dance School and in her spare time, she enjoys dancing, and performing for GRCS events, and is also very active in her youth group at her church, being able to share much of what she has learnt at GRCS.

Leslie Edghill:

In 2003, Leslie Edghill was trained as a peer educator in the TWC program. Leslie has since moved up the TWC structure, becoming an Instructor Trainer and presently functions as a



27 year-old Leslie consults his trusty TWC Manual, a manual that he knows all too well having been a PE for the past 8 years. Photo: courtesy of GRCS.

National Trainer in the program. Leslie is also a trainer in SPHERE and has also received training as a First Aid Instructor (refreshed as recently as February 2009). During all of this, Leslie has found time to pursue studies at the University of Guyana, majoring in Public Communications. In the past, Leslie has worked on previous issues of the GRCS newsletter and is currently trying to revive this within the national society. Currently, he works for GRCS on a Disaster Preparedness project as the Field Officer, where his years as a PE facilitating sessions in the TWC program has enhanced his ability to interact effectively with people in the communities. According to Leslie, "Facilitating TWC sessions make me feel as if I am doing my part in the fight against HIV and AIDS, even though it may be a small part."

Noel Prudencio:

Trained in 2005, Noel Prudencio continues to be an active peer educator in the TWC program. Noel, who started out as a very shy and quiet youth, is now an outspoken and confident adult. He attributes his boost in self-confidence to years of volunteering with the GRCS as a peer educator where he taught his peers about STIs, values, etc. Noel so enjoys his role as a peer educator that he refuses to be trained as a National Trainer, stating that he enjoys "interacting with youths directly in the sessions. Nothing beats working at the community level." Noel has been honored by the GRCS as one of the most outstanding peer educators and represented the GRCS at a World Bank meeting on HIV and Youth in Washington in November 2007. He is presently working on an EU and French Red Cross funded project with GRCS in water and sanitation, where he is able to apply skills learned under the TWC program. Noel continues to volunteer as a peer educator during his free time, even using his annual vacation to do peer education in communities in Region 9.

III. HAITI PROGRESS REPORT

SO	Key Country Level Workplan FY09 Indicators	FY09 Semi-Annual Results for Haiti								
		OVERALL			HAITI EXTENSION			HAITI EXPANSION		
		Planned Target	Actual	% of Target Met	Planned Target	Actual	% of Target Met	Planned Target	Actual	% of Target Met
SO1	Number of age, gender and culturally appropriate adaptations to TWC curriculum	0	0	-	0	0	-	0	0	-
	Number of Field Managers (MT/IT) and Peer Educators trained	44	65	147%	0	0	0	44	65	147%
	Number of youth completing entire TWC curriculum	5,000	3,912	78%	4,200	3,912	93%	800	0	0%
	Number of youth reached by peer to peer outreach	25,000	34,185	137%	21,000	34,185	163%	4,000	0	0%
	Number of youth reached by interpersonal community-wide events	2,571	3,898	152%	2,000	3,898	195%	571	0	0%
	Number of youth completing entire TWC curriculum in previous FY reached through follow-up interventions in current FY	0	63	-	0	63	-	0	0	-
	Total youth reached with community outreach programs	32,571	42,058	129%	27,200	42,058	158%	5,371	0	0%
	Number of youth completing entire TWC curriculum in current FY reached through follow-up interventions in current FY	1,470	891	61%	1,470	891	61%	0	0	-
	Number of youth reached by general diffusion community-wide events	10,000	12,509	125%	10,000	12,509	125%	0	0	-
	Number of youth reached by mass media programs	0	0	-	0	0	-	0	0	-
SO2	Number of operational partnerships	8	12	150%	6	12	200%	2	0	0%
	Number of operational national project task forces	2	0	0%	2	0	0%	0	0	-
	Number of staff trained in organizational development	10	2	20%	10	2	20%	0	0	-
SO3	Number of adults attending Town Hall meetings	966	1252	130%	750	752	100%	216	500	231%
	Number of operational community councils	8	7	88%	7	7	100%	1	0	0%

* Relevant PEPFAR indicators are also featured on page 8.

Key Accomplishments

Peer educators (PEs) and field managers (FMs) exceeded total youth reached targets (129%), reaching 42,039 youth through curriculum-based, peer to peer and community wide events. The Scaling Up Together We Can project reached 78% of its semi-annual target objective in terms of youth multipliers (YMs) completing the entire TWC curriculum, 137% of the target for youth reached through peer to peer outreach, and 152% of the target for youth reached through interpersonal Community Wide Events (CWEs). Over half of youth reached were female (54%) and 13% were out-of-school youth. The proportion of youth reached per age cohort with regards to the work plan goal of 30:50:20 was 29% for youth ages 10 – 14, 44% for youth ages 15 – 19, and 27% for youth ages 20 – 24.

During this reporting period, the project expanded into two new geographic areas. Inspired by DHS results and following a PEPFAR partners mapping exercise which revealed a lack of HIV prevention interventions in the North West and Nippes departments, and with support from the USAID Mission, the Haitian Red Cross (HRC) rolled out the TWC program in Port-de-Paix and Anse-a-Veau. The FM and PE recruitment and training process for these two new sites began mid-December and lasted through March. Seven participants were trained for the new FM slots and four were chosen. A further 58 peer educators were trained to qualify for the 40 PE slots. The newly trained teams in these expansion sites will begin to reach youth in May.

Expansion has also occurred within the original TWC project sites. Five out of those seven branches have increased their catchment area. The branch of Cap Haitian now intervenes in the communal sections of Limbe, Limonade and Plaine du Nord; Fort Liberte has expanded into Trou du Nord and Ferrier; Ouanaminthe has moved into Acul des Pins, Capotille, and Dosmond; Petit Goave now reaches Les Palmes, Violet, Hyacinthe, and Trou Chouchou; and Anse-a-Pitre has stretched out to Bony and Marre Rouge. The Petion Ville and Cité Soleil branches continue to have their hands full in their respective areas.

As of October, PE sessions were being conducted with the new curriculum in all seven original project sites. This has improved the quality of PE outreach through adaptations that include relevant and well-structured homework assignments for YMs to complete at the end of each block. Testament to this improved quality is the positive pre/post test gains illustrated in table 2 below. During this reporting period, the curriculum adaptation process was also formally finalized with the professional printing of the PE manual, complete with the Ministry of Health's logo and stamp of approval.

Interpersonal community wide events to commemorate World AIDS Day included street outreach, information booths, drama skits, games, messaging and DJs in town squares as well as outreach at churches. General diffusion community wide events included activities during local Patron Saint's Day festivals and sporting events.

The project's Information Education Communication pamphlet featuring singer Belo now features his female counterpart (role-model and youth actress Jessica Geneus). Over 20,000 have been distributed this period through community wide events and curriculum-based outreach. Each branch is also fully equipped with high-quality, laminated, erasable referral posters to which each branch adds information on local reproductive and sexual health services. Further,

FMs and PEs, as well as YMs through take home assignments, are encouraged to visit referral sites on a regular basis, to ensure that information on various services is current.

TWC follow-up interventions (FUIs) are now better structured with the support of a FUI guide. This guide ensures the standard delivery of key messages and skills-building activities. To support the interventions, FUI cards and certificates of completion are issued in advance and during FUIs, respectively.

A condom protocol was developed to guide the FMs on their condom outlet sites selection, and equips FMs with the tools required to ensure responsible distribution of high quality materials and to monitor stocks, avoiding storage of unused material for long periods of time. In March, Fort Liberté distributed 7,000 condoms at their commune's Patron Saint's Day festival.

The TWC project youth coordinator participated in a regional trainers training run by the Federation's TWC regional faculty. In January, the ARC Compliance Officer conducted a presentation and training for the HRC and ARC project coordinators along with the HRC project accountant on the project agreement terms, the A-122 cost principles, and USAID regulations (and business ethics).

The Haitian Red Cross continues its longstanding partnerships with FOSREF, VDH, PLAN, the Ministry of Health, and IDEJEN, and newer partnerships with the Scouts d'Haiti, PSI, MSH, FHI, POZ, Shine, and Hospital Fort Liberté. The strategic partnership with IDEJEN designed to expand the program's reach with out-of-school youth led to the recruitment of 4 out-of-school youth PEs from the program in Cite Soleil.

Seven community councils were active during the reporting period. Each community council has worked closely with project FMs to plan TWC sessions and assisted in informing parents and adults about TWC interventions in their schools. While targets were exceeded towards the end of the period after activities were reenergized, there was still a 12% deficit overall for the reporting period.

The official launch of TWC and Club25 in the new sites of Port-de-Paix and Anse-a-Veau occurred jointly, and the launch in Port-de-Paix was aired on national television (Tele Haiti) and several radio stations. Since the launch, several Club25 youth have been recruited and trained as TWC PEs.

The project received several visitors ranging from USAID Washington representatives to senior leadership of the American Red Cross (ARC). In March, CTO Emily Osinoff, Sarah Sandison, and Debbie Kaliel from USAID Washington as well as Wenser Estime, Activity Manager from the USAID Mission, conducted a series of meetings and site visits to view a FUI in one of the original sites and PE training in a new site into which the project is expanding. The visit helped create a neutral forum for the team to explore some of the internal weaknesses and program shortcomings. Further, the USAID visitors offered recommendations for problem-solving, and their visit added momentum to internal efforts to come up with solutions. Between January and March, the project received visits from the ARC Senior Vice-President of International Services and a U.S. Congressional staff delegation. The ARC Senior HIV/AIDS Advisor also visited the project to get a sense of issues surrounding PE retention and outreach to higher risk or out-of-

school youth. The ARC compliance officer visited to ensure that staff members understood the basic rules and regulations and project agreement documents, and to verify the implementation of standard operating procedures.

Major Issues/Constraints

With only 78% of its semi-annual target for YMs completing the entire TWC curriculum, the project needs to focus on reaching YMs who complete all 22 activities of the TWC curriculum. Efforts need to be made to ensure that YMs remain motivated to complete the entire curriculum through offering engaging sessions and rigorous follow-up. The possibility of allowing PEs who are available and willing to double up on YM sessions during the month is also being considered. This will enable the project to catch up on numbers of YMs completing the entire TWC curriculum. In addition, given that there is a direct correlation between number of active PEs and number of YMs reached, it is extremely important that the PE retention rate remain high.

The project experienced growing pains due to the increased workload resulting from expansion into new areas and new interventions. In response, the project coordination is exploring different scenarios with action steps designed to improve PE retention, the quality of FM supervision, and to enable the project to catch up to target objectives. From October to date, 14 PEs out of 128 left the project representing an 11% dropout rate; a list of possible incentives to increase PE retention includes t-shirts, hats, backpacks, or rain-gear. The possibility of having an extra FM or an assistant per branch to increase supervision and support is being discussed. Also, the project is providing more tools and supports such as motorcycles, office equipment and internet access. Field Manager trimester planning has also been reinforced to ensure FMs set clear monthly goals for YM sessions, town hall meetings, and PE supervision visits, and “PE of the month” awards and other mechanisms for individual recognition.

The program suffered from some internal communication and coordination issues between ARC and HRC teams which were compounded by the absence of the ARC Head of Programs during the disaster response in the fall. These are being addressed, and progress is being made. Further, poor performance led to the non-renewal of two FMs’ contracts.

Less than 25% of FUI targets have been reached because they only came into full force in January due to the fact that they occur three months after TWC sessions and there were no activities between July and September of the previous fiscal year. In addition, the percentage of youth reached constituting out-of-school youth fell slightly short of the 15% target, at 13%, due to continued challenges targeting and retaining higher risk youth.

Due to the inactivity of networks, there were no operational national project task forces and the project participated in only one Behavior Change Communication cluster meeting about the upcoming candlelight memorial and one meeting hosted by the Ministry of Health around carnival activities. While the security situation over the reporting period seemed to have drastically improved, hurricanes Gustav, Hanna and Ike caused delays in planning and programming of activities at the start of FY09. The populations in the rural areas were deprived of basic services, and transportation to certain sites was not available. Many schools postponed their opening (usually in early October), limiting the workshop sessions for the YMs. Other activities such as Town Hall Meetings were also cancelled.

Planned Activities

The Haitian Red Cross will focus its efforts during the next six months on the relatively new interventions and two new sites. HRC will strive for quality FUIs and work towards increasing the proportion of youth reached with FUIs who completed the TWC curriculum. In addition, HRC plans to fully actualize condom distribution in all branches. Given the delay in project expansion to two new sites by a couple of months, the project will focus on supporting new branches and their new FMs and PEs.

The project will also emphasize supervision at the branch level with: the recruitment and training of two FMs to replace those that left the project at the end of February; increased incentives and support for PEs; and continued efforts to strengthen FMs' trimester target planning. HRC will continue to participate in ARC-coordinated discussion with project partners in Tanzania and Guyana around strategies both to target and retain out-of-school youth and to optimize the effect of the intervention. Both ARC and HRC will draft three suggestions to improving program performance, addressing communication and coordination issues, which will result in concrete action steps and finally, HRC will draw on lessons learned and materials developed by the project in Tanzania to prepare for the FY10 roll-out of the trusted adult - youth communication curriculum.

Monitoring and Evaluation

Table 2: Haitian Red Cross Pre/Post-Test Results (October 2008 – March 2009)

<i>Question/Indicator</i>	<i>Pre-test</i>	<i>Post-test</i>	<i>% Increase</i>
Knowledge			
Comprehensive correct knowledge. UNAIDS. (female)	18%	43%	139%
Comprehensive correct knowledge. UNAIDS. (male)	19%	46%	142%
Attitudes			
HIV+ female teacher allowed to teach in school (female)	36%	67%	86%
HIV+ female teacher allowed to teach in school (male)	46%	71%	54%
Accepting attitudes towards people living with HIV. UNAIDS. (female)	5%	20%	300%
Accepting attitudes towards people living with HIV. UNAIDS. (male)	7%	23%	229%
Skills			
Ability to negotiate abstinence (female)	47%	62%	32%
Ability to negotiate abstinence (male)	43%	55%	28%
Ability to negotiate condom use (female)	73%	82%	12%
Ability to negotiate condom use (male)	77%	88%	14%

Table 2 above shows results for 939 pre-tests and 780 post-tests (531 pre and 452 post for females, and 408 pre and 328 post for males) administered by PEs to YMs during the first and last days of TWC workshops between October 2008 and March 2009. The table shows consistent gains for all indicators examined with particularly pronounced results for comprehensive correct knowledge and strong results for attitudes and abstinence negotiation self-efficacy. Only with skills acquisition (or self efficacy) around condom negotiation were results less than 15%. However, both females and males scored well on pre-tests for this question reducing the potential for gains.

Program Management

No change in key personnel occurred during this reporting period. However, the ARC project assistant left the project in December 2008 and the recruitment process for his replacement is underway.

Budget

Estimated sub-recipient (Haitian Red Cross) project expenditures from October 2008 through March 2009 total \$193,054. This amount does not include American Red Cross field and headquarters expenses.

Story from the Field. Taking it to the streets to stop AIDS.

In keeping with the World AIDS Day theme of “Keep your promise, stop AIDS,” the Cite Soleil branch held a town center celebration diffusing key Together We Can messages and raising awareness about HIV and AIDS and the Red Cross. Theatrical skits and participative activities such as “The Transmission Game” were also methods of conveying messages about HIV and AIDS. The event targeted both in-school youth and non-traditional youth. Community leaders, school directors, and even our donor USAID came out to support the event. The ex-mayor of Cite Soleil also helped animate the event, offered free internet minutes from his business as an incentive for youth participants, and used the occasion to encourage all youth to adopt responsible behavior towards sex. The event lasting from 10AM to 4PM also attracted media coverage including Radio Boukman, which has a strong presence in Cite Soleil, and both Channel 11 and Haitian National Television (HNT).



Peer Educators and Facilitators lead the edutainment in a World AIDS Day event in the Town Hall of the volatile community of Cite Soleil. Photo: Courtesy of HRC.

On the other side of town in another shanty town in Jalousie, another group of PEs and FMs were raising awareness through approaching young merchants, dwellers, and bystanders in the neighborhood hanging out in and out of their homes and stores, and striking up conversations around HIV messages with the help of the new TWC brochure featuring famous singer Belo and actress Jessica Geneus. As the PEs and FMs discussed how HIV is transmitted, it was clear that the basic facts had eluded some individuals up until this point; some youth were not aware of the non-sexual means of contracting HIV, that pregnant woman could infect their child with the virus, and that condoms help prevent the sexual transmission of HIV. Through the street outreach and distribution of the brochure, PEs made contact with youth from all walks of life to raise awareness not only around HIV but also the Haitian Red Cross.

Following the event, youth approached the Field Managers and Peer Educators to ask questions and to relay their decision to use a condom, and some in-school-youth committed to practicing abstinence in order to increase their focus on completing school. While the TWC team couldn't satisfy all requests such as those for condoms, and regretted not having prizes to give out as incentives for participation, participants seemed to gain a great deal and the event was very well-received by the community.



Interpersonal door to door and street outreach in a low-income area of Port au Prince, Jalousie, Haiti. (Photo Credit: Courtesy of HRC)

IV. TANZANIA PROGRESS REPORT

SO	Key Country Level Workplan FY09 Indicators	OCTOBER 08 – MARCH 09		
		Planned Semi-Annual Target	Actual	% of Target Met
SO1	Number of age, gender and culturally appropriate adaptations to TWC curriculum	1	>1	>100%
	Number of Field Managers (MT/IT) and Peer Educators trained	0	0	0
	Number of youth completing entire TWC curriculum	3,600	4,967	138%
	Number of youth reached by peer to peer outreach*	18,000	26,454	147%
	Number of youth reached by interpersonal community-wide events*	1,000	163	16%
	Number of youth completing entire TWC curriculum in previous FY reached through follow-up interventions in current FY	350	2,248	642%
	Total youth reached with community outreach programs	22,950	33,832	147%
	Number of youth completing entire TWC curriculum in current FY reached through follow-up interventions in current FY	2,170	1,346	63%
	Number of youth reached by general diffusion community-wide events*	2,500	6,435	257%
	Youth reached through Adult-Youth Communication training	0	180	0%
	Number of youth reached by mass media programs	500,000	0	0%
SO2	Number of operational partnerships	20	28	140%
	Number of operational national project task forces	10	2	20%
	Number of staff trained in organizational development	15	13	87%
SO3	Number of adults attending Town Hall meetings	240	121	50%
	Number of operational community councils	12	4	33%
	Adults reached through Adult-Youth Communication training	0	180	0%

* denotes that a discount rate has been applied

Key Accomplishments

Field managers and peer educators organized a comprehensive mix of outreach activities in all four project districts—Kigoma Urban, Kigoma Rural “B”, Kigoma Rural “A”, Kasulu and Kibondo. With 33,832 youth reached, TWC Tanzania reached 147% if its 6 month target for total youth reached through community outreach, exceeding overall targets and its 6 month goal for youth completing the TWC curriculum, peer to peer outreach, and the number of youth completing the entire TWC curriculum in the previous FY reached through follow-up interventions in the current FY. At 72%, the project also exceeded the goal of reaching at least 70% of youth completing the TWC curriculum with follow-up interventions. The breakdown of youth reached by gender was approximately equal with a slightly greater percentage of males (51%). The proportion of youth in school versus out of school was 74% to 26% compared to the

50% target. The proportion of youth reached in 10-14, 15-20, 20-24 age brackets vis-à-vis the 40:40:20 goal was 49:36:15 with a greater percentage of 10-14 year olds which also accounts for the greater proportion of in-school-youth. In order to avoid double counting beneficiaries, these figures reflect a 50% reduction in youth reached through peer-to-peer outreach and community wide events, due to the extremely rural intervention sites, which tend to increase the potential for double counting.

While 107 Peer Educators were refreshed, no new Peer Educators or Field Managers were trained given that three of the four departments' operations would cease in anticipation of the shift to Shinyanga. Instead, focus was placed on ensuring quality delivery of the curriculum and follow-up interventions, and closing out the three departments in a way that maximized the potential of sustainability. This meant reaching out to Branch Management Committees and community leaders to identify potential areas, partnerships and events for Peer Educators to continue outreach. This also meant making sure that each local branch was equipped with tools from the curriculum to the referral manuals, and discussing the stewardship of the project materials that will remain at the branches, as well as the transportation of certain moveable assets to Shinyanga.

Quarterly management meetings in October and January focused on the transition to Shinyanga, including the personnel structure, site selection, setting targets within each site, and planning for the recruitment process. The TWC project manager conducted site visits to Shinyanga to undergo a rigorous site-selection process and to identify the accommodation of TWC belongings and office materials. Site-selection was based on a series of criteria including risk factors such as proximity to major cross-roads and mines, number of truck stops, and commercial sex activity. The outcome was the move in March to three areas of Shinyanga: Bukombe, Shinyanga Urban, and Kahama. In Bukombe, the project will be part of an integrated program that includes ARC-funded Home-Based Care (HBC) and support for PLWHIV and orphans and vulnerable children (OVCs).

In November, a short term local adaptation consultant led the TWC curriculum adaptation core group in responding to critical reviewers' feedback to develop the final pre-field testing draft. In addition to critical readers' comments, the document also took into consideration adaptations made to the TWC curriculum in Haiti, Peer Education standards released by the Ministry of Health, data from the new Tanzania Health and Malaria Indicator Survey, and qualitative information about multiple concurrent partnerships in the "One Love" study. In February, the core group met in Shinyanga to field-test the curriculum with in and out-of-school youth. Following the two week field-test, the team convened to analyze results consisting of a compilation of observations, pre/post tests, and guided discussions with a select group of participants following each block. The outcome was the final TWC curriculum ready to be rolled out in Shinyanga in the next quarter.

No trusted adult-youth communication outreach took place this reporting period. However, the curriculum underwent a critical reading process and was revised and revamped in partnership with FHI with whom the TWC program is supporting in their own roll out of the project.

The TWC project participated in World Aids Day (WAD) events between 24th November and 1st December 2008 throughout Kigoma with the dissemination of HIV/AIDS messages, activity demonstrations, and the distribution of leaflets and magazines featuring messaging on prevention options. Kigoma was featured this year as the regional lead for World AIDS Day commemorations. On 1st December 2008, the TRCS participated in the national commemoration of World AIDS day at Lake Tanganyika Stadium in Kigoma town which was attended by National Vice President of Tanzania honorable Dr. Ali Mohamed Shein as the guest of honor, accompanied by Minister of Health and Social Welfare honorable David Mwakyusa. During the event themed “Lead and Facilitate to Fight Against AIDS,” TWC project FMs and peer educators delivered the key messages with an emphasis on abstinence among youth, performed condom demonstrations, and distributed “Fema” and ‘Si Mchezo’ magazines, reaching an estimated 10,000 of TWC target youth in Kigoma urban alone.

The TWC project manager conducted a one day training to 12 TRCS branch leaders in Kibondo to reinforce the roles and responsibilities of branch leadership, and to explore techniques for securing resources and initiating income generating projects. He also participated in a Federation-supported workshop to translate the Federation’s Prevention, Treatment, Care and Support manual from English to Kiswahili.

TWC continued to actively support over 100 members of four separate youth clubs in two of four districts in Kigoma. All clubs were formed on their own initiative by youth who had completed the TWC curriculum and continued to work with peer educators and youth multipliers to support TWC activities in their communities.

The project also benefited from the development of a more elaborate selection criteria and interview guide to be applied during the PE recruitment process in Shinyanga. This period also saw the improvement of data collection forms that were field-tested in Kasulu and Kigoma rural. Following testing, the new and improved data collection forms were further revised with comments from PEs and FMs. Meanwhile, at headquarters in Dar es Salaam, the ARC supported the development of finance and procurement manuals.

In January of 2009, TWC Tanzania hosted a representative from USAID Washington to give an orientation to the project. During the first quarter of the year prior to her departure, the ARC health delegate was active in facilitating and organizing the FHI-led ABY partners task force, and participated in the Coordination Committee for Youth Programs (CCYP). During the second quarter, the ARC Head of Programs participated in ABY partners meetings. Project staff maintained active partnerships with 11 different organizations. Four community councils were active. Town Hall meetings reached 121 stakeholders ranging from government to NGOs, FBOs and private companies.

Major Issues/Constraints

The three month void of a health delegate put strain on the project at a time when the project was both in the midst of a transition to a new district and curriculum adaptation processes. This contributed to the two month delay in moving over to Shinyanga.

The project confronted challenges in coordinating the move to Shinyanga due to limited local TRCS capacity there. This added complications to the transition. Furthermore, the final stage of the curriculum adaptation process consisted of nearly a month devoted to field-testing and making final changes, which further delayed the move.

Only 26% of youth reached constituted out-of-school youth due in part to the challenges that FMs and PEs face in working with non-traditional youth that are considered more difficult and ready to challenge them. The revised curriculum, having been well-received by the out-of-school audience with which it was field-tested, should have content that better resonates with out-of-school audiences. In addition, the older age criteria set for the recruitment of community educators (as opposed to peer educators) should lead to educators with greater maturity and hence greater ability to work with higher risk groups.

Planned Activities

Now complete, the TWC curriculum will be rolled out to Field Managers and new Peer Educators in Shinyanga. The trusted adult-youth communication curriculum will be field-tested, revised and will be complete in May for use in Shinyanga towards the end of the fiscal year once the FMs and PEs are fully operational with the TWC curriculum. The project will continue to supervise from afar the Kigoma Urban branch and follow up with the local leaders in three former Kigoma intervention sites to inquire into TWC peer educator activities and encourage the engagement of Peer Educators in future outreach. Project staff will also continue to improve upon the format and messaging of follow-up interventions, making them more responsive to data generated from various sources from the pre/post database and monthly reports to observations during site monitoring visits, and PE/FM monthly meetings.

Monitoring and Evaluation

Table 3: Tanzanian Red Cross Society Pre Post Test Results (October 2008 – March 2009)

<i>Question/Indicator</i>	<i>Pre-test</i>	<i>Post-test</i>	<i>% Increase</i>
Knowledge			
Comprehensive correct knowledge. UNAIDS. (female)	18%	29%	61%
Comprehensive correct knowledge. UNAIDS. (male)	6%	40%	567%
Attitudes			
HIV+ female teacher allowed to teach in school (female)	48%	76%	58%
HIV+ female teacher allowed to teach in school (male)	69%	87%	26%
Accepting attitudes towards people living with HIV. UNAIDS. (female)	14%	29%	107%
Accepting attitudes towards people living with HIV. UNAIDS. (male)	17%	49%	188%
Skills			
Ability to negotiate abstinence (female)	76%	82%	8%
Ability to negotiate abstinence (male)	54%	71%	31%
Ability to negotiate condom use (female)	80%	94%	18%
Ability to negotiate condom use (male)	79%	93%	18%

Table 3 above shows results for 118 pre-tests and 121 post-tests (66 pre and 66 post for females, and 52 pre and 55 post for males) in Kigoma Rural administered to peer educators, and by peer educators to youth beneficiaries during the first and last days of TWC workshops. Despite the small sample size which is insufficient for drawing meaningful conclusions, there were gains across the board, with significant increases in males' comprehensive and correct knowledge of HIV and AIDS, and accepting attitudes. The relatively small gain in females' ability to negotiate abstinence underscores the importance of the curriculum's activities focused on building communication, refusal and negotiation skills.

Program Management

A change in key personnel occurred during this reporting period. ARC Health Delegate for Tanzania, Erin Smith, left the program in December 2008, and her replacement, Bernad Ochieng, began in March 2009.

Budget

Estimated sub-recipient (Tanzania Red Cross) project expenditures from October 2008 through March 2009 total \$198,973. This amount does not include American Red Cross field and headquarters expenses.

Story from the Field: Reflections from youth who underwent the new TWC curriculum during the field-testing process.

To test the adapted TWC curriculum in northern Tanzania, in the remote mining town of Kahama, guided discussions took place with 8-12 youth following each day of field-testing a block of the curriculum. The guided discussion helped verify what participants learnt, exposing any prevailing misconceptions, and shed light on participants' perceptions of the program and how it will influence their behavior. Dr. Lugoi, the TWC program manager, led the discussions, while note-takers followed judiciously, with a voice recorder as a back up.



Dr. Lugoi leads a guided discussion with nine out-of-school youth after one of the adapted TWC Curriculum blocks. A TWC Peer Educator and Field Manager serve as note-takers. Photo: Courtesy of TRCS.

In addition to finding out the knowledge gains that seemed most weighty like the body, masturbation, that past behaviors constituted discrimination, Dr. Lugoi probed into the misconceptions to verify whether the examples of practices provided in the curriculum reflected the reality in Shinyanga. This exposed certain myths such as the various uses of sticks to physically and supernaturally prevent pregnancy, and gave youth the opportunity to practice countering misconceptions such as the myth that condoms are porous.

Participants confirmed that the curriculum's situations were typical but suggested other examples of risky areas/situations that they felt were common such as wash areas. Participants shared that they liked the interactive and participative nature of the program, but recommended that there be more time for questions and answers, and more focus on certain areas such as female condoms, testing, pressure lines, and biology. Asked how their behavior will differ as a result of what they've learnt and experienced, youth relayed that: they'd be less fearful around PLWHIV; communicate more assertively; get tested; be wary of gifts; and inform not just youth but also adults about misconceptions and risks given not only that many adults don't know the facts but that adults can play an active role in contributing to risky behavior among youth.

The guided discussions were useful in triangulating other data collected from the field-testing process, namely observation forms and pre/post tests, about what worked and what didn't, and in fleshing out the local context within which the curriculum is going to be applied. As such, it helped arm the core group with qualitative information useful in making final changes to the curriculum.