

[LMS Haiti PEPFAR Annual Report: Oct 07 - Sept 08]

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Leadership, Management and Sustainability Program
Management Sciences for Health
784 Memorial Drive
Cambridge, MA 02139
Telephone: (617) 250-9500
www.msh.org/lms



**Leadership, Management and
Sustainability Program, Haiti**

**Annual Report
October 1, 2007- September 30, 2008**

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Acronyms

AB	Abstinence and/or Being faithful
AIDS	Acquired Immune Deficiency Syndrome
ARV	Antiretroviral drug
BCC	Behavior Change Communication
BCC/CM	Behavior Change Communication/Community Mobilization
CBO	Community-Based Organizations
CCP	Center for Communication Programs
DPSPE	Direction de la Promotion de la Santé/Promotion de l'Environnement
FOSREF	Fondation pour la Santé Reproductrice et l'Education Familiale
HCP	Health Communication Partnership
HIV/AIDS	Human Immunodeficiency Virus/ Acquired Immune Deficiency Syndrome
LMS	Leadership Management and Sustainability
MAEC	Maison Arc-en-Ciel
MSH	Management Sciences for Health
MSH/LMS	Management Sciences for Health/ Leadership Management and Sustainability
MSP	Ministère de la Santé Publique et de la Population
NGO	Non-Governmental Organization
OVC	Orphans and Vulnerable Children
PEPFAR	President's Emergency Plan for AIDS Relief
PLWHA	People Living with HIV/AIDS
PFSCM	Partnership for Supply Chain Management
RIVACOM	Association pour le Relèvement de la Grande-Rivière-du-Nord « Les Rivanordais et l'Avancement de leur Communauté »
SDSH	Santé pour le Développement et la Stabilité d'Haïti
SCMS	Supply Chain Management System
STI	Sexually Transmitted Infections
UCP	Unité de Coordination des Programmes
UJAPH	Union des Jeunes pour l'Avancement et le Progrès d'Haïti
USAID/Haiti	United States Agency for International Development/ Haiti
USG	United States Government
VCT	Voluntary Counseling & Testing

I - PROGRAM OVERVIEW

The Leadership, Management and Sustainability (LMS) Program demonstrates that skilled management and inspiring leadership are critical to improving health service delivery; yet the majority of people working in health services who find themselves in management roles have had little or no preparation. By strengthening management systems and improving leadership at all levels, LMS improves the performance of health care organizations, develops human resources, and builds the capacity to anticipate and respond effectively to changing external environments. LMS focuses on all levels of health care organizations and programs to provide those key management and leadership skills to effectively address change and improve health outcomes in the areas of family planning, reproductive health, HIV/AIDS, infectious disease, and maternal and child health. Working with public and private-sector health organizations to develop responsive programs and systems, LMS helps ensure that investments in health—and the results they deliver—are sustainable.

USAID/Haiti provides support to MSH/LMS to bring this expertise to Haiti. The following report outlines the achievements of the LMS Haiti project during the time period of January 2008-September 2008.

Behavior Change Communication Activities

With the end of the Health Communication Partnership project (HCP) Project in Haiti, the Leadership, Management and Sustainability (LMS) Program was mandated to lead the current program in strengthening departmental level capacity to plan, coordinate, and monitor interventions focusing on promoting appropriate behaviors for HIV/AIDS prevention, addressing issues of stigma and discrimination reduction, and community mobilization for increased demand for and use of HIV/AIDS services. LMS carried out capacity building activities in community mobilization and coordination (through a mapping exercise) as the main approach to achieve its goal from January to September 2008.

The Health Communication Partnership Project (HCP), led by the Johns Hopkins Bloomberg School of Public Health Center for Communication Programs (CCP) from 2004-2008, was involved with innovative HIV prevention work for more than four years in Haiti. CCP's mandate included technical assistance to the MSPP at the departmental level for community mobilization to improve palliative care and support to people living with HIV/AIDS, as well as service promotion.

To achieve these goals, three main approaches have been used:

- ✘ Community mobilization to promote positive social norms related to HIV prevention: stigma reduction, promotion of services for care and support, risk assessment and risk management for safe behavior, gender equity, and child-parent dialogue.
- ✘ Mass media campaign linked to communities' interventions.

- ✘ Capacity building through training, peer education, and technical assistance to identified partners.

In partnership with World Relief and with sub-partner FOSREF, LMS Haiti carried out interventions targeting youth aged 10-24 years old, men, community leaders, women in stable relationships, and health care providers in three departments: North, South, and Nippes. In addition to those formal contractual partners, CCP collaborated with two community-based associations: RIVACOM in the North and UJAPH in the South. It also provided technical support to the MSPP at the departmental level to ensure quality and coordination of BCC interventions.

Technical assistance to the MSPP

The communication strategy document for HIV prevention has been drafted. During the ongoing mapping exercises inputs from participants are being integrated into the document. The finalized document is currently being printed and will be disseminated to partners involved in HIV prevention activities through the BCC cluster led by MSPP.

Interventions at departmental level - 10 MSPP Departments

LMS provides technical assistance to the 10 departments of the MSPP and the community outreach activities in Cité Soleil. This past year, the project supported the Ministry of Health in organizing the mapping of behavior change communication interventions associated with HIV prevention in 10 departments: Artibonite, West, Central Plateau, Nippes, South, Southeast, North West, Northeast, North and Grande Anse. The overall objective is to enable program managers and partners, including PEPFAR partners, to identify gaps in the BCC interventions being offered and to identify points of collaboration and coordination amongst partners. Currently, the project is developing a database with all information gathered during workshops. LMS conducted an inventory of materials supporting community mobilization and behavior change interventions. LMS submitted the report to DPSPE and UCP, the two divisions of the MSPP that coordinate BCC and Community Mobilization, to assist them with their activities.

Additionally, LMS actively participates in the BCC/CM cluster which is led by the MSPP in order to achieve better coordination of NGO's BCC/CM interventions. LMS provides technical inputs to the subdivision in charge of monitoring and developing communication and community mobilization materials. LMS has supported the following seven departmental directions to develop their action plans and community mobilization plans: North, South, Southeast, Northeast, Nippes, Northwest and Grande Anse. These plans are currently being implemented.

Cité Soleil Interventions

A key component of the community care and support component of the LMS project is the establishment of community-based activities in Cité Soleil, a priority intervention zone for all foreign assistance programs in Haiti, including USAID and the U.S.

Embassy. LMS is working with Maison l'Arc-en-Ciel (MAEC) to (1) expand the number of OVCs and PLWHA families impacted by MAEC's outreach program to the children in metropolitan Port-au-Prince who are infected/affected by HIV/AIDS and (2) to build on a model MAEC has begun to develop for community mobilization using large groups of community-based organizations (CBOs) in the Frères and Croix des Bouquets areas.

MAEC activities consist of two main components:

1. Care and support of OVCs and their families and
2. A community-level partnership with international, local and community based organizations to support PLWHA families while working to prevent HIV infection and reduce stigmatization.

LMS has also begun to support FOSREF to increase its capacity to provide access to services to the youth of Cité Soleil for sexually transmitted infections (STIs), HIV/AIDS, and sexual and reproductive health, at both the institutional and community levels. The two Youth Centers in Bois Neuf and Boston are being staffed with trained providers who will deliver sexual and reproductive health and HIV/AIDS services to youth from Monday to Saturday. Both clinics are scheduled to open by December 2008 and each will offer access to STI diagnosis and treatment services, gynecological exams, sexual violence management, contraceptive methods, VCT services, and other related services.

Services will be supported by trained youth facilitators who will participate in the VCT as counselors and referral sources. Young people who test HIV+ will be referred to other specialized centers for their medical follow up and integration into support groups for PLWHA. At the Youth Center, there will be trained youth facilitators who will be in charge of organizing the referrals to other previously established FOSREF Youth Centers in the Metropolitan area that offer palliative care as well as other institutions offering ARVs such as Choscal in Cité Soleil. Additionally, both HIV+ and HIV- youth will be integrated into post-test clubs that function as psycho-social support groups. An outreach network of youth facilitators will organize community activities that promote the VCT services and other related services among youth. FOSREF is currently looking for the site for the second center.

Commodities Management

The LMS project is also coordinating with MSH's SDSH Project and the SCMS project run by the Partnership for Supply Chain Management (PFSCM) to ensure that all USAID-funded condoms are effectively managed in MSH and USG-supported service delivery sites in close coordination with USG partners while technical assistance is provided to the MSPP to support efforts to establish one unique and secure commodities management system for the health sector. All project efforts are coordinated with and transparently shared with the MSPP. Despite difficult road conditions following the aftermath of the hurricanes, LMS continued to provide active distribution to the USG sites to ensure all sites were provided with full condom supplies and able to continue offering services.

II- SUMMARY OF RESULTS

This report highlights the main results obtained from combined activities (HCP and LMS) from October 2007 through September 2008.

1. Prevention/Abstinence and Being Faithful

During this reporting period, a number of accomplishments were realized in partnership with local organizations and community associations in three departments: North, South and Nippes. A total number of 13,044 individuals (youths and adults) were reached in churches, schools and community through listeners groups, educational sessions, community meetings and events. Of this number, 4,269 youths were encouraged to use abstinence as means of HIV prevention until marriage through Sunday schools in churches. The following tables present a breakdown of data for each subcontractor:

Table 1 Number of individuals reached through community outreach that promotes HIV/AIDS prevention through abstinence and/or being faithful

Targets:

	Number
Jeunes 10-24ans	6500
Parents/ Adultes	6200
Total	12700

Achieved:

	10-14		15-19		20-24		Parents/Tutors		Adults above 25		TOTAL		
	F	M	F	M	F	M	F	M	F	M	F	M	General
FOSREF	115	85	260	254	125	130	26	28	300	259	826	756	1582
RIVACOM	344	269	432	306	169	139	0	0	388	161	1333	875	2208
UJAPH	76	86	301	224	107	155	0	0	37	34	521	499	1020
World Relief-Sud-Nippes	465	387	886	685	564	698	0	0	250	2346	2165	4116	6281
World Relief-Nord	139	111	231	276	201	167	403	229	123	73	1097	856	1953
Total	1139	938	2110	1745	1166	1289	429	257	1098	2873	5942	7102	13044

Of those who received information regarding HIV prevention, 686 parents/tutors were reached through community meetings on parent-child dialogue. Facilitators trained by World Relief and FOSREF organized listeners' groups with parents and tutors in the North and Nippes departments. Facilitators used the discussion guide developed around the radio program "Paran Pitit Ann Pale" to discuss important issues regarding sexuality and HIV prevention with these groups. These activities focused on improving responsible adults' knowledge and helped them build their confidence to discuss these topics with their children. Activities were dedicated to married and unmarried men. Of those, a total of 2,012 married men were recipients of outreach activities focusing on faithfulness messages.

Table 2- Number of individuals reached through community outreach programs that promote HIV/AIDS prevention through abstinence

Targets:

	Number
Total	1110

Achieved:

	10-14		15-19		20-24		Parents/Tutors		Adults above 25		TOTAL		
	F	M	F	M	F	M	F	M	F	M	F	M	General
World Relief-Sud-Nippes	465	387	886	685	564	640	0	0	250	392	2165	2104	4269

Number of individuals trained to promote HIV/AIDS prevention programs through abstinence and/or being faithful

The project trained 1,044 individuals to promote safe behavior among young people. Of those, 121 married men were trained as peer educators in order to conduct activities on faithfulness in men's clubs created in Nippes and South departments.

As part of the project's capacity building activities, one training session was conducted from October 31-November 4, 2007, for 21 peer educators of RIVACOM on the use of the *Journey of Hope* kit. Trained peer educators held educational sessions in their communities with young people aged 15-24 years old.

LMS has conducted two orientation sessions for the HIV/AIDS program managers at departmental level on the use of the “*Journey of Hope*” kit, one in Nippes and the other in Grande Anse. In each department 15 individuals were trained as trainers. Altogether, 30 persons have been trained in two departments. This activity will continue in the other five departments where LMS provides technical assistance. In turn, those trainers will have to orient community animators on the use of this material.

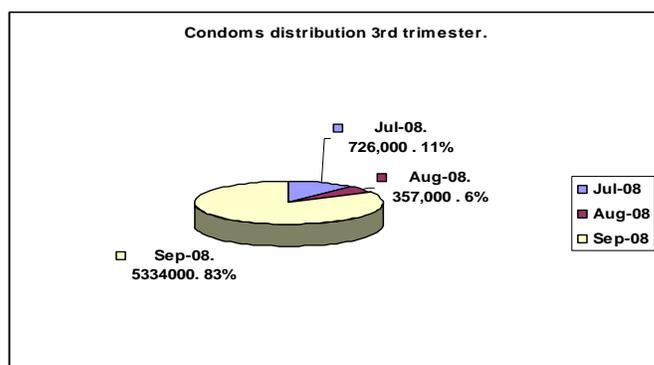
Table 3- Number of individuals trained to promote HIV/AIDS prevention

Institution	Participants	PARTICIPANTS						Total
		Male			Female			
		Less than 15 years	15-24 years	Above 25 years	Less than 15 years	15-24 years	Above 25 years	
WORLD RELIEF ¹	PE	7	257	206	3	248	129	850
WORLD RELIEF	Married PE	0	0	121	0	0	0	121
FOSREF	PE	0	31	0	0	21	0	52
HCP	PE	0	8			13		21
		7	296	327	3	282	129	1044

2. Prevention / Other Behavior Change

Number of targeted condom service outlets:

Two major supply of condoms, equivalent of 4.5 months for condoms (and FP for a few sites), were prepared and delivered to 53 sites in January/February, in May/June, 93 sites received condoms. This figure shows the number of condoms distributed from June to September 2008.



¹ Among Peer Educators trained by World Relief, 628 participated in refresher training sessions.

3. Orphans and Vulnerable Children

In order to help reduce the vulnerability of the orphans to HIV/AIDS, LMS has established a partnership with Maison l'Arc-en-Ciel (MAEC). By September 2008 MAEC was able to increase the number of OVCs reached from 526 to 624 and increased its reach to PLWHA families from 269 to 301 individuals. Additionally, Maison Arc-en-Ciel has provided trainings to mothers who live in the community of Cité Soleil called « Mères Délégués » in order to make home visits to support the families of OVCs. A total of 17 « Mères Délégués » and 21 Peer Educators have been trained to implement activities in Cité Soleil. The following table shows the number of OVC served:

Table 4 Number of OVC served by OVC programs (Primary Direct Support)

Gender	OVC
Male	318
Female	306
Total	624

Table 5 Number of providers/caretakers trained in caring for OVCs

Providers/caretakers	Number
Parents	301
Mothers Delegates	17
Young Peers Educators	21
Liaison Officers	6

4. Other/policy development and system strengthening

LMS supported the MSPP to organize a leadership and management workshop to strengthen the capacity of the HIV program managers and directors at the departmental level from March 25-28, 2008. During a four-hour session on community mobilization, participants were exposed to the community action cycle and were invited to think about the contribution of community mobilization strategies in the fight against HIV, while identifying major challenges encountered by health workers. More than 30 managers and directors participated in the session.

As planned, LMS has conducted two (2) training of trainer's sessions, one in Community Mobilization and the other in Advocacy related to HIV/AIDS. A total number of 50 individuals received these trainings.

Number of local organizations provided with technical assistance for HIV-related policy development

Other/policy development and system strengthening	
Number of local organizations provided with technical assistance for HIV-related policy development	2

Number of local organizations provided with technical assistance for HIV-related institutional capacity building

The project provided technical assistance to World Relief, FOSREF, and RIVACOM to develop and implement action plans. LMS provided technical assistance to 7 departments to develop community mobilization plans and provided assistance to 10 departments to complete their BCC mapping exercise.

Other/policy development and system strengthening	
Number of local organizations provided with technical assistance for HIV-related institutional capacity building	3

Maison Arc-en-Ciel (MAEC) provided technical assistance to community associations, in Frères des Bouquets and Cité Soleil, to set up coordination committees responsible for collecting, reviewing and approving proposed projects from organizations. Additionally, MAEC recruited volunteers to be trained in replicating these trainings back in their own communities. The volunteers will be responsible for the sensitization of the youth in HIV/AIDS prevention.

Number of individuals trained in HIV-related policy development

Other/policy development and system strengthening	
Number of individuals trained in HIV-related policy development	13

These figures included the managers that have been oriented to conduct the LDP.

5. Leadership Development Program (LDP)

LMS has developed an approach to help organizations to develop leaders at management levels to face challenges and achieve results in health services. Since 2000, MSH has carried out face-to-face and web-based programs in 49 developing countries to build the leadership and management capacities of health managers and strengthen the management systems required to deliver quality health services in a

sustainable fashion. In Haiti, this approach is being implemented in order to help health managers identify and face challenges. In July 2008, LMS organized a training of facilitators to offer the LDP. Thirteen facilitators were trained with the aim to replicate the program with two organizations. The following table shows the number of LDP facilitators trained by gender.

Table 6 Training of Facilitators for LDP

Gender	Trainers
M	5
F	8
Total	13

Number of individuals trained in HIV-related institutional capacity building

This indicator takes into account the number of peer educators and facilitators trained to use the Journey of Hope kit for RIVACOM (local association in the North) (21 PE), HIV managers in Nippes and Grand’Anse (30 HIV managers). Also it takes into account the training of trainers in Community Mobilization (25 trainers), Advocacy (25 trainers) and facilitation of the LDP (13 facilitators).

Other/policy development and system strengthening	
Number of individuals trained in HIV-related institutional capacity building	114

Number of individuals trained in HIV-related community mobilization for prevention care and/or treatment

In addition to training sessions conducted by partners on safe behaviors (AB promotion, risk assessment, and risk management), one training session was organized from December 9-15, 2007, in Community Mobilization, to build the capacity of 24 BCC program managers from the MSPP and local NGOs to supervise community mobilization interventions supporting safe behavior change. Upon completion of training, each participant received a facilitator’s guide enabling them to conduct the community action cycle related to community mobilization process. LMS organized another training session July 21-August 1, 2008, to enable a core group of program managers to effectively train NGO staff on community mobilization strategies in order to reduce HIV and AIDS in Haiti, using the Community Action Cycle (CAC) as a framework. Twenty participants from MSPP attended the first session and 25 participants attended the second session and were “oriented” on community mobilization approaches. Participants were introduced to the methodology of “Community Action Cycle” and how it can be applied to different settings to address HIV issues in Haiti. Participants also identified key challenges they face on the ground in their respective communities as far as community mobilization is concerned.

Other/policy development and system strengthening	
Number of individuals trained in HIV-related community mobilization for prevention care and/or treatment	49

A training of trainers in micro-project management that was planned for September 15-23, 2008, was postponed because many departments were affected by the hurricanes.

III - MATERIALS DEVELOPMENT

To support activities, the project reproduced high-demand educational materials for various communities. These materials included:

- 200 discussion guides : ***Paran Pitit Ann Pale***
- 200 CDs of the radio program : ***Paran Pitit Ann Pale***
- 550 ***Journey of Hope*** kits: LMS has reproduced this kit of materials developed by Health Communication Partnership project (HCP). It is a set of practical experiential learning activities designed to address a range of HIV and AIDS related issues, in particular HIV prevention and life skills that can help people deal with different situations, linked to staying healthy and achieving their goals and dreams in life. It can be used with a wide variety of individuals, both in small or large groups, and in formal and informal training situations. It also works well for teaching and educating people who cannot read.
- 6,000 youth passports aimed at encouraging young people to do their own risk assessment and risk management plan.

Materials are being distributed to partners and institutions at the departmental level with the approval of the Ministry of Health.

IV- MAJOR CHALLENGES

Project Start Up

The LMS project encountered substantial delays during program start up with USAID/Washington approvals on equipment over \$5000 (including cars and generators) and subcontracts. These delays had an impact on the functionality of the LMS office and the start date for the subcontracts. Receiving timely approval from Washington will continue to be a challenge under the field support mechanism, but the project is moving forward as rapidly as possible once approvals are received and coming up with creative solutions to keep the project activities moving forward.

Behavior Change

- According to the USG team, a large portion of the PEPFAR obligation funding for Behavior Change Communication activities was obligated directly to the departments of the MSPP to carry out their activities. In spite of that fact, one challenge the LMS team has faced is a lack of funds by program managers to implement activities as planned due to delay in the mobilization of these funds for activity implementation. LMS will be implementing a Leadership Development Program with the 10 departments of the MSPP, designed to focus on both building the capacity of local leaders (and creating managers who lead) and strengthening the departments' abilities to overcome implementation challenges and achieve results.
- A second challenge in this area is the lack of coordination between partners at all levels. LMS's main scope will be to support the BCC Cluster at the department level. From this support our expected results are: a coordination plan for PEPFAR partners and increased communication between all Behavior Change implementing partners, and a functional BCC cluster at the departmental level.

Commodity Security

- Insufficient staff for the active distribution of condoms, difficulty to access the sites, and availability of accurate monthly reports from the sites
- Due to the delay from Washington in approval for procurements, the pick-up trucks needed for delivery to the clinic have been severely delayed. LMS is currently renting vehicles to ensure timely delivery of all stock. The vehicles are scheduled to arrive on October 25, 2008.
- Avoiding overstock and/or damage of condoms at the MSH warehouse level due to approaching expiry dates (2010) and current overstock at the central store level (PROMESS).
- Coordination of the distribution of condoms with the MSSP and USG team.

V- . PLANNED ACTIVITIES

The October 2008-September 2009 workplan is currently under development. A summary of planned activities for the October-December 2008 quarter is as follows:

- Launch of Leadership Development Program for Youth—offered in collaboration with MAEC and FOSREF-- to launch in November
- Active distribution of condoms to the 271 USG sites
- Forecasting workshop to train employees in the USG sites
- Monitoring of 271 USG sites to ensure they have a TIAHRT compliance plan in place
- Opening of two youth centers with associated activities in Cité Soleil with FOSREF
- Continued care and support of OVCs and their families and a community-level partnership with international, local and community based organizations to support PLWHA families while working to prevent HIV infection and reduce stigmatization with MAEC
- TB study tour to the Dominican Republic

- FP counseling and education to be offered in both the non-SDSH sites and the youth centers of FOSREF in Cité Soleil
- Micro-project management training of trainers for the 10 MSPP departments
- Technical assistance from BCC international consultant to finalize LMS BCC strategy
- Finalize mapping of all BCC PEPFAR activities and coordination with partners
- Additional trainings on the Journey of Hope kit

Staffing

- Recruitment of a local TB Technical Advisor to sit at SDSH
- Recruitment of a local Capacity Building Advisor and two Program Officers
- Recruitment of a Family Planning Advisor to sit at LMS