

PROGRESS REPORT

"A MANAGEMENT MODULE FOR NUTRITION TRAINING"

Grant #DAN 1010-SS-1033-00

September 15, 1982 - January 15, 1983

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February 1, 1983

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INTRODUCTION

This report summarizes the activities carried out under AID Grant DAN 1010-SS-1033-00 since the last progress report submitted September 30, 1982. The present document covers the period from September 15, 1982 to January 15, 1983. The goal of the project supported by this grant, referred to as the nutrition project, is to enable mid-level project managers to effectively plan, organize, carry out, supervise and evaluate specific community nutrition interventions. The project will develop, field test, adapt and distribute nutrition management training modules; conduct feasibility studies for nutrition management training; provide technical assistance and support for the implementation of training workshops; and, promote the development of innovative nutrition intervention projects through follow-up technical assistance and seed money project support. CEDPA will also study and document the organizational variables and issues related to the management of community nutrition intervention projects.

ACTIVITIES THIS REPORTING PERIOD

The revised workplan for October 1982, through March 1983, projected that CEDPA would:

- Complete preparation of training materials for a two-week training module on management of nutrition programs.
- Conduct three nutrition management training workshops with Family Life Training Programme in Kenya; one with trainers/supervisors in Nairobi and two with staff and field workers associated with the program in rural sites.
- Adapt and field test the two-week nutrition training module in the Kenyan workshop setting.
- Complete planning for implementation of five-day nutrition management module with CEDPA Kenya WIM Unit.
- Conduct a site visit and feasibility study for the nutrition management and intervention program proposed by Family Planning Association of Nepal.
- Continue discussions and schedule tentative feasibility visits to Peru and the Dominican Republic.
- Submit concept paper to AID Mission/Indonesia and conduct feasibility visit contingent upon the decision of the Mission.
- Obtain the services of a management consultant to assist in the design of a documentaion plan for Nutrition projects development.

Progress made towards completing these objectives, as well as problems encountered and modifications in the plan, are covered in the sections below. The final section of the report covers the revised workplan for the next reporting period, January 15-July 15, 1983.

TWO-WEEK NUTRITION MANAGEMENT TRAINING MODULE DEVELOPED

The Nutrition Project calls for development and field testing of a

"...two-week management of nutrition program module designed for middle-level women involved in health, nutrition, family planning and development projects which would assist them in gaining the technical and managerial competence in adding growth monitoring, breastfeeding and weaning and general nutrition to on-going programs."

In the first project year, CEDPA developed introductory training sessions on the topics mentioned above, plus oral rehydration therapy. These content sessions were pre-tested in CEDPA Women in Management workshops held in Washington in 1981 and 1982. The expansion of the introductory content sessions into a management module suitable for use in in-country training programs was undertaken and completed during this reporting period.

The two-week Module, in its present form, is designed to enable technically trained health and development professionals to plan, carry out and evaluate nutrition training. The Module must be adapted for local use by trainers and is meant to be used in conjunction with training and technical assistance during the adaptation process. Training techniques and exercises suggested in the Module are highly participatory and require no sophisticated equipment.

Basic Assumptions in Developing the Module

Training content aims towards improving the ability of field project managers* to organize existing resources for the prevention and treatment of malnutrition. Module objectives and content are based on a series of assumptions about the work of field project managers. Perhaps the most important assumption is that although they are often bound by national or regional program plans they did not develop, field managers are also given considerable latitude to plan their work, to determine its focus, and to organize their time and the resources available to them. How well they do this in relation to nutrition is a function of both their technical understanding of the causes and consequences of malnutrition and their general management skills.

In the development of the Module we have assumed that field project managers can improve the results of their work if:

*Field Project Manager is the title used to describe individuals who are responsible for managing the human, financial and material resources needed to carry out development activities in one or more communities. A field project manager may be employed by a government or a private agency. In some cases, volunteers of self-help or coordinating committees are also field project managers. All field project managers plan, carry out and evaluate activities.

- o They learn to identify and work with those individuals at greatest nutritional risk in the community;
- o They direct their educational efforts at the specific local causes of malnutrition;
- o They stress those nutrition-related interventions proven to have an effect on child nutrition and related mortality;
- o They develop strategies for working with and facilitating the active involvement of the community;
- o They work together with other development programs and agents;
- o They plan their work; and
- o They learn to evaluate their work in relation to observable results.

Training Objectives

The general objectives of the Module are directly related to these assumptions. The training objectives are:

- o To help field workers identify the most important causes of malnutrition in their communities;
- o To introduce growth monitoring as a tool for early diagnosis of malnutrition, for educating and motivating mothers, for mobilizing community action and for evaluating program effects;
- o To enable field workers to choose and organize effective nutrition interventions with the community, e.g. promotion of breastfeeding, home production of weaning foods, family planning, prevention and early treatment of diarrhea, immunization, income and food generating projects;
- o To help individual participants develop basic planning skills and an appreciation for the role of planning by objectives and results in their work; and
- o To develop detailed workplans for improving nutrition activities in progress and initiating new activities based on the techniques and interventions introduced in the Module.

Module Content

The two-week training Module consists of a Trainer's Manual and a series of Trainer's Reference Packets.

The Trainer's Manual is organized with an introductory section entitled "How to Use the Materials-Suggestions for Facilitators" followed by six training units. The introductory section discusses the format of the manual and the procedure suggested for adapting its contents to local problems and conditions. It also covers the steps one should follow when preparing to facilitate content sessions.

Each training Unit consist of a series of content sessions on related topics. Units and content sessions begin with a set of training objectives. The session content is presented in narrative, script-like format. The narrative includes specific instructions and notes to help the facilitator conduct the suggested exercises and discussions. Handouts called for in the narrative are provided at the end of each session.

The Module Units are described below:

Unit 1. Human Organizational Skills - Unit 1 is designed to help individuals who work with or in groups understand how groups function and why some are more productive than others. The Unit has many uses. It may be adapted for use with participants who work with or will be working with groups (i.e. training groups, community groups, work groups). It could also be used as a resource for team-building with groups. It aims to improve the participants understanding of how behavior effects the work of a group. Skills members can develop to help their groups become more productive are identified and practiced in training exercises.

Unit 2. Assessing Community Nutrition Problems - This unit reviews the signs and symptoms of protein-energy malnutrition and involves participants in an exercise to identify the most significant causes of malnutrition in their areas. Specific attention is paid to beliefs and customs that effect the nutrition of young children and pregnant and lactating women. The final session in the unit emphasizes the risk factors and critical incidents that can determine nutritional status. The importance of focusing interventions on those most likely to benefit and on the periods of greatest risk in the lives of these individuals, is stressed. This unit may be expanded substantially for those who are not familiar with basic nutrition principles or condensed for groups who need only a review of the risk factors, critical incidents and cultural factors affecting nutritional status.

Unit 3. Growth Monitoring - The first session in this unit introduces the technique of growth monitoring using the Road to Health Chart and weight for age measurement. It takes participants through a series of exercises that require them to plot weight for age and read growth curves for normal and abnormal growth. The second session emphasizes the use of the card and growth curve for nutrition counseling and education of the mother. Participants practice teaching and counseling using Road to Health Cards in role play situations. Use of growth monitoring data for measuring program effectiveness is the topic of the third session in this unit. This session can be included in the sequence indicated in the Module or it might be

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inserted at a later time when discussing how to evaluate an intervention or program. The fourth session combines two topics. It demonstrates how the growth chart can be used to create a picture of the nutritional status of the community and suggests using this information to educate and motivate community leaders. It also discusses how growth monitoring might be organized as a regular activity with active community participation. This fourth session will be revised and separated into two content sessions in order to stress the organization and management of growth monitoring activities with the community. This unit is extremely versatile. It can be condensed or sessions eliminated and rearranged depending on the background of the trainee group and the intent of training.

Unit 4. Choosing Appropriate Nutrition Interventions - After identifying those individuals at highest risk of malnutrition and the most important causes of malnutrition, what can the field worker or manager do? This unit suggests that there are several highly effective nutrition interventions that can be carried out at low cost. In most cases, the resources and channels for implementing these activities already exist. The interventions for which content sessions have been developed to date include: 1) Promotion of Breastfeeding in the Community; 2) Local Production and Use of Weaning Foods; 3) Early Treatment of Diarrhea: Oral Rehydration Therapy; and 4) Family Planning and Nutrition. A session on immunization is in the development stages, and several on food production and income-generating projects for individuals and groups are anticipated. Content sessions present technical information on one intervention and the problem it is designed to address. They ask participants to identify the significant local causes of a condition, and the factors that would affect the success of an intervention in their area. Each session includes an exercise designed to help trainees focus on how they might include or improve the specific intervention in their work.

Unit 5. Working with the Community - This unit is being developed and is not found in the Module in the present draft. When completed it will include basic concepts of community development as well as community-based delivery of nutrition services. The unit will focus on needs assessment, working with and facilitating groups, and models of community nutrition self-help projects.

Unit 6. Planning Community Nutrition Activities - In its present form, Unit 6 takes participants through a step-by-step planning process in which they identify desired program results, write measurable objectives for those results and develop a strategy of activities to meet them. Assigning dates for completion of activities, responsibility for carrying out tasks and allocating resources is the subject of the second half of the unit - Writing a Team Work Plan. Although this draft of the Module focuses on team planning, the sessions can also be adapted for use with individual participants. Two additional sessions, one on scheduling and coordinating work, the other on monitoring and evaluating activities are to be developed.

Trainer's Reference Packets - Units 2, 3 and 4 of the Module are accompanied by reference packets for use by trainers. The packets include publications, visual aids and technical summaries useful in the adaptation of module content as well as in the trainer's preparation for the session. Materials included in the packets are listed in Appendix ___ of this report. Publications found in the packets were chosen based on the accuracy and appropriateness of the information they contain. Visual aids such as slide sets from TALC, are included as prototypes which may be adapted and used, or taken as examples for development of similar local training aids. CEDPA has developed technical framework summaries for a number of the topics in the Module. These are also part of the Trainer's Reference Packets.

The two-week Module (Appendix 1 of this report) was developed for use and field testing with Family Life Training Programme. It is in draft and is not complete. There are several sessions being developed, others we feel should be developed and others that need revision. Revision of the Module based on the first field test of it in Kenya will be made during the coming reporting period.

KENYA - NUTRITION MANAGEMENT TRAINING WORKSHOPS CONDUCTED WITH FAMILY LIFE TRAINING PROGRAMME

Two training workshops were conducted during this reporting period, both with the Family Life Training Programme of the Ministry of Culture and Social Services of Kenya. Family Life Training Programme (FLTP) is a nutrition training and rehabilitation program offering services to families of malnourished children at eleven centres throughout the country. The goal of nutrition management training with FLTP is to improve the outreach, training and follow-up services provided by the centres. The Project Coordinator traveled to Kenya in late October 1982, to provide technical and administrative support to FLTP for the following training events.

Training of Trainers Workshop

The first of the two workshops was a ten-day training of trainers course for thirteen supervisory level officers of Family Life Training Programme, the Ministry of Health/Nutrition and Home Economics Divisions, and the Ministry of Agriculture/Home Extension Division. Trainers were selected by FLTP to form a multidisciplinary team that, once trained, would plan and carry out a subsequent nutrition workshop for field extension workers. The training of trainers was held in Nairobi from November 1-14, 1982. During the workshop, trainers reviewed and adapted CEDPA's two-week Nutrition Management Training Module to fit the needs and particular constraints of nutrition field work in Kenya. They were also exposed to basic theories of adult education, training methods and group facilitation techniques in workshop sessions conducted by Kenyan resource specialists. The training team planned and prepared all of the materials necessary for the District Nutrition Management Workshop which was scheduled to begin immediately after the training of trainers course.

District Nutrition Management Workshop

The District Nutrition Management Workshop followed the training of trainers. This workshop was designed for extension workers, more specifically teams of extension workers who are involved in or have a potential contribution to make to the work of Family Life Training Centres (FLTC). Twenty-nine extension workers from six different districts of Kenya and a variety of health, nutrition, family planning and rural development programs attended this workshop. The workshop was held from November 15-26, 1982, again in Nairobi. Workshop content followed the general outline of the two-week Nutrition Management Training Module with the addition of sessions and exercises focusing attention on the specific problems facing the FLTP.

The final exercise of the workshop involved district teams in the development of six-month workplans, with the goal of improving the services of their respective FLTCs. Teams worked with trainers to define objectives and strategies for improving community nutrition outreach, centre training and follow-up of FLTC graduates. In several cases, workplans proposed development of self-help and centre projects to benefit the FLTC graduates in their own communities. Follow-up to the workshop training will include supervision by FLTP headquarters staff and a six-month review with district teams of their plans and progress towards meeting established objectives.

Participants and trainers were generally very pleased with the results of the training workshops. The biggest constraint encountered was insufficient time given the quantity of material to be covered in both workshops, and the short interval between the workshops.

A detailed report of the Training of Trainers and District Nutrition Management Workshops is included in Appendix III of this report, "Trip Report Kenya, October 23-December 15, 1982". The trip report discusses the criteria for selection of trainers and field workers, the composition of the training and district extension teams, the objectives, content and methodology of the workshops, lessons learned and recommendations for future training activities.

Second District Workshop Postponed

The revised workplan for this reporting period called for three training workshops to be conducted with FLTP, the training of trainers and two district workshops for extension teams. All of the eleven extension teams involved with FLTCs would have been trained according to that plan. Because of problems booking training facilities and the increased costs of training both trainers and extension teams in Nairobi, the second district workshop with FLTP is still pending. This workshop would involve the five FLTCs in Western and Rift Valley Provinces that were not included in the November workshop. At this time, we are exploring with FLTP the feasibility of proceeding with the second district training workshop in June 1983. This will largely depend on the revision of the FLTP project proposal for training and technical assistance. The revision of that project is discussed in the section of this report entitled, Kenya - Revision of the Proposal for Training and technical Assistance to Family Life Training Programme.

KENYA - EVALUATION OF THE TWO-WEEK NUTRITION MANAGEMENT TRAINING MODULE

The series of workshops with Family Life Training Programme in November, 1982 provided the first opportunity to use the Module in an in-country workshop setting. Field testing, in this instance, was directed towards evaluating the Module's usefulness to a team of largely inexperienced trainers, coming from a variety of disciplines and programs. We were also concerned with assessing the information contained in the Module and its appropriateness for training of field extension workers.

The method of evaluating the Module was largely qualitative. Instruments used formally and informally for data collection included:

- o Written evaluations from participants, both daily and final evaluations;
- o Session plans as they were revised by the training team;
- o Written evaluations from trainers of the sessions they adapted and facilitated;
- o Completed team work plans; and
- o Notes and personal observations of the Project Coordinator.

An analysis of the information collected has allowed us to draw a series of initial conclusions about the strengths and weaknesses of the Module while defining the areas to be addressed in its revision. More detailed observations about the Module's format, the concepts and information it contains, the quantity and appropriateness of that information and the training flow are included in Appendix III, "Trip Report Kenya."

Our overall experience with the Module was very positive. The training team was able to adapt the Module, organize and conduct the two-week workshop, identify outside training resources, prepare and present content for four of the six units, and critically evaluate their efforts. In retrospect, the problems that occurred during the workshop were administrative in nature and not generally related to Module content. Judgements about the time needed to cover certain subjects and the amount of information to be added to the Module, were the exceptions to this rule.

The Module will be revised in the coming months based on the Kenya experience. We will attempt to focus this revision on the generic deficiencies noted in the Module and not those determined at this juncture to be country-specific. We anticipate that the revision will focus on:

- o Correcting inconsistencies in terminology, format and presentation of information;
- o Increasing the visual impact of key concepts and information;
- o Improving unit and session linkages;
- o Completing the session dealing with community participation and delivery of services;
- o Simplifying the "planning by objectives" system presented in Unit 6 and adding a session on evaluation of projects and interventions;
- o Strengthening the non-technical portions of the Module that focus on organizing and managing specific interventions;
- o Adding a section on training methodologies to the introductory section of the training manual or producing a separate module for training of trainers; and
- o Adding suggestions for training activities as alternatives to those already contained in the Module.

Future field testing of the Module will focus more specifically on the immediate changes in trainee knowledge as a result of training. The impact of this training package on nutrition services and projects can only be addressed after participants are given sufficient time to develop and implement their ideas. In Kenya, we will address training impact on services delivered by FLTC's at the time of the six-month review and team evaluations.

KENYA - REVISION OF THE PROPOSAL FOR TRAINING AND TECHNICAL ASSISTANCE TO FAMILY LIFE TRAINING PROGRAMME

It was CEDPA's intent to finalize the agreement for additional assistance to Family Life Training Programme during the October-December consultancy. The draft proposal for this assistance was developed in June 1982. It included the nutrition workshops held in November plus several other proposed training activities leading to the establishment of community nutrition self-help projects with graduates of FLTCs. (The proposal was submitted as Appendix B to the previous progress report in October, 1982.)

Reviewing the draft proposal, a committee of FLTP staff and the Project Coordinator concluded that major revisions in the scope of the project would be necessary. Original budget estimates were found to be unrealistic. The economic situation of the country and new government financial restrictions will most certainly have a negative effect on the amount of supervision and counterpart contribution possible for FLTP. The definition of an acceptable mechanism for channeling CEDPA project funds to a Government of Kenya program, was also unresolved at the time of our

discussions. As mentioned in the previous report, we were advised to do this outside of the government treasury system, on a service-by-service or activity-by-activity basis. This will require a local agent to administer funds. In the original proposal, we envisioned the Kenya WIM Unit to this role. Once they have received legal recognition as a private, non-profit Kenyan association, it should be possible for CEDPA to subgrant administrative responsibility to the Unit. The process for Unit incorporation was started in January 1983; there is no indication when it will be completed. For the immediate future, the proposed role of the Unit as coordinator of CEDPA input to FLTP was judged to be inappropriate.

Despite these realizations, FLTP and CEDPA agreed that the goal of the project, extension of FLTP's strategy to the community, is desirable and attainable. An alternative to the original project model, one that is more focused involving fewer Family Life Training Centres and training workshops, was proposed by FLTP. It was concluded that FLTP would revise the original project proposal incorporating the changes discussed. CEDPA expects to receive the revised proposal for review by late February. (The conclusions reached by the review committee and the Project Coordinator are discussed in greater depth in Appendix III, "Trip Report Kenya".

The Project Coordinator will return to Kenya for the nutrition workshop planned with the CEDPA Kenya Unit in April 1983. At that time, she will again work with FLTP to finalize the proposed project document and to determine an effective and acceptable method for channeling assistance to FLTP.

KENYA-TRAINING FEASIBILITY STUDY CONDUCTED WITH CEDPA WIM UNIT

The Project Coordinator's technical assistance in Kenya during November and December included discussions, site visits and planning for a proposed nutrition training workshop with the CEDPA WIM Unit. The Unit members provide technical advice for project development by CEDPA alumnae, and review and follow-up of CEDPA-supported seed money projects. In 1982, they worked with a total of eight groups. Five of these groups have received CEDPA support for innovative community health and income-generating projects, two more have received support from other sources. The Unit intends to work with 10-12 new women's groups in 1983. The Unit requested training under the Nutrition Project to improve the ability of the women's groups to organize and carry out community health and family planning interventions.

The feasibility study for the proposed training focused on an analysis of the family planning and nutrition components of active projects, and the unmet needs for nutrition-related interventions in the communities they serve. To date these project components have focused on family planning. We were interested in finding out whether the need for improved nutrition was a felt need on the part of the community groups and whether field educators (the IEC agents in these small projects) were including any of the specific interventions that are addressed in the Nutrition Project as part of their activities. The feasibility study also addressed:

- The educational level of field educators and their varied degrees of previous technical training.
- The recordkeeping systems used by the projects and groups in relation to health.
- The linkages, existing and potential, for community projects with the government health system and other related private organizations.
- The resources available in communities and through existing programs that might be tapped by groups for nutrition-related intervention.

Our general findings indicated that protein energy malnutrition is recognized as one of the major health problems in all of the areas visited. We also found that the field educators have neither the equipment nor, in most cases, the training to tackle the existing nutrition problems. Those who are including nutrition education in their counseling and group teaching appear to rely on the basic three food groups and general hygiene messages. None of the projects have incorporated growth monitoring as a part of their health components, although several work along with the MOH staff at the time of monthly weighing clinics.

All of the groups visited have a level of organization and commitment to community self-help. All of them are at a stage where they could benefit from more training and technical assistance to improve the nutrition and family planning components of their projects. The new groups that the Unit intends to work with in 1983, are women's self-help groups that have been organized and functioning for a number of years. The Unit feels that these group leaders would also benefit from training during the project development stage to help them incorporate appropriate interventions into their overall strategies.

The Unit drafted a formal proposal for nutrition training based on the findings of the feasibility study (Appendix IV). They propose a five to six-day training workshop for 20-25 leaders, extension supervisors and field health educators, all chosen from the women's groups the Unit is currently working with or planning to work with in 1983.

The workshop is tentatively scheduled for April 1983, and will be held in the Mombasa area. The Unit members will coordinate and facilitate the workshop with the assistance of outside resource specialists. The basic curriculum for the workshop will be a five-day Nutrition Module currently being developed by CEDPA. The Module will include session content on:

- The signs and causes of malnutrition;
- Growth monitoring technique;
- Critical nutrition incidents and appropriate interventions;
- Income-generating activities for families and groups;
- Planning community projects/interventions; and
- Monitoring and evaluating a project using growth monitoring and family planning information.

In contrast to the two-week module for managers of district or regional programs, these materials will focus on the community's direct response to malnutrition. One technique, growth monitoring, will be introduced as a tool for targeting high risk cases, choosing nutrition interventions and evaluating effects of community nutrition action.

NEPAL- FEASIBILITY STUDY PLANNED WITH FAMILY PLANNING ASSOCIATION OF NEPAL

The Family Planning Association of Nepal submitted a preliminary project proposal to CEDPA in September 1982. The project would integrate nutrition education and service delivery components with the existing family planning activities of the Boudha Bahunepate Rural Family Welfare Project. (FPAN Proposal attached as Appendix V of this report.)

This project is a pilot effort targeting approximately 5,800 children from 0 to 5 years old and pregnant and lactating women in the project area. It is the project hypothesis that if nutrition education and services are provided, more children will survive and thus parents will be more likely to accept family planning methods. Nepal has one of the highest infant and child mortality rates in the world, and a very low rate of family planning acceptance.

Principle project inputs would include nutrition training for existing project staff and community workers; support for the community nutrition intervention program for one year; and, technical assistance for evaluating the project.

On the strength of this initial proposal, CEDPA indicated interest in providing technical assistance to FPAN for further project development. FPAN subsequently extended an invitation to conduct a feasibility study for project planning in Nepal. At this writing, travel authorization has been received from USAID/Nepal and the feasibility visit by the Project Coordinator scheduled for April 1983 at the request of FPAN.

The objectives of the feasibility study will be to assess the present level and scope of FPAN project activity, to conduct a training needs assessment with project personnel and to develop a workplan and budget for the training component of the proposed project. Technical assistance for the development of the project service and evaluation components will also be provided. It is unclear at present whether these project components will be fundable under the Nutrition Project or if other sources of funding will be needed. In the case that outside funding is necessary, the Project Coordinator will also work with FPAN to identify potential sources of assistance.

INDONESIA - CONCEPT PAPER FOR NUTRITION TRAINING SUBMITTED

In October 1982, CEDPA developed and submitted to Dr. Nafsiah Mboi, Chairperson of Indonesia Planned Parenthood Association of NTT Province, a concept paper for training development. Dr. Mboi, a CEDPA alumna, is actively involved in the planning and implementation of the AID-sponsored, CHIPPS project in NTT. Under the CHIPPS project, strategies will be developed for identifying and treating malnutrition within the framework of existing programs. PKK, the Family Welfare Movement through Village Women, has been proposed as one of the principle coordinating agents for CHIPPS project activities at the village level. Dr. Mboi is also a leader in this movement.

In the concept paper, CEDPA proposed to develop nutrition management training for three administrative levels of PKK - from the provincial level to women's groups at the village level. The goal of the PKK training project, as proposed, would be to develop viable community responses and projects directed towards improving nutrition.

Initial reactions from Dr. Mboi to the proposal express her feeling that there are already many village level nutrition activities in progress in NTT. Instead of training that would promote new or additional village nutrition activities, she requested that CEDPA assist with training to improve the management capability of provincial and district level supervisors who monitor and support existing village projects. In this case, CEDPA would not follow the entire progression of activities and inputs defined in the project model which include training, follow-up assistance, funding and monitoring of small projects. Instead, we would address the management training component of a large nutrition-oriented project. A project in which village nutrition intervention is already a reality.

CEDPA has responded to Dr. Mboi's request asking her for further details and a general scope of work for the activities she proposes. We will also seek from AID/Indonesia, the Mission's view of CEDPA's involvement in NTT. Once this input is received, a final decision about the potential for meaningful project assistance in Indonesia will determine whether or not a feasibility visit is scheduled during the coming months.

DOMINICAN REPUBLIC - RENEWED REQUEST FOR TECHNICAL ASSISTANCE

In October 1982, the newly formed Women's Promotion Division (Direccion General de la Promocion de la Mujer) of the Office of the President of the Dominican Republic, requested CEDPA's technical assistance for the development of a national breastfeeding promotion and education project. Mrs. Maricela de Nunes, a CEDPA alumna, is the coordinator of this effort within the Division.

Concurrent with their request for CEDPA's assistance in refining the project proposal, the Division presented a letter of intent and an initial project statement to USAID/Dominican Republic for funding consideration. They were subsequently informed that there would be no extra monies available for AID support of such a project at this time.

CEDPA has had discussions with the Director of the Women's Promotion Division and with the AID/Washington Project Monitor about the best approach to the Dominican Republic request. The Project Monitor has suggested that any technical assistance provided by CEDPA should be directed at coordinating and channeling existing sources of funding and technical assistance to the proposed project and not creating new demands for bilateral funding that cannot be met.

CEDPA has communicated this to the Division and to the AID Mission, offering our technical assistance for developing a breastfeeding project that takes advantage of the many types of assistance currently available (e.g. for training (CEDPA), development of educational materials and programs (INCS), project monitoring and evaluation (INCAP), etc.) We are currently awaiting the response of both parties, the Women's Promotion Division and the AID/Dominican Republic Health Office. If there is continued interest on the part of the Division, and the Mission concurs, we will carry out a feasibility study during the coming reporting period for involvement with the proposed breastfeeding promotion project.

REVISED PROJECT WORKPLAN JANUARY 15, 1983 TO JULY 15, 1983

During the coming reporting period, CEDPA intends to accomplish the following:

Module Development:

- o Develop and field test a five-day nutrition management training module for use with community project managers.
- o Begin revision of the two-week nutrition management training module based on the evaluation of its use with Family Life Training Programme.

Kenya/CEDPA Follow-Up Unit:

- o Conduct a five-day nutrition training workshop with the CEDPA Kenya WIM Unit for representatives of the projects that the Unit is assisting or will assist in 1983.

Kenya/Family Life Training Programme:

- o Continue to work with Family Life Training Programme to develop a feasible outreach project proposal.
- o Conduct follow-up evaluation and training of the six FLTC extension teams trained in the November 1982 district nutrition management workshop.

Nepal/Family Planning Association:

- o Conduct a feasibility study and provide technical assistance for development of a proposed project to integrate nutrition education and services into on-going program activities.

Dominican Republic/Women's Promotion Division, Office of the President:

- o Provide technical assistance to the Women's Promotion Division for the development of a national breastfeeding promotion project, specifically the management training component of such a project.

Indonesia/Family Welfare Movement through Village Women:

- o Determine potential for providing nutrition management training to women leaders in NTT Province, through continued correspondence with Dr. Nafsiah Mboi and AID/Indonesia. Conduct feasibility study in Indonesia if interest of NTT and the AID Mission indicates this is desirable.

Documentation and Organizational Diagnosis:

- o Develop the study criteria and protocol for data collection and analysis. Begin to collect information on organizational variables and issues related to the management of community nutrition interventions in Kenya and Nepal.