

**Advance Africa Project:
Third Quarterly Report, January 1 - March 31, 2005**

Advance Africa Team

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planning and
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services in Africa*



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**Advance Africa Project
Quarterly Report
Third Quarter FY 2005
1 January - 31 March 2005**

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I. Country Programs

I.A. Implementation Tools for Country Programs

I.A.1. Best Practices/Tools

Accomplishments

The Best Practices Compendium was completed in this quarter. Advance Africa conducted a final evaluation of the compendium and the audience it reaches. A report is in preparation. The last group of submissions was reviewed by the Review Board and added to the Compendium. In this quarter, Advance Africa also started to fill out submissions for the project's practices. No more practices will be reviewed after these and the website will not allow online submissions. The database will remain searchable and website will be maintained until the end of the project. Advance Africa is assisting USAID/Washington to explore various options to protect the information and the format for possible further use and application by other organizations.

I.B. Democratic Republic of the Congo (DRC)

Accomplishments

Advance Africa, in conjunction with the reproductive health team from SANRU III, focused on identifying and sensitizing community networks on the advantages of family planning in the internally displaced populations (IDP) zones (Katanga province), in the province of Bas Congo, and in the Bandundu and Kasi pools that contain 8 health zones. One hundred fifty community organizations with linked structures as social networks were sensitized in Katanga and in Bas Congo.

Training in mini-laparotomies (mini-lap) & IDU insertion has continued during Q3. The doctors from the health zones pooled around Kamina were trained on IUD insertion techniques. Training on mini-lap has been completed in 18 of the 22 health zones, and training on IUD insertion has been completed in 10 of the 22 zones. On 5 March, health zones in Bandundu and Kasai received a contraceptive technology update that was combined with a supervision review and emphasized the necessity of male involvement in family planning *vis-à-vis* the community.

Follow-up meetings regarding the resolutions and recommendations from the national level Repositioning Family Planning Conference were completed in 11 provinces in March. Originally only 9 provinces were programmed to receive follow up measures due to funding constraints, but the Advance Africa representative was able to combine the repositioning follow-up with supervision visits in more sites than anticipated.

Work with our partners: During the first month of the third quarter, Advance Africa and the SANRU III team conducted an evaluation of all the Medicines Chefs du Zones. Collaboration between Advance Africa and IRH Georgetown also continued in DRC. IRH completed a training of trainers on the Standard Days Method for the SANRU health zones.

Constraints

Distribution of mini-lap tools was delayed due an exaggerated shipping time.

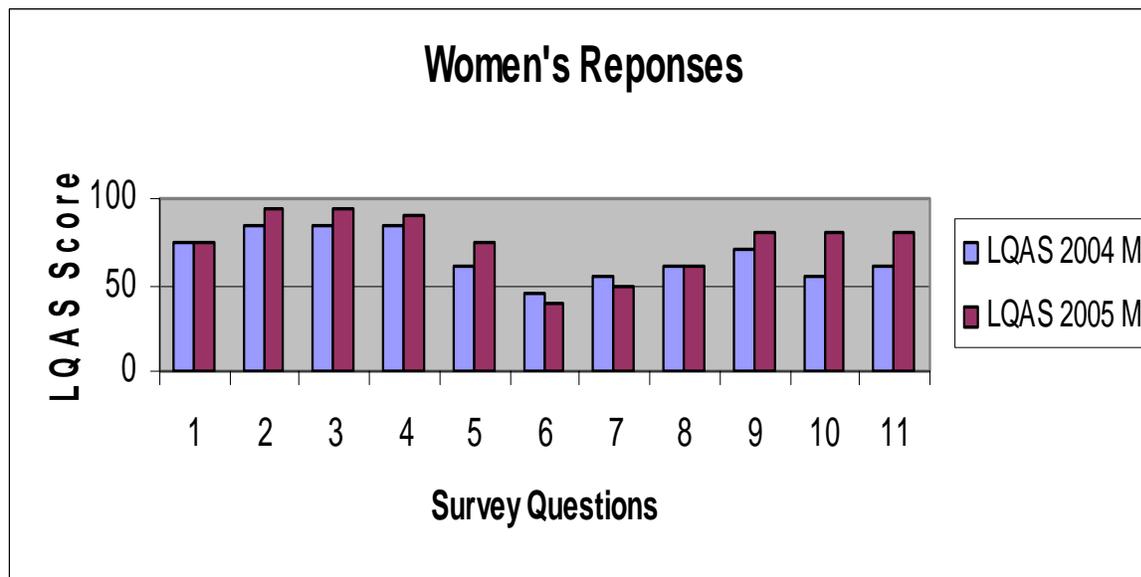
I.C. Angola

Accomplishments

In this period, the team completed the rehabilitation of two more facilities, thus reaching the total of 17 facilities rehabilitated by the Advance Africa Project. A refresher course on family planning service quality was given to 22 health technicians, and 55 community health workers and TBAs were trained on community mobilization activities for youth in the municipalities of Calcilhas and Petroleo. Various community mobilization activities were conducted particularly on Women's Day and Saint Valentine's Day.

Formative supervision visits have been conducted to all 17 facilities every month and the second Lot Quality Assurance Sampling (LQAS) monitoring survey was conducted, showing increase in most of the 11 target knowledge and behavior questions (figure 1).

Figure 1. Comparison of LQAS 1 and 2 responses of women in target communities.



LQAS Monitoring Survey Questions

#	Indicator	Answer Key
Section 1: Safe sex		
1	What ways do you know of protecting from HIV/AIDS?	Abstinence, Fidelity, Condom
Section 2: Birth spacing		
2	Have you heard about birth spacing?	Sim = 1 Não = 0
3	If yes, what does birth spacing mean?	Time interval between births

4	How long is the optimal interval between pregnancies	2 or more years (national policy)
Section 4: PF Knowledge		
5	What FP methods do you know?	Exclusive breastfeeding, Calendar Pill, Depo, IUD, Condom, Femidon, Surgical
6	What methods are available at the Health center?	
7	Are you using FP?	
8	What method are you using?	
Section 3: Exclusive Breastfeeding		
9	Have you heard of exclusive breastfeeding?	yes = 1 No = 0
10	What does it mean?	Only give breast to baby
11	How long should it be?	6 months

I.D. Zimbabwe

Accomplishments

Expanded CBD Programme

Evaluation of the Expanded CBD Programme was underway this quarter. The final report is anticipated during the final quarter of the project.

Mission Hospital Program

Follow-up training for nursing staff other than the trainers trained in June 2004 was planned for the three mission hospitals during Q3. Due to the early close out which was not previously anticipated this could not occur. Similarly training in data analysis that was planned could not take place. Data for the quarter for the hospitals is yet to be received. Messages have been sent to the respective clinics reminding them of the submission.

Constraints

With prohibitively high inflation rates and a surge in activities over the previous quarters, the Zimbabwe office was closed this quarter due to limitations in funding.

I.E. Mozambique

Accomplishments

At the end of Q3, the deputy director traveled to Mozambique to finalize activities and present the Mission and MOH with closeout plans. The KPC Study and draft end of project report were submitted to the Mission and revised to include their feedback.

Advance Africa completed the analysis of the data of the Adolescent Reproductive Health study. The report is forthcoming.

The Optimal Birth Spacing (OBS) study continued as planned. See below for further detail.

II. Repositioning Family Planning

II.A. Implementation of Demonstration and Operations Research Project Selected Countries

II.A.1. Integration of Family Planning and PMTCT Plus (Columbia University PMTCT+ Program)

Accomplishments

Draft Curriculum for FP/PMTCT/VCT Integration

This curriculum was finalized and has been edited by the dissemination team as one of the project products. It will need to be modified as a generic curriculum as the current version was based on Zimbabwe.

Chelston Clinic, Lusaka, Zambia

Following training sessions in the previous quarter, Chelston Clinic turned in some results as follows.

Month	New HIV+	New HIV-	New HIV?	Old HIV+	Old HIV-	Old HIV?	Total
Jan '05	45	115	0	124	51	0	335
Feb'05	63	92	0	91	78	0	324
	108	207	0	215	129	0	659

Mission Hospitals, Zimbabwe

Data from the mission hospitals in Zimbabwe have not been received for the quarter. Efforts are being made by having sent reminders to the heads of the respective institutions to submit this as a precondition for additional disbursements.

Mozambique, MOH

Due to restructuring within the MOH and inadequate funding, planned downstream training did not occur. As a result, integration was not implemented. In a follow up visit in March, USAID/Mozambique promised to have the necessary resources available to ensure the training in the provinces where they have a presence. The MOH's Family Health Unit has also indicated its preparedness to follow up with the integration training.

Constraints

Submission of results has been a big challenge especially for Zimbabwe as the project has closed and there is no specific individual in-country to follow up on the data collection and analysis.

II.A.2. Optimal Birth Spacing Project in Mozambique

Accomplishments

The Optimal Birth Spacing (OBS) study will test the effectiveness of using a five-year calendar and the Cyclebeads to communicate OBS messages in Gurue, where the population had expressed an overall preference for natural family planning methods. The deputy director, Elvira

Beracochea, worked with the District Health Team in Gurue and World Vision in Zambezia to prepare for the monitoring of project activities using LQAS. To present, 898 Cyclebeads have been distributed.

In this period, the OBS project had a number of delays in identifying and informing the local networks in Lioma. Delays were due to the transition of HSDS to the new project and have now been overcome. The project coordinator hired by World Vision is intensifying the support to the local networks. On March 31, Advance Africa trained the local staff to conduct the monthly monitoring survey and conducted a trial survey in Lioma proper, in an area about 2 km around the local health center. The monthly monitoring survey uses random LQAS. In this training trial survey, the team found that 70% of the population reported to know the importance of 3 to 5 years spacing between births and 40% reported to be using modern family planning methods, about half of them reported to be using the Cyclebeads. World vision will conduct the random monitoring LQAS surveys in April and May in an area of 5 km around the health center.

These initial trial findings are very encouraging but need to be taken with caution. The training survey took place in the proximity of the health center, the administrative post and the school and possibly covered the more educated part of Lioma’s population, who have easier access to information and community communication networks. It is important to note that the “activistas” expressed the high acceptability of and interest in the project’s handout and in the Cyclebeads. The OBS handout that includes the main messages was found in 40% of the surveyed households.

Phase two will be completed in the next quarter and phase three will take place in May. The final OBS report will be available in July.

II.A.4. Repositioning Family Planning through Conservation Programs – Advance Africa / Jane Goodall Inst. Collaboration

Accomplishments

During the quarter, the original sub-award was modified to take into consideration the period left for Advance Africa Project close out. During the same period, the project hired core staff including a Project Health Officer. Data on family planning was collected for the month of March in the zone as follows.

Method	New acceptors	Quantity supplied
Depo Provera	54	55
Pills	62	186
IUD	9	9
Condoms	97	710
Tubal Ligation	26	26
LAM	43	43
Cycle beads	7	7
Total	298	

The zone had targeted to reach 5% of the target population. Using the figure of 5,860 as the target, this 5% target was reached. It is yet to be seen what the trend over time will be.

Constraints

Five Roman Catholic institutions are yet to start provision of family planning services. The zonal health authorities are discussing this, and it is hoped that they will soon provide the service to increase coverage and possible acceptance.

II.B. Repositioning Family Planning through Advocacy

II.B.1. Regional Advocacy Conference for Repositioning Family Planning

The Repositioning Family Planning in West Africa Conference took place on 15-18 February 2005 in Accra, Ghana. The first half of Q3 was spent preparing for the conference, finalizing the agenda, presentations, speeches, materials, logistics, and additional conference-related activities. After six months of extensive preparatory work, the conference was realized by the coordination and commitment of a large group of dedicated individuals from five co-sponsors: USAID, WHO/AFRO, Advance Africa, AWARE-RH, and POLICY. In addition, YouthNet sponsored a one-day pre-conference workshop for youth and youth advocates in preparation for the conference.

Accomplishments

This four-day conference was conducted successfully. Over 250 participants from diverse sectors and 15 countries worked together in cross-cutting country teams to examine a fundamental gap in family planning in many West African nations: the disparity between expressed family planning need and use of family planning.

Participants from the health, legislative, education, finance, economic development, community mobilization, business, youth, gender, and religion sectors worked together to craft concrete, cross-cutting follow-up plans for repositioning family planning in their home countries. By taking advantage of the myriad viewpoints represented by each sector, the conference resulted in unique, flexible, and all-encompassing follow-up plans designed to increase the positive impact of family planning on the health and development of all of West Africa. Each plan takes advantage of important existing opportunities at the country level. Follow-up plans included advocacy at all levels, coordination among key stakeholders, participation at the community level, and improvement in quality of services.

Fourteen countries (Benin, Burkina Faso, Cote d'Ivoire, Ghana, Guinea, Guinea-Bissau, Mali, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, Tchad, and Togo) completed all of the group work and developed follow-up plans with individual participant commitments to action. The momentum created by the conference has proven to be great. Some of the follow-up activities that have already taken place at the country level include:

- Various – integration of follow-up plans into on-going workplans and strategies

- Mali – On March 14th, the Prime Minister launched a national campaign to promote family planning, whose main goal is to increase CPR
- Cote d'Ivoire – assessment of community organizations as network for IEC and advocacy; mini-films on birth spacing, MCH, and national development benefits of family planning
- Burkina – presentations to UNFPA and PAMACO; planned national meeting to present repositioning in March
- Ghana – Ghana Health Service and MOH are currently working to draft a new Reproductive Health Strategic Plan 2006-2010, and members of the country team have provided input to include repositioning. GHS organized a first post-conference meeting the week of 4 April at which sub-committees were established to work on a National Family Planning Strategy that will be presented at workshop end of May.
- Guinea – submitted advocacy strategy to the Minister; they are negotiating a presentation of family planning at an inter-ministers' meeting
- Senegal – presentations of standards/guidelines at the University Hospital with discussion about University Hospital's role in repositioning
- Regional – the African Women's Network for the Promotion of Family Planning was initiated and further developed by a group of women participating in the conference. They have since developed their manifesto with well-outlined goals and objectives. They have membership from eleven countries and are currently recruiting members from additional countries.

All partners were very pleased with the outcome of the conference and are working together to support implementation of follow-up plans at the country level. Advance Africa is working with USAID/Washington and USAID/WARP to ensure continuity upon completion of the project.

Constraints

Although there had been some challenges in coordination of the planning committee and completion of the objectives and agenda, once the committee reached agreement, all worked together to successfully realize the conference. The logistics, at times, were also a challenge, but our logistics team worked tirelessly to ensure that the conference went smoothly and to everyone's satisfaction.

II.B.2. Collaboration with WHO/AFRO

Accomplishments

The project continued to work with WHO/AFRO and other partners in the repositioning effort. As a follow up to the Repositioning conference in Accra in February, WAHO led a post conference meeting that was to discuss the follow up actions for countries. Advance Africa prepared a paper detailing its thoughts and had the Project Director participate in the meeting in April 2005.

III. Support Functions

III.A. Project Dissemination

Project dissemination continued in Q3, though with much more focus on the Repositioning Family Planning in West Africa conference. Much of the Dissemination Team's focus was on preparing for the conference with the conference website, materials, interactions with the media, dissemination at the conference (Info Marketplace), conference poster session (Innovations Gallery), and finalization of presentations. In addition, routine dissemination activities continued.

Accomplishments

Products include:

- ***Repositioning Family Planning in West Africa Conference*** – Numerous materials were developed for the conference during this period including:
 - Graphic design for the conference – a logo, binder covers, CD-ROM covers, conference bags, banners, certificates, nametags, etc.
 - Conference website launched in January 2005.
 - Materials for participants such as the welcome packets, conference binders (with agenda, information about Ghana, poster session abstracts, etc.), CD-ROM with all presentations and speeches
 - Press release and briefing folders for the media
 - Conference Proceedings finalized in March 2005
- ***Best Practices User Survey***, January 2005
- ***Senegal End-of-Project Report***, March 2005
- ***Mozambique Program: Knowledge, Practices, and Coverage Survey Report***, March 2005
- ***Advance Africa FY2004 Annual Report***
- ***Film: Zimbabwe Expanded CBD Programme, Final Draft***, March 2005

Constraints

Due to the amount of time required for the Repositioning Family Planning in West Africa Conference, the Dissemination Team was not able to focus as much as usual on the products currently in process. However, final project products are the sole focus of the team during Q4.

III.B. Monitoring and Evaluation

Accomplishments

All activities are up to date. Routine collection of service statistics and project data is on-track in Angola and DRC. Support was provided to the Angola team to conduct its second LQAS survey. We are pleased the team gathered and analyzed the data and produced tables with minimum support from HQ. In addition, support was provided to the Zimbabwe team to analyze and interpret the findings of the endline evaluation.

In follow-up to the Ghana Repositioning Family Planning Conference, Advance Africa collected information on follow-up activities among partners and country teams. This information has

been collated into a matrix that will be kept up-to-date through the end of the project in an effort to stay abreast of the activities and momentum generated from the conference.

III.C. Operations Finance & Administration

III.D. Close Out

AA worked closely with USAID/Washington to prioritize activities and revise the close out work plan to make the best of the resources available. On March 3, a new work plan and budget was approved. AA and USAID/Washington agreed to monitor pipelines month by month as activities wind down. A close out matrix has been prepared and activities at project headquarters are on track.

The Advance Africa project continued to phase-down its activities during the period January – March 2005. The Zimbabwe field office was closed February 28, 2005 when direct project activities came to an end. Zimbabwe OVC and Mission Hospital sub-award activities will end in March and April of 2005. By the end of April 2005, all Advance Africa activities in Zimbabwe will have ended.

Field support activities in the DR Congo are scheduled to end in June of 2005 and close-out is scheduled for the end of June. Advance Africa activities in Huambo, Angola are scheduled to end in August 2005. The Office will be closing by August 31, 2005.

IV. ANNEX 1: Summary of Travel for Q3

Traveler	Purpose of Travel	Destination	Start Date	End Date
Pruyn, Nina	Regional Repositioning Advocacy Conference – Activity coordination	Accra, Ghana	2-Feb-2005	19-Feb-2005
Samantha Ender	Regional Repositioning Advocacy Conference - work with Journalists and Conference Report	Accra, Ghana	31-Jan-2005	19-Feb-2005
Seidner, Erin	Regional Repositioning Advocacy Conference – Logistics coordination	Accra, Ghana	31-Jan-2005	19-Feb-2005
de Negri, Berengere	Regional Repositioning Advocacy Conference – Presenter and facilitator (BCC, advocacy, messaging)	Accra, Ghana	11-Feb-2005	18-Feb-2005
Diallo, Issakha	Regional Repositioning Advocacy Conference – Presenter and facilitator (repositioning, birth spacing)	Accra, Ghana	11-Feb-2005	19-Feb-2005
Yeboah, Kwaku	Regional Repositioning Advocacy Conference – Presenter and facilitator (integration of FP/HIV)	Accra, Ghana	9-Feb-2005	24-Feb-2005
Dr. Cheikh T. Cisse	Regional Repositioning Advocacy Conference	Accra, Ghana (<i>From Dakar</i>)	12-Feb-2005	19-Feb-2005
Prof. Oluwole Akande	Regional Repositioning Advocacy Conference	Accra, Ghana (<i>From London</i>)	12-Feb-2005	19-Feb-2005
<i>Nagbandja Kambatibe</i> , WHO	Regional Repositioning Advocacy Conference	Accra, Ghana (<i>From Brazzaville</i>)	12-Feb-2005	19-Feb-2005
Sponsored 11 participants from Region Supplementing WHO/USAID Mission delegations	Regional Repositioning Advocacy Conference	Accra, Ghana (<i>From Region</i>)	12-Feb-2005	19-Feb-2005