

## **CFPHS Monthly Report – November 2008**

---

Community-Based Family Planning and HIV/AIDS Services (CFPHS) Project

November 2008

Keywords: Family Planning, HIV/AIDS, Malawi

This report was made possible through support provided by the US Agency for International Development, under the terms of Contract Number GHS-1-00-07-00006-00. The opinions expressed herein are those of the author(s) and do not necessarily reflect the views of the US Agency for International Development.

---

Community-Based Family Planning and HIV/AIDS Services (CFPHS) Project  
Management Sciences for Health  
784 Memorial Drive  
Cambridge, MA 02139  
Telephone: (617) 250-9500  
[www.msh.org](http://www.msh.org)

# **COMMUNITY BASED FAMILY PLANNING AND HIV & AIDS SERVICES PROJECT**

**Contract No: GHS-1-00-07-00006-00**

**Task Order No: GHS-1-03-07-00006-00**

**Monthly Report for November 2008**

## **1. Summary**

The main activities for the month of November included: (1) Conducting sensitization Open Day at district level in the communities; (2) Participating in HIV Counselling and Testing (HCT) Week; (3) Pretesting of DMPA manuals through Health Surveillance Assistant (HSA) Training; (4) Initial Community Based Distribution AGENTS (CBDA) Trainings, Updates and Refresher for CBDAs; (5) Developing of Radio Drama Script (6) Strengthening district capacity in data collection, reporting and verification; (7) Policy Landscape (8) Information dissemination to private providers about PSI-Funded Oral (OCs) and Injectables Contraceptive (ICs) Social Marketing Project; (9) Participating in partnership Meetings and Technical Working Groups.

## **2. Accomplishments**

### **2.1 Conducted sensitization Open Day**

The second open day took place on 22 November 2008 at Chigumula ground, TA Malengachanzi in Nkhotakota.

The aim of the activity is enhancing demand creation and raising awareness regarding FP/RH and HIV/AIDS services in the communities. Some of the Open Day results were as follows:

- Sustained collaboration at district level as evident from joint planning with the District Health Management Team, District Coordinator for Management Sciences for Health (MSH), traditional leaders, church elders and politicians.
- Increased number of people aware of Family Planning/Reproductive Health and HIV/AIDS messages. In total, about 8000 people attended the open Day.
- Increased number of people accessing HIV Counseling and Testing (HCT) services: a temporary HCT site was established where people were tested. A total of 73 clients were tested and given results. There were 44 males, 25 Females (non pregnant) and 4 Females pregnant. Two out of 73 clients tested positive and were counseled accordingly.
- Increased knowledge with more than 20 FP/RH and HIV/AIDS topics covered followed by a quiz at the end of the function. FP/HIV/AIDS messages were also disseminated through traditional dances, songs, and drama.

Karonga and Balaka districts have prepared and set dates for open day sessions for December.

## **2.2 Participating in HIV Counseling and Testing (HCT) Week and services by provided by CBDAs**

This year's annual HIV/AIDS Testing Week was held from 10 to 15 November. The FP Technical Advisor participated in the HIV/AIDS Testing Week through:

- Planning and organization of the national event as a participating member of the national task force committee chaired by the Ministry of Health.
- Ensuring supply of adequate test kits and registers at the national event
- Supervision of counselors, testers and HTC supervisors in the assigned district of Blantyre.
- Submission of a report on the activities of the week

District coordinators supported the HIV/AIDS Testing Week through:

- Transport and logistics support to the District Health Management Team (DHMT), which included budget contribution for fuels cost.
- The 21 CBDAs who have been assigned as HTC participated in the event, which also advanced their experience as counselors.

## **2.3 Pretesting of DMPA manuals through HSAs Training**

Following the development of DMPA manuals, MOH, MSH and AHS pretested the manuals through HSA trainings in Zomba, Chikwawa, Nkhotakota and Karonga districts. The National Family Planning Coordinator (Ministry of Health) and the MSH Family Planning Technical Advisor conducted facilitative supervision from 16 November.

A total of 60 HSAs, 56 Male and 4 Female, were trained in DMPA together with 16 Nurses as their supervisors in the 3 CFPHS districts.

## **2.4 Initial Training, Updates and Refresher for CBDAs**

During the reporting month, districts facilitated initial/new training of CBDAs, conducted refresher courses and updates as summarized in the attached annex 1. In summary:

- A total of 51 CBDAs, 24 Females and 27 Males underwent an initial training in two districts.
- Three districts facilitated refresher courses for 74 CBDAs, 18 Females and 56 Males out of the total 411 trained in all the 8 districts in Year one.
- A total of 87 CBDAs, 31 Females and 56 males received update courses in the three districts.

## **2.5 Development of Radio Drama Script and IEC materials**

Following the Storyline Development Workshop which took place on the 30<sup>th</sup> and 31<sup>st</sup> October in Blantyre, two scriptwriters were selected to develop radio drama scripts. The initial draft of the story line was presented for feedback. Once the story line is finalized and approved, the development of the full draft scripts for the 26-episode drama will begin start by December.

The preparations for the selection of the Listeners Club have started. Following this workshop one or two scriptwriters will be identified to start working on developing the script. Once the script is further developed, the rest of the planned IEC materials and activities will also start to be developed to make sure that all the messages are well integrated and coordinated across all planned activities.

## **2.6 Strengthening district capacity in data collection, reporting and verification**

The M&E Advisor and the Policy Specialist visited Karonga district on 18 and 19 November to provide support in data collection verification of performance data for year one. Two core indicators on counseling visits and couple years of protection were tracked for accuracy at District Hospital, one of the health facilities and four CBDAs.

### **Outcomes of the visit include**

- A definition on coverage for counseling visits was illustrated to the health workers which should include new and subsequent clients who visit the health facilities and are counseled in the process. October 2008 data was used as an example for consolidating counseling visits by CBDAs and at health facilities.

### **Notable challenge**

Filing system starting from district hospital to health centers and CBDA was notably organized by dates and coverage of reporting by CBDAs. The visiting team recommended maintenance of such documentation which should assist the district in carrying out initial verification of data accuracy.

## **2.7 Policy landscape analysis- consultative Meetings**

The Policy Specialist continued with the consultative meetings during the month of November. The following stakeholders were consulted: Pharmacy Medicines and Poisons Board of Malawi (PMPB), Nurses' Organization of Malawi, Medical Council of Malawi, Nurses and Midwives Council of Malawi, MoH Departments: Nursing Services, Sector Wide Approach, Reproductive Health Unit, Lilongwe District Health Office, Kasungu District Hospital and Karonga District Health Office. Only a few key stakeholders like National AIDS Commission and Local Government District Assemblies are yet to be consulted. The policy topics discussed during the consultative meetings were:

- **Regulation of Contraceptives:** During the consultations, the Policy Specialist followed up with the PMPB on the issue of de- regulation of oral contraceptives

and Depo provera from prescription only medicines to Pharmacy Initiated Medicines

- **Regulation of HSAs:** Nurses and Midwives Council of Malawi; and Medical Council of Malawi were consulted to follow up on the issue of regulation of HSAs as a cadre.

## **2.8 Population Services International (PSI) Funded Oral (OCs) and Injectables Contraceptive (ICs) Social Marketing Project**

The first delivery of *SafePlan*<sup>TM</sup> *Microlette*<sup>TM</sup> oral contraceptives (procured with PSI discretionary funding support) has finally arrived and being packaged. By the end of the first week of December, Pharmavet (PSI's key pharmaceutical wholesale distributor) should start selling the new product to clinics, drug stores and pharmacies nationwide. The PSI/Malawi Medical Detailing team has already started informing private providers about this new product.

## **2.9 Participating in Partnership Meetings**

**National Sexual Reproductive Health (SRH) Policy Finalization meeting:** The Policy Specialist attended the 13 November 2008 finalization meeting of the National Sexual and Reproductive Health draft Policy. The policy has addressed the issue of expanding FP services to the community level and promoting method mix including Depo provera. Provision of Depo provera by HSAs has also been addressed. A few corrections and additions were done. The consultants were asked to incorporate and finalize the document.

### **Meeting with Reproductive Health Unit (RHU)**

There have been complaints from district health management teams, such as Kasungu, that they do not have an official correspondence about HSAs to start providing Depo provera. The Policy Specialist asked RHU to develop a circular letter to all the District Health Officers (DHO) in the project districts re-explaining about the HSA Depo provera initiative as pilot was starting. This would clear any misunderstanding on the intervention before dissemination of the guidelines.

## **3. Deliverables**

Technical and Financial reports for the month of September were submitted to USAID according to schedule. The revised Detailed Implementation Plan (DIP) was re-submitted to USAID for review and approval.

## **4. Challenges and Issues**

### **4.1 Vehicles for supervisory and monitoring visits:**

While transport at the country office remains a problem, provision has been made in the Year 2 workplan and budget for two vehicles. These will await USAID approval of the workplan, budget, and waiver.

#### **4.2 Recruitment of the Gender/Communication Specialist.**

A candidate has been identified through a competitive recruitment process. A Curriculum Vitae (CV) of the prospective candidate has been received and reviewed. Once PSI has confirmed the candidate's interest in the position, a letter will be sent to MSH seeking approval on hiring prior to making an official employment offer.

### **5. Major activities for December, 2008**

- Finalize Information, Education and Communication (IEC) material development and distribution
- Continue organization of sensitization open days at district level in the communities.
- Continue compilation of Policy Landscape Analysis Report
- Submit a summary of baseline survey findings from the reports in five series
- Visit additional districts for strengthening district capacity in data auditing, recording and documentation.
- Incorporate feedback from members on draft guidelines, training and logistics manuals for community based injectable services and make the document ready for discussion at the harmonization meeting.
- Finalize recruitment process for Gender/Communication Specialist.
- Facilitate DMPA Guidelines, training manuals and Logistics system harmonization meeting.
- Print guidelines and plan for dissemination meeting.
- Training, update and refresher of CBDAs.
- Recruitment of HIV/AIDS Advisor and Salima staff.
- Hold quarterly planning and review meeting
- Finalize PY2 Workplan and budget for approval

**Annex 1. The Cadre and Numbers of Trainees by type of course and by district for Year two**

District	Dates of Training	Cadre of Trainees	Female	Male	Total
<b>A) Training of new CBDAs</b>					
1. Karonga	10-28 November,2008	CBDAs	18	7	25
		Primary Supervisor	0	8	8
		Secondary Supervisor	4	2	6
2. Nkhotakota	3-28 November,08	CBDAs	6	20	26
		Primary Supervisor	4	6	10
		Secondary Supervisor	0	0	0
<b>Sub Total for New CBDAs and their supervisors training</b>		<b>CBDAs</b>	<b>24</b>	<b>27</b>	<b>51</b>
		<b>Primary Supervisor</b>	<b>4</b>	<b>14</b>	<b>18</b>
		<b>Secondary Supervisor</b>	<b>4</b>	<b>2</b>	<b>6</b>
<b>B) Update trainings for old CBDAs</b>					
1.Chikwawa	24-28 November,2008	CBDAs	10	10	20
		HSAs	0	0	0
	30 November 4 December	CBDAs	5	15	20
		HSAs	1	3	4
2. Kasungu	23-28 November,2008	CBDAs	7	14	21
		HSAs	0	2	2
3. Nkhotakota		CBDAs	9	17	26
		HSAs	1	1	2
<b>Sub Total for Update trainings</b>		<b>CBDAs</b>	<b>31</b>	<b>56</b>	<b>87</b>
		<b>HSAs</b>	<b>2</b>	<b>6</b>	<b>8</b>
<b>C) Refresher courses for CBDAs and their Supervisors</b>					
1. Kasungu	26-31 October,2008	CBDAs	5	19	24
		HSAs	1	3	4
2.Mangochi	12-15 Nov,2008	CBDAs	9	6	15
		HSAs	1	4	5
		Nurses	1	2	3
3.Phalombe	25-29 Nov,2008	CBDAs	4	21	25
		HSAs	3	3	6
<b>Sub Total for refresher courses</b>		<b>CBDAs</b>	<b>18</b>	<b>56</b>	<b>74</b>
		<b>HSAs</b>	<b>5</b>	<b>10</b>	<b>15</b>
		<b>Nurses</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>D) Trainings on Long Term and Permanent Methods</b>					
1.Kasungu	3-7 Nov,2008	Nurses	5	5	10
2.Chikwawa	19-26 Oct,2008	Nurses	7	3	10
3.Karonga	13-17 Oct,2008	Nurses	8	2	10
<b>Sub Total LTPM</b>		<b>Nurses</b>	<b>20</b>	<b>10</b>	<b>30</b>

Source: District Reports, November, 2008.