

FAMILY HEALTH INITIATIVES

**COOPERATIVE AGREEMENT
#AFR-0662-A-00-1088-00**

Progress Report: January 1 - September 30, 1986 and

Final Report: August 1981 - September 1986

Submitted by:
**The Centre for Development and Population Activities
(CEDPA)
Washington, D.C.**

November, 1986

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THE CENTRE FOR DEVELOPMENT AND POPULATION ACTIVITIES

November 17, 1986

Mr. Willie A. Whitten
Project Officer, USAID
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Room 4531 NS
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Washington, D.C. 20523

Dear Willie:

CEDPA is pleased to submit to you the Final Report for the Family Health Initiatives Cooperative Agreement Number AFR-0662-A-00-1088-00, which includes the Progress Report for the period January 1, 1986 - September 30, 1986. I am sending a copy for yourself and two copies for the AID Reference Center.

If you have any questions, please don't hesitate to call me.

Finally thanks so much for all your help! And happy holidays!

Sincerely,

A handwritten signature in cursive script that reads 'Carol Carp'.

Carol Carp
FHI Project Coordinator

CC/crt

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I INTRODUCTION

This final report on FHI Cooperative Agreement No. AFR-0662-A-00-1088-00:

- o summarizes and assesses progress during the five years of activities under the Cooperative Agreement. Specific information already provided in earlier progress reports is not repeated. Rather, a brief review of major developments is provided, and accomplishments in meeting objectives as well as difficulties encountered during the life of the Agreement are discussed.
- o describes activities carried out from January 1, 1986 - September 30, 1986. The last Progress Report for FHI/CA covered activities through December 31, 1985. This report covers the first eight months in 1986, the final period of the Agreement;

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II BACKGROUND SUMMARY OF ACTIVITIES THROUGH DECEMBER 31, 1985

CEDPA's Francophone Program aims to improve and extend the delivery of family planning and health services in Francophone Africa through management training for local women who implement integrated development projects for the benefit of their communities. The program, which was funded as a Cooperative Agreement in 1981 by the Africa Bureau of AID, employs CEDPA's comprehensive model of training, followed by technical assistance in developing projects and in establishing and strengthening Follow-Up Units.

CEDPA Follow-Up Units are in-country associations of CEDPA alumnae who work in institutions involved in development activities. These associations, supported with technical and financial assistance under this Agreement, develop proposals for small-scale projects which integrate family planning with health and income generation activities. Selected proposals are financed by CEDPA's privately funded small grants program. The alumnae associations then monitor, supervise and evaluate these projects, and develop new project proposals.

A. Developments in the AID/CEDPA FHI Agreement

The purpose of the original Agreement, as defined in August 1981, was "to improve and extend the delivery of family planning/health services in Francophone Africa through the availability of more trained women who can implement community-based programs."

The original objectives set in the Cooperative Agreement were the following:

- o "four participants from Francophone African countries trained in Washington, DC;
- o approximately 100-150 participants trained in (country-level training workshops in) four/five Francophone African counties; four/five training teams developed in each country;
- o management consultancy services provided to family planning/health managers as needed, for countries participating in the project's training activities;
- o eight to ten community based family planning/health projects established by country-level personnel and funded through donors."

The period of the Agreement was set from August 31, 1981 through August 31, 1984. The original allocation was for \$494,816. In August 1983 this budget was revised and the project extended to September 30, 1986. A subsequent budget revision was approved in December, 1985. Appendix 1 gives a line-item breakdown of the original budget and the subsequent revisions.

The Agreement called for an interim assessment to be conducted after one year of project implementation. ST/POP carried out this evaluation in October 1982 and made the following recommendations: (1) "In order to further develop a strong network of WIM alumnae in Francophone Africa, CEDPA should consider organizing a third Women in Management workshop either in Washington, DC or a regional workshop in Africa, and that AID/W consider partial funding for this additional workshop;" (2) "Consideration be given to paying the in-country project development team (Follow-Up Unit) so that they will be able to devote more time to developing proposals;" and (3) "CEDPA prepare a plan for optimal technical assistance visits."

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Three significant gaps in the original Agreement workplan were identified by the AID/W assessment. First, a need was established for more technical assistance to the Follow-Up Units to realize the Agreement objective of establishing community-based family planning/health projects. The progression from in-country training to project initiation in Francophone Africa was requiring much more technical assistance and monitoring by CEDPA than in its previous experience with Units in other countries. Conservative population policies and lack of exposure to family planning practices are among the factors which give rise to the need for a greater degree of technical assistance to build specific skills in project design and implementation.

A second gap in the Agreement concerned the amount of time available for follow-up. In order to be effective in their role as providers of project development technical assistance, the Follow-Up Units were assessed to need more time to become established and experienced in this capacity. At least two years of operational experience was seen as needed to realize this capability, so that the Units would be viable once financial assistance ends. Increasing the time available for follow-up for project implementation was to enable CEDPA to demonstrate that Follow-Up Units are effective mechanisms for developing and implementing community-based services in family planning.

A third gap identified by the interim assessment concerned the need for additional training in-country and in Washington. In order to form capable training teams in additional Francophone African countries, more WIM alumnae had to be identified through the Washington, DC-based training program. A third WIM was recommended to provide that capability.

In order to respond to this evaluation, an amendment to the Agreement was proposed and accepted. In August 1983, under a revised Cooperative Amendment, AID provided CEDPA with an additional sum of \$200,000.

Additional objectives were:

- o intensify support and technical assistance to the Follow-Up Units in three Francophone African countries. (A new category "Follow-Up Units" was added to the budget, as shown in Table I);
- o train 50-60 local level women in management of family planning and health programs in two additional training sites in Francophone Africa. (The budget category "in-country workshops" was significantly increased);
- o train 7-8 women from Francophone African countries in CEDPA's Francophone WIM program (Sept.- Oct. 1983) in order to build alumnae training teams in two additional training sites (Budget category "Fellowships" was heavily increased).

The obligation period was extended to March 31, 1986.

In November 1984, a no-cost amendment was requested to the Agreement which would have no effect on the total amount obligated, but which altered the "salaries and wages" line item. This change reflected the creation of a position of a Project Associate to backstop the work of the Project Coordinator.*

*In September 1985 Carol Carp replaced Barbara Brown as Project Coordinator. At this time the Project Associate position was eliminated.

In December 1985, CEDPA requested and was awarded a no-cost extension to the Agreement, which put the completion date at September 30, 1986. No changes were made in the objectives set, or in the total of the budget, although some line item changes in the budget were made. (See Appendix 1)

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B. Progress in Meeting Objectives Set

As reported in CEDPA's last Progress Report, the status of progress toward meeting objectives at the reporting date of January 1, 1986 was as follows:

- o 14 participants from Francophone African countries had been trained in Washington, DC under FHI/CA sponsorship (CEDPA's third French WIM had been held in Washington, DC);
- o five in-country workshops had been conducted in Mali, Madagascar, Senegal, Togo and Zaire. Training teams were developed in each country. A total of 114 women were trained. Ninety (90) proposals for projects were developed by these participants;
- o Follow-Up Units or alumnae associations had been established in Mali, Zaire and Senegal;
- o two community-based family planning/health projects in Mali and Senegal had been established by in-country personnel and funded by a private, non-AID donor;
- o extensive technical assistance had been given by CEDPA staff and consultants to alumnae in both training and organizational development in Mali, Zaire, Senegal, Togo and Madagascar.

Comparing objectives set to those met, as of the end of the last reporting period, CEDPA had already realized the objectives concerning:

- o participation of professionals from Francophone African countries in Washington, DC-based training workshops;
- o developing training teams for in-country training workshops;
- o conducting in-country workshops in five Francophone African countries;

In the last Progress Report it was stated that "...because in-country training has been conducted in all five countries, the emphasis in the next period will be on strengthening on-going operations of the Follow-Up Units established in Mali, Togo* and Senegal* and on firmly anchoring the establishment and maintenance of the Follow-Up Units which are planned for Zaire and Madagascar. In addition, technical assistance will also be directed toward supporting the implementation of the on-going projects in Mali and Senegal* and the projects newly establishing in Mali, Zaire and Madagascar."

In the report, the following objectives were proposed for the reporting period January 1 - September 30, 1986:

- o provide technical and financial assistance to the established Units in Mali, Senegal* and Togo*;
- o provide technical and financial assistance for the formation of Follow-Up Units in Zaire and Madagascar;

- o provide technical assistance in project development and/or implementation to Zaire, Mali, Senegal*, Togo* and Madagascar;
- o identify candidates for sponsorship to CEDPA Washington-based training workshops.

The last section of this report is a summary of final activities under this Agreement, covering January-September, 1986.

*Contingent upon resolution of difficulties concerning continued work in this country.

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III SUMMARY OF CEDPA'S COMPREHENSIVE DEVELOPMENT STRATEGY IN FRANCOPHONE AFRICA UNDER FHI/CA

A. CEDPA MODEL IN FRANCOPHONE AFRICA

CEDPA's training and technical assistance follow-up model has been adapted in each country in which activities have been undertaken to reflect local needs, sensitivities, resources and approaches to family planning. In Francophone West Africa, the CEDPA approach has reflected adaptations to factors which make family planning promotion in these countries particularly challenging.

1. Historical/ Cultural Context of Francophone Africa's Policies on Family Planning*

Colonization left its mark on the religions, viewpoints and ways of life of the newly independent countries. It also affected the legal structures and the attitude of the countries towards population policies. In fact, the former French and Belgian territories inherited pro-natalist policies and legislation. In 1920, France, decimated by the First World War, introduced a law forbidding the dissemination of contraceptive information, the sale of contraceptives and the practice of abortion. This law also applied to her colonies. Religious pressures, both Catholic and, in the countries of the Sahel, Islamic, strengthened these prohibitions. When, during the 1950's, there were initiatives to start family planning in English-speaking Africa, the French-speaking countries remained under the influence of the French legislation.

World population statistics for 1980 indicate that Francophone African countries have high rates of natural increase, for example, 3.0 or more in some countries.

French-speaking African countries differ from the other African countries by being comparatively optimistic on the level of population growth. Only 12.5% consider it too high as against 37.2% for all African countries (and 46.7% for the countries of the rest of the Third World). Just over 31% consider their population too small -- in contrast to English-speaking countries. In 1982, out of 16 French-speaking African countries, 10 had no proposals for intervening on fertility levels, while four had a policy for increasing fertility.

One result of France's pro-natalist policy is that family planning is generally not included in the training of doctors and nurses. Consequently, many practitioners, trained in France or by the French, even if they are not entirely opposed to contraception, are often ignorant of birth control methods.

There are also many technical obstacles. In many countries there is still a controversy over whether midwives can be allowed to insert IUD's because only doctors are thought to have the necessary experience. Abortion is illegal in all Francophone countries. In Zaire, women must have written consent - or presence - of their

*Much of this section is taken from the International Planned Parenthood Federation: publication People, volume 13, no. 3, 1986, pp 3-19

husbands before receiving contraceptives from government clinics. In many Francophone countries, there is no proper legislation governing family planning or even the staff administering the program. Traditionally, the health care systems of these countries are centrally structured and lack trained personnel and equipment to meet the needs of the rural health units. In addition, expertise in development and implementation of family planning programs is very limited in many Francophone African countries as pro-natalist governments have only recently permitted the introduction of family planning into the total preventive health care programs. In many of these countries, family planning as a method of child spacing is being integrated into MCH services as well as the introduction of sub-fertility and infertility clinics.

Many of the French-speaking countries are polygamous, and it is in these polygamous families that the women must rely above all on their fertility to win the esteem of their husbands and the family. A woman's status depends in part on how many children she has, and especially on the number of sons she has brought into the world. An infertile woman runs the risk of being repudiated and this happens frequently in Islamic societies. This is compounded by the fact that the levels of infant mortality are extremely high -- in the Sahel, for example, the rate is over 150/1000 (as against 67/1000 in Latin America).

Polygamy only works because of a great gap in the marrying age between men and women. In many French-speaking African countries, the official marrying age remains very low -- 17 in Togo for example since 1980 -- but even these limits are rarely observed in the rural areas.

One study on the Peul Bande in Senegal shows that almost half of the women between 10 and 19 are married. So while polygamy reduces the fertility of individual women, it increases general fertility, since a greater proportion are exposed over a longer period of time to the risk of pregnancy.

Conservative population policies, and in some places, restrictive family planning policies, have repercussions on the familiarity and experience of participants with family planning techniques. In general, a lack of exposure to family planning methods and strategies has been exhibited by participants attending in-country workshops. For many, the CEDPA WIM training offered their first systematic introduction to this field. This has critical implications for the amount of follow-up technical assistance needed to develop family planning projects, and the amount of time required for the development of Follow-Up Units and their family planning projects.

2. Limited Private Sector

The size of the private sector in Francophone Africa is much more limited than in other countries where CEDPA's model has been applied. In this region, in general nearly 90% of all health workers are government employees.* This has repercussions for in-country workshop participant selection and Follow-Up Unit project activities.

*Zaire is a major exception -- some 75% of health services in this country are privately administered.

The mechanism selected for identifying in-country workshop participants in Francophone West Africa has been the interministerial steering committee. These committees, which have been composed of representatives of government, USAID and collaborating organizations, have selected participants predominantly from the public sector working in government programs. (In other countries, more than half of CEDPA in-country participants have represented private organizations as salaried staff or volunteers.) Therefore, the type of health/family planning projects designed by workshop participants have tended to be expansions of existing government health services or development programs. This effects the strategy of follow-up technical assistance employed in Francophone West Africa, the formation of Follow-Up Units, and the development and funding of family planning activities. Projects developed by Follow-Up Units elsewhere have tended to involve women's groups and village community organizations, and have not depended greatly on the use of government facilities for their implementation, although government cooperation and use of in-kind services have been encouraged.

An analysis of the health/ family planning projects developed by in-country Francophone participants reveals two things in this regard. First, Follow-Up Units tend to assist in developing project activities which operate through government structures. This has implications for how innovative and experimental the approach to family planning can be, since government sanction for the activity will be required. CEDPA has attempted to introduce the maximum amount of flexibility and sensitivity in project approaches in order to extend family planning acceptance and service delivery.

Second, it may be more difficult to get communities, per se, to develop project activities, and to take over responsibility for their implementation once initial funding has ended. Health and social services are provided almost exclusively through government structures, and governments have tended to foster this dependency on public sector responsibility and authority in this area. Projects developed by Follow-Up Units in Francophone West Africa integrate community concerns in health/family planning, to foster community responsibility.

The follow-up technical assistance strategy offers the opportunity to encourage the provision of health/family planning services by creating a demand, at the community-level, for these services. In this way, project development not only is responsive to community needs, but provides a mechanism to express these needs and a plan to meet them.

B. Other CEDPA Activities Reinforcing and Facilitated by FHI-Sponsored Activities

In addition to those activities directly financed under the CA, the FHI Project Coordinator collaborated with other CEDPA staff members whose projects directly impact on and are affected by FHI activities. Thus, the level of effort in covering the five countries was maximized by other CEDPA resources. This interaction is not accidental, but planned under CEDPA's comprehensive technical assistance strategy for community-based women's programs (see diagram on following page). The foundation of CEDPA's strategy is its Washington-based, five-week workshops for women managers on "Planning and Service Delivery Programs in Family Planning, Health and Development", Women in Management (WIM). This series focuses on strengthening women's management and technical skills necessary to initiate and implement programs which serve women's priority needs. One of the FHI Agreement objectives addresses the need for more Francophone women trained in these Washington workshops. However, other donors solicited by CEDPA, such as UNFPA, IPPF and the African American Labor Center, have financed women from French-speaking Africa as well, who have then contributed to the FHI objective of "improving and extending the delivery of family planning and health services in Francophone Africa."

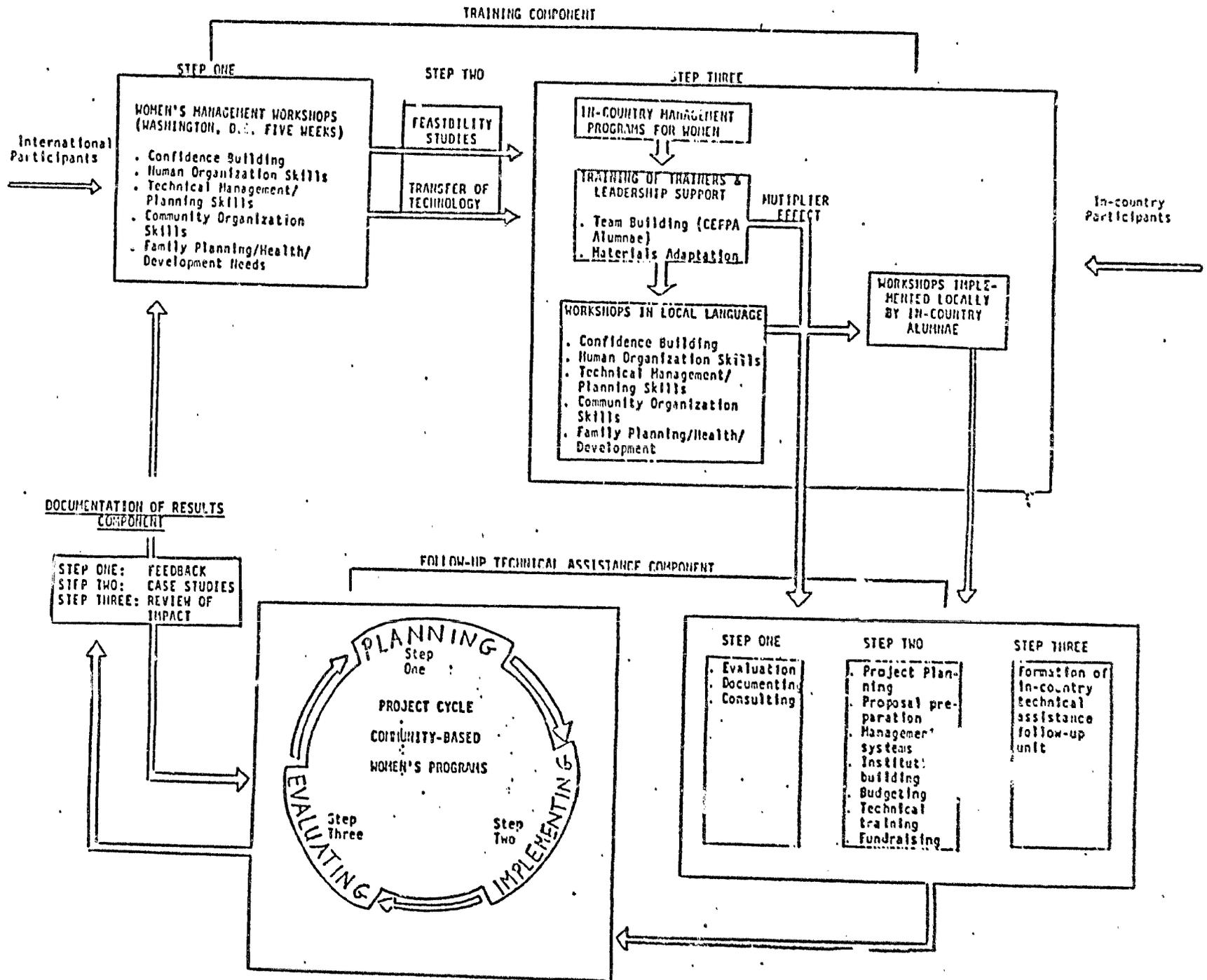
These WIM workshops concentrate on building personal, technical and community organizational skills as well as on developing systems for integrated development projects. Begun in 1978, eighteen WIM workshops, with 30-35 participants each, have been conducted to date in the U.S. in English, French, Spanish and Arabic. Three French WIM's have been conducted, one in 1981, one in 1982, and one in September-October, 1985.

Beginning in October 1979, and at the specific request of WIM alumnae who wanted to extend the benefits of this training to a greater number of women, CEDPA began a program of national level WIM programs. Through in-country management training using Washington alumnae as co-trainers and consultants, CEDPA was able to reach local women from government programs, development agencies and community-level women's groups who otherwise had no opportunity for such training, and to expand its trained women-to-women network.* CEDPA's Impact Grant from AID/PCC provided the funds needed for the first seven in-country WIM programs. FHI/CA funded the Francophone African in-country workshops.

Planned into CEDPA's FHI approach was the development by the Follow-Up Units of community-based projects which would be funded by donors other than the FHI/CA. CEDPA's Small Grants' Program or Matching Grant has served as the primary funder for these projects. The Matching Grant was awarded by the Office of Private Voluntary Cooperation for a three-year period from September 1983 - September 1986. The Matching Grant was designed to focus on the formation of Follow-Up Units and the implementation of integrated family planning, health and development programs, as well as the documentation of these activities. The Grant was designed to support the development of women-to-women, community-based development projects in Africa, Asia, Latin American and the Middle East and the strengthening of institutions which assist in these projects.

*To date in-country WIM programs have been conducted in the Francophone countries of Mali, Togo, Senegal, Madagascar and Zaire, as well as in Malaysia, Indonesia, India, Bangladesh, Pakistan, Egypt, Kenya and Peru.

A COMPREHENSIVE TECHNICAL ASSISTANCE STRATEGY FOR COMMUNITY-BASED WOMEN'S PROGRAMS



The following activities, which were initiated under FHI, were financed under the Matching Grant:

- o the Zairian Follow-Up Unit CEFD/Zaire was funded in May 1986;
- o the Senegalese CEDPA Unit's Yenne Health Project was financed in March, 1985;
- o the Katibougou Family Health Project, developed and supervised by the Malian Follow-Up Unit, was financed in 1985;
- o the Malian Follow-Up Unit received Matching Grant support in April, 1986.

Appendix 3 provides more detailed information on these subgrants.

Another CEDPA project whose activities interacted with, strengthened and gained from FHI activities is the Nutrition Management Project (NMP). Funded in 1981 with a five-year grant from AID's Office of Nutrition, the NMP:

- o developed two nutrition/child survival training modules for project managers and supervisors, and for community leaders;
- o conducted training in primary health care for mid- and upper-level managers of community projects in Kenya, Nepal, Indonesia and Senegal, and training for field workers and community volunteers in second and third generation nutrition workshops and programs;
- o provided technical assistance for project design, management and evaluation to alumnae in those four countries, and
- o awarded seed money grants for demonstration community nutrition activities with income generating components developed by alumnae in Kenya and Nepal.

In Francophone Senegal, the NMP funded a two-week Nutrition Management workshop in January 1985, in conjunction with CEDPA/Senegal. The 20 participants included midwives, nurses, social workers, rural extension workers, and family planning administrators. During the workshop, trainees drafted proposals for health and nutrition projects to submit to CEDPA and other donors. Following the workshop, the CEDPA Senegal Unit continued to help workshop graduates finalize their proposals for submission to CEDPA and to other donor agencies.

In September 1985, CEDPA was awarded a Cooperative Agreement with AID/S&T Population Office which enables more substantial and longer-term funding and technical assistance to family planning projects than are possible under the one year seed money program. Complementary to the Matching Grant, this new program continues work with some of the successful seed money projects, expanding, replicating and/or extending them. To date, the Katibougou Family Health Project in Mali, which was developed and supervised by the Follow-Up Unit, is among the projects to be given this extended assistance under the Population Project.

Under the Population Project, CEDPA works through its network of trained managers to develop and fund family planning projects. Most of these are developed with alumnae who have demonstrated strong managerial capabilities and a clear commitment to providing family planning services. Selected

alumnae are invited to attend regional subproject development workshops. During the workshops, participants develop proposals for potential projects. Those judged most feasible receive further assistance to finalize program plans.

In April 1986, CEDPA held its first regional proposal development workshop in Nairobi for Anglophone African alumnae. In July, a Francophone workshop was held in Bamako, Mali. Several areas of overlap and reinforcement between the activities of the Population Project and those of FHI may be noted:

- o the workshop was organized with significant support from the Mali Follow-Up Unit;
- o of the ten participants at the workshop, seven are members of CEDPA Follow-Up Units initiated under FHI: two participants from Mali, two from Senegal and three from Zaire;
- o the Coordinators of the Follow-Up Units in Zaire, Mali and Senegal were among the participants.
- o the proposal from the Coordinator of the Zairian Unit was written in the name of the Unit, with the Unit to have the principle role in monitoring and supporting project activities, and in training.

C. General Assessment of Results

The following achievements of the FHI/CA in the five targeted Francophone countries may be cited:

Training

- o Host governments and AID missions were made more aware of the important linkages between training/career opportunities for women and fertility levels.
- o Women in these countries were provided with the skills, motivation and self-confidence they need to implement integrated family planning/health programs in their communities.
- o Their awareness and understanding of needs of other women and the importance of gaining support and cooperation of the men in their countries, in such areas as health, family planning and nutrition, were increased.
- o They were given the opportunity to practice management and community organization skills through structured learning experience adapted to local conditions and needs and assistance that will enable them to put the training to use in action programs.
- o The training capacity was transferred to local women's groups by training women as trainers to enable reaching larger numbers of women through training workshops in the local languages.

Technical assistance:

- o Technical assistance was provided in project development, supervision, monitoring and evaluation, and in institutional development.
- o One-to-one or small group consulting in technical areas such as project planning, proposal writing, fundraising, budgeting and evaluation was provided.
- o In-country CEDPA follow-up technical assistance units/representative(s) for monitoring projects, reviewing proposals, providing on-the-spot support, conducting technical assistance workshops, networking, liaising and other such functions were established.
- o The development of integrated community-based projects in family planning/health was encouraged through the provision of organizational development skills and technical assistance.
- o Network-building among women with a particular view towards identifying women in-country who can serve as technical assistance experts in health and family planning projects was advanced

In terms of longer term impact:

- o The delivery of family planning/health services at the community level has been directly extended in two countries.

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Not measured within the time frame of this project were the following two objectives:

- o To improve service delivery of health/family planning programs through the availability of more trained managers who can implement integrated projects for the benefit of the community.
- o To impact on fertility through the provision of training and generation of projects that lead to family planning services for women and ultimately to meaningful alternatives to early marriage and prolonged childbearing.

Training and family planning activities in Francophone Africa have taken longer to accomplish than expected. More technical assistance was required than planned. This is primarily due to problems existing in countries where population policies have been recently, or are currently being established, and to the other issues mentioned previously. In several of these countries, CEDPA has been in the forefront in working with women in this area, and, as has been shown, mechanisms in the public and private sectors in family planning service delivery have had to be established.

Project Development

Support to seed money projects has been shown to be important for several reasons:

- o Training is linked to action. The importance of linking training to action programs is paramount. Often training institutes are unable, for programmatic or financial reasons, to follow through with trainees after their formal instructional programs end. Similarly, PVO's which assist projects often do not have the expertise or structures needed to provide training for the project staff before they begin actual implementation of activities. CEDPA's Washington and in-country training provide participants with opportunities to strengthen skills in program design, implementation and management. Part of the training curriculum focuses on the development of project ideas which incorporate innovative technical and management strategies, with each participant writing a project proposal. Seed money for small projects creates a direct link between this project design process and the actual implementation of viable projects.
- o Training can be followed by technical assistance. During workshops participants produce drafts of proposals for community-based projects. For many, it is the first time they have written a funding proposal to present their ideas in a logical, sequential manner. The majority of the proposals are not at that point adequate for most funding agencies to consider. However, by using seed money to fund projects, CEDPA provides important technical assistance, both during the design and proposal submission process and during project implementation.
- o Women are given an opportunity to play a leading role in development. Women and local-level groups of women who are motivated to undertake community projects are guided as they assess community needs, talk to local policymakers, plan the details of project implementation and learn to analyze the results. Seed Money Projects allow women to gain that critical first experience in managing the development process.

- o New community-based groups become institutionally stronger. Seed money support for projects permit these groups to build their capability to design and implement activities by actually doing so. Through experiential learning, these groups strengthen their capacity to plan, implement and manage community-based projects.
- o Integrated services in health and nutrition, family planning and income generation, which serve women's multiple needs, are delivered at the community level. Because they live in the communities where they propose to work, women whose groups receive seed money support have a greater understanding of the programming environment, than an external project developer could have. They are better able to design activities which respond to needs and practices, and which are appropriate, given social mores, economic conditions and political realities. They can re-orient activities and focus to ensure that projects are responsive to community needs.

Institutional Development

Long term, sustained and expanded development requires strong local institutions capable of designing, implementing and managing programs. While it is important to support pilot projects which lead to gains in health status, economic level, agricultural outputs, etc., international PVO's can greatly multiply impacts of this sort by focusing more attention on building strong indigenous institutions that can facilitate community development, rather than focusing on their own direct involvement in these community-level projects. By strengthening local or national level organizations, donors automatically benefit from the contacts, understanding of environment and relative ease of working within culture and country-specific systems. Among the inputs that can greatly enhance institution strengthening are management training, specific technical training and resources, access to advisory and technical assistance services. One important way of strengthening such organizations is to involve them as active participants in assessing their needs and defining the inputs required to address those needs. Building the capacity for self-evaluation, needs assessment and resource identification is extremely important and is an area where the FHI/CA focused considerable attention.

Innovation and Technology Transfer

Project planners and implementors in developing countries often lack an understanding of the programming process. Project planning, implementation, monitoring, reporting and evaluation are all parts of the programming process. Each step in this process, from the initial assessment of needs through the final evaluation of impact, is interrelated with all other steps and each builds upon the preceding steps. Likewise, the documents that are produced at each juncture relate closely to each other.

This view of the programming process, with its interrelated products, is often a new concept for women (and men) in developing countries. The following beliefs and practices were encountered regularly as FHI/CA staff began to work with project planners and implementors.

- o Project planning is often a relatively informal activity which takes place after funds have been secured and involves scheduling for a week or a month of activity.

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- o Many of the early project proposals were essentially 1-2 page letters which made pleas for funding without providing a detailed idea of the project strategy or intended results beyond "helping the needy."
- o When proposals were written and projects funded, the proposals and subsequent grant agreements were rarely used by the grantees as working documents to guide implementation.
- o Progress reports on project implementation were often anecdotal in nature and rarely provided objective, statistical measurement of progress in achieving specific objectives.

CEDPA used several approaches to facilitate an expanded understanding of the programming process and to transfer the technical skills needed to undertake programming:

- o CEDPA WIM training has added a greater emphasis on examining the process, discussing the interrelatedness of steps, and practicing these steps.
- o Project proposals and budgets, as they are written by the alumnae, with any negotiated revisions, are photo copied and inserted as the Program Summary and approved Budget sections of subgrant agreements. Project proposers are, thus, not faced with subgrant documents that are (and look) very different from their original proposals.
- o The CEDPA Manual on Planning, Implementation and Management of Development Projects, which was developed for use by subgrantees under CEDPA's Matching Grant, emphasizes the relationships between the steps of the programming process and the resultant products. The French version of the manual was employed consistently during the technical assistance visits.

Project implementors and managers, who are relatively inexperienced and hence are learning, require simple, straightforward programming tools, formats and guidelines. One of the important elements of the CEDPA FHI/CA program, which distinguishes it from many other development projects, is that it links training in project management to practice in project management. To that end, many of the project implementors and the Unit-level project managers, who received support under the FHI/CA, are not women with years of experience in integrated development projects. They often lack extensive experience in dealing with external donors and in completing donor requirements for proposals and documentation. Complicated tools such as the logical framework, while excellent if used correctly, are above the level of many. Hence, the CEDPA proposal guidelines' reporting requirements in subgrant agreements, and financial monitoring tools, were all developed to provide CEDPA with critical information without aiming above the level of CEDPA's subgrantees.

People who are involved in a learning process of any sort, must receive immediate, sustained and consistent feedback and technical assistance. Even when training, such as CEDPA's WIM program, is highly participatory, experienced-based and hands-on, often the skills gained and lessons learned become relevant only when participants encounter opportunities to apply them within "real life" contexts. Making the transitions from practice in a classroom setting to sustained application within projects and programs can be difficult. To the extent possible, CEDPA staff made

regular country visits to assist alumnae in defining problems and issues and in determining appropriate ways of dealing with them. Written feedback on all reports, proposals and other documents, combined with the provision of self-instructional materials such as the CEDPA manual, have helped to bridge the gap between learning and doing.

In addition to limited skills and experience in project design and management, women's relative lack of technical skills, related to poultry raising, food processing, product marketing, child survival techniques, or family planning, were addressed in order to facilitate development.

To this end, seed money project planning included assessing technical needs and identifying local, government or NGO sources of such expertise in order to ensure access to such advice and training whenever it might be required.

In regard to funding and development agencies, CEDPA has promoted alumnae members and groups with donors and other international agencies. This has resulted in the utilization of the members of these groups as consultants and advisors in the national and international fields they represent. Donor agencies benefit from the experience of women nationals as they design and carry out projects. The alumnae benefit as well from exposure to decision-making at the international level.

Policy Implications

The CEDPA FHI/CA has policy implications for CEDPA's future development work. CEDPA has consciously chosen to work in countries without stationing CEDPA staff to support its activities. CEDPA is committed to the development of Third world professionals as colleagues and not beneficiaries of the development process. Basic to the belief that training, followed by technical assistance, can upgrade professionals' skills, is the commitment to vest authority for action in those so trained.

Collaboration/Networking with Other Agencies

Complementarity, and the creation of linkages, are critical elements of programs that have a high potential for sustainability. The FHI/CA permitted CEDPA to play three main roles vis a vis the women managers who are alumnae -- the roles of training institute, technical assistance deliverer and funding agency. The provision of seed money funds under CEDPA's Matching Grant was intended to give women who could not secure financial support from the usual donors an opportunity to gain experience and credibility. Seed money funds, however, are limited and as such, emphasis is placed on the use of them to initiate work that can be assumed by other donors or can be supported locally. To this end, Units and projects are encouraged to build linkages with other funding sources as well as with service delivery agencies. By design, nearly all projects and Units funded by CEDPA also receive inputs from indigenous NGOs, public institutions and/or community level groups. This diversified base of support ensures a higher potential for sustainability.

Replication

Networking and assessment and evaluation workshops have permitted a high level of exchange of ideas among alumnae involved in Unit work and seed money projects. A seminar held in April 1984 with representatives of 9 Follow-Up Units also facilitated a sharing of experiences and ideas about managing development, designing and implementing community projects, and ensuring maximum, sustained improvements in the lives of those in greatest need. Successful strategies and project components from certain settings are often adapted and tried in other alumnae projects.

Because nearly all alumnae Unit members work with government or NGO programs in addition to their CEDPA activities, many of the training and technical assistance approaches they have learned from CEDPA are now also integral parts of their "paid employment." Among the CEDPA approaches which are now regularly used by alumnae in non-CEDPA work are a focus on participatory methods for working with communities, greatly expanded and strengthened needs assessment and project planning skills, and women-to-women approaches for the delivery of social services.

D. RECOMMENDATIONS

1. Recommendations - Technical

- o Effective communications between CEDPA/Washington staff and alumnae group members, while critical, has sometimes been difficult because there has been no CEDPA staff person permanently in the field and because of general communications problems in the region. Communication gaps, existing, have led to slow-downs and, occasionally, to misunderstandings which have required staff time and attention in the field. It is recommended that in budgeting for Francophone Africa, importance be placed on sufficient funds to enable most effective communications, e.g., providing for phone calls from alumnae when necessary, sending information and documents by DHL, allowing for telexes and telegrams when phones are malfunctioning, etc.
- o Project data must be standardized and simplified so that a more accurate estimate of project beneficiaries at the grassroots level can be maintained. Innovative ways of helping illiterate village women keep records should be experimented with. Such data should then be analyzed and utilized and the technical assistance given to the group.
- o Strong encouragement and assistance should be given to assisting groups early on in understanding the process of seeking financial and technical assistance from organizations in addition to the original donor. In general, alumnae had a very limited understanding of how to do this, for example, which organizations provide funding assistance and to whom, how to approach them, etc. Related is the need during technical assistance visits to introduce alumnae to relevant donors and to include them in communications and meetings between CEDPA and AID and other agencies.
- o Local leaders and key decision makers in the government ministries and existing political groups, such as national-level women's organizations, unions, etc., should be kept informed and involved consistently throughout the development of the organization and/or the projects. They should be encouraged to critique the approach and to suggest ways of strengthening and broadening the model, and of involving other relevant individuals and organizations. They should be invited to visit the projects in the villages.

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- o Experience has shown that a great deal of time during technical assistance visits, particularly at the beginning, should be spent discussing informally or loosely with alumnae and particularly, should be spent listening by the person providing technical assistance, rather than arriving with rigidly structured, preconceived ideas to pass on to the person receiving the assistance. It is important to learn what has happened in the period between the last visit, information which cannot be passed on in reports, and to understand what is wanted and needed.
- o Alumnae should be encouraged to understand that if they see any budget changes that will be needed, they should inform the donor sufficiently in advance of the needed revisions, rather than requesting these after money has been spent.
- o Considerable attention should be paid in technical assistance visits during the development stage of an organization or a project to the method of transferring funds. CEDPA experience has shown that this is frequently more difficult, time consuming and complicated than was expected and that it should be researched early on. An additional area which appears to be difficult and costly is the process of registering an organization as an NGO and should also be started as early as possible.
- o Proposals for the establishment of Follow-Up Units and the initiation of projects need to be developed by those who will be responsible by them and not by the staff members of donor organizations. Successful organizations and projects are those in which the participants feel that ownership is clearly vested in them. The farther removed the design process is from the intended participants, the weaker their commitment. To this end, CEDPA, in writing up Unit and project subgrant agreements, used the alumnae's own description of the Unit/project as the primary basis for agreement.
- o Specific technical training, geared to women's current skill levels, realistic needs and availability of resources is essential and must be complemented by linkages to technical expertise (agricultural extension agents, credit advisors, nutritionist, etc.) which will continue to service technical needs beyond the periods of external project funding.

2. Recommendations - General

o Training

Although the FHI/CA has contributed to the numbers of Francophone women receiving training in management skills, there remains a strong need for additional training for women in the French language in planning, implementation and evaluating development projects.* Recently, the Follow-Up Units in Senegal and Mali both submitted proposals to CEDPA proposing this additional training in their countries and the Unit in Zaire incorporated this objective in earliest documents defining their activities

In addition, there is a need for more women to develop technical expertise to better address the problems of hunger, agricultural production, health and nutrition, population pressures and the need for cash income and employment. CEDPA alumnae have consistently identified a priority need for integrated family planning, health and nutrition, and frequently income generation activities as well, at the village and community levels.

*Because of this demand, in 1987 CEDPA will hold two workshops in French - one for basic management skills and one in Supervision and Evaluation.

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CEDPA seed money projects combine two or more of these components in such areas as family planning, maternal/child health, nutrition, agriculture and income generation. Experience has shown, however, that too frequently women committed to initiating and sustaining these activities in their communities lack the specific skill needed to effectively address the critical needs, for example, an understanding of basic child survival interventions such as growth monitoring, ORT, of business, agricultural and marketing principles, or of contraceptive methods relevant to their communities. Relatively short, focused technical workshops on selected relevant topics could be extremely useful, at a limited cost, in providing the basic understanding needed for primary health care/child survival and income generation activities, which are of highest priority in the Francophone African region. At the same time, women need a grasp of basic administration, as provided in CEDPA's WIM, as a framework for making possible transfer of health and other development technologies.

In addition, there is a need for the development of effective training curricula and materials for use in delivering training - both management and technical - to community level groups. Particular areas of importance include:

- o family planning outreach, IEC and service delivery;
- o primary health care;
- o basics of income generation planning;
- o techniques for identifying community "felt needs";
- o "mini" surveys;
- o techniques for planning with the community;
- o project feasibility studies including an examination of an organizations' past successes and problems, as well as measurement of current willingness and ability to commit personnel and resources in support of new project activities;
- o management and administrative skill-building to help managers strengthen administrative systems, staffing, etc.;
- o basic record keeping, monitoring and accounting.

Training is a vital part of development and should not be considered as a separate activity to project initiation. In CEDPA's experience, training was difficult to fund, while many agencies were interested in project implementation. With the attendant training, however, projects would not have been produced.

o Small Seed Money Projects

Related to the need for training is the need to provide financial and technical assistance to women in Francophone Africa in the design and implementation of seed money projects. These small scale projects enable women to gain critical first experience in managing projects, evaluating, and analyzing results, and at the same time, permit groups to build their capability to design and implement activities by actually doing so. Training can be constantly evaluated and strengthened as a result of field experience. Additionally, these projects are excellent vehicles to strengthening community support towards development efforts.

o Institution Building & Strengthening

In Mali, Senegal and Zaire, there is a critical need to continue the financial and technical support given to the Follow-Up Units in these countries. In all three countries, proposals for projects to be administered by the Units have been submitted to CEDPA. Units, though at different stages of development, will continue to require additional support, if they are to maintain a secure anchoring and become self supporting. All three Units have the potential to become major, unique resources for training, technical input and project development assistance for under-served women in their countries.

In Madagascar and Togo, alumnae have begun initial steps to establish alumnae associations and have expressed strong enthusiasm for the idea. Potentially, depending on political developments within these countries and on AID priorities, support to the establishment of Units in these two countries may become feasible.

Development impact can be gained through using in-country groups and intermediaries to reach grassroots level communities. As technology, training and evaluation techniques need adaptation before they can be fully understood and utilized at the community level, an investment in establishing in-country intermediaries is a promising potential for international development.

o Use of CEDPA Alumnae as Trainers and Consultants

In addition to the above areas, there is a need to encourage agencies committed to the development process to employ CEDPA alumnae as consultants and trainers. Women should be consulted by agencies such as USAID as they plan large bilateral projects. Alumnae Units can provide information and resources on many facets of program development.

o Need to Address Teenage Pregnancies

The problem of teenage pregnancy and motherhood in Francophone Africa is often overlooked because, unlike in the West, most Third World teenage mothers are married in traditional early-marriage societies. Because pregnancy within marriage is not considered a "problem", the concomitant high maternal and infant mortality and morbidity rates have become accepted norms.

There is a need to develop and implement new community-based projects that provide information, education and services in family planning, safe-motherhood, reproductive health care and contraception to girls in the 10-20 age group.

A recent study¹ shows that in Senegal, for example, the average preferred family size among girls ages 15-19 is 8.8 children; 59% of females 15-19 are married, with only 5.7% using contraception.² The mean age at first marriage is 16.4. The age-specific fertility rate for 15-19 year olds is 197, which is 14% of the total fertility rate.³ In Burkina Faso, 54% of females 15-19 are married; the age-specific fertility rate among this group is 124, which is 9% of the total fertility rate.⁴ In the Ivory Coast, 56% of females 15-19 are married.⁵ In Madagascar, the age-specific fertility rate⁵ for this age group is 168, which is 17% of the total fertility rate.

o Networking

CEDPA alumnae, who work with NGO's and public sector agencies that have existing links to grassroots community groups, were better able to develop projects, ensure regular monitoring and contribute to sustainability beyond the period of CEDPA funding. Those alumnae, Units or other CEDPA alumnae associations which have close, previously-established links at the community level did not need to spend considerable time establishing those links and in generating community interest, trust and acceptance of new projects. Projects designed and managed by alumnae who know the communities where project activities are centered benefit from their understanding of needs, community structures, available resources and existence of complementary programs of other NGOs or public sector agencies. These alumnae are better able to use resources to initiate or expand activities which can be integrated into programs which continue beyond the limited period of funding.

The ability to mobilize and coordinate human and material resources across divisions, organizations, and sectors is a characteristic that greatly enhances the start-up and long-term results of community-level development efforts. Organizations and managers that are well-connected and have strong networking skills create an automatic multiplier effect. They get other managers interested and involved and, as a result, their projects benefit from a much wider range of expertise and resources than would normally be available.

¹World Bank, "Rapid Population Growth in Sub-Saharan Africa - Issues and Policies," Staff Working paper # 559, 1983, p. 46

²Population Reference Bureau, Population Bulletin Vol. 40, No. 2, April 1985, p. 12

³Ibid, p. 15

⁴Ibid, p. 9

⁵Ibid

o Impact on Policy

In regard to policy needs, the following recommendations are proposed:

- o to develop data and documentation for national level policy planners on the role of women in development;
- o to collect policy-oriented data on technical and training issues relevant to the role of women in the delivery of economic, agricultural, nutrition and health services in their countries;
- o to disseminate results of the above through publications, case studies and national level seminars and workshops;
- o to monitor the change in national policies that effect the role and status of women and disseminate these policy changes through CEDPA's world-wide network.

IV REVIEW OF COOPERATIVE AGREEMENT PROGRESS, BY COUNTRY

A. MADAGASCAR

1. History and Focus

CEDPA conducted its first feasibility study for in-country training in May 1984. However, due to postponement of the training, a second study was made in May 1985. The following August the workshop was held, preceded by a training of trainers' session. Twenty-four participants from the Ministries of Population and Health, the Family Planning Association of Madagascar (FISA) and the Red Cross attended the two-week seminar.

The workshop, organized by FISA (National Family Planning Association) in collaboration with the Ministries of Population and Health, introduced modern techniques in managing health, family planning and community development programs.

2. Achievements

There is currently no formalized Follow-Up Unit or program of seed money projects in Madagascar. However, important organizing efforts have been made which may lead to a Unit in the future.

During the two-week Madagascar WIM workshop, the women grouped by region to formulate proposals for integrated development projects which were presented to the other participants for their feedback and recommendations. Because the proposals were developed by teams, they were generally better designed and more complete than the project proposals developed in the course of other in-country WIM programs. The regional teams included women working for GOM agencies and women employed by NGOs, and they developed projects that stressed collaboration between the public and private sectors.

Since the August 1985 workshop, FISA has followed up with alumnae of the training. Visits were made to four regions to assist the alumnae in completing their project designs, and to enlist the support of the alumnae's supervisors for the projects. FISA reported that there was great enthusiasm and support for the regional teams and their projects, but that GOM did not have sufficient resources to fund the projects. FISA has also requested CEDPA assistance, including funding, to establish a Follow-Up Unit.

USAID Madagascar has requested that follow-up be delayed until 1988 as sector strategies do not include a role for CEDPA at this time (see also Section III A3, Trip Report to Madagascar, of this report).

3. Analysis of Results

There continues to be tremendous enthusiasm on the part of both FISA and in-country alumnae who wish to build upon the work begun during the in-country WIM workshop. The structure of FISA, which includes a network of volunteers and offices at the provincial level, makes it an appropriate institution to house a Follow-Up Unit. Likewise, the project ideas developed during the WIM program not only meet CEDPA funding criteria, but also represent an opportunity to build collaboration between public and private sector agencies at the community level.

B. Zaire

1. History and Focus

Zairian participation in CEDPA Washington WIM programs began in 1981, and there are currently 23 alumnae of these programs. In 1985, an in-country WIM program was held for women managers from nine regions of Zaire. Conducted in collaboration with the Projet des Services des Naissances Desirables, the workshop led to 22 proposals for community-based projects. Zairian alumnae formed a planning and coordinating committee which presented to CEDPA a detailed proposal for an in-country alumnae association to include all CEDPA alumnae. The CEDPA Zaire Follow-Up Unit, Centre d'Encadrement de Femmes en Matiere de Developpement (CEFD), received approval for a one year subgrant beginning May 1986. (See Zaire Unit profile found in Appendix 3) CEFD's workplan for 1986-87 has the following objectives:

- o to deliver technical assistance to in-country WIM alumnae as they plan integrated projects in family planning, primary health, and community development;
- o to assist alumnae in approaching donor agencies for project support;
- o to monitor, assist and evaluate project activities.

2. Achievements

The Zaire Unit is the newest CEDPA Follow-Up Unit. The tremendous enthusiasm generated by the July 1985 in-country WIM program, coupled with motivated, competent alumnae managers, have resulted in a rapid start-up of the Unit. The proposal prepared by alumnae for the establishment of a Zaire Follow-Up Unit is the most detailed one ever received by CEDPA, with well reasoned strategies and well designed mechanisms. The Zaire Unit was granted funding in May 1986, but had even earlier established a quarterly monitoring and reporting system to keep CEDPA up-to-date on activities. The Unit has forwarded two seed money project proposals to CEDPA for funding consideration as well as proposals to other donor organizations.

The first four months of funding the Unit has made rapid progress in establishing itself. Its office has been set up, regular meetings held, announcements about the organization have been sent to relevant individuals and organizations, and proposals for projects have been submitted to CEDPA and to several other donors.

3. Analysis of Results

The USAID Mission in Kinshasa has been highly supportive of the initial organizing efforts of the CEDPA Zairian alumnae. With communications between the U.S. and Zaire difficult at best, the assistance of USAID, for example, in facilitating communications and clearing cashiers checks, is invaluable as the Unit becomes engaged in sponsoring projects and other activities.

During the recent visit of the FHI Project Coordinator, strong support for the Unit was expressed by the Mission's Population Officer and by the head of the bilateral family planning project.

It is too early to accurately assess progress. Members have extensive experience in a number of related development fields. Continued technical assistance from CEDPA, however, will be required for some time to come.

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C. Togo

1. History and Focus

In 1981, CEDPA conducted its first Washington-based Women in Management program in French for mid-level women managers of health/family planning and community development programs. During the course of the workshop, eight Togolese participants developed a proposal for an in-country Women in Management workshop which they submitted to CEDPA for funding. In 1982, six additional Togolese women attended a second CEDPA Women in management French language program in the U.S., and in 1983, three Togolese women attended English and French language programs.

In August 1982, in collaboration with the Association Togolaise pour le Bien-Etre Familial (ATBEF) and other alumnae, CEDPA conducted a two-week Women in Management workshop in Kpalime, Togo. Twenty-four mid-level women managers of health, family planning and community development programs, representing all regions of Togo, attended the workshop. During the course of the workshop, participants developed a number of project blueprints for activities in health/family planning. Following the workshop, three CEDPA alumnae, who served as trainers in the in-country workshop, established a Follow-Up Unit (CEDPA/Togo). The purpose of the Unit is to help in-country participants of CEDPA training to develop and secure funding for the project blueprints they drafted during the workshop.

ATBEF is the executing agency for the Government of Togo's family planning program. It is responsible for information, education and communication through a large volunteer network, conducts the training and provides supplies for the Government of Togo's MCH clinics which offer family planning services. Several CEDPA alumnae are closely associated with ATBEF either as full-time staff members, volunteers or board members.

2. Achievements

Lack of USAID concurrence for the provision of funding to the Follow-Up Unit, and subsequent granting of seed money to projects, has precluded consideration of project proposals from Togolese alumnae. Togolese alumnae and ATBEF remain interested in working with CEDPA to extend the benefits of Women in Management training and to undertake community-based projects should the USAID mission reverse earlier decisions. One member of ATBEF was sponsored through CEDPA to attend Forum '85. She joined representatives of the Senegal and Mali Units in presenting a French language case study and workshop on "Women in the Management of Community-Based Services."

3. Analysis of Results

Tangible results in the form of Follow-Up Unit activities and completed seed money projects were circumscribed in Togo. While the in-country WIM program generated tremendous enthusiasm on the part of women who wished to apply their expanded planning and management skills, follow-up to the Togo program was interpreted not to be in agreement with the CDSS. The in-country WIM program was conducted with funds under FHI Cooperative Agreement. Although initial concurrence was received, ultimately, the lack of mission support prevented follow-up activities from taking place.

D. Senegal

1. History and Focus

In one year, 1983, CEDPA conducted a feasibility study for an in-country training workshop, the workshop was held, and then the Follow-Up Unit was established. In 1984, CEDPA funded the second phase of the WIM workshop, conducted by CEDPA/Senegal. Twelve women involved in the CHODAK integrated community development project in Grand Yoff attended. All trainees work for Environment and Development Action for the Third World (ENDA), which funded the first workshop in 1983. The women developed a joint project proposal for improving MCH, including a family planning component.

In 1984 CEDPA awarded a subgrant through the Unit for the establishment of a health center in Yenne. That same year, the Unit designed a nutrition management workshop which was held in 1985 under CEDPA's Nutrition Management and FHI/CA Grants.

CEDPA/Senegal is a membership association of the more than 30 Senegalese alumnae of CEDPA training programs. The four-member Unit, which serves as the steering committee, devotes considerable energy to strengthening the alumnae network through weekly association meetings. CEDPA/Senegal is committed to the task of improving managerial skills of local women and developing community-based projects which benefit women and children.

2. Achievements

Some of the activities undertaken by the Unit and its members include:

- o participation in the organization and delivery of a nutrition management workshop focused on child survival interventions and the design, implementation and management of MCH projects;
- o technical assistance to Training of Trainers workshops and Women in Management programs in Zaire and Madagascar;
- o development and implementation of a baseline survey as the initial activity of a CEDPA-funded seed money project to improve health services and outreach from the Yenne Health Centre (see Appendix 1 for profile of this subgrant);
- o participation in the delivery of a workshop in French entitled "Women in the Management of Community-Based Services" at Forum '85;
- o design and delivery of management training for female social workers employed by ENDA (Environment and Development Action in the Third World);
- o assistance, at the request of the Ministry of Development, to a commission established to mobilize resources in response to floods in the Fleuve Region (1983).

3. Analysis of Results

Because CEDPA/Senegal is a new organization, considerable emphasis has been placed on determining its institutional identity, relationships and

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structure. Unit members believed from the beginning that maximum autonomy was critical. To that end, the group resisted becoming a member organization of the national association of Senegalese women. The repercussions of this decision included tensions with other donors who wished to support both the Unit and the national association. Unit members subsequently negotiated a relationship with the national association in which the Unit is a member but retains full control over its own programmatic decision.

Unit members have strong planning and training skills. AID/Senegal is supportive of the Unit. With an end to the temporary halt in Unit activities, it may be expected that the Yenne Project will be initiated as planned.

E. Mali

1. History and Focus

In 1982, CEDPA went to Mali to study the feasibility of an in-country workshop. The workshop was held that Spring, followed by the establishment of the Follow-Up Unit. In May 1985, the Katibougou Family Health Project was implemented.

The CEDPA Mali Follow-Up Unit, an independent working group within the Training Division of the Ministry of Health, is known as the Women's Committee for Development and Population Activities (CFDAP/Mali). The group collaborated with CEDPA in an in-country Women in Management workshop in May 1982 and has continued since then to provide follow-up technical assistance to the workshop participants. In Mali, as in many West African countries, NGO activity is highly dependent upon GOM approval and support. The placement of CFDAP/Mali within the Ministry of Health, with the Unit Coordinator (a WIM alumna) well positioned in that Ministry, has ensured requisite support. Involvement of the government, however, means certain clearances and functions may take longer if bureaucratic involvement was not so direct.

2. Achievements

The following were achievements made in Mali:

- o Design and conduct and extensive baseline survey of six villages and Katibougou town to determine health and family practices and needs.
- o Development of an MCH project to train health educators and traditional birth attendants (TBA's) and institute a system of service delivery for high risk pregnancies and family planning acceptors. The Katibougou project (refer to the project profile in the Appendix) was funded under CEDPA's Matching Grant in May 1985.
- o Participation with the Senegal and Togo Units in the delivery of a workshop in French entitled "Women in Management of Community-Based Services" at Forum '85.

3. Analysis of Results

The Mali Unit configuration and mode of operation are quite unique. As an independent working group within the Ministry of Health, the Unit has the necessary government approval and clearances, while maintaining a degree of "privateness" and autonomy. The cooperation engendered in this arrangement is important to continuity of activities.

GOM and other NGO's working in Mali have also benefitted, in particular from the Katibougou seed money project pre-implementation survey. This survey was used by the Unit to develop a detailed profile of the Katibougou area and a typical family in the area. Such information about family composition, health practices, needs and resources is very scarce in Mali and is particularly valuable to program planners in both public and private sectors.

The Unit members were able, with relatively few difficulties, to respond to added program demands that the establishment of the Unit and the initiation of the Katibougou project generated. This was due to a great extent to the strong and consistent support for these activities given by high-level Ministry officials. Mrs. Mintou Traore, the head of the Mali Unit, has become the Ministry person responsible for "Women's Affairs" related to Ministry activities.

Working in countries with centralized government systems requires official authorization to introduce changes at the community level. The high visibility given to the program by the Malian government, as well as the interest to continue working with CEDPA technical assistance for the development of integrated health and family planning projects, provides the necessary authority to continue future development efforts.

Considerably more technical assistance was required than originally planned. Unit members have strong experience and understanding of health and family planning service delivery and training issues, but needed additional assistance in developing planning and project development skills, particularly financial planning, and in meeting reporting requirements. A particular strength of the Unit is collaboration and networking with other agencies, for example, with the National Union of Malian Women, with other women-in-development oriented projects, and with in-country NGO's.

The Katibougou Project, initiated and monitored by the Unit, is a highly successful small primary health care project, which is being extended under CEDPA's Population Project. Appendix 4 provides an evaluation of the project.

Table I provides a summary of activities in all five countries by country.

Table II shows activities and results, by activity.

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TABLE I
SUMMARY OF ACTIVITIES BY COUNTRY
TOGO

<u>DATE/PLACE</u>	<u>ACTIVITY</u>
1981/2/3/5 (Washington, D.C.)	Washington-based training
February 1982 (Togo)	Feasibility study for in-country training
August 1982 (Togo) trained)	Training of trainers (4 women
August 1982 (Togo)	In-country workshop (24 women trained)
August 1982 (Togo)	Project blueprints for action developed (23 proposals developed)
December 1982 (Togo)	Establishment of Follow-Up Unit
December 1982-July 1983 (Togo) budgets	Development of Unit workplans and
July 1983 (Togo)	Identification of projects (5) for proposal development
July 1983-present	Funding of Follow-Up Unit and projects pending OAR/Lome concurrence for additional CEDPA technical assistance

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MALI

<u>DATE/PLACE</u>	<u>ACTIVITY</u>
1981/2/3/5 (Washington, D.C.)	Washington-based training
January 1982 (Mali)	Feasibility study for in-country training
May 1982 (Mali)	Training of trainers (4 women trained)
May 1982 (Mali)	In-country workshop (21 women trained)
May 1982 (Mali)	Project blueprints for action developed (15 proposals developed)
September 1982 (Mali)	Establishment of Follow-Up Unit, CFDAP/Mali, located in the Training Division, Ministry of Public Health and Social Affairs
September 1982-June 1983 (Mali)	Development of Unit workplans and budgets
February-June 1983 (Mali)	Project identification for proposal development
December 1983 (Mali)	Funding of Follow-Up Unit
May 1985 (Mali)	Katibougou Project implementation
April 1985 (Mali)	CEDPA technical assistance visit
December 1985 (Mali)	CEDPA technical assistance visit
June 1986 (Mali)	CEDPA technical assistance visit

MADAGASCAR

<u>DATE/PLACE</u>	<u>ACTIVITY</u>
1982/3/5 (Washington, D.C.)	Washington-based training
May 1984 (Madagascar)	Feasibility study for in-country training
May 1985 (Madagascar)	Second feasibility study for in-country training (second study needed due to postponement of training)
August 1985 (Madagascar)	Training of trainers (5 women trained)
August 1985 (Madagascar)	In-country training (24 women trained)
August 1985 (Madagascar)	Proposals developed (7 proposals developed in regional teams)
July 1986 (Madagascar)	Visit by FHI Coordinator with CEDPA alumnae

ZAIRE

<u>DATE/PLACE</u>	<u>ACTIVITY</u>
1981/2/3/5 (Washington, D.C.)	Washington-based training
April 1984 (Zaire)	Feasibility study for in-country training
February 1985 (Zaire)	Training of trainers (13 women trained)
February 1985 (Zaire)	In-country workshop in conjunction with PSND (22 women trained)
February 1985 (Zaire)	Project blueprints for action developed (22 proposals resulted)
November 1985 (Zaire)	CEDPA technical assistance visit to develop proposal for funding of Follow-Up Unit
May 1986 (Zaire)	Funding of Follow-Up Unit CEFD/Zaire
September 1986 (Zaire)	CEDPA technical assistance visit with Zaire Follow-Up Unit to refine project proposals.

SENEGAL

<u>DATE/PLACE</u>	<u>Activity</u>
1981/2/3/5 (Washington, D.C.)	Washington-based training
February 1983 (Senegal)	Feasibility study for in-country training
May 1983 (Senegal)	Training of trainers (4 women trained)
May 1983 (Senegal)	In-country workshop (23 women trained)
May 1983 (Senegal)	Project blueprints for action developed (23 proposals)
August 1983 (Senegal)	Establishment of Follow-Up Unit
August-December 1983 (Senegal)	Development of Unit workplans and budget
November 1983 (Senegal)	Project identification for proposal development (5 proposals)
December 1983 (Senegal)	Funding of Follow-Up Unit
July-August 1984 (Senegal)	In-country WIM training (12 participants)
October 1984 (Senegal)	Subgrant to Yenne project
January 1985 (Senegal)	Nutrition workshop (20 participants)
June 1986 (Senegal)	CEDPA technical assistance visit to Senegal

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TABLE II
SUMMARY OF ACTIVITIES AND PROGRESS
#AFR-0662-A-1088-00
FAMILY HEALTH INITIATIVES COOPERATIVE AGREEMENT
AUGUST, 31 1981 - SEPTEMBER 30, 1986

ACTIVITY: TRAINING	DATE/PLACE	NUMBER TRAINED
I. Washington-based training	Oct/Nov 1981-U.S. Mar/April 1982-U.S. Sept/Oct 1983-U.S. Sept/Oct 1985-U.S.	148 women from Franco- phone Africa countries trained; (14 women sponsored by FHI/CA)
II. Feasibility study for in-country training	Jan 1982 in Mali Feb 1982 in Upper Volta Feb 1982 in Togo Feb 1983 in Senegal Apr 1984 in Zaire May 1984 in Madagascar	
III. Training of trainers	May 1982 in Mali Aug 1982 in Togo May 1983 in Senegal Feb 1985 in Zaire Aug 1985 in Madagascar	4 4 4 3 5
IV. In-Country workshops	May 1982 in Mali Aug 1982 in Togo May 1983 in Senegal Feb/Mar 1985 in Zaire Aug 1985 in Madagascar	21 24 23 22 24
V. Project blueprints for action developed	May 1982 in Mali (15 proposals) Aug 1982 in Togo (23 proposals) May 1983 in Senegal (23 proposals) Feb-Mar 1985 in Zaire (22 proposals) Aug 1985 in Madagascar (7 proposals)	

ACTIVITY: FOLLOW-UP		
TECHNICAL ASSISTANCE	DATE/COUNTRY	RESULTS/STATUS
I. Development of Plans for a Follow-Up Unit	a) Sept/Feb 1983-Mali	
	b) Dec 1982-Togo	
	c) Aug 1983-Senegal	
	d) Sept/Nov 1985-Zaire	
	e) Sept/Nov 1985-Madagascar	
II. Unit Workplans submitted to CEDPA	a) Mali	Submitted to CEDPA Feb 1983; revised & resubmitted June 1983
	b) Togo	Submitted to CEDPA Jan 1983; revised & resubmitted July 1983
	c) Senegal	Submitted to CEDPA Sept 1983; revised & resubmitted Dec 1983
	d) Zaire	Submitted to CEDPA Nov 1985; revised & resubmitted Feb 1986
III. Formation of Follow-Up Units	a) Mali Sept 1982	Four member-Unit located in Training Division, Ministry of Health
	b) Togo Dec 1982	Two member-Unit located in ATBEF, local IPPF affiliate
	c) Senegal Aug 1983	Four member-Unit taking steps to register with GOS as PVO
	d) Zaire Nov 1985	Forty member-Unit taking steps to become legally registered
IV. Funding of Follow-Up Unit	a) Mali	Proposal submitted to AID/Contracts Dec 13 1983 for \$4,439;
		Revised Nov 1985, increased by \$2,000 extended to March 1986

ACTIVITY: FOLLOW-UP		
TECHNICAL ASSISTANCE	DATE/COUNTRY	RESULTS/STATUS
	b) Togo	Pending OAR/Lome concurrence for additional CEDPA technical assistance
	c) Senegal	Proposal submitted to AID/Contracts Dec 29 1983 for \$6,079
	d) Zaire	Funded by PVO Grant May 1986, \$17,000
V. Identification of Projects by the Follow-Up Unit	a) Mali-Feb/June 1983; Dec 1985 additional projects identified	Two potential family planning projects identified for proposal development
	b) Togo July 1983	Five potential family planning project activities
	c) Senegal Nov 1983	Three potential family planning projects plus two management training workshops
	d) Zaire Apr 1986	Two potential family planning projects;
	Sept 1986	Two additional proposals developed
	e) Madagascar July 1986	Proposal developed during in-country WIM was approved by the Ministry of Health and submitted to FHI Coordinator during Technical Assistance visit
VI. Projects Approved for CEDPA Private Seed Money funding	a) Mali	CEDPA Project Review Committee approved \$5,276 for family planning project at Katibougou, Dec 19 1983
	b) Togo	Proposals pending OAR/Lome concurrence

ACTIVITY:
FOLLOW-UP

<u>TECHNICAL ASSISTANCE</u>	<u>DATE/COUNTRY</u>	<u>RESULTS/STATUS</u>
	c) Senegal	Proposals returned to Unit for further work
	d) Zaire	Proposals under review
	e) Madagascar	Proposal pending AID/Antananarivo con-

currence

VII. Project Implementation	a) Mali (Katibougou Family Health Project)	\$6,218 awarded by CEDPA's PVO Matching Grant, Aug 13, 1984
	b) Senegal Yenne Project	\$10,287 awarded by CEDPA's PVO Matching Grant, Oct 17, 1984

V. INPUTS TO THE FHI COOPERATIVE AGREEMENT: 1981-1986

With the dual purpose of facilitating individual and institutional growth and supporting the implementation of community-level projects impacting on family planning, health, nutrition and income generation, CEDPA inputs include the following:

A. Training

1. Washington-based training: From August 1981 - September 1986, CEDPA conducted 12 Washington-based Women in Management workshops or WIM's. Three of these were in the French language: Fall 1981, Spring, 1982 and Fall, 1985. However, English-speaking women from Francophone Africa also attended the English WIM's, so that during this period, a total of 148 participants from Francophone African countries attended training. Fourteen (14) participants were funded directly by the FHI/CA. Six (6) Supervision and Evaluation (S&E) workshops, S&E, the more advanced level of management training, were conducted in this period.
2. In-Country WIM Training: In-country WIM programs, funded by the FHI/CA, were conducted in Francophone African Zaire, Madagascar, Togo, Senegal and Mali. A total of 114 participants were trained.
3. Project Design Training: In February 1984, a conference workshop with participation of nine CEDPA Follow-Up Units, including those from Mali, Togo and Senegal, was held in Nairobi, Kenya, to initiate CEDPA Matching Grant activities. In addition to sharing histories and experiences related to their institutional development as Follow-Up Units, workshop attendees participated in sessions on needs assessment, project design, proposal writing, project implementation and monitoring.

In July 1986, CEDPA's Population Project's project design workshop was held in Bamako, with participants from Follow-Up Units in Zaire, Mali and Senegal (see section IIIB for complete description).

4. CEDPA also held a series of nutrition management workshops in four countries, including Senegal, under the auspices of a grant from the Office of Nutrition. The workshops focused on the importance of nutrition to maternal/child health and on the development of primary health care/nutrition projects. Trainees learned techniques in the areas of growth monitoring, breastfeeding, oral rehydration therapy and diarrhea prevention, preparation of nutritious weaning foods and family planning.

B. Technical Assistance

Technical assistance to alumnae and to Follow-Up Units was a major input of the FHI/CA. On-site visits and written feedback were the two methods employed by CEDPA to assist alumnae in institutional and project development. In some cases, private matching funds covered the costs of technical assistance trips to Francophone countries. Other CEDPA staff, traveling with other grants, also delivered assistance.

Technical assistance focused on working collaboratively within six areas:

Strategic Planning:

- o plan and develop appropriate and effective institutional goals, structures, systems and long term program emphases;
- o develop organizational policies and procedures;
- o determine broad program emphases;
- o develop fundraising and public relations strategies;
- o allocate institutional resources in line with organizational goals;

Program Planning:

- o collect baseline data and use other needs assessment tools;
- o prioritize needs and match with resources;
- o facilitate overall organizational input to planning process;
- o develop realistic implementation schedules for programming process;
- o identify sources of financial and other support;

Management Information Systems:

- o establish sound record keeping, monitoring and reporting systems;
- o analyze results;
- o adapt project approaches based on past results;
- o control finances and allocate resources;
- o establish participatory feedback systems;

Technology Transfer:

- o identify technical gaps;
- o plan technical skills development;
- o supervise technical aspects of programs;
- o access local and national technical resources;
- o adapt technologies and deliver technical training;

Proposal Development:

- o analyze needs assessments and determine project approaches;
- o identify potential donors and determine their interests and priorities;
- o produce complete, feasible project proposals;

Evaluation:

- o determine indicators of change;
- o establish participatory systems of formative and summative evaluation;
- o collect/analyze project data;
- o assess project impact;
- o determine immediate and long term implications.

C. Financial Support

Appendix 2 provides information on expenditures as of September 30 of this year. A final financial report will be submitted within 3 months of the completion date of the Agreement.

D. Other Inputs

1. Eleven CEDPA alumnae plus five CEDPA staff members were official participants at the NGO Forum in Nairobi, Kenya, July 1985. Representatives of the Francophone Units in Senegal, Mali and Togo conducted a joint slide presentation on how management training for local women has helped to cope in their countries with acute needs for family planning, health and nutrition services.
2. CEDPA has published a manual in French, English, Spanish and Arabic entitled "Manual on Planning, Implementation and Management of Development Projects." The French edition came out in time for distribution at CEDPA's 1985 French WIM. The manual is a concise yet comprehensive, clearly-written, not highly technical document directed toward Third World professionals with little or no formal management training. The manual has been distributed to all members of CEDPA Follow-Up Units and to CEDPA-funded projects' staff members.
3. CEDPA's newsletter "CEDPA WorldWide" is published quarterly and is sent to all alumnae as well as other individuals and organizations. It provides updates on activities of Follow-Up Units and their projects, as well as information on individual alumnae and on CEDPA/Washington activities.

**VI PROGRESS REPORT FOR THE FINAL PERIOD OF THE COOPERATIVE AGREEMENT:
FHI/CA Sponsored Activities During the Period of January 1 - September
30, 1986**

The following FHI-funded activities were conducted during the final eight months' period of January 1 - September 30, 1986:

- o technical assistance visit to Mali;
- o technical assistance visit to Senegal;
- o exchange of information visit to Madagascar;
- o technical assistance visit to Zaire.

A. Technical Assistance Trip, Mali, May 22 - June 3, 1986*

On May 22 FHI Project Coordinator Carol Carp went to Mali to work with CFDAP/Mali, the CEDPA Follow-Up Unit, and with the Katibougou Family Health Project, the small primary health care/family planning project directed by one of CEDPA's in-country alumnae, funded by CEDPA's seed money funds, and supervised by the Follow-Up Unit.

The objectives of the visit were:

- o to provide technical assistance to CFDAP/Mali and to the Director of the Katibougou Project in preparing the progress and financial reports required by CEDPA;
- o to further develop with CFDAP several ideas they had submitted to CEDPA for additional small projects, for possible CEDPA non-AID funding;
- o to develop with the Unit a new six month work plan and budget.

In addition to these objectives under the FHI/CA mandate, the Project Coordinator spent a few days assisting in preparing activities to be funded under CEDPA's Population Project**, activities which are directly related to ongoing activities in Mali initiated under FHI. These included:

- o providing assistance to the Project Director at Katibougou in finalizing technical and financial aspects of a proposal to extend the Project through the provision of additional CEDPA Population Project funding;
- o providing assistance in finalizing preparations for a proposal development workshop also funded under the Population Project which took place in Bamako in July.

*Background information on developments in Mali may be found in the last Progress Report

**CEDPA's Population Project, and its relationship to activities initiated under FHI/CA, are explained in Section IIIB of this report.

Summary of Visit

The visit consisted primarily of a series of working sessions in Bamako with the members of CFDAP and/or with Mrs. Fatimata Traore, the director of the Katibougou Project, in Katibougou.

In Bamako, Ms. Carp worked primarily with Mrs. Mintou Traore, the Coordinator of CFDAP/Mali, as well as with other members of the Unit, as they were able to temporarily leave their jobs. Mrs. Traore was relieved of most of her responsibilities at the Ministry of Health during the visit and thus could work with Ms. Carp every day.

A great deal of time was spent discussing CEDPA's reporting needs with the CFDAP members. A new six month work plan and budget were also established by the Unit members using instructions given in CEDPA's "Manual on Planning, Implementation and Management of Development Projects,"* with assistance from Ms. Carp. Courtesy and information exchange visits were paid to the Director of the National Division for Plan and Environmental and Social Training and with the Director of the Division for Family Health, Ministry of Health. Several meetings were also held with staff from the Public Health Office, USAID, to clarify details concerning the upcoming workshop and to exchange information about CEDPA and USAID involvement in Mali. A de-briefing was also held with the AID Mission Director.

Two days were spent with the Director of the Katibougou Clinic in Katibougou, Mrs. Fatimata Traore. Mrs. Traore also travelled to Bamako one day for a meeting there. The Katibougou Project, funded for one year under CEDPA's private funding source, is about to end and therefore discussions centered primarily on the extension of the project under CEDPA's Population Project funding. (An evaluation of the Katibougou Project is found in Appendix 4)

The final activity during the visit was to discuss the Unit's plans for development of additional seed money projects. The Unit had already submitted to CEDPA a short proposal for an income generating project in the Hippodrome section of Bamako. This proposal, however, needed serious refinement as well as the addition of a strong family planning component, a donor's requirement for these funds. A meeting was held with women from this section of the city to ascertain their interest in family planning and family planning promotion activities, and to discuss other technical details of the proposal. Because of the apparent strength of their interest in these activities, it was decided that the CFDAP Coordinator would take responsibility for revising and expanding the proposal, with the participation of the women in the Hippodrome Section, for resubmission to CEDPA.

Finally, discussions had been held on an earlier trip to develop a family planning/primary health care proposal for the Selingue area of Mali for submission for private seed money funds. However, Mrs. Traore selected to develop this idea for the Population Project proposal development workshop held in Bamako in July, i.e. to develop the idea into a larger, family planning-focused project.

*See Section V-D of this report for information on this manual.

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B. Technical Assistance Trip, Senegal, June 4 - June 8

Background to the Visit

CEDPA/Senegal, formed in 1984, is a membership association of the more than 30 Senegalese alumnae of CEDPA training programs. The four member unit which serves as the steering committee has undertaken the following activities:

- o participation in the organization and delivery of a nutrition management workshop focused on child survival and family planning interventions and the design, implementation and management of MCH projects;
- o technical assistance to Training of Trainers workshops and Women in Management programs in Zaire and Madagascar;
- o development and implementation of a baseline survey as the initial activity of a CEDPA-funded seed money project to improve health services and outreach from the Yenne Health Centre (Appendix 3 is the profile of this subgrant);
- o participation in the delivery of a workshop in French entitled "Women in the Management of Community-Based Services" at Forum '85;.
- o design and delivery of management training for female social workers employed by ENDA (Environment and Development Action in the Third World);
- o assistance, at the request of the Ministry of Social Development, to a commission established to mobilize resources in response to floods in the Fleuve Region (1983).

In 1985 a conflict arose between CEDPA/Senegal and the National Association of Senegalese Women (FAFS), which had requested that CEDPA/Senegal become a member organization. Unit members however, felt that maximum autonomy was critical to their institutional identity and development, and decided not to join. The repercussions of this decision included tensions with donors, including USAID, who wished to support both CEDPA/Senegal and FAFS. USAID requested that CEDPA/Washington discontinue support to CEDPA/Senegal until the conflict with FAFS was settled.

In April 1986, CEDPA Senegal negotiated a relationship with FAFS in which the Unit became a member of the national association but was to retain full control over its own programmatic decisions. As a result of this reconciliation, the CEDPA visit to Senegal was approved and undertaken.

Summary of Visit

The objectives of the trip were:

- o to confirm with CEDPA/Senegal and with USAID conditions of the agreement established between CEDPA/Senegal and FAFS;
- o to learn from the Unit the progress of the Yenne Project and the financial situations of the Unit and the Yenne Project;
- o to work with the Unit on a new work plan and budget;

- o to develop with the Unit ideas for additional seed money projects; and
- o as a CEDPA Population Project activity, to confirm with AID/Dakar and with the Unit that CEDPA/Senegal members might attend the Francophone project development workshop held in Bamako in July.

Several meetings were held with Mrs. Marie-Therese M'Boye Sy, President, and Mrs. Fatoumata Tandiag, Secretary General, CEDPA/Senegal. During these meetings, CEDPA/Senegal explained the current situation with FAFS and the conditions surrounding the agreement with them. Additionally, details on the status of funds for the Unit and the Yenne Project were discussed. The Yenne baseline survey was recently completed. The start-up date of the Yenne Project is dependent on certain conditions which must be met for the Ministry of Social Development and, especially the Ministry of Health, both of which must approve the project before it can be implemented. Mrs. M'Boye Sy estimated that the earliest possible time to meet with the Ministry of Health would be August enabling optimistic start-up of the Yenne Project in September or October.

It was also learned that other small projects proposed by the Unit for CEDPA funding, including Guet-Ndar, would be sent to CEDPA shortly.

A new work plan and budget were developed for Ms. Carp to take back to Washington for funding consideration.

A meeting was also held with Mrs. Carol Tyson, Deputy Director, USAID/Dakar, to discuss the history of the conflict with FAFS and AID's assessment of the current relationship. AID/Dakar gave its concurrence for CEDPA to start-up collaboration and support for CEDPA/Senegal, including inviting Unit members to the July proposal development workshop in Bamako.

C. Visit to Madagascar, July 15-20, 1986

Background to Visit

Following the FHI-financed Women in Management workshop held in Madagascar in August, 1985, plans were made between CEDPA, Malagache alumnae and one of the CEDPA staff trainers to develop a Follow-Up Unit. The post-workshop activities planned for Malagache interested in forming a Follow-Up Unit were:

- o contact with the alumnae of the in-country training program to encourage them to continue using the skills developed during the workshop;
- o technical assistance visits with the alumnae related to these skills;
- o assistance to the alumnae in identifying potential resources for their programs.

Alumnae were left with a small sum of money (\$400) to cover transportation and per diem costs related to the above activities. With this money, as well as additional financial participation by FISA,* alumnae conducted:

- o visits with in-country alumnae;

*FISA is the Malagash family planning agency which collaborated on the WIM.

- o visits with the supervisors of in-country alumnae to see if the alumnae were using new skills;
- o some investigation of possible sources of funds for projects designed during the in-country workshop;
- o selection of the three projects they judged most appropriate to be funded under CEDPA's PVO Small Grants Program.

Alumnae of the Washington-based training, who served as the training team, agreed to develop a proposal for CEDPA FHI/CA funding of a Follow-Up Unit. A visit from a CEDPA staff member in the Spring was planned in order to finalize with the Malagache their plans for establishing a Follow-Up Unit.

In April 1986, CEDPA staff members met in Washington, DC with Mr. Sam Rea of the Madagascar AID mission to discuss future CEDPA activities in the country. At this meeting, it was learned that the current population strategy for Madagascar, which was agreed upon between the Government and outlined in the CDSS, does not envision a role for CEDPA at this time.

Prior to this meeting, a letter had been received in January from FISA requesting that Mr. Manitra Andriamasinoro, FISA IEC Officer, attend CEDPA's English-language Supervision and Evaluation workshop to be held in Washington in August. It was not clear to CEDPA staff members attending the meeting with Mr. Rea that AID's halt on CEDPA activities in Madagascar also included CEDPA funding of participation of Malagache in Washington, DC training workshops. Unsuccessful attempts were made by CEDPA to find outside funding for Mr. Andriamasinoro's participation. It was decided, therefore, that FHI funds which are targeted to fund fellowships for participants, might be made available.

However, in seeking the concurrence of the AID Mission for the use of FHI funds, CEDPA received a cable from the Mission stating that, because of AID's population strategy for the country, CEDPA is to "discontinue training of Malagache until the current population strategy is appraised in 18-24 months when CEDPA's role will be reconsidered." The cable also stated that the Mission agreed to CEDPA's inviting "one Malagasy to their annual meeting if central funds can be found," and also agreed that a visit could be made to Madagascar "to explain why CEDPA will retire from active training of Malagasy at least over the next 2 years." CEDPA was confused by the cable's reference to an annual meeting, as CEDPA does not have an annual meeting. CEDPA immediately requested clarification from the mission, but did not receive a response before Ms. Carp left for Madagascar.

Summary of Visit

The objectives of the visit to Madagascar were to:

- o explain to alumnae from FISA interested in forming a Follow-Up Unit why this was no longer possible under the current FHI Agreement;
- o attempt to clarify if funding for Mr. Andriamasinoro's participation could be made available;
- o follow-up on and evaluate informally the earlier CEDPA training of Malagache.

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Carol Carp arrived in Antananarivo July 15. Many discussions were held with Mrs. Bodo Ramambao, Executive Director, FISA, Mr. Manitra Andriamasinoro, IEC Officer, FISA and other FISA staff members. Major topics were the AID decision regarding temporary discontinuation of CEDPA work in Madagascar and the related restriction in funding Mr. Andriamasinoro's participation in the CEDPA Supervision and Evaluation workshop. FISA is extremely disappointed about the discontinuation of CEDPA activities in the country.

The FISA members also brought Ms. Carp up-to-date on population activities in the country and on FISA activities. Of particular importance was the recent statement given by the President of Madagascar to the journal Nouvelle Observateur concerning his position on family planning. For the first time he stated publicly that, although he does not support abortion and any attempts to limit family size, he does support birth spacing.

It was learned that, as a result of CEDPA's WIM workshop in Madagascar in August 1985, two of the participants introduced delivery of family planning services into their clinics, with contraceptives and certain other materials provided by FISA. A third participant became a member of FISA.

A meeting was held with Richard Macken, AID/Antananarivo, in the absence of Mr. Sam Rea, concerning CEDPA's involvement in Madagascar and the recent exchange of cables relating to the proposed participation of the FISA Officer at CEDPA's Supervision and Evaluation workshop. Mr. Macken was not able to provide new information other than that found in the AID cable to CEDPA.

A meeting was also held with the Assistant to the Representative of UNFPA, Gisele Ratsimba. UNFPA is a major funder of participants to CEDPA Washington training workshops.

Several meetings were held with participants from the in-country WIM in Madagascar to evaluate informally with them the workshop and to learn about the participants' current work. This included a day spent with a participant who works in an MCH/family planning clinic in Antsirabe, a town about four hours outside of the capital. In general, participants felt the training to be extremely useful, that the period of the workshop was not long enough and that the development of proposals' section brought them the most new and useful information.

A meeting was also held with the President of FISA, Mr. Bebe Fidaly to inform him of AID's decisions. Mr. Fidaly felt that CEDPA should try to assist in finding a non-AID source of funding for training participants until CEDPA can again work in Madagascar.

A one and a half hour focus group session was conducted with four Malagache alumnae of CEDPA's French-speaking WIM 17, September-October, 1985. The four alumnae were:

Clarisse Andriamboavonjy

Chef du Service de la Promotion de
la Femme, Ministere de la
Population, Antananarivo

Lucette Philippon

Teacher at l'Ecole de'Education de
Base Plateau, Fianarantsoa

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Dr. Jeannette Rabeharisoa

Medecin Ajointe au Chef de Service de la Sante de la Mere et de l'Enfant, Antananarivo

Dr. Monique Ravelonanosy

Medecin, Chef de Sante Maternelle et Infantile de Tsaralalana, Ministere de la Sante Publique, Antananarivo.

Dr. Rabeharisoa has been working as head of the MCH Program in the Ministry of Population for the past two years. This is a FNUAP-funded project which will extend to all of Madagascar by the end of the project. She described her responsibilities as liaison between FNUAP and the Ministry, training, administration, evaluation, supervision and leading groups. She also represents the Ministry to the population and the Ministry to other organizations. She feels her strength is in administrative tasks, but feels she is lacking family planning technical information as well as experience in project evaluation, which is one of her responsibilities, but about which she has limited knowledge.

When asked about the Washington training, she said "everything was useful." She said that she felt "psychologically freer" at this training than at other trainings she has attended outside of Madagascar because she was among women only, which she said was a great "moral support." She stressed particularly that at the end of the training, she "felt more sure" of herself. She also stressed the importance of being able to benefit from the experiences of the other women through direct contact with them.

In regard to her career plans, she stated that she had no desire to leave government service before retirement, even if she would be offered another position. She feels pleased that in the course of her career, her responsibilities have increased. She would like, within her current position, to be able to introduce family planning.

Dr. Raeharisoa was at one time offered a six-month consultancy with UNESCO, but she refused it because it would have meant having to leave her family and live elsewhere for that period of time. She definitely does not want to leave Madagascar.

Clarisse Andriamboavonjy, Chef du Service for the Promotion of Women, Ministry of Population, Direction for the Situation of Women and Children. Mrs. Andriamboavonjy's work is directed toward disadvantaged women, who are organized in pre-cooperative structures and who are supported to develop income generating activities. Her "Service" works with other Ministries to upgrade the situation of women. This includes changing official regulations relating to women's legal status. They also work closely with a number of NGO's in the country. Since returning from the CEDPA WIM, she began a project with the World Bank which focuses on developing energy-saving stoves for women. As part of this work, she conducted in one of the poorer sections of Antananarivo a survey which was directed toward finding another energy source to substitute for the wood charcoal primarily used by Malagache women. This project also works with technicians from the University in developing both the stoves and their energy source.

She stated that the WIM training was particularly helpful to her in developing and implementing the survey, particularly the courses on "group dynamics." She works not only with Ministry employees, but with UN volunteers and members of other UN organizations such as UNICEF and with staff of NGO's.

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She said that if offered a job with an international organization, she would accept it.

Lucette Philippson, Teacher at "L'Ecole d'Education de Base Plateau", primary school in Fiananrantsoa, about 400 kilometers from Antananarivo. By coincidence, Mrs. Philippson was in the capital at this time.

Mrs. Philippson said that while the CEDPA training has not had a direct or obvious effect on her work as a teacher, since returning from the training, she has created an association of young women which is directed towards improving the situation of young women in her town. She is the President. The association currently has 40 members and works with volunteers including doctors, teachers, and midwives. Beginning in August they will begin to teach sewing and home economics to women, both to those in the association and to other young women who are interested. They also teach, in conjunction with the activities aiming to increase income, health education and family planning. The midwives who provide the education are workers with FISA. They teach how to prepare more nutritional but inexpensive meals using local foods. (Mrs. Philippson's project at the CEDPA WIM was a nutrition project which focused on food production activities.) They require a small fee from all members. They are currently working with women in the town, but hope to expand to work with village women when the association has more funds. They are planning to approach donors in requesting additional funds.

The association recently had a local fund raising event and grossed 50,000 FM. She said that the CEDPA training was directly catalytic in the development of this organization. She also said that the training in Washington was particularly helpful to her responsibilities as President.

The areas where Mrs. Philippson would like to have more training are technical issues in agriculture and nutrition. Mrs. Philippson likes being a teacher and has no other career goals.

Dr. Monique Ravelonanosy, head physician at the MCH Center in Antananarivo. One of Dr. Ravelonanosy's primary tasks is educating the women coming to the Center. She prepares the health education materials, works on methodology and presents the materials. She felt that the training sessions on "group dynamics" were particularly useful to her in her work, particularly in her role as an educator. She has been working at the Center for 11 years and said that preceding the CEDPA training she was really in need of new ideas and new impetus. Since the training, she has improved her method of teaching.

She also said that "human management" sessions were particularly helpful as well as all aspects of the training which touched on relationships between herself and staff, and herself and clients. She has brought these ideas to her staff and has noticed a "change in attitude of staff toward the clients -- they are more open." The attitudes of the physicians

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working under her have particularly improved. She said least helpful to her in the training were the sessions on family planning and primary health care, as she already knew the information presented.

Dr. Ravelonanosy noted that she feels since the training that her own superiors "give more attention to what she says." She says this is a reinforcing process as she, on the one hand, has more self-confidence since the training, which others notice, and they therefore give more weight to what she says, which then also reinforces her self-confidence.

Before Dr. Ravelonanosy went to Washington, she had developed two ideas for projects connected with her work. However, the projects were "stagnating." After the CEDPA training, she revised the projects, updated them and put them into action. The two projects are a nutrition project and an integrated project she is initiating with FISA which is family planning and income generation activities directed toward both men and women. She said that in particular the motivation she got from the training helped her to revitalize these projects.

She feels a need for more training in supervision and in evaluation. She emphasized that the opportunity to learn about the work of other women, from them directly, was as important a learning experience as the training courses.

In terms of her career, she stated that her only wish is to remain working in the field of MCH no matter which organization, although she feels it is better to continue with the same organization rather frequently changing. She said she would love to get a one-two year consultancy in another country. This would enable her to increase her own knowledge and expand her perspective, and she would then put this information to use in her own country upon her return. She said that if she got a job overseas, she would bring her husband and her five children with her. Her husband would then have to look for work for himself.

In the final part of the discussion, all four women agreed that evaluation was the area for which they felt the most need. They said that in Madagascar everyone thinks that evaluation is something one does at project end, rather than planning in and for the evaluation from the beginning of the project.

A second area of general agreement was that all four women began new projects after returning from the CEDPA training. They explained that there were two reasons for this: one, that their own supervisors and others responsible for determining their scope of work have more respect for them and their abilities, since attending a training overseas is regarded very highly in Madagascar. Secondly, they themselves gained much more confidence as well as improvement of skills, providing the necessary catalyst to enable them to start new activities.

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D. Technical Assistance Visit, Zaire, August 29 - September 12, 1986

Background to Visit

Zairian participation in CEDPA Washington WIM programs began in 1981. Twenty-three women have attended these workshops. In 1985, an in-country WIM program was held for 22 women managers from nine regions of Zaire. Conducted in collaboration with the Projet des Services des Naissances Desirables (PSND), the workshop led to 22 proposals for community-based projects. Zairian alumnae formed a planning and coordinating committee which, in November 1985, presented to CEDPA a detailed proposal for an in-country alumnae association which would include all CEDPA alumnae. In May 1986, CEDPA funded this organization for one year. (For more information, see the Project Profile in Appendix 3)

Summary of Visit

The objectives of this trip by the FHI Project Coordinator were the following:

- o To assess progress of the Unit and assist in any problems;
- o To refine with Unit members several project proposals they had submitted to CEDPA for private, seed money funding;
- o To assist the Unit in seeking other sources of funds and in understanding the process of seeking resource assistance;
- o An additional objective was to study the feasibility of a proposal which was developed by one of the Unit members and which is being considered for funding under CEDPA's Population Project.

The majority of the trip was spent in morning and afternoon working sessions with the Unit Coordinator, Tshwikakwa Kongolo, and other members who were available during the period of the visit. In regard to assisting the Unit with problems, it was determined that the original budget required revision, so a revised budget was worked out for submission to CEDPA. Other problems which were discussed included difficulties in the process of registering the Unit, excessive work and home demands on Unit members which limit time available for voluntary work, and the need for more technical assistance in proposal writing.

Several working sessions were centered around the process of seeking funding. Although the Unit had already approached other donors and had submitted project proposals to several of them, their understanding of the process is limited. The following were undertaken:

- o a document was developed, to be printed up in the form of a brochure, which gives a brief description of the organization, objectives, experience, capability, etc. Particular attention was given to highlighting qualifications of members.
- o The process of seeking funds was discussed in detail -- how to approach donors, write letter of inquiry, what to look for, etc.

- o CEDPA's Population Project provides an English handout for its regional workshops entitled "Examples of agencies from which your agency might request additional support or continuation funding support after CEDPA." This document was translated and discussed, particularly aspects such as the specific requirements of each donor, whether to send a letter or a complete proposal, to whom, where, etc. The Unit will follow-up by sending proposals and/or letters of inquiry to these organizations.

- o Two proposals and one concept paper were developed to the stage where they can be submitted to CEDPA and to other organizations for funding. One proposal focuses on motivating males in Kinshasa, and the other is an integrated income generation/family planning project for 13-18 year old girls. The concept paper describes a CBD project in an under-served area of Kinshasa. All three documents have been submitted both to AID/Zaire and to CEDPA for funding consideration.

Meetings Held

AID

- o PSND

Dr. Peter Knebel, Technical Advisor
Mrs. Chirwisa Chirhamolikwa, Project Director

- o USAID/Kinshasa

Gael Murphy, Population Officer

- o SANRU

Dr Frank Baer

- o UNICEF

Phyllis Gestrin, Administrator of Nutrition and Women in Development Projects

- o American ORT Federation

Laurie Emrich, Health Coordinator

- o CEFD/Zaire

Tshikwakwa Kongolo, CEFD/Director
Zawadi Mwange
Kazadi Salwe (AZBEF Nurse-Supervisor for Family Planning Activities)

- o AZBEF

Mr. Mutumbi, Administrator

- o PCC, Washington, DC

Susan Rich

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o Population Planning Associates, New York
Theo Van Der Does

o UNTZA (National Labor Union)

Mr. Walilu, Director of Administration and Personnel

Appendix 1

FHI/CA Approved Budget Changes

BUDGET CATEGORY	APPROVED BUDGET	REVISED AMENDMENT	REVISED BUDGET
	ORIGINAL AGREEMENT 1981	BUDGET AUGUST 1983	DECEMBER 1985
Personnel	129,200	157,254	146,375
Fringe Benefits	29,800	37,374	47,168
Consultants	20,000	20,000	18,500
Travel & Transportation/ Per Diem	59,116	71,846	120,000
In-Country Workshops	120,000	160,000	80,000
Other Direct Costs	30,000	37,000	24,197
Fellowships	24,000	60,600	56,000
Indirect Costs	82,700	126,742	186,576
Follow-Up Units	<u> --</u>	<u>24,000</u>	<u>16,000</u>
T O T A L:	494,816	694,816	694,816

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Appendix 2

SUMMARY OF FUNDS EXPENDED UNDER FHI COOPERATIVE AGREEMENT (8/31/81 - 9/30/86)

(Note: 9/30/86 Figures are Neither Complete nor Final)

BUDGET CATEGORY	APPROVED BUDGET (as revised 12/30/85)	EXPENDED AS OF 9/30/86
Salaries & Wages	\$146,375.00	\$135,217.78
Fringe Benefits	47,168.00	43,777.01
Consultants	18,500.00	16,231.10
Travel & Per Diem	120,000.00	133,874.15
In-Country Workshops	80,000.00	76,238.62
Other Direct Costs	24,197.00	22,431.59
Fellowships	56,000.00	56,792.50
Follow-Up Units	<u>16,000.00</u>	<u>10,379.76</u>
TOTAL DIRECT COSTS	\$508,240.00	\$494,942.51
INDIRECT COSTS	<u>186,576.00</u>	<u>181,975.47</u>
T O T A L	\$694,816.00	\$676,917.98

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PROJECT PROFILES

World Wide Women in Management Projects

COUNTRY: ZAIRE

PROJECT: ZAIRE FOLLOW-UP UNIT 1986-87

DATES: May 1986 - May 1987

ORGANIZATION: CEDPA Zaire Follow-Up Unit/CEFD Centre d'Encadrement des Femmes en Matière de Développement

Zairian participation in CEDPA Washington WIM programs began in 1981, and there are currently 23 alumnae of these programs. In 1985, an in-country WIM program was held for 22 women managers from nine regions of Zaire. Conducted in collaboration with the Projet des Services des Naissances Désirables, the workshop led to 22 proposals for community-based projects. Zairian alumnae formed a planning and coordinating committee which presented to CEDPA a detailed proposal for an in-country alumnae association which will include all CEDPA alumnae.

STRATEGY:

This subgrant, which provides one year of funding, will enable Zairian alumnae to become established as an institution focused on enabling women to become active participants in their own development. CEFD's workplan for 1986-87 includes:

- To deliver technical assistance to in-country WIM alumnae as they plan integrated projects in family planning, primary health, and community development;
- To assist alumnae in approaching donor agencies for project support; and
- To monitor, assist and evaluate project activities.

BENEFICIARIES:

Immediate beneficiaries of Zaire Unit work 1986-87 will be the women who strengthen their skills to develop and implement projects that improve their communities. Ultimate beneficiaries will be the women, men and children who participate in community-level development projects.

(Profile prepared April 1, 1986)



PROJECT PROFILES

World Wide Women in Management Projects

COUNTRY: SENEGAL

PROJECT: PROJECT OF HEALTH EDUCATION AND FAMILY PLANNING OUTREACH THROUGH THE YENNE HEALTH CENTER

DATES: March 20, 1985 - March 19, 1986

ORGANIZATION: CEDPA - Senegal Unit

In May 1983 CEDPA and Senegalese alumnae conducted the first Women in Management program in Senegal. Following the workshop, members of the training team established CEDPA/Senegal, an association of all Senegalese alumnae, coordinated by a steering committee which is responsible for the Unit's functioning.

STRATEGY:

Situated approximately 25 kilometers from the nearest maternal/child health clinic (the Rufisque clinic), the community of Yenne, with 15,000 inhabitants, has extremely limited access to health care. Not only is it difficult for community members to travel to Rufisque for health and family planning services, but outreach education from the clinic to Yenne is nonexistent. In response to a request made by a group of concerned women in Yenne, a CEDPA in-country alumna was assisted by the Senegal Unit to establish a health center in connection with the Yenne dispensary, for education and service delivery at the community level.

The Yenne project strategy includes equipping the health center to provide gynecological/obstetrical services, with contraceptives to be supplied by the Rufisque clinic. Family planning promotion and outreach education in basic health care, nutrition and sanitation will be organized by paramedical health auxiliaries. These women are to receive additional training in health care, IEC, family planning and infant delivery techniques through the project. It is hoped that through the project a child health and nutrition monitoring program will be initiated to include regular weighing, nutrition demonstrations and vaccination.

RESULTS/CURRENT STATUS:

Initiation of the Yenne project was delayed while the Senegal Unit awaited official government sanction, granted in January 1986. Immediately following the official approval, the Unit began an extensive baseline survey of the area to be covered by the Yenne project.

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Initial beneficiaries will be an estimated 850 women and children who receive improved health care and family planning services. Over time the health center will reach additional clients in the area which includes approximately 3,800 women of child bearing age.

(Updated April 1, 1986)



PROJECT PROFILES

World Wide Women in Management Projects

COUNTRY: MALI

PROJECT: KATIBOUGOU FAMILY HEALTH PROJECT

DATES: May 9, 1985 - May 8, 1986; three-month extension approved March 1986 to continue project until August 8, 1986

ORGANIZATION: Women's Committee for Development and Population Activities (CFDAP/Mali)

The CEDPA Mali Follow-Up Unit, an independent working group within the Training Division of the Ministry of Public Health and Social Affairs, is known as the Women's Committee for Development and Population Activities (CFDAP/Mali). CFDAP/Mali assisted alumna Fatoumata Traore, a midwife at the Katibougou maternity, in the development of the Katibougou Family Health Project.

STRATEGY:

The Katibougou Family Health Project addresses the problem of high maternal and infant mortality in a poor rural area in Mali. The rate of maternal morbidity due to high risk pregnancies is 1% for those women giving birth at the Katibougou maternity, as compared to 10% in the surrounding villages where deliveries are unsupervised or supervised by traditional birth attendants (TBAs). More than 50% of all women attending the Katibougou maternity suffer from malnutrition.

The project strategy includes provision of family planning services, nutrition and primary health care education, and a system of high risk pregnancy referral to the Katibougou maternity. The training and supervision of village health teams are key elements of the strategy. The project area covers the village of Katibougou about 70 km. from Bamako, as well as six nearby rural villages.

RESULTS/CURRENT STATUS:

As of May 9, 1986, three training programs of three weeks each have been organized at the MCH maternity at Katibougou. The training, focused on family planning and nutrition, involved 12 TBAs and 12 outreach workers. An in-service training program of four weeks duration has been conducted at the MCH maternity at Katibougou in family planning and nutrition for 5 health matrons working at the Katibougou maternity and Mafeya rural maternity.

At least one IEC session in family planning and nutrition per month are conducted by the village health teams in each village in the project area plus

Katibougou town, attended by a total population of 1000 women of childbearing age. The project director and health matrons make monthly supervision and technical assistance visits to each village in the project area to supplement the training of the village health teams.

By May 9, 1986 there were a total of 86 new family planning acceptors motivated by the project, of which 47 were new acceptors in the surrounding villages and 39 live in Katibougou town.

Child morbidity due to measles, diarrheal diseases, abrupt weaning and malnutrition had been reduced from 40% to 30% through a measles vaccination campaign and child nutrition educational sessions with mothers.

(Updated June 3, 1986)

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PROJECT PROFILES

World Wide Women in Management Projects

COUNTRY: MALI

PROJECT: TECHNICAL ASSISTANCE TO COMMUNITY FAMILY HEALTH PROJECTS

DATES: Three Months Beginning April 1, 1986

ORGANIZATION: Women's Committee for Development and Population Activities
(CFDAP/Mali)

The CEDPA Mali Follow-Up Unit, an independent working group within the Training Division of the Ministry of Health, is known as the Women's Committee for Development and Population Activities (CFDAP/Mali). The group collaborated with CEDPA in an in-country Women in Management workshop in May 1982 and has continued since then to provide follow-up technical assistance to the workshop participants.

STRATEGY:

Seed money to CFDAP/Mali will enable the group to undertake the following:

- To monitor and provide technical assistance to the Katibougou seed money project, particularly in the design of an expanded family planning program;
- To develop a plan for CFDAP/Mali functioning on an annual basis; and
- To provide advice and assistance on the development of new seed money projects.

BENEFICIARIES:

The Mali Follow-Up Unit will benefit as an institution from seed money support which will enable the Unit to become a stronger organization. Other women will be assisted in strengthening program development skills, and any resulting projects will have as beneficiaries a wide range and number of women in Mali.

(Profile prepared April 1, 1986)

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JUN 3 1986

Min. H/MH.
//) MINISTRE DE LA SANTE PUBLIQUE
ET DES AFFAIRES SOCIALES -

REPUBLIQUE DU MALI
Un Peuple - Un But - Une Foi

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DIRECTION NATIONALE DE LA FAMILIARISATION
ET DE LA FORMATION SANITAIRE ET SOCIALE

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COMITE PEULHIER POUR LE DEVELOPPEMENT ET
LES ACTIVITES EN MATIERE DE POPULATION

CEPDI/ MALI.-

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-o- RAPPORT D'EVALUATION -

DU

PROJET DE SANTE FAMILIALE

KATIBOUSSU.-

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Best Available Document

MAI 1986.

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Le Projet de Santé Familiale CEDEA créé en Avril 1985 (à Bamako) a effectivement démarré le 9 Mai 1985 à la maternité FMI de Katibougou.

La zone couverte par ce projet comprend 6 Villages situés dans un rayon de 25 Km de la maternité FMI de Katibougou.

La population totale est d'environ 3000 hots dont 1400 Femmes.

Son but est de réduire en 2 ans d'existence de 10% les accidents dus aux grossesses non surveillées et rapprochées et aux mauvaises conditions nutritionnelles.

Pour y parvenir le projet a conçu la 1ère année une série de réalisations spécifiques :

1°/ - Etude du milieu et sensibilisation de la population cible.

2°/ - Amélioration des structures socio sanitaires de la zone d'intervention (y compris la maternité FMI de Katibougou)

3°/ - Formation d'équipes de Santé Villageoise

Notons que la situation de référence prise en compte dans le présent rapport est celle de l'année 1984.

Les données qui se rapportent à cette date ne sont que de simples ordres de grandeurs et ne sauraient mettre suffisamment en relief l'impact du projet dans les 6 Villages.

De sa création à ce jour les prestations des services de la maternité FMI englobent les populations des 6 Villages de la zone du projet, et les villages hors zone projet ainsi qu'une partie de Koulikoro -

Le présent rapport d'évaluation qui se veut modeste et d'essai (il est le premier du genre dans la zone) ne saurait satisfaire tous les besoins de ceux qui s'intéressent à la vie du projet.

Il est, à ce titre une première réponse aux questions suivantes :

- où en était les villages avant le projet ?
- où en sont - ils aujourd'hui ?
- Que faire pour corriger, améliorer les résultats obtenus ?
- Est-ce que le projet a atteint ses objectifs en 1 an d'existence ?