

The CHANGES Programme:

Quarterly Report: January - March 2002

The CHANGES
PROGRAMME

Basic Education and Policy Support (BEPS) Activity

CREATIVE ASSOCIATES INTERNATIONAL²

In collaboration with

CARE, THE GEORGE WASHINGTON UNIVERSITY, AND GROUNDWORK



United States Agency for International Development
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Quarterly Report: January – March 2002

Prepared by:

Edward Graybill, Chief of Party
CHANGES Programme
Zambia

Prepared for:

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I. SUMMARY

At the end of the present quarter, the CHANGES programme completed the first full year of operations. After experiencing the usual relatively lengthy start-up period, the programme is now fully functional, moving forward, and in most cases achieving its targets and deliverables on schedule. (*See Appendix A for the CHANGES programme description and deliverables.*)

The activities of this reporting period constituted somewhat of a watershed for the **Community Sensitization and Mobilization Campaign (CSMC)** in Southern Province (SP). Early in the quarter, the research and verification process was completed and community mobilizers were trained in Kalomo District. In the meantime, community sensitization regarding the development of community action plans was conducted in Kazungula District and, as a result, 11 action plans were developed and submitted for consideration for funding from the CHANGES small grants mechanism. Near the end of the quarter, at the request of USAID, an external consultant went to SP to review progress and to work with the CSMC team and their provincial MOE (Ministry of Education) counterparts on forward planning. During the course of this consultancy, it was discovered that, due to some confusion, several seemingly minor deviations from the original intent and design of the CSMC had been made that have had significant repercussions on the overall focus and scope of the campaign. As a result, the programme was refocused to more clearly reflect its original intent and design, and a new two-year work plan that will take the programme to the end of the current funding cycle was developed on that basis. It is anticipated that, as a result of these modifications, the CSMC will be able to more effectively and efficiently achieve its aims. Further details on these developments are included in the CSMC section of this report as well as in *Appendix B*.

Much of the work done in the **School Health and Nutrition (SHN)** component of the CHANGES programme this quarter centered on activities to follow-up the baseline survey conducted last November, including visiting all 20 intervention schools to track pupils' compliance in taking the iron and Vitamin A supplements. Beyond this, staff from 17 Rural Health Centers were trained by the provincial SHN team so that the centers can better support the SHN programme. The training addressed topics and issues such as the use of school health cards, pre-payment schemes for pupils, the formation of school health committees, supervision of drug administration by teachers, and a general overview of the SHN programme. Also during this reporting period, the training manual for teachers in administering the cognitive assessment instrument (CAI) was completed, development of the general SHN teacher training manual was started, planning for the health education management information system (EMIS) was conducted, and planning for a re-survey of approximately 300 pupils from the first group of intervention schools was finalized. Further, CHANGES staff collaborated with the World Food Programme (WFP), UNICEF, and the MOE to begin planning and designing a school feeding programme to complement other SHN inputs. Finally, considerable strides were made in the Information, Education, and Communication (IEC) campaign: two SHN brochures were completed, a SHN poster was completed, the first issue of the School Health News magazine was readied for printing, and progress was made on producing a video to document the work of the popular drama troupes in communities in Eastern Province (EP).

Unfortunately, the implementation of specific **HIV/AIDS** initiatives in SP and EP has not yet gained significant traction. Several training workshops that were planned in EP during this reporting period were postponed due to the unavailability of funds from MOE/HQ. However, in EP drama troupes were organized to undertake community sensitization for HIV/AIDS and, to date, this work has been done in eight school catchment areas in Chipata District, and plans are in place to complete this sensitization in all 20 intervention school catchment areas during the next quarter. Additionally, planning has been completed to train 33 teachers and 33 headmasters in HIV/AIDS related issues during the next reporting period in EP and to conduct a HIV/AIDS situation analysis in 50 EP schools.

Although no grants have yet been made through the **Small Grants Mechanism**, significant groundwork has been laid in this regard and grants will begin to be allocated in earnest next quarter, especially in EP. In EP, 40 teachers from Chipata District and 20 teachers from Chama District were trained in proposal writing and financial management. And, so far in EP, 41 community and school action plans and proposals have been received and are being reviewed by the district small grants steering committees. In SP, sensitization of community members, PTA leaders, and teachers regarding the small grants has been completed in Kazungula District and, to date, 11 community and school action plans have been developed and submitted for review. The pace of all these activities relating to small grants is expected to accelerate dramatically as the programme moves into its second year of operations.

Finally, with regard to **Programme Administration**, the most noteworthy development during this reporting period has been the hiring of more local contract staff in the field offices. In SP, an Assistant Coordinator and Field Supervisor/Training Specialist have been hired and in EP a SHN Technical Officer has been hired and a Training Officer will be brought on board in the near future. In both provinces an Administrative Assistant has been hired as well as an additional driver. The addition of these staff has considerably strengthened the capacity of the field teams and is enabling the Coordinators to step back somewhat from implementation so that they can focus more on management and programme oversight. Also, during this reporting period the first USAID-initiated Implementation Advisory Committee (IAC) meeting was convened. The committee includes senior staff from all USAID education programmes and their MOE counterparts, and is tasked to review progress and to facilitate collaboration and integration of all USAID education programmes. The committee will meet semi-annually.

II. ACCOMPLISHMENTS/ACHIEVEMENTS DURING THE QUARTER

In this section, the progress and achievements attained during the January-March 2002 quarter will be highlighted for both of the major component areas of the CHANGES programme and their corresponding USAID Intermediate Results (IRs)—the Community Sensitization and Mobilization Campaign (CSMC) and School Health and Nutrition (SHN)—as well as for the two cross-cutting components: HIV/AIDS and the Small Grants Mechanism.

A. Community Sensitization and Mobilization Campaign (CSMC) (IR 2.1: Improved Quality of Learning Environment in Targeted Areas)

1. Progress on Indicators

Priorities/Category	Indicator	Means of Verification	Target	Actual as of 03/02
1. Participation of girls & other vulnerable children in basic education	Increase in % of enrolment & retention rate of girls & other vulnerable children in basic education	Yearly school records <i>(Data collected from five selected schools in each district)</i>	Enrolment: 22% Retention: 50%	Enrolment Baseline: 16% increase from 2000 to 2001 Retention Baseline: N/A
Indicator 1. The Enrolment Baseline of 16% increase in girls' enrolment from 2000 to 2001 was obtained from Provincial records. For that same period the enrolment increase was 22% for boys. The target for girls' enrolment has been set at 22% in an effort to see girls' enrolment increased to be at par with boys' enrolment. Retention rate target has been set at 50%. Although no baseline information is available for this indicator, it was felt that the USAID target of 87% would be more attainable if the programme was working in urban areas. The high number of rural schools selected as research sites has influenced CSMC to set the retention target at a lower rate.				
2. Sensitization & mobilization	Number of schools, communities, local leaders, PTAs and pupils sensitized and mobilized (to take action) concerning HIV/AIDS and girls'/vulnerable children's education	Zonal-level Community Facilitator Action Plans and Field Reports	168,600	818
Indicator 2. There are 843 schools in the Southern Province. It is anticipated at least 200 individuals within each school catchment area will be sensitized and mobilized as a result of the CSMC programme.				
3. Gender & Equity	Number of provincial/district and zonal officials, and community-based animators sensitized & trained in gender & equity issues in education	Workshop attendance figures	275	74

Indicator 3. There will be approximately 25 participants from the zonal-level in each district trained as Zonal-level Community Facilitators. Gender and equity sensitization will be a part of that training curriculum. Therefore, a target total of 275 has been set as all 11 districts in Southern Province are reached.

4. Action Research	Number of communities participating in action research	Researchers' Field Reports	330	85
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Indicator 4. Six villages will be selected in each of the five selected school catchment areas in district. This is 30 villages per district for a total of 330 villages in all 11 districts.

5. Research & Verification	Number of community members present to verify research	Head-count by Researchers	22,000	818
	Number of TFD performances for verification and research	Researchers' Field Reports	110	10

Indicator 5. There are a total of 55 school catchment area research sites. Two drama presentations will take place in each catchment area to verify research findings, for a total of 110 drama performance. It is anticipated that at least 200 community members will attend each of the performances.

6. Participatory Monitoring	Number of community activities (as mentioned in action plan) monitored	Monitoring plans & reports	843	0
	Number of communities monitoring their own progress	Monitoring plans & reports	1,686	est.10

Indicator 6. With 843 school catchment areas in the Southern Province, it is anticipated that at least two communities in each catchment area will have action plans that they will be self-monitoring. At least 50% of those community-based action plans will be monitored by Zonal-level Community Facilitation teams, District officials, and/or the CSMC Core Team members.

7. Life Skills	Number of Zonal-level action plans including training on the use Life Skills modules	Zonal-level action plans	138	0
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Indicator 7. 275 Zonal-level action plans are expected to be developed. Half of those are targeted to include training on the use of Life Skills modules.

8. Information, Education, and Communication (IEC) Interventions	of variety of communication media focused in promoting girls' and other vulnerable children's education and in sensitizing community members (including teachers, children) about HIV/AIDS proliferation and its mitigation	Actual media products	11	0
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Indicator 8. The target of 11 media products is the total of 2 radio programmes for HIV/AIDS, 2 radio programmes for girls' education, 4 supplementary readers on issues of HIV/AIDS or girls' education, 2 illustrated annual reports for stakeholders, and 1 CSMC newsletter.

9. Action Plans	Number of action plans developed by districts (Zonal-level Community Facilitators)	Actual count of action plans filed at district, zonal and CSMC offices	77	0
	Number of communities developing community action plans		1,686	30
Indicator 9. Approximately 7 Zonal-level Community Facilitator teams will be established in each district and each will develop an action plan for sensitisation and mobilisation. A total of 77 will be developed for all eleven districts.				
10. Capacity-building at all levels	Number of provincial, district, and zonal-level officials and community-based animators able to facilitate community-based activities in participatory ways.	Workshop participant list	275	74
Indicator 10. There will be approximately 25 participants from the zonal-level in each district trained as Zonal-level Community Facilitators. Therefore, a target total of 275 has been set as all 11 districts in Southern Province are reached.				

2. Highlights

Research and Verification in Kalomo District Completed:

The research and verification process was completed in the five school catchment areas of Kalomo District (representing a total of 34 villages) in early January. The villages comprising the five catchment areas and their distance and direction from the schools are captured in the following table:

SCHOOL	NAME OF COMMUNITY	DIRECTION FROM SCHOOL	DISTANCE FROM SCHOOL
KATANDA (<i>PAGE SCHOOL</i>)	Kayumba	Central	1 km
	Muleya	South	5 km
	Kasamu	West	10 km
	Lwambi	North	10 km
	Lweendo	East	2 km
	Kabanze	North	5 km
MABUYU	Mwiindilila	Central	2 km
	Michelo	West	8 km
	Mafwafwa	North	5 km
	Chikoli	East	8 km
	Muchindu	North east	7 km
	Simwendanduli	South west	9 km
	Simuluwe	South	12 km
MASEPELA	Chibbabuka	North east	5 km
	Simwajata	Central	0.5 km
	Siantungwani	North	6 km
	Siachidwaba	South west	6.5 km
	Siasesa	West	4 km
	Masempela	East	1 km
	Sialukuba	West	3 km
	Kaneneta	South west	2 km
Nkomponi	South west	8 km	
MOONDE	Moonde	West	2km
	Sialwindi	North east	8 km
	Sibululi	South east	2 km
	Muulwa	East	6 km
	Siantali	North	5 km
	Siambala	South east	6 km
	Muchanga	North west	5 km
NAJINKA (<i>PAGE SCHOOL</i>)	Mulala	West	4 km
	Muchindu	East	6 km
	Michelo	South east	5 km
	Hamatwi	West	5.5 km
	Munsaka	North	10 km

Of the five selected schools, two are PAGE (Programme for Advancing Girls' Education) schools, a UNICEF- and USAID-funded initiative to improve girls' education. The CSMC consciously aims to supplement and strengthen the inputs made by the PAGE programme in those schools. The researchers spent 10 days in the 34 communities surrounding the 5 schools and, because the schools survey had already been completed in December 2001, the 10 days were devoted entirely to conducting qualitative research in the communities. The researchers lived in the communities and sought to understand community members' way of life and some of the prevalent socio-cultural practices and beliefs using various qualitative data collection techniques (e.g., focus group discussion, PLA/PRA (Participatory Learning and Action/Participatory Rural Appraisal), observation, and key informant interviews to uncover

factors that might be negatively impacting girls' and other vulnerable children's education, and affecting the spread of HIV/AIDS.

Baseline of School Enrollment Established for Kalomo District Schools:

A baseline of enrolment by gender was established for the five schools in Kalomo District as a result of the school survey. Enrolment data for the year 2001 are as follows:

SCHOOL	GIRLS	BOYS	TOTAL
Katanda	61	80	141
Mabuyu	145	181	326
Masempela	192	255	447
Moonde	271	305	576
Najinka	93	99	192
TOTAL	762 (45%)	920 (55%)	1682

Katanda and Najinka are both PAGE schools and are Lower Basic Schools (Grades 1-4), while the other three schools are Middle Basic Schools. Msempela and Moonde have double streams for all the grades.

Field Visits to Support Researchers:

While the five teams of researchers were conducting the research and verification in Kalomo District, the SP Coordinator and her CSMC team colleagues, including a representative from the District Education Officer's (DEO) office, made several visits to the field to provide support and guidance to the researchers. This team helped the researchers to focus on the main research questions, and also participated in community meetings organized by the researchers; while in the field, the team was able to view a drama performance and one rehearsal for a performance by the researchers and community members.

Activities of Recently Trained Community Mobilizers in Kazungula District:

The Kazungula District community mobilizers who were trained near the end of last quarter began undertaking their role in the community sensitization and mobilization process in their communities. In line with the action plans they developed in December 2001, the mobilizers organized and conducted meetings in their schools, attended by their village headman, during which they discussed their strategy for addressing issues of girls' and other vulnerable children's education and the mitigation and prevention of HIV/AIDS. Moreover, the CARE Sub-Grant Officer, Ms. Rose Chibbonta, attended these meetings to facilitate the refinement of community action plans and to start the proposal writing and grant making process.

Monitoring of Kazungula District Community Mobilizers by Researchers:

The five teams of researchers visited the five Kazungula schools and catchment areas to monitor and support the work of the community mobilizers. They clarified issues pertaining to the small grants aspect of the CSMC and assisted in the development of community action plans. Reports from the researchers suggested that nearly all the mobilizers were enthusiastic about their role and were carrying out their duties in a competent manner. The researchers also helped the

mobilizers understand that they were mobilizers for their communities rather than for the CHANGES programme per se, so that the focus is placed on facilitating the process of change that community members want to bring their children's education and in their communities in general. During these visits to the communities of Kazungula, the researchers also collected some data that were overlooked when they conducted the research and verification earlier on.

Development of Community Action Plans in Kazungula District:

By the end of February, Chooma River, Maunga, and Siamasimbi schools and catchment areas had developed action plans representing a total of 15 communities. Encouragingly, all three action plans addressed concerns and issues that had been surfaced through the research and verification process. By the end of March, Nyawa and Siamundele schools and catchment areas also developed action plans. To date, a total of 11 action plans have been developed in SP representing 37 villages/communities. (For more on this, see section D on the Small Grants Mechanism.)

Stakeholders' Meeting in Kalomo District:

In late January, a district level stakeholders' meeting was held in Kalomo District. The purpose of the meeting was to introduce the CHANGES programme and to solicit cooperation and collaboration for when the post-research and verification activities of the CSMC would be introduced there in the near future. In attendance were representatives from the district government (District Administrator, Council Secretary, District Planning Officer, Community Development Officer, Water Affairs, and Local Government) as well as from development organizations working in Kalomo District, for example SCOPE-OVC (Orphans and Vulnerable Children), World Vision, and Let's Build Together.

The meeting was officiated by the Provincial Education Officer (PEO). The SP Coordinator presented the goals of the CSMC and the CARE Sub-Grant Officer explained the types of small grants that can be made to address concerns in community action plans, and how those grants will be made. Several of the researchers attended the meeting and described to the stakeholders the nature of the research and verification they will be undertaking. The enthusiasm on the part of the stakeholders and their willingness to work with the CHANGES team were unmistakable, setting a positive tone for the prospect of bringing the CSMC to the district.

Debriefing and Consultation Visit to Five Selected Schools and their Catchment Areas in Kalomo District:

In February, the SP Coordinator, with her recently hired local staff, Mr. Ackim Maambo, Assistant SP Coordinator, and Mr. Malumo Malumo, Field Supervisor/Training Specialist, visited all five selected schools and their catchment areas to debrief the school heads, teachers, and PTAs about the findings unearthed during the research and verification conducted by the field researchers in early January. They also started the process of identifying community members from the five catchment areas who would be trained as mobilizers in March. A sufficient number of names were put forward during this meeting.

Training of Community Mobilizers in Kalomo District:

During 25-29 March, the CSMC team trained 36 community mobilizers from Kalomo District, including five head teachers. This training, which was essentially the same training that was conducted last quarter for mobilizers from Kazungula District, included topics such as gender and equity in schools, HIV/AIDS, the rights of the child, and the role of the community mobilizer in the CSMC. The CARE Sub-Grants Officer facilitated the part of the workshop devoted to the development of community action plans and the process of applying for small grants. By the end of the training, the participants had started the process of developing their action plans.

Review of the CSMC and Forward Planning:

From 12 March through 3 April, Dr. Janet Robb, former Division Director at Creative Associates International, Inc., came to Zambia at the request of USAID and the CHANGES programme to review progress of the CSMC to date and to assist the SP Coordinator, her team, and the MOE with planning for the remaining two years of the programme. Because Dr. Robb was the architect of the CSMC based on her previous experience in Malawi, it was thought she was in a unique position to undertake this consultancy.

During the two and one-half weeks Dr. Robb was in SP, she conferred extensively with the SP Coordinator and the CSMC team, provincial MOE officers, and MOE/HQ officers in the review of the CSMC. Based upon the findings of that review, she assisted the same stakeholders in fine-tuning the design of the CSMC, adjusting the indicators, drafting a two-year implementation plan based upon those design modifications, and developing a draft IEC (Information, Education, Communication) strategy for the CSMC.

During the course of her work, Dr. Robb noted that the CSMC, as it had been implemented to date, had deviated from the original intent and design of the programme in two significant ways. First, due to a confusion in terminology in the original programme documents, community mobilizers were recruited from the communities themselves to work with communities instead of zonal-level government officers who were to perform this task in the original design of the programme. This change in design has had the effect of limiting the ability of the CSMC to build capacity of the government and to embed its inputs in the government system in the interest of sustainability. Inevitably, that change led to a second significant deviation from the original intent and design of the CSMC: it narrowed the scope of the programme in terms of the number of schools and villages it could reach because the community mobilizers, unlike the zonal-level officers, are rooted in their own communities and cannot range more widely to other villages and catchment areas. The plan as it has now been re-focused will conduct research and verification in five school catchment areas in each of nine districts (total 45) but will reach all schools and all villages in the nine districts in terms of action plan development and, as appropriate, the provision of small grants. *(See Appendix B for some of the major documents and reports from Dr. Robb's consultancy.)*

B. School Health and Nutrition (SHN) (IR 2.2: Improved Delivery of School-Based School Health and Nutrition Interventions to Support Pupil Learning)

1. Progress on Indicators

Category/Level	Indicator	Means of Verification	Target Numbers	Actual Numbers
Child Quality Measures				
Education	Increase in cognitive assessment scores	Scores from Cognitive Assessment Instrument (CAI)		Phase 1 of baseline survey completed in October/November 2001 (sample: 2,000 pupils)
Health	Reduction in worm infection prevalence	Semi-annual parasitological assessment	Subsampling to be done in April 2002-350 pupils	Phase 1 of baseline survey completed in October/November 2001 (sample: 1,400 pupils)
Nutrition	Increase in haemoglobin levels	Semi-annual biomedical assessment	Subsampling to be done in April 2002-350 pupils	Phase 1 of baseline survey completed in October/November 2001 (sample: 1,400 pupils)
Community Sensitization and Mobilization				
PTA/Community meetings/ADC (Area Development Committee)/Neighborhood health committee	# of meetings to discuss SHN issues; problems-analyzed and responded to.	Survey reports; field monitoring –minutes of meetings	By end 2002 100 meetings held by PTAs, ADCs, and Neighborhood Health Committees	40 communities and school catchment areas (approx. 10-12 schools/catchment) sensitized through popular drama/public meetings and discussions with headmen
PTA/Community action plan development and implementation	Increase of PTAs/communities supporting SHN interventions with specific action plans	Survey reports; field monitoring	Cumulative total of action plans received 2001-31 2002-60 2003-80	41 community action plans developed
IEC				
Media strategy	Media strategy developed and implemented including radio, TV adverts, newsletters, newspaper.	Strategy available	Media strategy (regional and national)	Media strategy developed
IEC materials	IEC materials developed for SHN advocacy and Training	IEC materials available	2002-12 products Radio spots- TV spots- Pamphlets Newsletters Brochures 2003-15 new products	Plans for producing materials in 2002 including an HIV/AIDS production workshop

Teachers/pupils	# teachers using IEC materials for SHN teaching-including life skills	Observation/monitoring of teachers	2002-150 teachers trained 2003-150 trained 2004-50	Life skills training scheduled for 2002
Training				
Teachers and administrators	# of teachers trained in school-based health and nutrition interventions	Reports	2002 –250 2003-350 cumulative total teachers trained 2002=50 2003=100 2004=200	207 teachers and MOE, MOH, and MCDSS administrators trained in SHN interventions; 20 teachers and DIPS (District In-Service Providers) trained to administer the CAI
Pupils	# of pupils who have received the set number of health education lessons	Reports	By end 2002 15,000 pupils received the lessons By end 2003 25,000; by March 2004, 30,000	To start in 2002 Based on pupil enrolment in 80 selected schools
Health workers, community leaders, PTA members.	# PTA exec.members, ADC, trained in collaborative methods, group participation techniques, SHN advocacy, and management skills # Health workers trained in SHN advocacy and SHN issues	Reports and field monitoring	By end 2002, 400 trained; by end of 2003, an additional 250 PTA, health workers and community leaders trained; by March 2004, a further 100 additional	Management skills training of teachers in Chadiza, other training and orientations scheduled for 2002 for Health Workers, PTA and other key community leaders

2. Highlights

Baseline Survey Follow-Up Activities:

The EP Coordinator, with the provincial SHN Focal Point (FP) person, visited the 20 intervention schools throughout the reporting period to track the distribution of drugs, to check compliance in the administration of drugs, and to deal with other SHN issues in the schools. These activities were combined with the distribution of school health cards and teaching materials about bilharzia and how to prevent infestation. The bilharzia flip chart teaching aid had been sent by the MOE/HQ in Lusaka for piloting in the 80 schools in EP, in addition to several other schools in Chama and Chadiza Districts. With the assistance of the CARE Sub-Grants Officer, Mr. Julius Kampamba, 32 schools were visited, and headmasters and teachers were briefed on the use of the health cards and the biharzia flip charts.

Further, the EP Coordinator checked the treatment record forms in eight intervention schools and provided additional iron tablets for the second school term. The EP Coordinator found that a majority of schools visited had been administering the drugs properly and had been recording this as instructed. However, some issues regarding compliance in the drug taking were detected, especially in Tamanda School where a significant percentage of the pupils had not taken many of the iron tablets. In discussions with the headmaster and chairman of the PTA, it was learned that many of the pupils were allowed by their parents to participate in the pilot programme only because the parents thought the children would receive free food and other forms of assistance. These pupils were often truant in the past and are now staying away from school since they discovered that no free food would be provided aside from biscuits and juice when taking the drugs.

Another form of baseline follow-up conducted during the present reporting period was obtaining missing heights and weights data in control schools. This re-measurement of pupils was required because of insufficient accuracy due to rounding figures, missing data on ages, and absenteeism during the baseline survey that was conducted last November. In all, nine control schools were visited by the EP Coordinator and SHN FP during this quarter to obtain the missing data.

Provision of Additional Iron Tablets:

Another task completed after the baseline survey was the delivery of the second tranche of iron tablets to the intervention schools. An additional 4,000 tablets were received from PCD (Partnership for Child Development), CHANGES' subcontractor, and those tablets were distributed to 12 intervention schools.

Planning for Iron Analysis from Baseline Survey:

The Tropical Disease Control Centre (TDRC) in Ndola had been contracted by PCD from the beginning to conduct the analysis of Vitamin A from the blood samples drawn during the baseline survey in November; additionally, the initial the plan had been to conduct the analysis of iron in the UK. However, in the interest of developing the capacity to conduct the iron analysis in Zambia, it was agreed that TDRC would conduct that analysis as well after being trained in the procedure by consultants from PCD, which will be done in April. Because TDRC lacked the appropriate equipment (an ELISA reader) to conduct the iron analysis, an arrangement was worked out whereby UTH (University Teaching Hospital) in Lusaka would lend TDRC this equipment. Finalizing this agreement required considerable time and effort on the part of the SHN FP person in Lusaka, Catherine Phiri, the CHANGES Senior Technical Advisor, and the EP Coordinator, including making a trip to Ndola to assess TDRC's laboratory needs. In the future, this arrangement will not be necessary because CDC (the Center for Disease Control at the US embassy in Lusaka) will be providing new equipment to TDRC for conducting this type of analysis.

Planning for SHN Teacher Training Manual Development:

The EP Coordinator and his newly hired technical officer started planning for the development of a SHN/Drug Administration training manual, to be used primarily in the training of teachers as

the pilot programme expands. Based on the TOT (Training of Trainers) workshop that was conducted in August 2001, the manual will include material on SHN background and rationale, SHN drugs to be administered, an overview of worms (causes and prevention), diagnosis, the use of tools such as the tablet height poles, urine dipsticks, and the health (bilharzia) questionnaire. When the soon to be hired training officer of the CHANGES SHN team on board, s/he will assist in this task. The manual is scheduled to be completed during next quarter.

Completion of Cognitive Assessment Instrument (CAI) Teacher Training Manual:

A manual for training future teachers and other government officers to administer the Zambian CAI was completed, based on the training that took place in October 2001 prior to the first baseline survey. This manual will ensure that the training of people who administer the CAI in the future is standardized, which will help to further ensure that the administration of the CAI is uniform.

Completion of Data Entry and Cleaning from Baseline Survey:

During the present reporting period, the SI (Successful Intelligence) consultant, Paula Kapungulya, and her assistant completed all data entry and cleaning from the baseline survey, including the heights and weights data that were missing from pupils in nine schools in EP and that had been collected after the survey.

Ongoing Validation and Fine-Tuning of the CAI:

As part of the ongoing effort to validate and finalize the Zambian CAI, the SI consultant administered the current version of the CAI to 350 Grade 3-7 pupils at Northmead Basic School in Lusaka. The aim of these ongoing efforts is to improve the instrument's validity and reliability. The next stage of this process will take place in April when a further 200 children in grades 5 and 6 will be administered the assessment (see SHN section of "Anticipated Activities (April-June 2002)" below).

Training of Rural Health Centre Staff:

During the present reporting period, the EP Coordinator held discussions with Mr. Malata and Mr. Soko of the District Health Management Team (DHMT) concerning the need to train and orient Rural Health Centre (RHC) staff. The need for this stems from the perception that some RHCs are refusing to treat pupils from the pilot schools without a registration payment; moreover, staff from the RHCs have complained that they do not know much about the SHN programme. It was therefore considered imperative that training of the RHC staff begin soon after school started for the second term in February.

To this end, a training schedule was drawn up with the collaboration of Dr. Mkanawire, DHMT Director, and will be delivered by the DHMT staff, SHN Technical Officer, and the EP Coordinator on site in the RHCs nearest to the 20 intervention schools, and later in the control schools after they are trained in drug administration. The training plan included sessions on the

school health cards, pre-payment schemes for pupils, and a general overview of the SHN programme.

During 18-28 March, this training was conducted in 17 RHCs. In addition to the above mentioned topics, the training included a briefing on a local action manual that had recently been produced by the SHN programme, how to use the bilharzia flip chart, the formation of school health committees, participation of health staff on PTAs and supervision of drug administration, drug flow and storage, and participation of teachers on school neighborhood health committees. The orientations were conducted by Mr. Soko (DHMT) and Mr. Josias Zulu, SHN Technical Officer, the SHN FP, and the EP Coordinator.

Organization of Sub-Sample of Pupils for Resurvey:

Near the end of the reporting period, the EP Coordinator and his colleagues organized a sub-sampling of approximately 300 pupils from intervention schools who will give blood, urine, and stool samples for analysis when a consultant from PCD is in EP during 7-12 April. The schools and pupils were identified and visited, laboratory technicians were identified and recruited to participate, and the availability of the local veterinary laboratory for analyzing the samples was confirmed. The purpose of the resurvey of the sub-sample of pupils from intervention schools is to measure treatment effects after the baseline survey conducted six months previously and to determine the rate of worm re-infection, if any.

Progress on IEC (Information, Education, Communication) for SHN:

The EP Coordinator worked with the IEC specialist in the MOE/HQ, who visited EP, to document the work of theatre groups in EP for use as television advertisements. The specialist, Mr. Musonda, held discussions with the four theatre groups who had performed SHN sensitization activities during August-November 2001 prior to the baseline survey. Each group submitted budget proposals and plans were developed for them to perform short plays that will be videotaped and used as SHN television adverts.

In addition, the IEC consultant completed the following activities during the current quarter:

- Collected data from Chama, Chipata, and Lundazi Districts in EP required for the editing of the School Health News magazine, SHN car and door stickers, still and video pictures, and supplementary reading materials.
- Collected draft SHN sample logos and drafted additional logos.
- Visited and consulted with three local journalists on the production of interactive radio programmes for the SHN programme.
- Facilitated the publication and launch of two SHN brochures, one on the situation analysis of school health and nutrition in EP and the other a general overview of the BESSIP SHN programme.
- Facilitated the production of a large SHN poster.
- Facilitated a media familiarization tour for GlaxoSmithKline (GSK) officials from Johannesburg. The tour, which included a media press conference, was intended to

enable the GSK officials to learn about the media institutions that will collaborate with the SHN programme in transmitting SHN messages and news.

- Completed the first draft of the School Health News magazine, circulated the copy for editorial comments, and finalized the issue at the IEC Sub-Committee Materials Review Workshop during 27-29 March.
- Introduced an in-house training programme for MOE staff as part of an ongoing effort to transfer basic IEC skills to them.

Planning for the Development of a SHN MIS (Management Information System):

As stated previously when describing baseline follow-up activities, the newly developed school health card was distributed to all 80 schools participating in the SHN pilot programme in EP. Further, the EP Coordinator conducted ground laying discussions with the new EMIS consultant in the MOE, Dr. Drake Warrick, during January to begin planning the linking of the proposed health MIS with the EMIS system being developed in the MOE. The health MIS system will receive considerable attention during the next reporting period, April-June 2002.

Planning for the Design and Implementation of a School Feeding Programme:

During the current quarter, the CHANGES Senior Technical Advisor collaborated with the MOE, MOH, WFP, and UNICEF in planning for a school feeding programme (SFP) to be piloted in Luapula Province. As a member of the SHN Cross-Sectoral Steering Committee, the Senior Technical Advisor was nominated to represent CHANGES and USAID on the newly formed SFP sub-committee. The committee met for a full day on 13 February to develop a five-year framework for the SFP and, following that, met to develop the first one-year plan of the five-year framework. Subsequently, during 3-8 March, the committee conducted a fact-finding tour in Luapula Province in which they visited the initially identified 70 schools to participate in the SFP from Mansa, Mwense, and Nchelenge Districts. The committee split into four teams with each team visiting 15-20 schools. During the school visits, the teams interviewed school heads and PTA members and filled in a detailed questionnaire to assess the readiness of the school and community to participate in the SFP. Further, during the school visits, the infrastructure of each school (storage space, latrines, availability of potable water, etc.) was assessed. Presently the findings from the four teams are being synthesized into a single report that will be used as the basis for designing the SFP.

Although on the surface it would appear that active involvement in the SFP initiative on the part of the CHANGES programme goes beyond its mandate, there are several ways the programme can play a substantive, important role. Inasmuch as the SFP will be implemented in an integrated and holistic manner, school feeding will be supplemented by deworming, the provision of micronutrients, life skills training, and community sensitization and mobilization. And it is precisely these areas in which the CHANGES SHN programme has been developing instruments (tablet height pole, school health card, health questionnaire) that will be needed for the SFP. These instruments will be shared for use in the SFP. Moreover, the CHANGES programme will also be in a position to share its expertise in training teachers to utilize the aforementioned instruments and to dispense drugs and micronutrients. As such, the synergies

that can be created between the CHANGES SHN programme and the SFP are considerable and will be of mutual benefit should the SFP take off.

Planning with Education Advisor from USAID/Washington:

During 25-30 March, the EP Coordinator and his team worked in Chipata with Dr. Bradford Strickland of USAID headquarters/Washington, DC. In addition to visiting five intervention schools, they discussed the possibility of integrating the MOE malaria rollback initiative into the SHN programme, conceptualized and planned HIV/AIDS initiatives, discussed the possibility of scaling-up the SHN programme, and conducted some preliminary planning for the proposed two-year extension of the CHANGES programme.

C. HIV/AIDS (Cross-Cutting Component)

1. Progress on Indicators

Southern Province:

Priorities/Category	Indicator	Means of Verification	Target	Actual as of 03/02
HIV/AIDS	Number of provincial/district and zonal officials, and community-based animators sensitized & trained in HIV/AIDS issues of transmission and proliferation	Workshop attendance figures	275	74
There will be approximately 30 participants from the zonal-level in each district trained as Zonal-level Community Facilitators. HIV/AIDS sensitization will be a part of that training curriculum. Therefore, a target total of 275 has been set as all 11 districts in Southern Province are reached.				
HIV/AIDS Peer Educators	Number of Zonal-level action plans including the training of peer educators for HIV/AIDS	Zonal-level action plans	138	0
Of the approximate 275 Zonal-level action plans, 50% (138) of those are targeted to include the training of peer educators.				

Eastern Province:

Category/Level	Indicator	Means of Verification	Targets	Current Status
Teachers	# teachers using life skills Modules/lesson plans used in teaching	Field monitoring	By end 2002-120 teachers using life skills modules By end 2003-250 By March 2004 Cumulative total =450	Strategic work plan developed with Provincial FP (Focal Point), and plans to train teachers in life skills to begin in 2002; in 2001, 6 teachers in Chadiza and 5 in Chipata trained in counseling

School/Communities; Pupils and village communities	# schools engaged in debate competitions, quizzes, drama, choirs, essay writing, and various other innovative activities	Field monitoring Reports	Situation analysis of Anti- AIDS clubs in 40 schools in 4 districts completed By June 2002 By end 2002 40 schools engaged in activities- By end 2003 80 By March 2004 90 schools	Currently 90% of Basic schools have Anti-AIDS clubs that need revitalization through training of patrons and training of club leaders in counseling and guidance. This will lead to the establishment of HIV/AIDS counseling centers which, currently, no Basic schools have
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2. Highlights

Planning for HIV/AIDS Initiatives in EP:

The EP Coordinator continued to work with the provincial HIV/AIDS FP on the revision of the provincial HIV/AIDS work plan. Due to delays in the provincial allocation of funds for HIV/AIDS from BESSIP, the training of trainers workshop planned for January, and then February, was postponed. (For more on this, see #7 of section IV. of this report.)

NGO/Stakeholder Coordination:

In February, the EP Coordinator submitted information to the HIV/AIDS NGO Forum Subcommittee that presented an overview of CHANGES' anticipated HIV/AIDS activities, which will be compiled in the forum's directory. He also suggested that representatives from the health and education sectors be invited to attend the monthly meetings which should encourage collaborative efforts, particularly in view of the fact that the currently constituted HIV/AIDS task group is not very active.

Planning for HIV/AIDS Sensitization in Communities (EP):

A major HIV/AIDS activity planned with the national and provincial HIV/AIDS FPs is the need for continued sensitization of communities. While much work has been done in this regard in urban areas and schools, little of a similar nature has been done in rural schools and communities. Therefore, popular theatre groups will be contracted to help address this situation. Six theatre groups have expressed interest in participating in this initiative, and all were briefed on the need to focus on behavioral change, life skills, and positive aspects such as educating young, primary children. Each interested theatre group was provided with more than 100 pages of material extracted from many HIV/AIDS publications (brochures, leaflets, and books). Each then developed a script that was reviewed by the EP Coordinator and the HIV/AIDS FP person, and corrections and revisions were made.

During the week of 4-8 February, the six theatre groups staged trial performances in markets and nearby compounds, attended by the SHN FP, HIV/AIDS FP, CARE Sub-Grants Officer, and the EP Coordinator, all of whom assessed the performances. A rating scale that included entertainment value, message development, post-performance interaction, and overall impression was developed and used by each observer/assessor.

Three theatre groups were selected from the six groups who had applied and a meeting was conducted in late February to discuss and agree on a common approach prior to starting the work. The Scope of Work for the groups working in Chipata District intervention and control schools included data collection, completion of community profiles, encouragement of schools and communities to form their own theatre groups, and strengthening Anti-AIDS clubs. To date, eight schools (of the planned 30 schools) in Chipata District have been covered by the theatre groups. Additional groups will be selected to work in 6-8 schools in Chadiza and Chama Districts.

D. Small Grants Mechanism (Cross-Cutting Component)

1. Highlights

Visits to Schools and Communities in Chama District (EP):

During the present reporting period, the CARE Sub-Grants Officer in EP visited three schools and their catchment areas in Chama to introduce the small grants component of the CHANGES programme. The schools visited were Chama Basic, Kamphemba, and Mundalanga. The officer also visited the communities in the catchment areas to verify the existence of some of the local NGOs and CBOs that have indicated interest in participating in the programme.

Training in School and Community Proposal Development in EP:

Financial and basic management training courses were held in the Provincial Training Centre (Chipata) from 4-7 February for teachers in the 40 schools (20 intervention and 20 control) currently part of the pilot programme. The objectives of the training were to provide basic skills in proposal writing in an effort to elicit better written and more innovative small grant requests. The workshops were held in two one-day sessions and were facilitated by the CARE Sub-Grants Officer and Mr. Nicholas Zimba, CARE's financial accountant based in Chipata.

A total of 31 schools out of the 40 invited were represented in the two training sessions, including 40 participants from Chipata District and 20 from Chama District; the remaining nine schools will be visited by the SHN team to receive the training. The participants were actively involved in the training and demonstrated a keen interest in the financial and proposal writing skills being imparted. The EP Coordinator took advantage of the presence of the teachers to distribute the bilharzia flip charts and school health cards to participants who had not yet received them.

Formation of Small Grants Steering Committee in Chama District:

In the previous reporting period, district level small grants steering committees had been formed in Chipata and Chadiza Districts to vet community action plans and project proposals and to make recommendations on the allocation of small grants. This quarter, a similar steering committee was formed in Chama District, comprised of representatives from the MOE, MOH, MCDSS, District Women's Association, Red Cross, Care for the Children in Need, and Forum for African Women Educationists in Africa (FAWEZA).

Receipt of School and Community Proposals/Action Plans for Small Grants (EP):

A great deal of interest has been shown in the small grants provision aspect of the CHANGES programme in EP. This period, 26 proposals (41 proposals total so far) for small grants were received from NGOs, local community-based organizations, schools, and communities. The CARE Sub-Grants Officer has organized steering committees in each participating district (Chama, Chadiza, Chipata) to assess the proposals as they are received and to make decisions regarding giving awards. As mentioned in the previous quarterly report, proposals tend to focus on infrastructure inputs such as rehabilitation of teachers' houses, pit latrines, and bore holes. During all field visits and proposal training, the SHN team have driven home the point that attention should be focused beyond the needs of teachers to include community needs as well as issues relating to HIV/AIDS, and a gradual shift in this regard is evident as proposals are revised and new proposals are received. At the same time, however, addressing some of the needs of schools, as long as they are supported by the communities, is considered legitimate insofar as assistance for school rehabilitation by other organizations (for example, World Vision, Lutheran World Federation, and Plan International) has dropped off considerably or ceased entirely in recent years.

Community Sensitization and Development of Community Action Plans in Kazungula District (SP):

Community sensitization regarding community action plans and proposal writing for small grants was conducted by the CARE Sub-Grants Officer in Kazungula District in SP. As a result of this work, 11 action plans have been received representing 37 villages. As has been the case in EP, the action plans have initially focused on infrastructure inputs like boreholes and latrines at the school but some plans have included actions directed towards addressing girls' education and discouraging early marriages.

III. PROGRAMME ADMINISTRATION

On the level of programme administration there were several important developments during the present reporting period. These are summarized below.

A. Recruitment of Local Contract Staff

With the approval of the CHANGES contract modification during last quarter, the two field offices have been able to hire much needed senior level technical staff. In SP, Mr. Ackim Maambo was hired as Assistant SP Coordinator and will assist the SP Coordinator with the management and administrative side of the programme. Also, Mr. Malumo Malumo was hired as Field Supervisor/Training Specialist and, as his title suggest, will be supervising the work in the field and overseeing the training aspect of the programme. In EP, Mr. Josias Zulu was hired as a SHN Technical Advisor and, although the people have been identified, the positions of Training Specialist and Administrative Assistant will actually be filled in early April when the construction of the EP Coordinator's office in the provincial MOE is completed. The addition of these staff has gone a long way towards strengthening the capacity of both field teams.

B. Strengthened Integration with the Provincial MOE in SP

In January 2002, a change in the position of PEO took place in SP. Because the support from PEO is essential for the forward progress of the CHANGES programme, the SP Coordinator met with the new PEO to debrief her on progress made on the CSMC so far and to seek her advice on the formation of a committee that will oversee all projects and programmes implemented under the MOE (including CHANGES). The PEO enthusiastically received the idea of forming such a committee, and suggested the committee be called a Project Coordinating Committee. Further, the PEO requested that the SP Coordinator draft a letter regarding the formation of the committee and suggest the names of key individuals to be named to the committee.

C. Request to Purchase an Additional Vehicle

Due to the ongoing difficulties in mobilizing the CSMC teams (including enabling the CARE Sub-Grant Officer to go to the field regularly) because of insufficient transportation, the Senior Technical Advisor and home office staff requested approval from USAID for purchasing another vehicle. If approval is granted, CARE Zambia has committed to deploying its vehicle permanently in EP, which will mean that the SHN component in EP and the CSMC in SP will each have three vehicles, which should be sufficient to effectively run their programmes. Approval for the purchase of the additional vehicle is still under consideration at the time of writing.

D. Strengthened Collaboration and Integration with Other USAID Education Programmes and Government Counterparts

On 23 January, the first USAID-initiated Implementation Advisory Committee (IAC) meeting was held in Lusaka. Attended by both the EP and SP Coordinators and the CHANGES Senior Technical Advisor as well as by the technical advisors for other USAID projects and programmes (notably the EMIS and Interactive Radio Instruction (IRI) programmes) and their government counterparts, the purpose of the meeting was to review progress over the preceding six months, to share information, to strengthen collaboration between programmes and line ministries, and to problem solve as necessary. The EP and SP Coordinators and their key MOE counterparts gave updates on progress in their respective programmes, and the same was done by advisors from other USAID projects. The IAC will meet semi-annually and will provide an effective platform for integrating USAID initiatives in education and for strengthening collaboration.

E. Briefing of USAID SO2 Team on SHN Progress

On 27 February, the EP Coordinator and the CHANGES Senior Technical Advisor briefed the USAID SO2 team on recent progress. The EP Coordinator described the overall achievements and challenges of the SHN programme while the Senior Technical Advisor reported on his involvement in planning a school feeding programme. After this meeting the same two CHANGES staff met with Dr. Kent Noel, Education Advisor at USAID, to discuss the possibility of scaling-up the current SHN programme more rapidly as well as potential scenarios for the proposed two-year extension of the CHANGES programme.

IV. CHALLENGES/LESSONS LEARNED

Considerable progress was achieved during the present reporting period in the face of several constraints; these constraints (and the lessons learned from dealing with them) are briefly summarized below:

- In SP, long distances between schools and between villages within school catchment areas continues to hamper the CSMC team's ability to effectively move from one place to the other and to sufficiently support the work being done. As a way to alleviate some of the difficulty, the CHANGES programme has requested approval to purchase another vehicle for use in the field.
- In SP, school registers have not been kept up to date in many instances, which has resulted in only incomplete data being available at the school level. Either school heads are unaware of the government's requirement to keep registers up to date or head teachers do not have the time to do so because of being overwhelmed with other duties. In the absence of accurate school registers, it is difficult to track enrolment, repetition, and progression rates of cohorts of pupils.
- In some of the schools in Kazungula District (SP), none of the pupils passed the Grade 7 examination. The researchers are finding it difficult to convince parents to keep their children in school, though they are having some success in helping parents understand their role in improving their children's education. This will be an ongoing challenge for the CSMC.
- The presence of the CARE Sub-Grant Officer in SP has strengthened the CSMC team's capacity to monitor schools and catchment areas in which the research and verification has been completed and to support the development of community action plans.
- In EP, post survey follow-up activities have underscored the importance of the community sensitization and mobilization aspect of the overall programme. Although considerable work had been done in this regard by popular theatre groups prior to the baseline survey last November, socio-cultural and religious issues surfaced that affected compliance in taking the drugs and persistence in the pilot programme. For example, in one catchment area, parents were reluctant to have their children continue in the programme because they associated the SHN programme with a World Vision child sponsorship programme in which rumors were rife that their children were being kidnapped and taken to the US. Other parents refused to have their children continue in the programme because they belonged to the Jehovah's Witness sect and, therefore, objected to giving blood, taking pills, and in general participating in "government development." Although most of these compliance issues have been resolved, the need for continued community sensitization has been underscored.
- Also in EP, due to the extreme hunger situation in the province, many pupils are not reporting to school for the second term (which started in February). For example, in

Nkhoto School only 29 of 250 pupils reported to school for registration on the first and second days of the term. In another school, Dzoole, only 29 of an anticipated 220 pupils enrolled. Should this situation continue, it will be very difficult to complete heights and weights measurements as well as the distribution of the second tranche of iron tablets. As such, the pilot will be significantly impacted.

- Due to delays in the provision of funds from MOE/HQ, two HIV/AIDS training courses, one for in-service providers and the other for school heads, were postponed. This situation will be rectified in the next quarter through a cost-sharing arrangement between the MOE and CHANGES for these and other HIV/AIDS initiatives.
- The IEC consultant, Mr. Gershom Musonda, reports that his work is at times hampered by the need to borrow equipment, lack of photocopying facilities (though the copier in the CHANGES Senior Technical Advisor's office in the MOE is available for modest amounts of copying), and difficulty in making official international telephone calls from the MOE, which must be made at the CHANGES office.

V. ANTICIPATED ACTIVITIES (APRIL - JUNE 2002)

During the next reporting period, the following activities will be started, continued, or completed:

A. CSMC

- Approximately 30 zonal-level government officers will be recruited and trained from Kazungula and Kalomo Districts to develop zonal-level action plans and to conduct sensitization and mobilization activities in their assigned areas of their districts.
- Begin implementation of zonal-level action plans in Kazungula and Kalomo Districts, including the development of community action plans.
- Start the implementation of community action plans in Kazungula District.
- Begin monitoring of zonal- and community-level activities in Kazungula District.
- Make entry in Choma District: brief district officials, select five schools and catchment areas in which to conduct research and verification, and identify approximately 30 zonal-level officers to conduct sensitization and mobilization in all schools and villages of the district.
- Complete research and verification in Choma District.
- Contract the services of consultants to assist with the design and first delivery of the training of zonal-level officials (in Kazungula District) and to assist with qualitative data analysis and the strengthening of CSMC researchers. The first of these consultancies will be undertaken in April and the second in May.
- Recruit and train five more field researchers and four senior-level researchers so that two teams of 10 researchers are operational.

B. SHN

- Continue the orientation and training of RHC staff; 8 RHCs (beyond the 17 completed) to be covered in April.
- Organize orientation meetings with 40 PTA executives to discuss SHN issues, compliance in the pilot programme, and anticipated activities for schools and pupils.
- Continue treatment of pupils in the first cohort of intervention schools: administer Albendazole in April and complete the 10-week cycle of iron tablets. During these school visits the use of the health cards and the bilharzia flip charts will also be monitored.

- During 7-12 April, a sub-sample of approximately 300 intervention school pupils will be re-surveyed to assess gains in health and nutrition status since the baseline survey was conducted. Rates of re-infection with worms, if any, will also be assessed.
- On 4 April, a half-day meeting will be held in which the preliminary results of the November 2001 (Phase 1) survey will be presented by the SHN programme, including the sub-contractors PCD and SI.
- In early April, a full day planning meeting, attended by representatives of the MOE, CHANGES, PCD, SI, TDRC, and UTH will be held to reflect on the first baseline survey and to plan for the second survey to be conducted in October/November 2002.
- During the first week of April, the SHN FP, CHANGES, PCD, SI, and PCD's EMIS sub-contractor will meet with the newly arrived EMIS consultants at the MOE to begin conceptualizing the linking of the health MIS with the EMIS system that is being set up in the MOE. Work in forging this linkage will be started during the quarter.
- Also during the first week of April, the SHN FP, CHANGES, PCD, and the HIV/AIDS FP will meet to discuss and plan the delayed HIV/AIDS life skills module development. Work on the module will be started during the quarter.
- During the week of 8-13 April, two consultants from PCD will train TDRC staff in how to conduct transferritin (iron) receptor analysis on the blood samples collected during the November baseline survey to determine the causes of chronic anemia. The capacity will then exist for TDRC to conduct the same analysis on samples from phases two and three of the baseline survey. The Vitamin A analysis will have been completed by TDRC before this time.
- In June or July a larger debriefing meeting (than the 4 April meeting) will be held in which the full results (including Vitamin A and iron levels) will be presented. The larger forum will include representatives of the World Bank, UNICEF, WHO, and other line ministries and departments (Health, Community Development, etc.).
- When the deworming drugs and micronutrients arrive from the UK, a distribution and tracking system will be put in place from the DHMTs to RHCs to schools. The system will be monitored and fine-tuned as necessary.
- Mass treatment of all students in intervention schools that indication a higher than 50% infestation rate during the baseline survey will be conducted when the drugs reach the schools.
- Development of the SHN/Drug Administration teacher training manual, started during the present reporting period, will be finished and printed for use in the future training of teachers.

- The SI local consultant will continue with the validation and streamlining of the CAI at Lusaka Girls and Boys Schools where a total of 200 children will be tested. Preparations for this exercise have been underway and both schools have been notified.
- The following activities will be completed in the IEC campaign:
 - collection of data from EP on SHN in general
 - collection of data on the SFP in Luapula Province
 - collection of data from SP on the CSMC
 - publication of the second School Health News magazine
 - editing and transmission of television and radio programmes
 - production of radio and television advertisements
 - editing and distribution of audio and video teaching aids
 - complete the production of IEC stickers
 - facilitate the publication of the SHN manual
 - orient media to SHN activities
 - facilitate the transfer of IEC skills to MOE staff through in-house training

Additionally, the IEC consultant will attend a marketing course to strengthen his skills in marketing.

C. HIV/AIDS

- In EP, a situation analysis of HIV/AIDS activities in 50 schools will be conducted to ascertain Anti-AIDS club activities and other school-based activities, for example, the materials used in schools, levels of community involvement in schools, and so on. An instrument will be developed for this purpose and the survey will be conducted by provincial and district MOE staff and CHANGES staff.
- 33 District In-service Providers from eight EP districts will be trained in HIV/AIDS issues, including mitigation and prevention.
- HIV/AIDS sensitization training of 33 headmasters (first of two rounds of training) in EP will be conducted.
- In a two-week workshop, 10-12 teachers from EP will be trained in HIV/AIDS materials and IEC production. The aim will be to have in-service providers and teachers develop locally relevant materials in the local language relating to HIV/AIDS.
- 40 Anti-AIDS club leaders in selected schools in EP will be trained.
- Popular theatre groups will continue HIV/AIDS awareness and sensitization activities in the remaining 22 schools and communities (8 of 30 completed to date) in Chipata District, in 8 schools and communities in Chadiza District, and in 6 schools and communities in Chama District in EP.

D. Small Grants Mechanism

- First funding of rapid response project proposals in EP will be made with regular follow-up and monitoring.
- Training in proposal writing and financial management will continue in EP.
- The training of approximately 30 zonal-level government officers will be carried out in both Kazungula and Kalomo Districts of SP (total: approximately 60). Part of the training will address the development of district- and zonal-level action plans which will then guide the development of community action plans in the two districts, leading to the provision of small grants.

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Appendix A

CHANGES Programme Description and Deliverables

The CHANGES Programme
(Communities Supporting Health, HIV/AIDS, Nutrition, Gender, and
Equity Education in Schools)

INTRODUCTION

The contract between USAID/Zambia (United States Agency for International Development) and Creative Associates International, Inc. (CAII) to implement the CHANGES programme was officially signed on 1 April 2001. Funded for an initial period of three years, the CHANGES programme provides technical assistance to Zambia's Ministry of Education under the auspices of the Basic Education Sub-Sector Investment Programme (BESSIP). The overall aim of the CHANGES programme is to improve basic education in Zambia through the provision of technical support to three of BESSIP's nine components: Equity and Gender, HIV/AIDS, and School Health and Nutrition (SHN).

At the same time, the CHANGES programme aims to support USAID's Strategic Objective #2: *Improved quality of basic education for more school-aged children* through addressing two Intermediate Results: *Improved quality of learning environment in targeted areas* (IR 2.1) and *Improved delivery of school-based health and nutrition interventions to support pupil learning* (IR 2.2). Cutting across these Intermediate Results are strategies to mitigate the negative effects of HIV/AIDS on the quality, access, and sustainability of good basic education and, as such, HIV/AIDS is a cross-cutting theme of the CHANGES programme as well. Another cross-cutting dimension or strategy of the CHANGES programme is a sub-grant mechanism, implemented in collaboration with CARE USA, that aims to provide modest grants and seed money for projects and initiatives proposed by schools, PTAs, community groups, and local organizations in the areas of school health and nutrition, the promotion of basic education for girls and other vulnerable children, and the mitigation of the impact of HIV/AIDS on Zambian communities and its school system.

OBJECTIVES/STRATEGY

During the initial three-year period, the CHANGES programme will be operational in Southern and Eastern Provinces, with its headquarters in Lusaka. In Southern Province (hereafter, SP) the focus of the CHANGES programme is the Community Sensitization and Mobilization Campaign (CSMC). Initiatives in this component include the use of popular theatre to facilitate community participation to surface issues related to increasing girls' and other vulnerable children's attendance and retention in primary school; the development and implementation of district- and community-level action plans to address issues raised through popular theatre and participatory action research; the training of provincial and district government officials in community participation methodologies related to gender equity; and training teachers to integrate life skills throughout the curriculum.

Simultaneously, in Eastern Province (hereafter, EP) the central thrust is on school health and nutrition (SHN) interventions, including conducting baseline biomedical, anthropometric, and cognitive surveys; providing micronutrients and deworming pills to primary students,

administered by teachers; training teachers in school health, nutrition, and life skills; sensitizing and mobilizing communities through popular theatre, district field teams, and public gatherings; and strengthening linkages between health centers and schools.

Although the CSMC and SHN components are being initially piloted in SP and EP respectively, it is anticipated that, over time, considerable cross-fertilization between the inputs being made in each province will take place. Further, inasmuch as addressing HIV/AIDS and providing small grants cut across the two major component areas described previously, inputs in these two areas will be made in both SP and EP.

The major tasks to be completed in the CSMC (IR 2.1) and SHN (IR 2.2) components during the initial three-year programme period are the following:

Community Sensitization and Mobilization Campaign (IR 2.1: Improved quality of learning environment in targeted areas)

- Sensitize, motivate, and mobilize parents, local leaders, teachers, pupils, and PTAs from five school catchment areas in each of nine districts in Southern Province (total: 45) to increase girls' and other vulnerable children's enrolment and retention in primary school and to halt the proliferation of HIV/AIDS.
- Strengthen the capacity of district-level officials from the Ministries of Education (MOE), Health (MOH), and Community Development and Social Services (MCDSS) to work cooperatively and collaboratively, and to facilitate a successful mobilization campaign.
- More specifically, the preceding two tasks have the following scope:
 - At least nine of the eleven districts in Southern Province will be actively involved in the CSMC.
 - Forty-five schools (five per district) and approximately 270 villages will be involved in action research and verification activities.
 - Approximately 270 district officials (30 per district) from the MOE, MOH, and MCDSS will be trained in community participation methodologies and mobilization strategies in order to effectively take on the role of Field Worker in their districts.
 - One hundred and eighty community leaders and those active in development in their communities will be trained as "Community Animators" to lead the CSMC work in their communities.
 - Approximately 90 district-level plans of action will be developed as a framework for community sensitization and mobilization.
 - Community-level plans of action will be developed and implemented in all school catchment areas in the initial nine districts in Southern Province.
 - Action plans that address HIV/AIDS will be developed and implemented in those same primary school catchment areas.
 - A variety of activities that support the above initiatives will be designed and put in place.

School Health and Nutrition (IR 2.2: Improved delivery of school-based health and nutrition interventions to support pupil learning)

- Provide an overview of current SHN and community-based activities in Eastern Province.
- Develop strategic alliances at the provincial- and district-levels among MOE, MOH, and MCDSS, and assist in developing the capacities of the alliance partners.
- Train teacher trainers and community development trainers in SHN and establish a system within the BESSIP framework to train teachers and community workers as the programme expands.
- Train district- and community-level field workers and teachers in pilot areas.
- Develop information, education, and communication (IEC) materials to promote good health, nutrition, and hygiene, especially for school-age children, their families, and their communities.
- Establish and implement protocols for anthropometrics and other pupil health and nutrition status monitoring procedures in schools.
- Develop a School Health Card that tracks health and nutrition-related issues as well as the learning of pupils as they progress through school.
- Develop and implement a Cognitive Assessment Instrument.
- Implement pilot testing of the SHN program, including provision of micronutrients and deworming medicine, monitoring pupil health status, community sensitization, training health workers and teachers, and strengthening health and life skills education in schools.
- Develop a SHN program information system to monitor progress and impact at all levels.
- Establish a drug distribution and storage system.
- Mobilize communities to support SHN activities.
- Develop and implement a plan with the MOE to mitigate the effects of HIV/AIDS on basic education, integrated within and/or complementing the SHN programme activities, including the development and implementation of action plans that address HIV/AIDS in 80 primary school catchment areas.

Appendix B

CSMC Consultant's Report and Supporting Documents