

Report of the Fifth Annual Course on: Strengthening Contemporary School Health, Nutrition and HIV Prevention Programmes

An International Course for Educationalists, Public Health
Professionals and Community Development Workers



**Held at the Noguchi Memorial Institute for Medical Research
at the University of Ghana**

Jointly hosted by the West African Centre for International Parasite Control (WACIPAC),
the Eastern and Southern Africa Centre of International Parasite Control (ESACIPAC),
and the Partnership for Child Development (PCD), Imperial College London

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INTRODUCTION

This report summarises the debate and knowledge shared between thirty-three participants that took part in 2009's international course from ten African countries (Burundi, Ghana, Kenya, Madagascar, Malawi, Nigeria, Rwanda, Senegal, Sierra Leone, and the United Republic of Tanzania). The representatives came from a wide range of different organizations and included members from the Ministries of Education, Health and Agriculture, non-governmental organizations and the private sector.

Training the right people

The course evaluation demonstrated that the people who attended the course were those who stood to benefit most from the training provided:

- 100% of participants considered the course's relevance to be very good to excellent for their current work functions.
- 97% of participants considered the course's relevance to be very good to excellent for their future work functions.

COURSE OBJECTIVES

1. To strengthen capacity at the national level of both health and education sectors to support all SHN and HIV prevention programme components.
2. To strengthen global, regional, national and local partnerships that enable the implementation of sustainable and scaled SHN and HIV interventions.
3. To provide evidence-based messages for communications and advocacy to build political and financial commitment for the provision of SHN and HIV prevention programmes.

COURSE OUTLINE

The organizing principle behind the course was the FRESH (Focusing Resources on Effective School Health) framework: an international framework for SHN and HIV prevention, endorsed by many different countries and agencies. Most countries participating in the course reported either using FRESH, or being familiar with the framework (see Figure 1).



Figure 1: Four Pillars of the FRESH Framework.

During the course, participants examined each of the four pillars of FRESH, and used the framework to gain information and learn strategies and techniques that enable the coordinated implementation of multi-sectoral, scale-level SHN and HIV prevention programmes. "Hands-on" experience was gained by participants in drafting basic SHN and HIV prevention plans specific to their countries' needs, incorporating activities, outcomes and objectives for inclusion in national frameworks of action. The lessons learnt by participants contributed to discussions, debates, consultations and actions towards enhancement and scaling up of monitored SHN and HIV prevention programmes across Africa and beyond.

Participants considered how SHN can:

- Integrate a package of activities in order to achieve maximization of long-and short-term benefits.
- Improve the level of cooperation between the health and education sectors.
- Build effective partnerships with communities and schools.
- Prioritize good monitoring and evaluation for long-term, sustainable programming and desired health and educational outcomes.



ENSURING RELEVANCE

At the start of the course, participants were invited to rank the health problems that most affected school-age children in their countries. These were:

1. Malaria.
2. Worms/Parasites.
3. Dysentery/ Diarrhoea.
4. HIV/Reproductive Health.
5. Malnutrition.

The course programme was then shaped in order to ensure that attention was given to addressing these concerns. For example, a considerable proportion of the programme was spent learning about new technologies for providing malaria control services in schools, and how to ensure the delivery of school-based malaria prevention education in a scaled and systematic fashion.



Representatives were also invited to consider the most significant barriers they experienced in their efforts to implement programmes which they ranked as follows:

1. Lack of funding.
2. Low awareness/community ownership.
3. Lack of policy or implementation thereof.
4. Lack of human resources.
5. Poor sanitation and hygiene/lack of clean water.

Again, the programme was shaped in order to respond to these concerns. For example, much time was spent learning about effective and comprehensive planning for SHN programmes that would address many of the concerns identified.

This year's course was made possible through the generous support of JICA and the World Bank. Individual participants were sponsored to attend by a range of funders including national governments and agencies such as GTZ, UNESCO and VVOB.

MEETING THE COURSE OBJECTIVES

OBJECTIVE 1: *Strengthen capacity at the national level of both health and education sectors to support all SHN and HIV prevention programme components.*

A number of activities were undertaken during the course that supported the achievement of the first course objective. These included technical presentations on good practices and the most recent research, facilitated discussion highlighting knowledge gaps and consolidating technical inputs, and the provision of the latest hard and soft copy documents on SHN and HIV prevention.

Evaluation of the course's impact with respect to this objective was extremely positive. Eighty-five per cent of participants strongly believed that they had significantly increased their understanding of SHN or HIV responses during the course. Eighty-three per cent of participants believed the new information would be of very good to excellent use, while 84% cited the tools, computer programmes, guidelines, and more that they acquired during the course as being very good to excellent. Eighty-five per cent of participants strongly believed that they had identified gaps in their programmes that they were not aware of before, and 81% reported a very good to excellent increase in their knowledge of solutions that have worked well in different contexts. Most importantly, 83% of participants reported their strong intent to integrate new information received on the course into current programmes and policies. Highlights of the work undertaken to achieve this impact included a field visit, thematic group sessions, learning about monitoring and evaluation, consideration of life skills programming, and learning about community involvement.



FIELD VISIT

The field visit provided the opportunity to explore the reality on the ground of theories. Participants travelled to Ada Foah, a fishing village on the coast of the Dangme East District in the Greater Accra Region of Ghana, to gain a sense of school level implementation of SHN programmes, in relation to a checklist of key elements participants had developed around the FRESH framework. One group toured Pute Presbyterian Primary School, focusing on the school's water and sanitation efforts. They examined whether latrines and hand washing facilities had been well maintained, and were gender sensitive and age-appropriate. Another group visited Elavanyo D/A Primary School, a school in which Ghana is pioneering the provision of school meals using produce from local markets (home grown school feeding). The group learned more about the challenges the school had faced when enrolment increased dramatically as a result of implementation.

The field visit culminated in a meeting with the local government outfit, the Dangme East District Assembly, which is active in encouraging all stakeholders in the community to promote the implementation of integrated and sustainable SHN programmes. Participants learned how this has resulted in strong community participation in SHN services through the efforts of School Management Committees and Parent Teacher Associations, and through effective linkages between the District Assembly, Ghana Education and Health Services, private organizations, and technical support agencies such as JICA through WACIPAC's school-to-community parasitic diseases control project. Overall, 94% of participants reported that the field visit made a very good to excellent contribution to their understanding of the issues explored in the course.

"The community has to be actively involved in all activities for positive results." Course participant.

THEMATIC GROUP SESSIONS

One day of the course was used to enable participants to break into small groups and take part in thematic group sessions relevant to their particular professional responsibilities. The sessions enabled in-depth consideration of one of four different thematic areas, each led by a professional of recognized international expertise. The areas offered were Deworming, School Feeding, Education Sector Responses to HIV Prevention, and Community Participation and Advocacy. The thematic group sessions were rated by 87% of participants as very good to excellent in providing the opportunity to exchange information, while 88% of participants believed the thematic group sessions were effective in providing the opportunity to discuss key issues of interest in more depth.

LEARNING ABOUT MONITORING AND EVALUATION

Extensive consideration was given to the effective monitoring and evaluation of activities, helping to increase participants' awareness and ability to collect appropriate data using sound methods and to analyse systems. Participants gained experience in the construction of log frames, tailored to their specific country situation, and based on each of the four FRESH pillars. The constructed log frames comprised both vertical logic of goals, objectives/outcomes, outputs, activities and resources required, as well as horizontal logic of indicators, means of verification and critical assumptions (see Figure 2). In addition to this, technical monitoring and evaluation presentations and examples of a current monitoring and evaluation system demonstrating good practice were provided. Overall, 90% of participants reported a very good to excellent improvement in their monitoring and evaluation knowledge and capacity as a result of being on the course.

CONSIDERATION OF LIFE SKILLS PROGRAMMING

An important aspect of discussion during the course was the need for a holistic response to life skills education that not only recognizes the need for children to gain skills, but also recognizes the different constraints that children's environments place upon their ability to exercise the skills gained. Although 100% of participating countries offered some form of life skills education, delivery of such education did not appear uniform, but rather, many different activities took place to different extents and in different contexts. Often effective promotion of the subject is impeded by it being non-examinable. In particular, the need for enhanced training of teachers was highlighted, especially during pre-service training, to improve their capacity to deliver life skills education effectively.

LEARNING ABOUT COMMUNITY INVOLVEMENT

Another major topic of debate throughout the course was the establishment of effective linkages with communities to ensure sustainable implementation of SHN programmes. Input was received from a Ghanaian non-governmental organization, the "Community Directed Development Association" which works to mobilize local resources and groups towards the implementation of SHN and other interventions. Participants considered how community involvement can enhance the effectiveness and sustainability of SHN programmes by facilitating policy formation and dissemination, by supporting school-based health promotion activities, by monitoring provision and usage of facilities, and by enabling improved coordination with local government.

CHANGE CONTINUUM	Narrative Summary	Indicators of Achievement	Means of Verification (Data Source)	Critical Assumptions (Beyond Immediate Programme Control & Control At Different Levels)
	Goals:			
	Objectives/Outcomes:			
	Outputs:			
	Activities:			
	Resources Required:			

Figure 2: Log Frames for School Health-Related Policy and SHN Services.

OBJECTIVE 2:

Strengthen global, regional, national and local partnerships that enable the implementation of sustainable and scaled SHN and HIV interventions.

Networking and greater engagement between sectors and across regions was the key outcome towards the achievement of the second course objective. The following activities supported this:

- Exhibitions of country and sector materials and a review of others in the Market Place.
- Design and presentation by teams of current country status in SHN and HIV prevention to identify strengths, gaps and priorities in programming.
- National, multi-sectoral country plans developed within teams and presented to all participants.

"I now understand definite areas of partnership and it will enhance my capabilities."

Course participant.

The Market Place took place during an evening of the course, and provided a forum for each country to exhibit different products and materials associated with its school health, nutrition and HIV prevention activities. This session enabled countries to share information with each other and showcase examples of excellent materials, such as Kenya's National School Health Policy and Ghana's School Sanitation and Hygiene Education Manual. UNESCO also participated in the forum. SHN resource materials, such as the HIV in Education Sourcebooks and the One Childhood and Courage and Hope DVDs, proved popular. As participants mingled informally between the different displays, they found the Market Place an excellent forum for focused networking and problem solving.



"Before coming on this course I had never even met my counterpart from the ministry of education. Now we have become friends and will work on our country's school health programme together."

Health sector course participant.

Presentations of national plans drafted during the course were considered a very good to excellent tool in assisting teams improve their country's plans by 80% of participants, with 91% of participants strongly believing that they benefitted from hearing about different countries implementation activities, and 83% of participants strongly believing that they gained ideas which enhanced their ability to implement their country's plan. Overall, 78% of participants rated the course as very good to excellent in providing an opportunity for networking with SHN and HIV professionals, and similarly, 81% rated the course as a very good to excellent opportunity to develop or strengthen relationships with other colleagues during the course. Most importantly, 87% of participants strongly believed that networking with colleagues achieved during the course would assist them in their professional work.

"I realise that there are some things that are done in other countries which are not well considered in my country: this is an occasion to think about them." *Course participant.*

OBJECTIVE 3:

Provide evidence-based messages for communications and advocacy to build political and financial commitment for the provision of SHN and HIV prevention programmes.

A critical component of the course concerned equipping participants with evidence-based advocacy tools to make the case for SHN programming within their ministries and among stakeholders in their home countries. Particular emphasis was placed on helping participants learn more about the evidence that:

- SHN interventions improve the quantity and quality of children's education by improving enrolment, attendance, and cognitive performance and by decreasing drop-out rates.
- SHN interventions improve children's health through reducing infection and preventing disease.
- Education interventions improve children's health by changing behaviours e.g. acting as the "social vaccine" against infection with HIV.

Participants received an array of different resources that could assist advocacy, ranging from briefing sheets and learned documents to films, electronic toolkits, WACIPAC's flip charts, and a story book and game on the control of worm infestation and malaria developed from data collected in primary schools and the community. More importantly, participants grew in the confidence and skills necessary to campaign for sustained political and financial commitment for the provision of SHN and HIV prevention programmes. A major focus of discussion was the difficult issue of securing funding for activities: participants considered the need to ensure the participation of all stakeholders in the development of strategic plans as an effective means of enabling subsequent funding of activities. Funding and human resources were identified as the final step required for policy implementation.



"I have gained some insight into how other countries are involving their communities in the management of SHN in schools." Course participant.

Ninety per cent of participants strongly believed that what they had learnt on the course would shape the kinds of activities for which they would request resources, while 78% of participants rated the materials received during the course as very good to excellent in enabling them to motivate for additional political interest in this field. Overall, 88% of participants rated a very good to excellent improvement in their appreciation and awareness of the importance of SHN and HIV prevention.

"I hope to engage myself in aggressive advocacy within my ministry to ensure that we carry out our responsibilities as spelt out in the developed log frame and subsequent work plans." Course participant.

COURSE EVALUATION

Immediate feedback was gathered from a detailed evaluation form completed by all 33 participants on the final day of the course. The feedback from the course evaluation was extremely positive with

94% of participants rating the course overall as either very good or excellent.

Further evaluation on the impact of the training will occur through the collection of data 6- and 12-months post-course. A full report on the course evaluation can be obtained from PCD upon request.



The sixth annual course on *"Strengthening Contemporary School Health and Nutrition and HIV Prevention Programmes"* will be held at the University of Ghana, Accra in June 2010.

For further information and for a registration form, please refer to the websites: www.child-development.org and www.schoolsandhealth.org or alternatively contact:

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