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It’s extraordinary when what was once the very cutting edge of technological advance becomes standard, everyday practice adopted around the world – the internet, digital imaging, Global Positioning Systems – the examples are legion and yet they still make us wonder at how things change. In the field of school-based health and nutrition (including responses to HIV and AIDS), the work of PCD is very much part of this story. We help turn what were once radical innovations into commonplace activities. At the same time, we think what was previously unthought-of – pushing out the boundaries of existing technology and understanding – so that the health and nutrition of school-age children in low income countries around the world can be improved in ways that we can barely, as yet, imagine. We are proud to share with you in this annual report some of the highlights of how this occurred for us in 2009.

Twenty years ago, health and nutrition interventions targeted at school-age children were few and far between. In the years since, PCD has pioneered a range of responses designed to improve children’s health and education including mass deworming delivered by teachers, school-based responses to malaria, education sector-led prevention and mitigation of HIV and AIDS. In 2009, what was once revolutionary became global. In these pages you will read how our support to Deworm the World saw 20 million school-age children targeted for intestinal parasite treatment, how toolkits enabling schools to address malaria are being disseminated across Africa, and how messages about the role of the education sector in addressing HIV and AIDS are now reaching millions.

As old problems are more comprehensively addressed, so new issues arise that grab our attention and demand a response. The food crisis of 2008 asked the most searching questions to governments and the international community. We asked, “How can schools be part of the answer?” In response, in 2009, PCD began groundbreaking and major work through our “Home Grown School Feeding” initiative in which we will provide support and expertise to governments to design and manage school feeding programmes sourced with local agricultural production. As the world edges close towards achievement of the Millennium Development Goal of universal primary education, the need to ensure that all children can make the very most of the education they receive becomes ever more pressing. In 2009, through helping pioneer technology that is as brilliant as it is simple, we supported advances towards ensuring that all children that need spectacles can receive them safely and at low cost. Some issues remain almost intractable and deeply difficult to address. We report here on work in Zimbabwe that seeks to improve the health and education of their most vulnerable children through innovative technologies of “conditional cash transfers”.

PCD is enormously fortunate to benefit from the partnership and support of its many friends around the world, and to you all I extend my deepest gratitude. I am grateful also to those closer to home who make our work possible – the Department of Infectious Disease Epidemiology at Imperial College in which we are based, our outstanding International Advisory Board and Technical Advisory Group who help guide and shape our strategy and activity, and finally the dynamic and hardworking team at PCD’s Coordinating Centre who with such dedication make our work possible.

Michael Beasley
Director of PCD

The past year has been memorable for PCD for many reasons, but particularly so because of several arrivals and departures. In April 2010, we sadly bade farewell to our Director of the past two years, Michael Beasley. Michael first joined PCD as a doctoral student in 1992, and then stayed on in a number of capacities. Fortunately, PCD has not lost Michael entirely, since he now serves in yet another role, this time as a member of our Technical Advisory Board.

This year has also witnessed the return of two PCD veterans: Jane Lillywhite as the Managing Director and Lesley Drake as the Executive Director. Jane was a research coordinator for helminth programmes when PCD was first established, while Lesley has been with PCD since 1998, serving as Director until her secondment to Deworm the World in 2008. We warmly welcome them both back into the fold.

Nilanthi de Silva
Chair of PCD’s International Advisory Board
School health and nutrition (SHN) programming necessitates working across the education, health and nutrition sectors. The Partnership for Child Development (PCD) adopts a cross-sectoral approach to develop the most effective, scaled and sustainable programmatic solutions to improving the education, health and nutrition of school-age children and youth in low and middle income countries. Critical to PCD’s work has been the ability to appreciate the concerns, priorities and cultures of both the education and health sectors and to enable effective partnerships between the two. PCD also promotes a gender-aware life cycle approach and includes programmes on pre-school children, school-age children and youth in its portfolio. Essential to our activities are partnerships formed with many different groups, including governments, bilateral and multilateral agencies and non-governmental organizations (NGOs).

PCD consists of a global consortium of civil society organizations, academic institutions and technical experts with a coordinating centre based at Imperial College London. The role of the centre is not to act as an implementing agency, but to engage specific experts, in specific countries, on specific issues, as and when required. In this way, PCD brings together a distinct combination of academic excellence, technical expertise and high level networks to governments and international organizations, resident in many different countries.

The work is constantly evolving as PCD examines potential new ways to improve school-age children’s health, nutrition and education. PCD is recognized internationally for its focus on quality science in development and its work has shown how simple health and nutrition interventions, implemented through schools, can improve not only children’s physical wellbeing, but also their education and life choices; both in the short- and long-term.

**Goal**

The goal of the PCD Global Programme is to improve the educational achievement of children, especially girls, through national programmes that enhance the health, nutrition and psychosocial status of children in low and middle income countries.

**Objectives**

To achieve this goal, PCD has identified four key objectives:

1. **To strengthen the evidence-base:** Leading to promotion of good practice of cross-sectoral SHN programmes.
2. **To strengthen the capacity of the education sectors in low and middle income countries:** Leading to the development of policies and plans for cross-sectoral programmes in SHN, early child development, HIV education and support for orphans and vulnerable children.
3. **To improve, collect, share and disseminate knowledge:** Promoting the evidence for cross-sectoral SHN programmes.
4. **To strengthen global, regional, national and local partnerships:** Facilitating consensus and supporting effective programme coordination and implementation.

**Our Approach**

**Rapid and flexible**
The combined resources of in-house experience and partner cooperation at all levels enables PCD to respond rapidly to provide considered and robust guidance and support anywhere in the world.

**Experienced**
PCD is among the world’s foremost authorities in SHN programming with expertise ranging from design, through implementation to evaluation.

**Collaborative**
PCD harmonizes the response of all sectors and stakeholders, drawing on the expertise and resources of each, to ensure that the objectives of all are met.
PCD enhances the education, health and nutrition of children by conducting groundbreaking research that equips countries with guidance and insight that informs evidence-based development of policy and practice.

Highlights of 2009

Strengthening the Evidence-Base

PCD was founded, and remains embedded, within the academic environment of Imperial College London, in order to bridge the gap between the latest academic research and the needs of countries standing to benefit from the application of such knowledge. The use of evidence-based approaches ensures that programmes are more likely to succeed. PCD continues to produce high quality research, both academic and operational, in diverse areas informing SHN practice. The research spans the impact of childhood disease, orphanhood and SHN programmes on children’s health, school attendance and cognitive abilities; the impact of teacher health on education supply; and the cost benefit and economic analyses of SHN activities.

Part of PCD’s on-going programme of work is to identify and fill gaps in the knowledge-base. In order to maintain our position at the cutting edge of SHN, PCD continues to work to identify key emerging issues. In 2009, school feeding, conditional cash transfers and the provision of low-cost spectacles emerged as key areas for attention.

Rethinking school feeding

In response to the severity of the global food, fuel and financial crises and the need for prompt action, the World Bank Group created the Global Food Crisis Response Programme (GFCRP) in May 2008. This 2 billion US dollar programme was set up to provide immediate relief to countries hard hit by high food prices. Analysis of how recipient countries had spent this relief money soon showed that many countries chose to invest in school feeding programmes, which was surprising to many. Therefore, there was an obvious need to rethink school feeding.

Rethinking School Feeding: Social Safety Nets, Child Development, and the Education Sector was written jointly by the World Bank Group and the World Food Programme (WFP). It examines the evidence-base for school feeding programmes with the objective of improving understanding on how to develop and implement effective school feeding programmes. Firstly, as an effective safety net that is part of the emergency response to the social shocks of the global crises, secondly, as a fiscally sustainable investment in human capital as part of the global effort to achieve Education for All (EFA) and finally, to provide longer-term social protection to the poor.

Analysis showed that every country in the world, rich or poor, runs a school feeding programme of some sort. Coverage is most complete in high- and middle-income countries - indeed it seems that for most countries that can afford to provide food for their schoolchildren, do so. But where the need is greatest, in terms of hunger, poverty, and poor social indicators, the programmes tend to be the smallest, and usually targeted to the most food-insecure regions. These programmes are also those most reliant on external support. Supporting low income countries to scale-up sustainable school feeding models is an important area for development partners to focus their resources to best meet country needs.

School feeding programmes can provide both explicit and implicit transfers to households and can increase school attendance, cognition, and educational achievement, particularly if supported by complementary actions such as deworming and food fortification. When combined with local purchases of food, school feeding can potentially be a force multiplier, benefiting both children and the local economy.

The key concern today is not whether countries will implement school feeding programmes, but how and with what objective.
The transition to national ownership

Past experience shows that countries do not seek to exit from providing food to their schoolchildren, but rather to transition from externally supported projects to nationally-owned programmes. Low income countries transitioning toward sustainable, government-funded implementation of school feeding programmes provide the perfect opportunity to strengthen links between school feeding, agricultural, and community development.

Rethinking School Feeding identifies five stages in this transition process, (see Figures 1 and 2) and draws three main conclusions. First, programmes in low income countries exhibit large variations in cost, with concomitant opportunities for cost containment during the transition process. Second, programmes become relatively more affordable with economic growth, which argues for focused support to help low income countries to move through the transition. Thirdly, the main pre-conditions for the transition to sustainable national programmes are mainstreaming school feeding in national policies and plans, national financing, and national implementation capacity. Countries that have made this transition have all become less dependent on external sources of food by linking the programmes with local agricultural production. This is the main drive behind Home Grown School Feeding (HGSF) (see page 23).

The near universality of school feeding provides important opportunities for PCD, WFP, the World Bank, and other development partners to assist governments in rolling out productive safety nets as part of the response to the current global crises and to sow the seeds for school feeding programmes to grow into fiscally sustainable investments in human capital. Rethinking School Feeding will be useful to government agencies and non-profit organizations working in education reform and food and nutrition policies.

With over 3,000 hard copies and soft copy downloads to date, the uptake of Rethinking School Feeding from policymakers, implementers and researchers worldwide has been remarkable. The book has also been translated into seven languages and has been cited widely in academic, policy and programme publications.
Cash transfer project in Manicaland, Zimbabwe

Research into cash transfers provided to households caring for orphans and other vulnerable children has shown the positive effects such programmes have had on the health and education of children living in middle income countries, but as yet there is little data for low income countries. To fill this gap in the knowledge-base, PCD in collaboration with the United Nations Children’s Fund (UNICEF) and the Wellcome Trust has funded a project by Dr. Simon Gregson from Imperial College London and researchers from both Catholic Relief Services (CRS) and the Biomedical Research and Training Institute (BRTI) to investigate the effects of cash transfers on the wellbeing of children living in vulnerable households in Manicaland, Zimbabwe.

In the evaluation, 30 communities received one of three programmes: a conditional cash transfer (CCT) programme – whereby conditions were attached to the cash transfers to ensure that child beneficiaries were sent to school and were able to access basic health services; or an unconditional cash transfer (CT) programme; or basic agricultural assistance (the control programme). The effects of cash transfers on school attendance, vaccination status and birth registration were then measured. A baseline census was conducted in September 2009, before the cash transfer programmes began, and a follow-up survey to provide data for the final evaluation, has been scheduled for November 2011.

In the baseline census, 4,116 eligible households were identified (24% of all households in the programme areas). The most common characteristics of eligible households were extreme poverty and caring for orphans or chronically-ill members. Cash distribution began in December 2009 with eligible households receiving between 22 to 30 US dollars every 2 months. Around 8,775 orphans and other vulnerable children live in households that are now receiving regular cash transfers. A further 3,423 are living in households in control communities and have received the basic agricultural assistance package.

Monitoring of compliance with conditions, in the CCT communities, has now begun following a 6-month grace period to allow beneficiaries to adjust to the transfers and the conditions. Early results showing increased birth registration, vaccination and school attendance suggest that the pilot CCT and CT programmes are improving the lives of vulnerable children in Manicaland, Zimbabwe. Further studies to evaluate the sustainability and comparative cost-effectiveness of conditional and unconditional cash transfers will build on this pilot study.
Examining the effectiveness of low-cost spectacles

It is estimated that 180 million school-age children in the developing world would benefit from vision correction and yet the majority of these children do not have access to affordable eye examinations or eyeglasses.

This presents a major issue for child development with impacts ranging from poor academic performance, absenteeism and drop-out from school to poorer employment prospects. Uncorrected vision in children will reduce the benefits of global investments in education and hinder the attainment of the education-related Millennium Development Goals (MDGs) and EFA goals.

Photograph by Tom Merilion, courtesy of Vision for a Nation.

The developing world has insufficient eye care professionals, where equipment and eyeglasses are often expensive and difficult to obtain. At a PCD-funded conference held in Oxford in 2007 to investigate this issue, one approach suggested was the provision of adjustable or self-refractive eyeglasses. Adjustable or self-refractive eyeglasses allow children to correct their own vision without the need for eye care professionals and expensive equipment, which is perfect for parts of the developing world where these resources are in short supply. There is also great potential for major distribution of these eyeglasses through existing SHN programmes.

As a result of the conference, a global research team was created to conduct a PCD-funded ‘Child Refraction Study’ to investigate the safety and potential success of mass delivery of adjustable or self-refractive eyeglasses to the developing world.

The primary aim of the study was to determine whether children were able to correct their vision under the supervision of teachers by comparing the accuracy of the self-refraction with other methods used by eye care professionals. The study itself was carried out in Boston, USA, and in Shantou and Guangzhou, the People’s Republic of China.

Early findings from this innovative study show that self-refraction compares well with other eye testing methods used in the developing world where access to eye care professionals are limited. These new eyeglasses are also able to solve the problem of poor supply of eyeglasses for children once tested. This can all be achieved without specialized or expensive equipment and personnel. Self-refraction would also address the common problem of inaccurate or outdated eyeglasses by allowing modifications when necessary.

On the basis of these findings, PCD is now carrying out operational trials to assess whether children would accept the eyeglasses for daily wear and if they can be delivered to children through the education sector.
Other Selected PCD Activities on Strengthening the Evidence-Base

Helminth drug resistance

With the increase in the scale and number of mass drug administration programmes for deworming, researchers from Imperial College London and McGill University in Canada are conducting a global study to investigate the potential development of drug resistance. Genetic analysis of samples collected from across the world are being monitored to show whether there is an emergence of drug resistant parasites.

Helminth mapping

PCD is working with the London School of Hygiene and Tropical Medicine (LSHTM) to develop an open access, global information resource on the distribution of human helminth infection, especially those worms that affect the health and nutrition of school-age children. As part of this, PCD is supporting work to complete the identification, cataloguing and mapping of helminth survey data for Africa, Asia, the Caribbean and Latin America.

Impact of SHN on cognitive ability

PCD has partnered with the Ministry of Education and Health in Sri Lanka to conduct an impact evaluation of two key SHN interventions (namely school-based deworming and iron supplementation) on the cognitive ability of schoolchildren in the plantation sector of Sri Lanka. This research will significantly add to the evidence-base for the impact of school-based health initiatives on the learning ability of the most disadvantaged schoolchildren.

Impact of HIV on Education for All (EFA)

PCD and partners developed the Ed-SIDA model which is now routinely used to analyse the global impact of HIV on the education system and efforts to achieve EFA and other education-related MDGs. Findings from this research concluded that the impact of HIV is sufficient to derail efforts to achieve EFA in several countries in sub-Saharan Africa, but not in East Asia or the Caribbean. The model predicts that universal access to antiretroviral therapy (ART) in the next 5 years, coupled with making ART and HIV prevention education available to teachers, could reverse this impact in some countries.

Impact of HIV in Trinidad and Tobago

Trinidad and Tobago is a country with high HIV prevalence and, as a small state, can suffer disproportionately from shocks to its education system, such as those caused by HIV. An Ed-SIDA analysis on the impact of HIV on education was performed using data from the Ministries of Education and Health in Trinidad and Tobago. This analysis showed that the impact of HIV was estimated to be low but likely to increase in the future, especially where the provision of ART is not increased to all teachers requiring it.

Impact of school fees on enrolment in Ghana

In collaboration with the Ghanaian Government, PCD is examining the medium- and long-term impacts of secondary education for a cohort of students who earned admission into a senior secondary school, but could not afford to pay the fees. The study identified 2,000 students who took the senior secondary school qualifying exam in April 2008 and then gained admission into a senior secondary school in September 2008, but who did not enrol because of financial distress. Follow-up surveys on the impact of school fees on enrolment in Ghana are currently in process with forthcoming results.
East African Community: Situation analysis

As part of PCD’s continuing technical support to the Education Sector SHN Network for Eastern Africa, PCD completed a situation analysis on SHN and HIV prevention in the East African Community (EAC) Partner States. As well as including a regional analysis, the report also included a national analysis for each of the EAC Partner States.

Monitoring and evaluation

PCD coordinated technical experts within the FRESH (Focusing Resources on Effective School Health) partners collaboration, to develop a generic monitoring and evaluation framework that builds on the good practice of the partners. This effort sought to synergise existing resources and provided monitoring and evaluation guidance.

Publications arising from the above studies are listed on pages 28-29. To download these studies, see www.schoolsandhealth.org

PCD’s work on strengthening the evidence-base provides:

- Strong advocacy tools for the impact of SHN on the education sector and achievement of EFA and the education MDGs;
- Assessments of new technologies and interventions that can be used to improve the health and nutrition of school-age children around the world;
- For the development of education sector policies and plans to accelerate countries' response to HIV;
- For the rationale for school feeding models tailored to work within a range of countries and contexts; and
- Strategies targeting methodologies to improve the scale and sustainability of school-based deworming.
Capacity Building and Technical Assistance

Providing resources to support countries’ development is only effective where there is adequate in-country capacity to utilize this assistance appropriately. The Paris Declaration on Aid Effectiveness (2000) identifies the institutional capacity of partner countries to design and implement development strategies as a key weakness preventing the successful utilization of development partners’ assistance. Hence, implementing contemporary valuable in-country SHN programmes requires the development of institutional capacity in SHN programming embedded within national governments. PCD continues to build upon its successes and experience in order to contribute successfully towards the development of SHN capacity.

School-based deworming

Over 400 million school-age children are infected with parasitic worms which harm their health and development and limit their ability to access and fully benefit from the education system. Children, at an age of rapid growth and development suffer the highest intensity of worm infections and, consequently, the greatest morbidity.

Worms can cause impairment of mental and physical development, malnourishment and anaemia. In the short-term, children infected with worms may be too sick or tired to attend or concentrate at school. In the long-term, worms can cause impaired cognitive development, decreased educational achievement and reduced adult earning potential.

School-based deworming is a safe, simple, and cost-effective solution. It has been shown to reduce school absenteeism by 25%, and at less than 50 US cents per child per year, school-based deworming is recognized as one of the most cost-effective methods of improving school participation ever rigorously evaluated.

The World Health Organization (WHO) aims to reach 75% of at-risk children by 2010, but as yet, only 15% of children are being regularly dewormed. To tackle this shortfall, a group of Young Global Leaders of the World Economic Forum launched ‘Deworm the World’ in 2007. This initiative works with governments and development partners to strengthen institutional capacity to run effective school-based deworming programmes. PCD provides key technical support to Deworm the World and together they work in 25 countries around the globe to assist governments in developing and scaling up sustainable programmes.

National deworming programme in Kenya

PCD in collaboration with Deworm the World has been assisting the Kenyan Ministry of Education to target and deliver a national deworming programme. In 2009, this partnership enabled the implementation of a scaled and sustainable programme which trained 16,000 teachers and dewormed over 3.6 million children.

By 2009, the Government of Kenya had taken several key steps in developing a national deworming programme which included, earmarking 1 million US dollars for the programme, creating training materials and developing pilot deworming programmes. However, there were still a number of key obstacles to implementing a sustainable programme. To support the government to overcome these obstacles and scale up this national programme, PCD together with Deworm the World were invited to provide a technical support package which included strengthening cooperation and partnerships between stakeholders, leveraging resources, and providing logistical and technical support.

A key area of PCD’s technical assistance to this programme was its expertise in mapping ‘where the worms are’. This mapping is vital to the strategic design and implementation of an effective and sustainable control programme. This is a direct application of principles and techniques developed through the Global Atlas of Helminth Infections (GAHI) project, led by PCD’s Technical Advisory Group member Dr. Simon Brooker.

Timeline of Kenyan deworming policy initiatives.

PCD enhances the education, health and nutrition of children through expert support in government planning for SHN activities, providing high quality training to educationalists and public health professionals and supporting the participation of new sectors’ in SHN activities.
Treatment shall be administered to all school-age children, including those out of school, based on the prevalence and intensity of worms and bilharzias in the area.

Kenya School Health Policy and Guidelines

With over 1,200 surveys carried out over the past two decades, a wealth of information was available. Collation and mapping of these surveys, in combination with climatic data, provided a predictive model showing areas of high levels of infection. This model demonstrated the need for school-based deworming in 45 districts clustered within three main geographic areas of high population. Rather than deworming in every region in Kenya, a programme was designed to only treat children in schools in these three at-risk areas. By eliminating treatment in areas where worms are not a problem, the overall programme coverage was reduced by two-thirds, resulting in a targeted programme that was more efficient in terms of both cost and management.

Following this, a strategic operational plan was developed. This included a cascade training programme for master trainers, district level personnel and teachers that enabled them to support staff to deliver programmes in their schools. Using this cascade system, over 16,000 teachers and 1,000 district personnel were trained. Additionally, to encourage participation by the recipient communities, a large scale sensitization campaign was conducted which provided accessible information about both the impact of worm infections and safe and reliable school-based treatment.

The programme was hugely successful both in terms of coverage and cost. In year one, all targeted districts were covered, and over 3.6 million Kenyan children (72% of those identified as at-risk) in more than 8,200 schools were dewormed. This treatment was achieved with an overall price tag of approximately 36 US cents per child.

PCD, working together with Deworm the World, continues to provide technical support to the Government of Kenya as they sustain their programme into its second year. In 2010, a new round of mapping will be carried out, allowing for a dynamic refinement of the targeted areas over time. The programme will scale up to include all schools where worms are a problem.

Map (A) shows districts in Kenya predicted to have high prevalence of soil-transmitted helminths, and thus, warranting mass treatment, modelled from available survey data (B) and climatic and environmental information. These target districts correlate with the main centres of high population density (C) and school enrolment.

The annual short course on school health, nutrition and HIV prevention, seeks to enable governments and other organizations in low income countries to improve the health and education of millions of the world’s poorest children. This prestigious international course is an exciting North-South collaboration that brings together expertise from academic institutions in Ghana, Kenya and the United Kingdom (UK). It is a unique opportunity for SHN practitioners, educationalists and policymakers from across sub-Saharan Africa, to further develop their knowledge, capacity and technical expertise on thematic areas such as deworming, malaria and school feeding. The lessons learnt and skills developed during this short course can then be taken home by participants to share with colleagues to further strengthen their country’s SHN efforts.

The course was run jointly by the Eastern and Southern Africa Centre of International Parasite Control (ESACIPAC), Kenya, PCD, UK, and the West African Centre for International Parasite Control (WACIPAC), Ghana. Participants from 10 African countries (Burundi, Ghana, Kenya, Madagascar, Malawi, Nigeria, Rwanda, Senegal, Sierra Leone, and the United Republic of Tanzania) took part in the course in 2009. These representatives came from a wide range of different organizations and included members from the Ministries of Agriculture, Education, and Health, international non-governmental organizations (INGOs) and the private sector. During the course, participants examined the FRESH framework focusing on strategies and techniques that enable the coordinated implementation of multi-sectoral and scale level SHN and HIV prevention programmes. “Hands-on” experience was gained by participants in drafting basic SHN operational plans specific to their countries’ needs, incorporating activities, outcomes and objectives for inclusion in national frameworks of action.

A field visit to local schools provided the opportunity to see firsthand how the SHN theories discussed during the course were actually being put into practice. The group heard from both teachers and students about the challenges that local schools faced when enrolment increased dramatically as a result of successful programme implementation. The field visit culminated in a meeting with the local government representatives who are active in encouraging the whole community to promote the implementation of integrated and sustainable SHN programmes. Participants learned how this 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. Ninety-four per cent of participants reported that the field visit increased their understanding on the issues explored throughout the course.

Overall, this participatory course strengthened capacity at the national level of both health and education sectors to support all SHN and HIV prevention components and provided evidence-based messages to build in-country political and financial commitment.

PCD’s work on capacity building and technical assistance:

- Ensures ownership among key leaders;
- brings the latest research and mapping techniques to policymakers and programme implementers;
- strengthens cooperation and partnerships between stakeholders, leverages resources, and provides logistical and technical support to catalyse sustainable national SHN programmes; and
- provides learning environments to share good practice across a diverse set of perspectives for example, from countries to implementation levels, etc.
Collecting and Disseminating Knowledge

In terms of collecting and disseminating knowledge on SHN programmes, 2009 has been an exciting year. PCD continued to make use of traditional media such as the publication and dissemination of hard copy documents including papers, reports and training materials to enable advocacy, policy and planning for SHN practitioners. PCD manages a range of online global resources, including the Schools & Health website and associated sub-sites, the FRESH portal website, and the PCD website, continually tailoring the functionality and accessibility of these resources to meet the information needs of the global SHN community. During 2009, PCD continued to focus on interactive media, further expanding the SHN Mailing List, thereby providing a platform to enable the sharing of SHN expertise between practitioners and experts.

The work of PCD in supporting effective SHN programmes can be seen as a continuum where research conducted to strengthen the evidence-base once completed is then disseminated and promoted to support the work of SHN stakeholders. The following two examples illustrate how PCD works in this area.

Malaria Control in Schools: A Toolkit

Schools and governments are increasingly recognizing the importance of malaria prevention and control for the health and education of school-age children. Yet, there is currently little international consensus as to what schools can do to implement this.

To address this information gap, PCD developed a toolkit *Malaria Control in Schools* to assist countries to develop effective programmes to tackle malaria in schools within the context of school health programmes. Information in the toolkit was identified through structural searches of the literature, advice from malaria and school health experts, and visits to selected countries to learn from best practice.

A draft version of the toolkit was launched in December 2008 in Dakar, Senegal, at a regional meeting of SHN coordinators from 20 African countries. Feedback received from the meeting informed a revision of the toolkit. In addition, the toolkit was reviewed by experts from both health and education sectors.

The toolkit helps users to understand why the education sector should respond to malaria; the benefits of controlling malaria in schools; the appropriate malaria interventions which can be delivered through schools; examples of promising practice at scale; the key issues in developing a school malaria programme; how to formulate a national Malaria Control in Schools strategy; and how to design a malaria component of a wider school health programme.

It is hoped that *Malaria Control in Schools* will enable professionals within the education sector to develop effective programmes on the prevention and control of malaria for school-age children within malaria endemic countries. The finalized toolkit was presented during a World Bank Malaria Impact Evaluation Workshop in Cape Town, South Africa in December, 2009. Malaria teams from a number of countries, including Nigeria and Zambia, attended the Workshop and have subsequently used the toolkit in their schools for malaria planning. In addition, the toolkit has been disseminated during country visits to Kenya, Malawi, and Senegal.

The toolkit has been well received and has already been widely used to inform national planning efforts for both school health and malaria control. The toolkit can be downloaded from the Schools & Health website [www.schoolsandhealth.org/Pages/Malaria.aspx](http://www.schoolsandhealth.org/Pages/Malaria.aspx)
Courage and Hope makes World AIDS Day news in London, Nairobi and Washington, D.C.

To mark World AIDS day on 1st December 2009, PCD and the World Bank joined forces with the stars of the internationally renowned film Courage and Hope to promote, across three continents, the message of teachers living positively with HIV.

An estimated 122,000 teachers in sub-Saharan Africa are living with HIV, most of whom have not sought HIV testing and do not know their HIV status. Stigma remains the greatest challenge and the major barrier to accessing and providing assistance to these teachers.

The film was a collaboration between PCD, the World Bank, the Joint United Nations Programme on HIV/AIDS (UNAIDS), Kenya Network of HIV-Positive Teachers (KENEPOTE) and the Ministry of Education HIV Networks of Africa, and tells the remarkable stories of four teachers from Kenya living with HIV and their fight to dispel the myths and discriminations associated with the HIV infection.

Leaving behind their Kenyan schools, Margaret Wambete and Martin Ptoch travelled to the UK for the film’s premier at the Houses of Parliament in London. Attended by politicians and representatives from the UK’s leading HIV and AIDS organizations and teacher unions, the event opened up new avenues to further raise awareness of the issues faced by HIV-positive teachers. As a result of this event, the film has been made available to over one million weekly visitors to the HIV and AIDS website www.avert.org. Britain’s largest association of unions, the Trades Union Congress (TUC), will be using the film as a key resource in their work supporting international colleagues facing up to the social stigma attached with HIV and AIDS.

In Washington, D.C. Beldina Atieno addressed delegates at the World Bank's World AIDS Day event about her experiences of living with the HIV virus. The event, attended by United States (US) Deputy Secretary of State and Chief Executive Officers from leading US AIDS agencies, again made the news with articles about Beldina’s story appearing on The Voice of America website and the leading health website www.getbetterhealth.com.

World AIDS day is about more than just the public health professionals and policymakers, it is also about engaging the general public, and back home in Kenya, Courage and Hope was screened twice on the country’s Citizen TV.

The channel with its weekly audience of 8 million and extensive reach into the rural areas of the country meant that more and more people were able to hear the teachers’ stories and learn from their experiences.

The teachers are keen to take their message further and they are already lined up to encourage and cajole yet more key figures involved with the fight against HIV and AIDS at a conference in Ethiopia in early 2010.

Following on from this, Baney Media who produced the film on behalf of PCD, will be re-editing Courage and Hope and the 2008 film One Childhood about SHN in Eritrea, to broadcast across America’s Public Broadcasting Service Network, accumulating an audience of approximately 11 million from the broadcast.

The documentaries Courage and Hope and One Childhood can be viewed at: www.schoolsandhealth.org and requests for copies of the DVDs can be emailed to: pcd@imperial.ac.uk
Collecting and Disseminating Knowledge online

PCD website

Since its formation in 1992 PCD has been committed to improving the education, health and nutrition of school-age children and youth in low income countries by conducting and supporting research to strengthen the evidence-base for good practice in implementation of SHN programmes, with sharing and dissemination of the knowledge obtained on topics including: the delivery and cost of SHN interventions; worms; malaria; nutrition (including micronutrients) and sexually transmitted infections (including HIV).

Relaunched in 2008, the PCD website is designed to showcase our organization. It contains current information on who we are, what we do and where we work. This website links to the Schools & Health website which is the major component of PCD’s online work of collecting and disseminating SHN knowledge and expertise.

Schools & Health website

The Schools & Health website was developed in response to demand for a global website covering current SHN issues. It was one of the first global SHN websites and went on to become the first to bring together information on HIV and education issues.

Hosted by PCD, but supported and endorsed by a wide range of multilateral and bilateral agencies and NGOs, this cutting edge online resource aims to provide contemporary and quality assured information, including more than 250 downloadable documents covering: strategy and policy, examples of good programming practice, technical reviews and toolkits, as well as current reports.

This information is provided in collaboration with PCD’s technical partners, drawing on their specific areas of expertise and filtered to provide examples of best practice in these areas. The site aims to provide easy access for policymakers, researchers, implementers and practitioners to a variety of resources drawn from across the SHN sector. The site also acts as a gateway directing users to resource sites which offer areas of SHN technical expertise in more depth.

Translations of many of these resources are available in languages including French, Portuguese and Spanish with some documents also available in Arabic, Chinese, Hindi, Kiswahili, and Russian.

PCD continues to monitor the activity of the website using Google Analytics. The most frequently visited pages in 2009 were: News & Events, Micronutrients, Documents Downloads, and Country Programmes. As part of the analysis, PCD can also determine where visitors to the website have come from: in 2009 the Schools & Health website received 26,954 visits from 3,207 cities across the world (see Figure 3). Visits from Africa (see Figure 4) accounted for 3,169 visits via 155 cities whilst Asia accounted for 5,251 visits via 359 cities. Using this information PCD will be conducting research, part of which will involve using Google Analytics, to determine if our current means of dissemination are the most effective to reach the global SHN community.
Network sub-sites

Hosted within the Schools & Health website (see page 19), the Ministry of Education HIV&AIDS Networks sub-sites (www.schoolsandhealth.org/Pages/MinistryofEducationHIVAIDSNetworks.aspx) supports the work of these Networks and allows members to share ideas, documents and good practice. The Network sub-sites are managed in partnership with the Networks by PCD, the United Nations Educational, Scientific and Cultural Organization (UNESCO–BREDA) and the World Bank. Through the re-development of the Schools & Health website, the Network sub-sites have increased functionality, including an interactive message board and integrating with popular social networking websites.

Food for Education sub-site:

Hosted within the Schools & Health website, the Food for Education (FFE) sub-site (www.schoolsandhealth.org/sites/ffe/Pages/Default.aspx) allows international agencies, national governments, NGOs and civil society to access and share reliable information on school feeding. Data are provided and updated by agencies operating school feeding programmes across the globe. School feeding assessment and cost issues are addressed and examples provided of how food assistance can support education. Key school feeding documents and resources are available for download.

Moving forward we will build on this online resource to increase the amount of school feeding information available in particular, providing resources on the linking of school feeding with local agricultural production.

The FRESH Portal website

The FRESH Portal website (www.freshschools.org) was set up at the request of, and in collaboration with, the FRESH framework founding partners: UNESCO, UNICEF, WHO and the World Bank. The Portal links to all FRESH partner websites, as well as other relevant technical websites. It also contains all of the key FRESH documents; collected together in collaboration with FRESH partners who bring expertise from their specific areas of interest, such as in water and sanitation.
Other Selected PCD Activities on Disseminating Knowledge

**SHN Mailing List**

With SHN programmes increasing in number and scope across the world, PCD established the SHN Mailing List in 1999. The list serves to share information on SHN, providing a global forum for discussion and debate on SHN. PCD has continued to facilitate greater access to the Mailing List for practitioners in SHN and HIV by promoting it to a diverse range of partners during meetings, workshops and in related fora. PCD has also increased accessibility and ease of subscribing to the Mailing List through a simple sign-up box on all of the websites that PCD administers. The Mailing List currently has approximately 600 subscribers from agencies and individuals throughout the world.

In 2009, topics promoted and discussed on the Mailing List included: *Courage & Hope*; SHN in Nepal; Education and SHN in Papua New Guinea; Deworm the World; and HGSF.

**Promoting quality education for orphans and vulnerable children: A sourcebook of programme experiences in Eastern and Southern Africa**

This report was a joint collaboration between PCD, UNICEF and the World Bank with support from SHN Focal Points across Africa. The sourcebook documents 12 case studies from sub-Saharan Africa that represent a wide range of approaches to addressing the educational rights and needs of orphans and vulnerable children. The report is designed to be relevant to anyone who is seeking to launch or improve work that enables orphans and vulnerable children to access quality education.

**IX International Congress on AIDS in Asia and the Pacific (ICAAP), 9 –13 August 2009**

At the ICAAP Congress, 1,000 copies of the document *School Health, Nutrition and HIV/AIDS Programming: Promising Practice in the Greater Mekong Sub-Region* were distributed to participants. PCD provided technical and editorial support to the Greater Mekong Sub-Region (GMSR) Network of School Health, Nutrition and HIV/AIDS Ministry of Education Focal Points to produce the document which aims to share best practices in the field of SHN within the GMSR and to facilitate the alignment and coordination of SHN activities of governments and development partners.

PCD’s work on collecting and disseminating knowledge enables:

- The use of a wide variety of media including film, internet and electronic resources and hard copy documents to disseminate the most up-to-date information on SHN technologies and evidence to thousands of different stakeholders around the world;

- the provision of a growing resource – the SHN Mailing List, that enables practitioners to share the latest information, ideas and opinions about approaches to programming and planning; and

- bringing together in a single website Schools & Health, of a readily available and highly extensive library of documents, country reports and information about all aspects of SHN that can inform the work and action of programme managers and policymakers in many different countries and contexts.
Supporting and Strengthening Partnerships

Partnerships are essential to PCD’s work around the world as we collaborate with governments, multilateral and bilateral agencies and NGOs in many different countries to work towards our goal of improving the health and education of school-age children. Such partnerships take different forms as occasion and tasks demand – from work with individual Ministries of Education to address country-specific activities and needs, to much more complex collaborations that enable global consensus about pressing issues in the field of SHN to be achieved.

With respect to the latter, a key development of 2009 was the launch of PCD’s new programme Home Grown School Feeding (HGSF). This initiative brings together stakeholders from a diaspora of organizations ranging from school cooks through to nutritionists, food storage managers and policymakers from the Ministries of Agriculture and Education. A central objective of this initiative is in strengthening partnerships and coalitions for in-country driven HGSF.

Home Grown School Feeding

School feeding: A social safety net

The current food, fuel and financial crises have highlighted the importance of school feeding programmes both as a social safety net for children living in poverty and food insecurity, and as part of national educational policies and plans. Appropriately designed school feeding programmes have been shown to increase access to education and learning, and improve children’s health and nutrition, especially when integrated into comprehensive SHN programmes (see Rethinking School Feeding on page 6).

School feeding (and SHN programmes generally) are now widely recognized as significantly contributing to the achievement of the education goals of the MDGs and EFA. The key to the success, scale up, and sustainability of these programmes has been the development of a multi-sectoral understanding, especially between education and health, as outlined in the internationally recognized FRESH programming framework.

Building on this global momentum, PCD has launched the new programme “Home Grown School Feeding” (HGSF) to support government action in sub-Saharan Africa to deliver cost-effective school feeding programmes sourced from local farmers.

Supporting countries in the transition to nationally owned school feeding programmes provides the perfect opportunity to strengthen links with agriculture and community development.

The programme, supported in part by a grant of 12 million US dollars from the Bill & Melinda Gates Foundation, is engaging with a wide range of stakeholders to promote agricultural development by using locally produced food for school feeding, providing regular orders and a reliable income for smallholder farmers, whilst also improving the education, health, and nutrition of local children.

With PCD acting as the lead coordinator, the initial 5-year programme is providing direct, evidence-based and context-specific support and expertise to governments to design and manage school feeding programmes sourced with local agricultural production. Due to the multi-sectoral nature of HGSF, PCD is working with key partners across education, health, and agriculture at global, regional, country, and local levels to ensure effective collaboration and support to government programmes.

Strengthening local agricultural production

As school feeding programmes run for a fixed number of days a year (on average 180) and normally have a pre-determined food basket, they also provide the opportunity to benefit local farmers and producers by generating a stable, structured, and predictable demand for their products, thereby building the market and the enabling systems around it. The ubiquity of school feeding programmes, their coverage and their potential for sustainability are three arguments in favour of supporting this approach.

As programmes expand and become nationally-owned and part of the national policy framework, the size and stability of the demand is increasing as well. This also provides an opportunity to put into practice productivity-enhancing technologies and practices that support local agricultural production and smallholder farmers – especially women who comprise over 70% of smallholder farmers in sub-Saharan Africa – and benefit the local economy.
With regards to the local private sector, jobs and profits can be created not only for farmers, but for those involved in the transportation, processing, and preparation of food along the school feeding value chain. These jobs created in rural communities can provide off-farm income-generation opportunities, many of which are usually filled by women. Off-farm investment can in turn further stimulate productivity and agricultural employment, producing a “virtuous cycle” benefiting long-term food security and improving welfare in rural households.

Working with key partners to engender national and local ownership

The HGSF initiative is driven by the New Partnership for Africa’s Development (NEPAD) vision for nationally-owned, sustainable programmes aimed at improving the food security of smallholder farmers, many of whom are women.

The programme explores key operational trade-offs, benchmarks, and good practice, analysing how HGSF can most effectively stimulate local agricultural production and create jobs and profit-making opportunities in rural communities.

PCD’s work in the field of SHN in sub-Saharan Africa already engages with the Regional Economic Communities (e.g., the EAC and the Economic Community of West African States – ECOWAS) and has supported the growth and development of Regional Networks of Ministries of Education Focal Points for SHN. These Communities and Networks recognize the impact that HGSF can have on education, health, and on rural prosperity. As countries are now seeking to develop or strengthen scaled and sustainable programmes, PCD is working with government ministries, leading universities and research institutions, and other key partners at the national and local levels.

At the international level, a number of multi-sectoral partners are engaged with the HGSF programme, including the Alliance for a Green Revolution in Africa (AGRA), NEPAD’s Comprehensive Africa Agriculture Development Programme (CAADP), Imperial College London, Institute of Development Studies (IDS), International Food Policy Research Institute (IFPRI), NEPAD, the World Bank, and WFP, amongst others.

Overall goals and key areas of focus

Through the funding provided by this grant and matching funds mobilized for support to HGSF in at least 10 sub-Saharan African countries, PCD anticipates that by 2014 the programme activities will have contributed to the following goals and focus areas:

Goals
1. Improving smallholder farmer income through improving access to market demand generated by HGSF programmes.
2. Improving the nutritional status of individuals within smallholder farmer households.
3. Improving education, health and nutrition of school-age children through sustainable and cost-effective school feeding programmes.

Focus areas
1. The current state of HGSF: Gathering landscaping knowledge on key questions that will influence the structure and implementation success of future programmes such as, How and Why HGSF programmes are implemented, governed, funded, and improved on the ground?
2. Strengthening partnerships and coalitions for in-country driven HGSF: Promoting the cooperation and coordination between the wide range of stakeholders, including the recipient countries, donors, implementing agencies and the private sector.
3. Strengthening the current knowledge-base: Reviewing the existing evidence-base (including gaps and priorities), developing planning and monitoring and evaluation tools, and disseminating examples of best practices.

Using evidence-based, multi-sectoral approaches, PCD is now working in partnership to explore how HGSF can most effectively improve the health and education of schoolchildren, stimulate local agricultural production, boost local and regional food production and create jobs and profit-making opportunities in rural communities.
Other Selected PCD Activities on Supporting and Strengthening Partnerships

In collaboration with a wide variety of partners including UNESCO, UNICEF, the World Bank, Education International (EI), and the Education Development Center, Incorporated (EDC), PCD provided support to a number of sub-Regional and Regional Networks of Ministry of Education SHN and HIV Focal Points:

*Working with the Ministry of Education Focal Point Networks, under the auspices of the Regional Economic Communities*

PCD continues to provide demand driven support to Regional and inter-Regional Networks and the Regional Economic Communities within which they operate. These include the following Networks and the Economic Communities: Eastern Africa (EAC and the Southern African Development Community [SADC]), West Africa (ECOWAS), Central Africa (Economic Community of Central African States [ECCAS]) and the Caribbean (Commonwealth Secretariat [COMSEC]) in collaboration with EDC. PCD also provides support to the emerging Southeast Asian Ministers of Education Organization/Association of Southeast Asian Nations (SEAMEO/ASEAN) Network, and the Lusophone sub-Saharan Africa Network of the Community of Portuguese and Language Countries (CPLP).

*Working with civil society, research and academic partners*

PCD continues to collaborate with civil society, research and academic institutions, including: the Asian Center of International Parasite Control (ACIPAC), Action Health Incorporated (AHI) – Nigeria, American Institutes for Research (AIR), Blair Research Institute – Zimbabwe, CRS, EDC, EI, ESACIPAC, Harvard, Kenya Medical Research Institute (KEMRI), KENEPOTE, Save – US, WACIPAC, and the UNAIDS Epidemiology Reference Group.

International Partnerships and Initiatives

PCD is an active member of a range of global partnerships and initiatives:

*UNAIDS Inter-Agency Task Team (IATT) on Education*

PCD continues to play a full role as a partner in the UNAIDS Inter-Agency Task Team (IATT) on HIV and Education. In 2009, PCD helped to coordinate the work of the IATT towards development of a concise set of indicators for the education sector response to HIV. These were agreed by the wider IATT group and went on to be field tested in a number of country settings. They also formed the basis of the IATT’s submission towards the revision of the United Nations General Assembly Special Session (UNGASS) indicators for HIV that is taking place in 2010.

*Deworm the World Initiative*

PCD is the lead technical advisor to the Deworm the World initiative. This initiative works to strengthen, and support sustainable school-based deworming programmes worldwide, by providing governments with in-depth technical assistance, coordinating strategic support, and advocating for large school-based deworming programmes. In 2009, this collaboration led to 20 million school-age children, from across 25 countries, benefiting from sustainable government-led deworming programmes.

In 2009, PCD was also a member of the following global partnerships and initiatives:

- The FRESH framework.
- FRESH partners’ SHN Monitoring Panel.
- Partners for Parasite Control (PPC).
- International School Health Network (ISHN).
- Neglected Tropical Disease Organization (NGTDO).
Countries with which PCD works

Outlined below is a selection of the capacity building activities that PCD carried out in 2009.

Sub-Saharan Africa

Nigeria

Working in partnership with AHI and the World Bank, PCD supported the Ministry of Education in Nigeria to host the 2nd Meeting of the Coordinating Committee of the ECOWAS and Mauritania Network of Ministry of Education SHN Focal Points. The meeting served to continue the sharing of knowledge and regional good practices.

Ethiopia

With technical support from PCD, the Federal Ministry of Education in Ethiopia produced and published an education sector policy and strategy on HIV and AIDS. The draft SHN strategy, also developed with the support of PCD, has now been reviewed by the State Minister of Education and plans are now being made for its national dissemination.

Kenya

At the request of the Kenya Teacher Service Commission and in collaboration with the Kenya Institute for Public Policy Research and Analysis (KIPPPRA), training was given in the use of Ed-SIDA, a computer-based model used by education planners to predict the impact of HIV and AIDS on education systems. Ed-SIDA is now an integral tool used by the Ministry of Education Planning Department.

Malawi

PCD undertook an in-depth analysis of the different options for SHN services in Malawi. This analysis, prepared in partnership with the World Bank and WFP, was in response to a request from the Ministry of Education and partners. This analysis focused on the implementation of essential SHN services based on Malawi’s current experience with these programmes, as well as feasibility and costing considerations.
Asia

India

PCD worked in collaboration with Deworm the World to support the State Governments of Andhra Pradesh, Bihar and Delhi in the implementation of school-based deworming programmes. This support included policy development, targeted design, training, development of plans and budgets, monitoring and evaluation, and awareness and community sensitization campaigns.

Sri Lanka

We continue to provide technical assistance to the Ministries of Education and Health joint ‘SHN Task Force’ to strengthen the comprehensive national programme. This programme is strategically designed to address the specific needs of children in different geographic areas of the island. The programme is now at-scale and has secured long-term financial support.

Caribbean

Belize

In collaboration with EDC, PCD provided technical support to deliver a two-day Policy and Development Workshop to senior stakeholders on the education sector’s response to HIV and AIDS. During the workshop a national education sector HIV and AIDS policy and strategy was drafted.

Trinidad and Tobago

In preparation for the development of a 5-year education sector strategic plan, PCD conducted a situational analysis on SHN and the education sector’s response to HIV and AIDS in Trinidad and Tobago.
Recent Publications

Key publications


Book chapters


Peer reviewed publications


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**Reports**


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**Films**

Funding and Resources


Income

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<td>Charitable Trusts/Foundations</td>
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<td>State Governments and Agencies</td>
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<td>138</td>
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<td>Private Research Institutions/Centres</td>
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<td>Non-Profit Research Institutes/Centres</td>
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<td><strong>TOTAL</strong></td>
<td><strong>7,539</strong></td>
<td><strong>8,382</strong></td>
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Direct Expenditure – by Objective

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<tr>
<td></td>
<td>(000s)</td>
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<tr>
<td>Strengthening the Evidence-Base</td>
<td>2,168</td>
<td>2,513</td>
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<tr>
<td>Capacity Building and Technical Assistance</td>
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<td>2,178</td>
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<tr>
<td>Collecting and Disseminating Knowledge</td>
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<tr>
<td>Supporting and Strengthening Partnerships</td>
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<td>Administration</td>
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<td>838</td>
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<td><strong>TOTAL</strong></td>
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Direct Expenditure – by Region

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<tr>
<td>Global</td>
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<tr>
<td>Sub-Saharan Africa</td>
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<td>East Asia and Pacific</td>
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<td>159</td>
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<tr>
<td>Middle East and North Africa</td>
<td>152</td>
<td>184</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>7,542</strong></td>
<td><strong>8,378</strong></td>
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Accounts audited through Imperial College London’s audit procedures.
PCD Organization and Structure

PCD is part of the Department of Infectious Disease Epidemiology which is in turn part of the Faculty of Medicine of Imperial College London.

Department of Infectious Disease Epidemiology

The Department carries out world class research into a wide variety of infectious diseases and pathogens, including HIV and AIDS, severe acute respiratory syndrome (SARS) and pandemic influenza, the Transmissible Spongiform Encephalopathies (e.g. bovine spongiform encephalopathy – BSE; and Scrapie), drug-resistant bacteria (e.g. methicillin-resistant Staphylococcus aureus – MRSA) and parasites, childhood viral and bacterial diseases, emerging fungal infections, the epidemic viral infections of livestock (e.g. foot-and-mouth disease), parasitic helminth infections and bioterrorism.

www.imperial.ac.uk/medicine/about/divisions/ephpceide/

The Department also hosts:

MRC Centre for Outbreak Analysis and Modelling
Director Professor Neil M. Ferguson OBE FMedSci.
www.imperial.ac.uk/medicine/outbreaks

Schistosomiasis Control Initiative
Director Professor Alan Fenwick OBE.
www.sci-ntds.org

Imperial College London

Imperial’s on top of the world

Imperial is among the top six universities in the world. Its high ranking has been confirmed in the Times Higher Education Supplement (THES) 2009 league tables for the world’s top 200 universities which ranked Imperial as joint fifth overall.

When broken down into subjects Imperial is ranked second in Europe and sixth in the world for engineering and information technology, third in Europe and 10th in the world for natural sciences, and third in Europe and 17th in the world for life sciences and biomedicine.

www.imperial.ac.uk
Goverance

International Advisory Board

The International Advisory Board meets annually to provide PCD with guidance and oversight about its policy direction and strategy. It also provides PCD with accountability for work and will help PCD build partnerships with others working in SHN. The International Advisory Board is comprised of eight members who come from a range of different organizational backgrounds and geographical regions and who bring to PCD a variety of skills.

Technical Advisory Group

The Technical Advisory Group provides PCD with regular guidance about: its operational support to countries; its identification of research and programmatic areas; and its design of studies on technical and scientific innovations. Meeting quarterly, a further part of the Technical Advisory Group’s remit is to monitor PCD’s activities, helping to ensure that PCD implements its annual work plan and to achieve the expected results. The Technical Advisory Group is comprised of technical experts invited to join PCD for their experience, insight and connections with countries around the world.
Coordinating Centre

Staff and Consultants

Michael Roskilly PhD
Director

Celia Maier MSc
Senior Communications Manager

Alice Geil MSc
Senior Research Manager

Abigail Doremer MSc
Operations Manager

Anton Patrikios MA
Operations Manager

Alison Woolnough MSc DLSHTM
Programme Manager

Pawna Havemolle MSc
Programme Manager

Isis Gardiner MSc
Programme Manager

Ruth Dixon MSc
Programme Manager

Malini Venkatram MSc
Programme Manager

Lucinda Johnson MPH
Programme Manager

Warlima Mallo PhD
Programme Manager – Kenya

Daniel Humond MSc
Programme Manager – Ghana

Clare Ridley PhD
Research Associate/Manager

Kristie Neeson MSc
Research Assistant

Nicola Lloyd MSc
Team Administrator

Francis Peel BA
Website and Communications Officer

Dan Ochloeng MPH
Management & Planning Consultant

David Clarke MA
Senior Education Consultant

Ed Cooper MPH
Clinical Consultant

Rashnih Ebenezer MA
Consultant

Cristina Corral PhD
Education Consultant

Anastasia Gaid MSc DLSHTM
Editor

Elizabeth Girnswell
Consultant

Helen Waller
Designer

Nicola Meader
French/English Translator
Lesley Drake, Executive Director of PCD, has been seconded to continue her role as Executive Director for Deworm the World for the second year. Deworm the World is a global initiative which aims to improve health and access to education by expanding deworming among school-age children.

Worldwide, more than 400 million school-age children are affected with parasitic worms which result in poor health and nutrition, that in turn, are major barriers to educational access and achievement in low and middle income countries. School-based deworming is a proven, safe, simple and cost-effective health intervention and is now an urgent education policy priority, especially in efforts to achieve EFA and the education MDGs.

Launched at the February 2007 World Economic Forum in Davos, by the Education Working Group of the Forum of Young Global Leaders, Deworm the World works to strengthen and support sustainable school-based deworming programmes worldwide, by providing governments with in-depth technical assistance, coordinating strategic support, and advocating for large school-based deworming programmes.

During 2009, Deworm the World supported action which benefited 20 million school-age children through coordinating strategic support and facilitating drug donations to enable nationally-owned programmes across 25 countries. This included in-depth technical assistance to launch new government programmes in Kenya and in India which reached over 5.7 million children.

Deworm the World also enjoyed key successes in its efforts to achieve global policy shifts to expand school-based deworming. Through its work with the Education for All – Fast Track (EFA-FTI) Initiative, school-based deworming has now been recognized by the EFA-FTI as a significant contributor to the achievement of EFA and the MDGs. As policy, EFA-FTI now encourages Ministries of Education to include deworming programmes within national education sector plans in areas where worms are a problem. In addition, Deworm the World collaborated with WFP, which led to the revision of WFP’s school feeding policy to include deworming in all programmes where children are at-risk.

Prior to joining PCD, Jane served as the Coordinating Officer for the Rector of Imperial College with special responsibility for International Projects.

With a background in parasitology and immunology, Jane started her career at the London School of Hygiene and Tropical Medicine developing serodiagnostic tests for parasitic infections. In 1987, she joined Imperial College to work on a project supervised by Professor Donald Bundy and Dr. Ted Bianco on the immuno-epidemiology of soil-transmitted helminths and became the Coordinator for an expanding number of international research projects. It was during this exciting period under the Directorship of Professor Donald Bundy that PCD was founded. Jane then moved with the group to Oxford where she became the Scientific Manager of the Wellcome Trust Centre for Infectious Disease Epidemiology, and then returned to Imperial in 2001, as Administrator of the newly formed Department of Infectious Disease Epidemiology.
Partners

Our sincere appreciation and gratitude extends to the many partners who have helped, guided, advised and supported our work.

United Nations

Food and Agriculture Organization (FAO); Joint United Nations Programme on HIV/AIDS (UNAIDS); UNAIDS Inter-Agency Task Team (IATT) on Education; United Nations Children’s Fund (UNICEF); United Nations Development Programme (UNDP); United Nations Educational, Scientific and Cultural Organization (UNESCO); UNESCO-BREDAC; UNESCO-International Bureau of Education (UNESCO-IBE); UNESCO-International Institute for Educational Planning (UNESCO-IIIEP); United Nations Girls’ Education Initiative (UNGEI); United Nations Office on Drugs and Crime (UNODC); United Nations Population Fund (UNFPA); United Nations System Standing Committee on Nutrition (UNSCN); The World Bank; the World Food Programme (WFP); and the World Health Organization (WHO).

Bilateral Agencies

Canadian International Development Agency (CIDA); Danish International Development Agency (DANIDA); Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ); Irish Aid; Japan International Cooperation Agency (JICA); Norwegian Agency for Development Cooperation (NORAD); Swedish International Development Cooperation Agency (SIDA); United Kingdom Department for International Development (DFID); and the United States Agency for International Development (USAID).

Intergovernmental Organizations

African Networks of Ministry of Education HIV/AIDS Focal Points; Association of Southeast Asian Nations (ASEAN); Caribbean Community (CARICOM); Caribbean Education Sector HIV and AIDS Coordinator Network (EduCan); Commonwealth Secretariat (ComSec); Communauté Économique des États d’Afrique Centrale (CEEAC); Communauté Économique et Monétaire de l’Afrique Centrale (CEMAC); The Comprehensive Africa Agriculture Development Programme (CAADP); East African Community (EAC); Economic Community of Central African States (ECCAS); Economic Community of West African States (ECOWAS); The New Partnership for Africa’s Development (NEPAD); Paises Africanos de Língua Oficial Portuguesa (PALOP); and the Southeast Asian Ministers of Education Organization (SEAMEO).

Civil Society Organizations, Institutions and Networks

Abdul Latif Jameel Poverty Action Lab (J-PAL); Academy for Educational Development (AED); Action Health Incorporated, Nigeria (AHI-Nigeria); ActionAid International; Africa Regional Sexuality Resource Centre; Alliance for a Green Revolution in Africa (AGRA); American Institutes for Research (AIR); Asian Center of International Parasite Control (ACIPAC); Asociación Brasileña de Salud y Alimentación Escolar (ABRAE); Association for the Development of Education in Africa (ADEA); Association of African Universities (AAU); Bill & Melinda Gates Foundation; Biomedical Research and Training Institute (BRTI); Blair Research Institute – Zimbabwe; CARE International UK; Catholic Relief Services (CRS); Centre for Vision in the Developing World; Child-to-Child Trust (CIC); Children Without Worms (CWW); Communauté Baptiste au Centre de L’Afrique (CBCA); Deworm the World (DTW); Eastern Africa National Networks of AIDS Service Organizations (EANNASO); Eastern and Southern Africa Centre of International Parasite Control (ESACIPAC); Education Development Center, Incorporated (EDC); Education International (EI); Feed The Children (FTC); Focusing Resources on Effective School Health (FRESH) partners; Food, Agriculture and Natural Resources Policy Analysis Network (FANRPAN); Global Campaign for Education (GCE); Global Child Nutrition Foundation (GCNF); Global Network for Neglected Tropical Diseases (GNNTD); Harvard Graduate School of Education (HGSE); Harvard University Department of Economics; Institute of Development Studies (IDS); International Food Policy Research Institute (IFPRI); International School Health Network (ISHN); Keio University; Kenya Medical Research Institute (KEMRI); Kenya Network of HIV-Positive Teachers (KENEPOTE); Kingdom Holding Company: Alwaleed Bin Talal Foundation; La Red de Alimentación Escolar para América Latina y el Caribe (LA-RAE); London School of Hygiene and Tropical Medicine (LSHTM); Mahidol University; Marie Stopes International; Massachusetts Institute of Technology (MIT); McGill University; Neglected Tropical Disease Organization (NGTDO); Noguchi Memorial Institute for Medical Research (NMIMR), University of Ghana, Legon; Program for Appropriate Technology in Health (PATH); Purchase for Progress (P4P); Right To Play; Save the Children; Schistosomiasis Control Initiative (SCI); School feeding Initiative Ghana-Netherlands (SIGN); SNV Netherlands Development Organisation; The George Washington University; The Wellcome Trust; UK Consortium on AIDS and International Development; University of College London (UCL) Institute of Child Health (ICH); University of Kelaniya – Sri Lanka; University of Ottawa; University of Oxford; Value Development Initiatives Ltd (VDI); and the West African Centre for International Parasite Control (WACIPAC).

Private Sector

Adaptive Eyewear; Baney Media; Creative Jar; Creative SharePoint; and iCRE8 Design Ltd.
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The Partnership for Child Development
Department of Infectious Disease Epidemiology
Imperial College London
Faculty of Medicine
Norfolk Place
London W2 1PG

Tel: +44 (0)20 7594 1941
Fax: +44 (0)20 7262 7912
Email: pcd@imperial.ac.uk

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