

Sub-Project Title : HIV & AIDS prevention among youth out of school in Malindi District.
FCO Number : FCO/ID # 603057
Implementing Agency : Malindi Education and Development Association (MEDA)
Report Prepared By : Project Manager
Quarterly Narrative Report : Jan - March 2009.

1. BACK GROUND

MEDA is a Community Based Organization started by Muslims in Malindi to work with young people in uplifting the levels of formal education and address issues affecting the youth in the District.

MEDA as a local implementing partner in APHIA II Coast, is mandated to target youth out of school aged between 14 – 25 years in 12 zones in Malindi. These are Maweni, Majengo, Kisumu Ndogo, Barani, Shella, Gede, Msabaha, Kijiwetanga, Takaye, Ganda, Mambrui and Watamu. There are 94,104 youth of ages 14 – 25 years in the district out of a total population of 415,847 people, (*Source; Malindi District office, Kenya National Bureau of Statistics*). The youth are reached through Peer Education, Peer Counseling, Friends of Youths (FOY's) and Community Outreaches (Puppeteers, Mahewa, Magnet Theatre, MWAFO, Video Projector, & Acrobats).

Goal

To reduce the risks of HIV & AIDS infections among youth out of school between the ages of 14 – 25 years.

Current Status and progress.

II. HIGHLIGHTS OF ACTIVITIES AND ACHIEVEMENTS.

A. PLANNED ACTIVITIES.

The planned activities during the month were;

1. Peer educators monthly meetings
2. Monthly peer educators Zonal Leaders.
3. Community Outreaches.
4. Stigma reduction outreaches with Malindi Women Aids Fighters Organization (MWAFO).
5. Peer Education sessions.
6. Field follow ups for quality assurance and quality improvements (QA/QI).
7. Young women forums.
8. Basic peer counseling training.
9. Stakeholders meeting.

10. FOY's training.
11. FOY's meeting.
12. Family Dialogue.

B. THE FOLLOWING ACTIVITIES WERE UNDERTAKEN.

1. Monthly meetings.

A total of 3 monthly meetings were held during the quarter for AOC's as planned. Active peer educators during the month of March were 141 (95 males and 46 females) out of 256 total trained peer educators since the commencement of the program in September 2005.

a) Zonal leaders meeting.

A total of 3 meetings were held during the quarter for the Zonal leaders as planned. The first 2 meetings were held at MEDA centre while the third meeting was held at Maternity Shelters in Malindi General Hospital. The zonal leaders were taken round the Hospital as part of orientation to be familiarized with various referral points, contact persons and service charters. They visited Comprehensive Care Centre, Family planning and Youth Friendly Services. Active zonal leaders are 24 (100%).

The monthly AOC's/Peer Educators meetings provided technical backstopping, experience sharing and documentation of case studies while; zonal leaders' meetings were for capacity building and coordination.

2. Community outreaches.

The community was reached with Magnet theatre, Puppetry, Video projector and Mahewa which totaled to 73 outreaches during the quarter.

1,495 contacts (708 males and 787 females) were attained while a total of 8,177 people (3,502 males and 4,675 females) were reached.

During the quarter MEDA adopted an integration approach with its Early Childhood Development and Education program by availing in its activities and disseminating Health Information. This approach effectively increased the numbers of people reached during the quarter.

Outreaches have been instrumental in dissemination of information beyond abstinence, condom distribution, and provision of services such as VCT as well as mobilizing the community towards health centers.

a) Stigma reduction outreaches with MWAFO.

A total of 3,412 people (1,904 males and 1,504 females) were reached with stigma messages during the quarter that promote HIV & AIDS prevention through other behavior change beyond abstinence and or being faithful. The messages were incorporated within the skits, songs and facilitation.

3. Peer Education sessions.

A total of 8,226 contacts (4,600 males and 3,626 females) were attained while a total of 2,022 people (1,165 males 857 females) were reached through 995 peer education group sessions. The group sessions have been used to pass knowledge among the peers through participatory methodologies. The peer group sessions have been seen to provide an opportunity of nurturing and facilitating positive behavior change among peers. Through the peer group sessions, youth are mobilized for community outreaches and referred for various services. A total of 3,596 referrals were made during the reporting quarter.

5,529 contacts (2,895 males and 2,634 females) were attained while a total of 7,824 people (5,265 males and 2,559 females) were reached through 13,353 peer education one on one sessions. One on one sessions have been very useful in the program as a gateway for objective referrals beyond health services. In cases where peers need more attention AOCs refer the cases to the peer counselors or FOY's for more support.

Hence, peer education sessions have increased the number of referrals for appropriate services and facilitated positive behaviour change among youth out of school in Malindi.

4. Field follow up for quality assurance and quality improvement (QA/QI).

a) Peer education sessions.

Three Coordinators, Zonal leaders & Trainer of Trainees (TOT's) conducted 193 field visits to peer education group sessions for QA/QI of peers in the maskans and the impact it has created in 8 zones. The involvement of TOT's has strengthened the participation of the AOC's in conducting sessions in maskans. The involvement of more TOTS' during the quarter in field monitoring has contributed to the continuity of peer education both one on one and group sessions.

b) Zonal meetings.

24 zonal meetings were held during the quarter. The participants of these meetings were the AOC's, FOY's, & peer educators in the respective zones. The meetings were carried out in every zone and were chaired by the zonal leaders. The meetings provided opportunities for the zonal members to address community progress in relation to programme and capacity building. FOY's and APHIA II field coordinators provided support to peer educators and AOCs.

5. Young women forums.

a) Girls Forum

3 girls' forums were conducted during the quarter reaching out to 166 madrasa girls and young mothers with Health Information. The forums were facilitated by resource persons from the MOH Reproductive Health and First Community Bank on aspects of savings and credit. A total of 17 cervical cancer and 20 VCT related cases were referred. Experience sharing and Case studies were documented.



*Photo 1:
Young women during a reproductive health talk at Gede.*

6. Basic peer counseling training.

a) Recruitment

An advertisement for the training was pinned on MEDA’s notice board one month before the training. The peers brought in application letters according to the criteria of the training and after the interview, 24 youth (7 females and 17 males) were successfully selected for the training.

b) Training

The Basic peer counseling training was facilitated by the Malindi Professional Counselors Forum who are also MOH personnel at the Doctors Plaza building in Malindi for 7 days. There was a total of 24 trainees (7 females and 17 males) and 3 facilitators. Currently, the total number of all peer counselors trained is 64 (42 males and 22 females) and no more peer counselors will be trained as per the sub agreement. The curriculum used is NASCOP, VCT counseling manual. The peer counselors are anticipated to conduct one on one peer counseling sessions in their maskans and refer the peers for health services at the youth friendly services. Peer counselors need monthly counseling supervision as a counseling requirement for personal and professional growth. A refresher course will be convened whenever there will be updates on basic peer counseling and /or sharpening their counseling skills to meet quality and standards of Y-PEER.

7. Stakeholders meeting.

The above meeting took place at Municipal Council conference room and 25 people (15 males and 10 females) attended. The stakeholders were drawn from the new three areas of expansion (Takaye/Kijiwetanga, Ganda and Mambroi zones). The objective of the meeting was to give an overview about APHIA II program. However a 50% turn out was realized and it was due to another parallel meeting which was taking place in the same building and the stakeholders were invited to both meetings by coincidence.

8. Friends of youth training.

a) Recruitment.

An advertisement for the training was pinned on MEDA's notice board one month before the training. A series of small meetings with stakeholders was carried out in the new zones where the FOY's were to be recruited which included Kijiwetanga, Takaye, Mambrui and Ganda. The stakeholders involved include opinion leaders, spiritual leaders, Village elders, Chiefs, parents, and community members. They were given an overview of APHIA II Coast Youth out of School program and the need of having some stakeholders to become FOY's. 28 FOY's (15 males and 13 females) expressed interest and were successfully selected.

b) Training.

The FOY's training was facilitated by APHIA II staff at Malindi cottages for 3 days. There was a total of 28 (15 females and 13 males) FOY's trained and 8 youth (4males and 4 females). Currently, the total number of all FOY's trained is 73 (32 males and 41 females) and no more FOY's will be trained as per the sub agreement. The curriculum used is Youth Adult Partnership Training Curriculum by YouthNet/FHI. The FOY's are anticipated to conduct one on one sessions and group sessions in their zones and refer the peers for health services at the youth friendly services. A refresher course will be convened whenever there will be updates and /or sharpening their skills to meet quality and standards of Y-PEER.

9. Friends of youth meeting.

2 FOY's meetings were held during the quarter. The meetings were attended by a total of 64 people (30males & 34 females). Currently; active FOYs are 64 (87.7% of trained FOYs). It was conducted at Nusra Technical Institute. Present were FOY's, APHIA II staff and TOT's. The objective of the meeting was for the new FOY's to get to know other FOY's and were given orientation on their roles about transforming the lives of the youth by bridging the gap between the parents and the youth. A resource person from Youth Friendly services, Ambassador of Hope and Maarufu group, which deals with reducing the supply of hard drugs in the community, gave presentations on youth friendly services, Positive living and consequences of drug abuse respectively.

The FOY's reached out to 404 people (137 males and 267 females). Success story was documented.



Photo 2: A resource person from Maarufu group giving an Advocacy talk on Drug Abuse during the FOY meeting.

10. Family dialogue.

The family dialogue took place at Nidhamia hall and a total of 55 people (28males and 27 females) attended. The participants were divided into 3 categories comprising; panelists, hosts and audience. The panelists were 2 parents, 2 FOY's, 2 AOC's and 2 peers; hosts were APHIA II staff while; the audience consisted of members from the community. The theme was 'Youth Life,' and the key question was, *does the mode of dressing contribute towards the rise of HIV prevalence?* Through the discussions the community was reached with Reproductive Health Information.

11. Organizational capacity building.

a) Grant writing in the Health Sector

The 2 weeks workshop was attended by one APHIA II staff from MEDA at Milele beach hotel Mombasa. The meeting had 13 participants (10 males and 3 females) among them 3 were from APHIA II COAST. The participants were acquainted with proposal writing skills in European, American, and Canadian formats.

C. CHALLENGES

a) Lack of implementation of Peer counseling supervision.

MEDA has not been able to supervise its 64 trained youth on basic counseling since the first quarter of the reporting year begun. This has resulted in missing out of the numbers reached through peer counseling. This is because there is no budget allocated for the activity.

b) Incompatible quantitative data summary sheet

The quantitative data summary sheet has a technical problem. A number of cells do not accept data entry and tallying thereby giving wrong information. Therefore there is a need of the M&E people to review it and rectify the tool.

c) Lack of basic peer counseling curriculum

The peer counselors were trained using the NASCOP, VCT training curriculum which runs for three weeks. However, the facilitators selected some important components on counseling skills in line with the objectives of the sub agreement, one of it being to increase referrals for reproductive health to health facilities.

D. LESSONS LEARNT

a) Stakeholders participation

When stakeholders are fully involved during the initial stages of a program, maximum support is realized and forms a strong foundation for program ownership and eventual sustainability.

b) Peer educators as master of their own destiny

Appreciating that peer educators understand each others capacity much better and know what they want to achieve has enabled them to elect active zonal leaders through democratic principles. The zonal leaders have demonstrated 100% active participation on the youth out of school programme. Hence; there is a need of involving peer educators in matters that concern them for efficient and effective participation.

APPENDIX 1: SUCCESS STORY

a) Exchange visit of Tosha youth group.

Tosha youth group is one of the 5 youth led Community Based Organizations that were formed through APHIA II Coast Youth Out of School programme in Malindi as an exit strategy and is based at the Malindi district hospital youth friendly services centre. The CBO members attended a one day exchange visit program in Mombasa. The MOH facilitated the exchange visit by providing transport to and from Mombasa as its contribution. They visited *Reachout Centre* which is a drug rehabilitation centre and *FHOK* youth counseling centre. The visits strengthened the group's cohesion and shaped their vision to scale greater heights and achieve more.

b) Diversified clientele base for youth out of school talents & skills

Malindi Youth Development Group (MYDG) is one of the youth led community based organizations that were formed through APHIA II coast youth out of school programme in Malindi as an exist strategy has been linked to an Italian Organization to promote child rights using its skills in Mahewa and interactive theatre. During the quarter; CISP, MEDA and MYDG officials held 3 consultative meetings on how best to sub –contract MYDG in CISP programme. So far, the MYDG members will undergo a 10 day orientation training on child rights for them to have the right information.

c) FOYs as child rights watch dogs

FOYs that were trained through the USAID APHIA Coast youth out school programme in Malindi, have demonstrated a capacity to serve as a community child rights watch dogs. During the quarter, FOYs in Mambrui zone discovered that 2 children of ages 12 and 14 had been sodomized and no legal action had been taken. The concerned families had resolved to settle the matter through the village elders. The FOYs held a consultative meeting among themselves and resolved to advise the guardians of the sodomized children to take the children to hospital and police for check up and recording statement respectively. The guardians refused as they had previously resorted to settle the matter at family level. The FOYs held another consultative meeting and resolved to report the issue to the children's officer in Malindi and police station. As the police and children's officer were taking long to act, the FOYs decided to hold a peaceful demonstration against the perpetrators as away of creating awareness on the evils that were conducted to innocent children.

Currently; the case is at the Malindi Law court.

APPENDIX 2: IMPORTANT EVENTS.

a) TB/HIV stakeholders meeting.

The meeting took place at the District hospital maternity shelters. The meeting usually takes place every quarter and present were the District TB coordinator, APHIA II staff from result area I, II and III, among other stakeholders in health. TB multi-drug resistance case was reported which called for the stakeholders to intensify activities of educating the community on stigma and denial reduction in the district. The world TB day which was on 24th March 2009 was discussed and a steering committee was appointed to plan for the event.

b) World TB day.

The event was marked at Ngomeni Village in collaboration with MOH, Marie Stopes, APHIA II Coast and the community. 23 community members were referred for TB screening, VCT and Family planning services. 671 people (296 males and 375 females) were reached with Health information.

APPENDIX 3: COLLABORATION

MEDA recognizes and appreciates the invaluable linkages with various collaborators during the month to highlight but only a few areas of collaboration;

- 1) Malindi district hospital has been of great support in providing youth friendly services to the youth, giving health talks to youth, providing facilitators during basic peer counseling training, supporting the Tosha youth group with a transport for the exchange visit and its invaluable to acknowledge that Malindi DMOH youth friendly services centre has hosted Tosha youth group from MEDA to use the centre as its meeting point.
- 2) Marie Stopes where MEDA AOCs sent young mothers for referrals.
- 3) The Omari project as a referral centre for more information on drug abuse related issues as well as follow-up for drug counseling cases.
- 4) Last but not least, the recommendable and acknowledged youth friendly services of Liverpool Stand Alone VCT centre as heard from the MEDA peer educators. It's for the friendly VCT services and Post Test Club where youth get support.

APPENDIX 4: PLANNED ACTIVITIES FOR THE QUARTER APRIL - JUNE 2009

1. Monthly meetings for AOC's
2. Peer educators zonal Leaders.
3. Community Outreaches.
4. Stigma reduction outreaches with MWAFO.
5. Peer Education sessions.
6. Field follows ups for quality assurance and quality improvements (QA/QI).
7. Family Monthly Dialogue.
8. FOY meeting.
9. Ambassadors of Change (AOC's) training.
10. Organizational capacity building.