

A. NARRATIVE REPORT

1. Project Title: CF-04/05-06: Promotion of Family Planning among Ethnic Minority People in Dong Hy District, Thai Nguyen City

2. Geographic location: Dong Hy District, Thai Nguyen City

3. Recipient/implementing agency: PATH Canada Vietnam

4. Project Objectives:

1. To increase access to information on reproductive health (RH) and modern contraceptive methods, presented in a locally-appropriate format, among 25,000 women and men in five communes of Dong Hy district, Thai Nguyen province over a one year period.
2. To build the capacity of motivators, local partners and PATH Canada staff to work effectively in the area of RH.
3. To reduce unwanted pregnancies as well as abortion rates in the selected communes.

5. Duration of the Project:

◆ Planned duration of the projects (start - end date):
October 2004 to March 2006

◆ Actual duration of the project (start - end date):
January, 2005 – June, 2006

6. Project implementation:

- ◆ Completed activities of the project:
1. Identified and selected motivators for the TOT training; females represented 62.5% of those selected and all were in the 19-44 age range.
 2. Identified and selected reproductive health trainers for TOT training.
 3. Discussed and selected materials for RH training with the TOT trainers. The materials were drawn from the book, Training Guide for *Let's Talk About Love, Sexuality, and Health* previously produced by PATH Canada Viet Nam.
 4. Identified and selected a drama expert from the Youth Theatre for drama training. Provided the drama expert with material used for the RH training to prepare the appropriate drama training content.
 5. PATH Canada Viet Nam provided reproductive health (RH), scriptwriting, and drama training for core teams of “motivators” (female and male members of the Women’s, Youth, and Farmer’s Associations) from the five project communes of Dong Hy. Each training session lasted 7 days. 40 people from 5 communes attended the training. The motivators from Nam Hoa commune wrote their own play scripts with assistance from the drama expert.
 6. PATH Canada Viet Nam provided a wide variety of brochures and flyers about RH and contraceptive methods (produced by NGOs such as IPAS, Pathfinder,

- WPF, and MSI) for the motivators to use and adapt to ensure that they were culturally appropriate for the project sites.
7. Undertook a field study with the motivators, including a visit to the RH clinic at Dong Hy Health Center, to provide them with more information about STDs, the danger of unsafe sex, and other RH issues.
 8. Distributed 50 copies of *Let's Talk About Love, Sexuality, and Health* to the motivators. 220 copies of the *Growing Up, Puberty, Blossoming* books were also provided to the motivators as additional materials to educate local youth and adolescents.
 9. Designed contraceptive method flyers to distribute to people of 5 communes
 10. PATH Canada and Thai Nguyen Health Department supported and supervised all training activities at the Dong Hy Health Center.
 11. Held a meeting with key representatives of the Thai Nguyen Health Department, Dong Hy Health Center, and Women's, Youth, and Farmer's Associations to assign responsibilities for activities and monitoring in each commune.
 12. Eleven drama performances were conducted in 5 communes. Nam Hoa performed three times, while the others (Linh Son, Quang Son, Hoa Trung, Hoa Thuong) each performed twice.
 13. Popularized RH information in meetings of the Youth, Farmer's, and Women's Associations. Each commune held 2 information sharing sessions each month. To date, 30 (2x3x5) sessions have been held.

◆ *Difficulties encountered and measures taken to overcome them:*

1. **The diverse background of the motivators prevented them from fully grasping the RH training:** Some of the motivators have a high level of education, while others do not. Also, some are working at home while others have regular and frequent contact with the wider community and so have better access to information. In order to ensure that all the motivators have the same level of understanding of RH issues in the end, PATH Canada asked the trainer to use training methods such as group discussion and question and answer sessions. This would make sure that everyone involved in the training would improve their understanding and have clarification on the areas that they did not understand. Moreover, all the motivators are required to participate in all activities so that they can conquer their shyness and build up their communication skills to explain RH to local people.
2. **Some of the participants were shy about being involved in the training activities:** We encouraged and cheered them to speak and present their ideas, and to take part in the activities. On the other hand, we recommended that the trainers ask the timid people to speak more frequently in front of the class and to contribute to the lessons in order to help them overcome their shyness.
3. **The participants have not previously learned how to write scripts and perform a drama:** We have asked the drama expert to design the materials and training lessons in detail and in a way that is appropriate to the abilities of the

participants. Also, we required the drama expert to prepare one or two RH propaganda scripts as samples for the training participants. In cases where the motivators were unable to write their own scripts, they were able to use these samples.

4. **The short time available for drama training:** 1 week for script writing and performance skill development was not enough. The motivators indicated that they wished to have more training for these skills. Still, due to the limited budget, we were unable to lengthen the duration of the training. In order to tackle this shortcoming, we urged the attendants.
5. **Absence and/or infrequent attendance of some motivators:** We discussed the rules and regulations of the classes with the motivators, which required each of them to attend class and arrive on time. We also contacted the commune authorities to ask them to release the motivators from other less important tasks so that they could attend class regularly.
6. **Low attendance of men:** The recruitment of men to the training was lower than expected. Only 15 men attended, compared to 25 women. Most motivators were representatives of associations, such as the Women's Association, or were local health workers, which are primarily women. Those men who did attend were mostly representatives of the Farmer's Association. Additionally, some men were unwilling to come as they assumed that RH was concentrated on women.
7. **Shortage of funds for the Steering Committee:** Project partners included the Thai Nguyen Health Department, Thai Nguyen Planning and Investment Department, Dong Hy Health Center, Women's Association, Farmers' Association, Youth Union and local authorities of 5 communes. The motivators were members of the above organizations; as such, thus the heads of organizations were required to participate in the Steering Committee to understand the implementation phase and to monitor the activities being implemented in the 5 communes. We allocated a part of the salary of one official of Thai Nguyen Health Department to pay for the Steering Committee.

◆ *Explain any discrepancy with respect to the implementation plan:*

The RH training took place later than anticipated. This was due to a number of reasons, including the delays faced in recruiting a new project officer, and the fact that the Health Department of Thai Nguyen was too busy to prepare the site for training as originally scheduled. Thus the training took place 3 months later than anticipated.

◆ *How many times and how did you receive project budget from the CF:*

The first payment of 242,430,000 VND was received upon project approval by the project implementing agency.

◆ *How the project was monitored during the implementation:*

This project is being monitored by PATH Canada’s Project Officer, as well as by representatives of Thai Nguyen Health Department, Dong Hy Health Center, Women’s and Farmers’ Associations, Youth Union and the local authorities of 5 communes. The RH, scrip-writing, and play drama training courses were supervised by PATH Canada, Thai Nguyen Health Department and Dong Hy Health Center, while the training was executed at Dong Hy Health Center.

Local authorities were assigned to monitor the activities undertaken in the 5 communes. Performances at the grassroots level and the biweekly or monthly meetings at the Farmers’ and Women’s Associations and Youth Union will be attended by PATH Canada or Thai Nguyen Health Department staff. Meetings with motivators will occur on a quarterly basis during the implementation phase. Also, the steering committee is responsible for monitoring the planning of performances and project implementation at the commune level.

Each commune is under the supervision of the heads of the organizations involved in the project. PATH Canada officials and Thai Nguyen Health Department administer the overall project. The motivators prepared the schedule for RH information sharing and drama performances, and then received approval from the local authorities and the Thai Nguyen Health Department. Together the Thai Nguyen Health Department and PATH Canada will provide overall supervision to all activities in the communes. Specifically, Mr. Nhan, head of the Youth Union, is responsible for Quang Son, Ms. Ho, head of the Women’s Association for Hoa Trung, Mr. Dung, director of Dong Hy Health Center for Hoa Thuong, Mr. Tinh, head of the Farmers’ Association for Nam Hoa, and Ms. Lan of the Thai Nguyen Health Department for Linh Son.

7. Project Assessment:

Expected and Actual Results:

Expected Results	Actual Results Achieved	State variance between expected and actual results
a) Beneficiaries will have better understanding on locally relevant RH issues, including modern contraceptive methods and will have access to accurate, appropriate family planning materials	Key persons of Farmers’ Association, Women’s Association, Local Health Workers, Youth Union received RH training from experienced trainers so that they can improve their knowledge about RH as well as clarify what they do not understand properly. They have the opportunity to discuss with the trainers the usage of different contraceptive methods, and the strength and weakness of each methods.	No variance, results were as anticipated

<p>b) Beneficiaries will have increased use of modern contraceptive methods, particularly men</p>	<p>None to date</p>	<p>This is just the beginning phases of the project so it is difficult to measure the effect of the grass root activities at commune level. We hope that after 10 consecutive months, drama performances, and propaganda programs of RH and family planning methods will enable not only people at 5 selected communes to increase the usage of modern family planning methods but the neighboring communes (especially men as) well.</p>
<p>c) Motivators will have improved knowledge of RH issues, including modern contraceptive methods and improved skills through developing scripts and performing dramas illustrating real-life RH issues important to their communities</p>	<p>One third of the attendants of the training are men so that they have better understanding about RH and contraceptive methods and how to evaluate which method is suitable for his case. The motivators have developed 2 dramas with the assistance from the drama experts. Their work reflects the real situation of their communes, and shows how they develop drama scripts from their own observation.</p>	<p>No variance, results were as anticipated</p>
<p>d) Unwanted pregnancy and abortion rate in the five communes will be reduced.</p>	<p>None to date</p>	<p>At the beginning of the project, it is impossible to see the abortion rate reduces immediately. But we hope that through 18 months of implementation, the project will actually lessen the above mentioned rate.</p>
<p>e) Related local partners will have improved capacity in delivering RH programs.</p>	<p>Farmers' Association, Women's Association, Youth Union, and local health workers have</p>	<p>No variance, results were as anticipated</p>

	<p>benefited from RH and script writing skills training which will gradually enable them to have better knowledge and know how to join forces to implement effective RH propaganda programs. The Center for Health of Dong Hy holds the TOT training, which will allow it to improve its capacity to set up RH programs and other health related workshops.</p>	
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8 Target beneficiaries:

- ◆ *Who benefited from the project and how project benefits were realized? Please specify the total number of project beneficiaries, number of males, females, and children.*

Members of the Youth Union, Farmers’ and Women’s Association will benefit from the project through increased information gathered and skills built through monthly meetings, play performances, discussion about RH issues, IEC materials, and modern contraceptive methods distribution. Nam Hoa has performed times, while the other communes (Linh Son, Quang Son, Hoa Trung, Hoa Thuong) have performed twice each. The drama performances attract a about 300 persons per performance, for a total of about 3500 persons to date who have received information in this manner.

Motivators popularize RH information in meetings of youth, farmers, and women. Each commune held 6 information sharing sessions each month. To date, a total of 30 sessions has been held. Approximately 30 people attend each monthly of each association. At the RH information sharing meeting, the motivators will use the material from the TOT training to inform the participants. They will use lessons from the book *Let’s Talk About Love, Sexuality, and Health* as the topic of each gathering. The local health workers who attended the TOT training appear at all the RH information meetings to answer the participants technical questions.

- ◆ *How did the beneficiaries participate in the implementation of this project?*
 - PATH Canada and staff from Thai Nguyen Health Department participated in all phases of the design, implementation, monitoring and evaluation. Together, PATH Canada and Thai Nguyen Health Department selected the training materials, identified motivators, organized the TOT trainings, conducted the RH and drama writing skills courses, supervised and monitored activities in the communes, and assigned responsibilities for the heads of participating organizations.
 - The trainers actively participated in the RH and drama writing skills courses and were instrumental in delivering the reproductive health and family planning methods in the communes.

- Together, PATH Canada, Thai Nguyen Health Department, Youth Union, Farmers' and Women's Association, and RH training participants chose locally appropriate contraceptive brochures to distribute in the communes
- The Youth Union, Farmers' and Women's Association, together with the local health workers, prepared and performed dramas for people in the communes as well as in presenting RH information at monthly meeting of the above mentioned organizations.

◆ *What will be the beneficiaries' future participation to maintain the results of this project?*

Thai Nguyen Health Department, in collaboration with the Farmers Association, Youth Union and the Women's Union of Dong Hy District will ensure that the project results are sustainable. Updated reproductive health issues will continue to be integrated into the regular meetings of the Women's, Farmers' Association and Youth Union. Thai Nguyen Health Department can apply the project success to other districts in the province by using the same training tools and methods to family planning teams at the communal level.

9 Report the project impact on the following aspects if they apply to your project

◆ *Poverty reduction: How did the project contribute directly or indirectly to the poverty reduction in the target area?*

The project does not lessen the poverty rate directly. Over time, the reduction of abortion, RTIs and STDs will decrease health costs and save resources, which in turn will enable people to increase the productivity. At the same time, uptake of contraception will decrease birth rates, making families smaller and thereby lessening poverty at the family level.

◆ *Gender Equality: What is the role of women as participants in the project (planners, designers; managers/administrators; trainers/facilitators). Specify male/female participation and state the number of women in decision-making positions. Did the project improve socio-economic status for women in the community? If yes, how?*

Women's health is the main target of this project. Women face the risks of unwanted pregnancy and childbirth. Women should be encouraged to improve their knowledge and skills to take care of their own health. PATH Canada, Thai Nguyen Health Department, and the Youth, Farmer's and Women's Associations all have female employees who will take part in all activities of the project. One thirds of participants are men who need to get involved, and play an important role in preventing unwanted pregnancies and STDs.

The motivators will take turns presenting RH information at the monthly meeting of Youth, Farmers' and Women's Association. The motivators consist of 15 men and 25 women.

◆ *Environment: Describe negative and positive impact of the project on the environment*

No effect on the environment

- ◆ Other Aspects such as Health, Culture, etc.: State how the project addressed the existing cultural context and/or health issues, etc..

Minority people are still shy to talk about RH and related topics. Through this project, they are being encouraged to be more involved in activities that will help them to improve their knowledge and comfort in being involved in public awareness activities.

10. List any unanticipated benefits of the project:

No unanticipated benefits of the project to date

11. Lessons Learned:

- Training is valuable and highly desired: Motivators informed the project team that they wanted more training and in-depth information in RH. Future training activities should have a longer duration so that the participants can obtain comprehensive RH training and have enough time to discuss issues with the trainers and practice propaganda skills.
- Participatory Learning Methods are very effective: Participatory Learning Methods, through role-playing, small group discussions, presentations, etc. helped maintain the interest of the participants and allowed their active participation.
- Locally appropriate IEC materials are important: Motivators freely selected the most locally appropriate contraceptive brochures from among those provided from PATH Canada's collection. After discussion, all the features that needed to be changed to match the motivators' requirements were noted so that they would be incorporated into the design of new brochures.
- Drama performances enable widespread information sharing: The motivators combined the dramas with social events in the communes so that many people could be reached. The dramas attracted the attention of local people as the plays were designed to reflect their daily lives and situations. Motivators were encouraged to write more scripts, and send them to PATH Canada for review.
- Project Monitoring: All the participating organizations and local authorities were requested to monitor the project's activities. Many local people attended and participated in performing dramas. We found that the local authorities were very active in supporting drama performances as these activities improved the social environment in the communes.

14. What were the original project costs:

Canadian Contribution:.....
 Recipient Contribution:.....
 Others (specify) :.....

13. Were the project completed within the limits of the anticipated costs?

If not, how were the additional costs met?

Yes

14. How did the implementing agency contribute to the project implementation? And how will the implementing agency be involved in maintaining and assuming responsibility for the results of this completed project?

- PATH Canada contributed 2 staff members working 30% time to implement this project. PATH Canada was responsible for the overall design, implementation, and evaluation of the project. PATH Canada acted as the liaison between all project stakeholders, serves as the lead contact with the Canada Fund, and is responsible for all progress and financial reports.
- PATH Canada will be responsible for providing IEC materials and together with Thai Nguyen Health Department will hold a workshop at the end of the project to present the results and lessons learned from the project to all project stakeholders and all other organizations working in the area of reproductive health.

15. Comments on the roles, responsibility and collaboration of the CF staff to the project:

Throughout the project period, the staff members of the Canada Fund have always been very enthusiastic and supportive. They do not hesitate to help when needed.

16. Other Observation and Remarks on the Project Implementation:

Most of the participants were impressed with this training. They wished to have more activities like this available in their communes. Also, they wanted to have more training on propaganda skills through drama performances, brochures, etc. We will discuss with Thai Nguyen Health Department and other organizations how to ensure that such activities in Dong Hy district and other regions of Thai Nguyen city are sustainable.