# COMPASS Update



COMPASS departing Chief of Party Carol Hart during a farewell party at the COMPASS Central Office in Abuja <u>Photo:</u> Uche Udeh, COMPASS Central Office

ow well into its third year, COMPASS is registering encouraging results at community level. A September 2006 assessment by Joy Riggs-Perla, former head of the Global Health Bureau of USAID/Washington, and Rosemary Nwangu, an eminent Nigerian educationalist, has confirmed that the integrated approach to improving social services at community level is working. Communities continually confirm that improved health and basic education services do not emerge in separate arenas, but necessarily must emerge within the "integrated" framework of the Nigerian family. Physical well-being and positive learning experience are inseparable for every Nigerian child, whose needs must be addressed as a coherent whole uniting health and education. In some mysterious way, by synergizing health and learning, one plus one makes three. There is added value in the holistic approach. A community is much more than the sum of its parts. What touches one sector comes back to enrich another.

Another obvious truth: communities are learning from each other. We all know about how brush



COMPASS departing Chief of Party reflects on COMPASS at the beginning of year 3

fires can travel with a breath of wind, and we have seen a case of measles or wild polio virus jump communities within the space of a market day. There are no borders. Now something similar - but very positive - has been happening between COMPASS-supported communities and their neighbors. Once COMPASS builds confidence and hope, these precious motivators spread to nearby communities. Time and time again, we hear that C O M P A S S - s u p p o r t e d communities are inspiring their neighbors to take on similar challenges. If the "COMPASS" communities can raise the equivalent of \$1 million in corrugated roofing, cement blocks, wells, walls, desks and waiting room benches, then it must be possible for other communities to do the same. In the second year of COMPASS, we have seen one neighboring community in Kano build a house for the resident doctor as a strategy to attract a full-time physician. In FCT, another community independently negotiated a borehole with the World Bank, and a group of communities on their own initiative replicated COMPASS training for their teachers using COMPASS-

developed materials. We have seen numerous other communities organize to improve the quality of services in a clinic or a school without a "kobo" from COMPASS. It was enough to see our working model next door.

A final message we are hearing is that COMPASS' work will be sustained by communities' ability to advocate to Local Government Authorities for the resources they need. When community members are knowledgeable about tracking budgetary allocations and expenditures in education and health, it encourages fiscal accountability. What the  $C\,O\,M\,PA\,S\,S-s\,u\,p\,p\,o\,r\,t\,e\,d$ communities are learning about community participation will serve them long after COMPASS has folded its tent. Hopefully, these skills will be as "contagious" as the spirit that is driving our neighboring communities to make physical improvements. One of the many challenges in Year 3 will be to foster that "contagion."

It has been an honor to be entrusted with leadership of this dynamic and thriving USAID-sponsored partnership with the Government of Nigeria. Like any project, COMPASS is only as strong as the members of its team, and we have been very fortunate indeed in the talent and commitment of the individuals who make up COMPASS throughout the four states, the Federal Capital Territory, and in the central office. We are likewise fortunate to have Government partners who are not only knowledgeable but deeply committed to making the COMPASS experience serve Nigeria.



## Use of data to improve for health and education programming



Participants during a group session in Bauchi State <u>Photo:</u> Temple Jagha, COMPASS Central Office

"Using data and information to improve health and education programs" was the theme of a recent workshop organized by COMPASS, in collaboration with the MEASURE Evaluation Project. The objective of the workshop was to demonstrate through practical exercises that evidence-based decision making is the foundation of national health and education information systems; and is vital to the effectiveness of both systems as a whole. Participants at the workshops, which were organized between December 2006 and February 2007, were health and education decision makers, indigenous nongovernment organizations and community coalition representatives, Nigerian partners, Local Government Authority representatives, COMPASS Local Government Facilitation Officers, and Program Coordinators in the Project-supported states of Kano, Nasarawa, Bauchi, Lagos and the Federal Capital Territory.

To form the basis for practical exercises, state-specific profiles were developed. These profiles summarized the characteristics of each state and concrete issues the states are facing. At the end of the workshops, participants developed action plans to address issues of concern. These plans will be used by policy champions, opinion leaders, community coalitions and community-based organizations to advocate for changes and improvements in program efforts in their communities.

## Initiative encourages male support for reproductive health services

n most rural Nigerian communities, women do not seek reproductive health and family planning services because they fear their husband's disapproval, largely owing to religious or cultural reasons. In such rural settings, community and religious leadership positions are dominated by men.

Because of the significant role men play in acceptance and use of reproductive health and family planning services, COMPASS is collaborating with EngenderHealth (under the ACQUIRE Project) to promote male involvement in RH/FP through the Male As Partners (MAP) program.

The program trains community coalition members on how to promote male involvement in reproductive health and family planning and ways to encourage their wives to seek these services. The program also orients services provider to be more male friendly through



Group work during training on "Men as Partners" in Gaya community in Kano State <u>Photo</u>: Mohammed Gama, COMPASS Kano

counseling and communication and to create a male-friendly environment in their facilities.

Two rounds of training have been conducted in Lagos and Kano States for 57 community coalition and NGO members, 46 health providers, 49 MAP transformation agents, and 4 COMPASS staff. All 49 transformation agents conducted teach-back sessions in communities to demonstrate the knowledge, skills and attitude acquired during their own training.

ommunity Coalition members in Saye, a rural community in Bichi LGA in Kano State recently organized a mass awareness campaign at the community health clinic to promote the importance of immunizations to mothers and their children. The Saye village head, former Vice Chairman of the local government area, and the primary school's head teacher joined 141 women to learn about routine immunization, the use of insecticide treated nets, and exclusive breastfeeding. Mothers of children and pregnant women who completed the required dose of immunization in one year received gifts from the Community Coalition. The community also purchased drugs worth N7,800 (Seven Thousand, Eight Hundred Naira) for use in the health facility.



A cross-section of participants during the PES field test involving the state Director of Planning & Research Photo: Akpoga Envuladu, COMPASS Nasarawa

Recognizing the importance of supportive government policies in successful program implementation, COMPASS recently finalized and field-tested Policy Environment Score instruments for its three focal areas -Reproductive Health, Child Survival and Basic Education.

## **COMPASS set to track policy environment**

The instruments will evaluate changes in the policy environment and help to identify areas in need of high quality health and education services.

The instrument for Reproductive Health was adapted from the existing Policy Environment Score developed by the former Policy Project, while the Basic Education and Child Survival instruments were newly developed.

With the instruments, local governments are now able to measure the overall status of the policy environment in their states and evaluate changes over a specific period. The instruments will be applied in the five COMPASS-supported states and the results will guide in identifying priorities and setting agendas to improve policy environments.

#### Local program invigorates pupils, improves participation

**"Kokoka"** is the series title for the COMPASS Primary 1 and Primary 2 Yoruba literacy and numeracy program. The name is in line with a popular saying in Yoruba land, "Only the educated can wear shoes that makes the sound Ko...Ko...Ka!". According to COMPASS Interactive Radio Instruction (IRI) Coordinator, Swadchet Sankey, "We wanted a name that the children and teachers could relate to."

In a series of writing workshops, most recently in February 2007, 15 writers wrote the educational radio scripts. These scripts are acted out by seasoned actors, whom children in COMPASS-supported schools are growing to love. The action takes place under a big orange tree in "Ero Wunmi Village" with four main characters: Baba Wolewole, Iya Alakara, Sade and Bayo. Aunty Joke is a minor character who teaches the children English in the village square. Baba Wolewole is a 65 year old retired sanitary inspector who thrills the children with stories from his travels around Nigeria. Each of these tales carries a learning objective aimed at teaching literacy and numeracy. Sitting under the tree with Baba, his 59 year old wife, Iya Alakara, teaches the



Pupils during Interactive Radio Instruction Program Photo: Ayobisi Osuntusa, COMPASS Central Office

children while she fries "Akara " and makes "Ogi" for her numerous customers. Sade, 7, and Bayo, 6, meet with Baba and Iya three times a week to play and learn.

*Kokoka* is a very exciting, fun packed 25-27 minute interaction between radio characters, class teachers and pupils. Each lesson is made up of ten segments which include math, Yoruba literacy, songs, health messages and English as a second language. The songs and story segments are the most loved by the children. Not only can teachers and pupils relate to the fictional setting and characters, the songs are produced with local instruments and tunes. *Kokoka* currently reaches 1,638 teachers and 43,276 pupils in Lagos State and is aired three times a week, Mondays through Fridays, from 9:00am-10:30am.

uring a visit to Shabbabu Islamiyya School in Nasarawa Local Government Area in Kano State, United States Ambassador John Campbell observed the highly effective interactive radio instruction (IRI) broadcast, "Ina Yara" in Hausa language. The Ambassador was delighted by their excitement and responses to questions from the radio teacher and fascinated by the use of locally sourced materials as teaching aids in the Teacher Resource Center (TRC). Before his departure, the Ambassador presented books on various subjects to the school.

### **Annual Partners meeting a success**

n November 9th and 10th, the Abuja Central Office held the Second Annual International Partners Meeting with representatives from each of the nine COMPASS partner organizations: Pathfinder International, Creative Associates, Management Sciences for Health, Johns Hopkins University/Center for Communications Programs, Constella Futures, Nigerian Medical Association, Adolescent Health Information Project, Federation of Muslim Women's Associations in Nigeria, and the Civil Society Action Coalition on Education for All.

The objective of the meeting was to share information, Project results and challenges, and to discuss issues relevant to the COMPASS partnership. One such topic was Carol Hart's presentation of the highlights from Joy Riggs-Perla and Rosemary Nwangwu's external review of COMPASS. With the Project fully engaged in implementation, presenting the Project's achievements and challenges from an external perspective offered the participants the chance to discuss the direction COMPASS is headed and address barriers to the Project's success.

Of great interest was the candid presentation by USAID staff, Akua Kwateng-Addo and Ann Oden, who conveyed the changes in USAID programming and reporting and the ensuing implications for COMPASS in Year



Representatives of FOMWAN, AHIP and CSACEFA at the meeting Photo: John Femi, COMPASS Central Office

3 and beyond. This led to an informative question and answer session with the active participation of partners and COMPASS staff.

The meeting involved each of the Senior Technical Advisors, who gave brief presentations on what is planned for each component in Year 3. The broad overview was a helpful way for all especially those who are familiar with just one sector to learn what COMPASS is planning to achieve this year and identify areas of collaboration.

The next meeting is planned to take place in Abuja in November, 2007. Until then, the partners were invigorated to begin Year 3 with a common understanding and purpose.

## **Promoting Salt Sugar Solution for diarrhea**

iarrhea continued to be one of the major killer diseases among under five children in Nigeria. Each year an estimated 200,000 children die from diarrhea. The recommended treatment of diarrhea is Oral Rehydration Therapy (ORT). The corner stone of ORT is giving oral rehydration solution (ORS) to a child as soon as diarrhea starts. ORS can be made at home using salt and sugar.

Although ORT is a simple intervention to manage diarrhea, less than one in five children with diarrhea in Nigeria receive ORS (Nigerian Demographic and Health Survey Report 2003). COMPASS as part of its Child Survival interventions is working with communities to promote home management of diarrhea using salt-sugar-solution (SSS). Mothers are taught how to make home made SSS and administer SSS to a child during diarrhea and continue breast feeding and other food. In addition, mothers are told to continue breast feeding during and after diarrhea.

This orientation is conducted through



A child with diarrhea receiving treatment at the ORT corner in Karu PHC Photo: Blessing A. COMPASS Nasarawa

Community Coalitions (Ccs) and FOMWAN members. Between October to December 2006, COMPASS oriented 382 FOMWAN and 116 CC members in Kano, Nasarawa and Lagos state, on how to prepare SSS at home. In addition, COMPASS is also supporting Primary Health Care (PHC) centers to establish ORT corners in their units according to WHO/FMOH Nigeria guideline. In these ORT corners, children with diarrhea are treated and mothers are trained on how to prepare SSS at home. COMPASS update is published quarterly by the Community Participation for Action in the Social Sector (COMPASS) to communicate the work of our Project.

COMPASS represents a partnership between the Government of Nigeria and the United States Agency for International Development. The Project engages local Nigerian communities in building high quality, integrated health and education

COMPASS is implemented by nine partner organizations under the leadership of Pathfinder International AHIP CAII CONSTELLA Futures CSACEFA FOMWAN JHU/CCP NMA MSH

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