# Review of the Eritrean HIV/AIDS peer education program implementation process

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Development Policy & Practice/
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### **DECLARATION**

#### Declaration:

Where other people's work has been used (either from a printed source, internet or any other source) this has been carefully acknowledged and referenced in accordance with departmental requirements.

The thesis Review of the Eritrean HIV/AIDS peer education program implementation process is my own work.

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### **ACRONYMS AND ABBREVIATIONS**

AED: Academy for Educational Development AIDS Acquired Immunodeficiency Syndrome AIDSCAP: AIDS Control and Prevention Project

ANC: Antenatal Care

BCC Behaviour Change Communication

CMHRP Community Managed HAMSET Response Program

GDP Gross Domestic Product GOE Government of Eritrea

HAMSET HIV/AIDS, Malaria, Sexually Transmitted Infections, and

Tuberculosis Control project

HIV human immunodeficiency virus

HPC Health Promotion Centre

IEC Information, Education and Communication

MOE Ministry of Education

MOH Ministry of Health (Eritrea)
MOI Ministry of Information

MOLHW Ministry of Labour and Human Welfare

NATCoD National AIDS and Tuberculosis Control Division NCEW National Confederation of Eritrean Workers

NGOs Non-governmental organizations NUEW National Union of Eritrean Women

NUEYS National Union of Eritrean Youth and Students PATH Program for Appropriate Technology in Health

PC Peer Coordinator PF Peer Facilitator

PMU Project Management Unit

STI Sexually Transmitted Infections

UNAIDS the Joint United Nations Programs on HIV/AIDS

UNDP United Nations Development Program

UNFPA United Nations Population Fund

USAID U.S. Agency for International Development

VCT HIV testing and counselling WHO World Health Organization

EPEP Eritrean Peer Education Program

SWOT strength, weakness, opportunities and threats

M&E monitoring and evaluation

NACP The national AIDS control program unit

WTC wining through caring

CDC communicable disease control ASAP AIDS strategy and Action plan

RRI Rapid result imitative EDF Eritrean Defence Forces

### **ABSTRACT**

### **Background**

Although the Eritrean Peer Education Programme (EPEP) has been in operation since 2001, the achievement of objectives is progressing on a very slow pace. This could be because of internal structures within EPEP itself or due to external factors. Thus, conducting a SWOT analysis at this point is important, in order for EPEP to map both its strengths and opportunities or weaknesses and threats.

**Objective:** To analyze using the SWOT analysis the internal and external factors that influence the implementation of the HIV/AIDS peer education program so as to provide recommendations for improvement.

#### **Methods**

The study was conducted in two stages. Stage one, involved conducting a SWOT analysis for the five domains that are necessary for the successful implementation of a peer education project as documented in UNFPA's Peer Education Standards Checklist (Y-PEER). These are: planning, recruitment and retention, training and supervision, management and oversight, and monitoring and evaluation. This stage analysed evaluation reports, minutes of meetings, annual reports, training manuals and other project documents. The second stage involved conducting a literature search in international journal. Unpublished literature documenting experiences in peer education were also reviewed.

### **Findings and Recommendation**

The SWOT analysis revealed that the key strength of EPEP is that: target groups are clearly identified and structures for delivering the project are in place and functional. However, areas that require improvement include: supporting the peer coordinators so that they use participatory approaches in training peer educators, strengthening monitoring and evaluation, ensuring programme activities should be participatory and all-inclusive and improve the criteria for recruitment and selection.

**Key Words: peer education, Eritrea** 

### Introduction

When I graduated from the University of Asmara in Eritrea in 1999, I took up a job with the ministry of Health as a monitoring and evaluation officer on BCC program. I was involved in this program since its inception in 2001. During my work in the Ministry of Health (MOH), I realized that there were a lot of challenges in program implementation that affected the quality and coverage of the prevention services. As an M&E officer I have tried on several occasions to convince my program managers to review the program so as to find ways of improving its operations. Unfortunately, nothing has been done to date. It is my hope that this study will be able to give an insight to program managers on the need to carry out a comprehensive evaluation of the program in order to improve its implementation.

Therefore, this thesis aims to analyze using the SWOT framework, the internal and external factors that influence the implementation of the HIV/AIDS peer education program so as to provide recommendations for improvement. The main outputs of this study will be useful to all the actors who are involved in the day to day implementation and planning of the peer education program in Eritrea. These include: program managers, program offices, line ministries, donors and other project staff. I also plan to use the output from this thesis to influence program managers and other actors, so that they may realize the importance of strengthening and conducting program monitoring and evaluation.

HIV/AIDS is a leading cause of death in Eritrea, like in other African countries. Therefore, there is a need to have in place effective interventions programs to reverse the trend of infection. Gaps in such interventions are increasingly being filled by non-governmental organisations or by government entities that are created to fulfil this duty. For this intervention programs to deliver their programmes they must be run efficiently. In Eritrea like in other places elsewhere, the youth are increasing becoming vulnerable to infection by HIV/AIDs this is because of several factors for example: lack of accurate information on HIV/AIDs or lack of supportive environments. Experience from other countries, has shown that peer education is an effective strategy in which to empower the youth so that they can better protect themselves from HIV infection.

# **CHAPTER 1: Background of Eritrea**

### 1.0 Geography and Governance

Eritrea is a new nation in Africa. It was fully liberated from Ethiopia after 30 years of war and gained its independence in May 1993. It has an area of 124,000 square kilometres with a sea coast of about 1,200kms. The country is bordered to the east with the Red Sea, to the south east with Djibouti, south with Ethiopia and in the north and west with Sudan. Administratively, the country is divided into six Zobas or regions namely: Anseba, Debub, Debebawi K'eyih Bahri, Gash Barka, Makeal and Semenawi Keyih Bahri. Each of the six administrative regions has its own regional, sub-regional and village administrators. The estimated population is 3.5 million (EDHS 2002). The population is made of 9 ethnic groups namely: Afar, Bilen, Hedareb, Kunama, Nara, Rashaida, Saho, Tigre and Tigrigna. The population is half Christian and half Muslim.

## 1.1 Socio-economic Status, Drought and Conflict

Agriculture and pastoralism are the main source of livelihood for about 80% of the Eritrean's population. The country is classified one of the poorest countries in the world with a gross domestic product per capital of \$171 in 2003 and about seven out of ten people living below the minimum standard (UNDP 2005). Intermittent droughts and wars have severely damaged Eritrea's infrastructure. The Gross Domestic Product (GDP) growth reached 8% in 1997. However, achievements began to decline with the onset of war and drought. The country's initial promising economic growth and development was disrupted when a border dispute with Ethiopia led to war in May 1998. This conflict was resolved, but hostilities still exist between the two countries, because border demarcation has not been implemented. Because of this conflict, a significant proportion of the countries resources (both financial and human) are tied up in defence. In addition to the border war and its consequences, the country has faced persistent drought as a result, poverty and food insecurity remain widespread in the country(World Bank 2008).

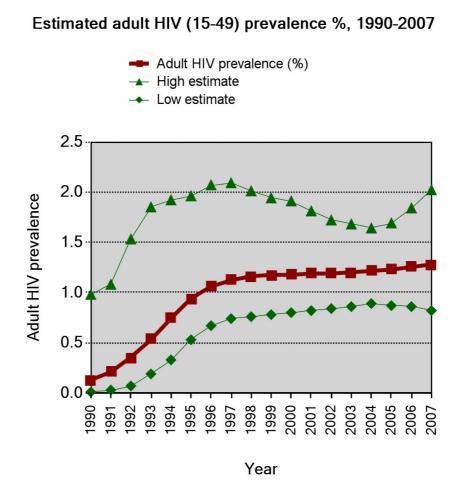
# 1.2 HIV/AIDS Epidemic and Response

HIV/AIDS is a serious health problem in Eritrea. HIV surveillance data in Eritrea is based on health facilities reports, Antenatal Clinic (ANC) sentinel surveillance and special surveys conducted on different population sub-groups. The first AIDS cases were identified in 1998, since then, the country has experienced generalized epidemic. The main mode of transmission is unprotected heterosexual relations (Ministry of Health 2003). Over the last decade, there have been a number of attempts to generate HIV sero-prevalence data. In 1994,

an HIV surveillance activity carried out in Asmara indicated a prevalence rate of 3%. In 1997, a small study among women attending selected ANC sites in all six zones yielded an HIV prevalence of 2%. In 1999, a study limited to urban areas in four zones namely: Makeal, Debub, Anseba and Northern Red Sea yielded 4.2%.

In 2001, the Ministry of Health (MOH) assessment which covered all six zones, reported prevalence of 2.4%. In 2003, a study was done among different occupational groups. This study reported the following prevalence rates: sex workers (11.9%), women (9.5%), military or national service personnel (6%) and workers (4.1) (MOH 2009). Recently, in 2006, special survey conducted by MOH indicated that the prevalence rate among the sex workers was 8.08%, among track drivers 7% and among TB patients 34.3 % (NATCoD MOH 2008). See the Figure 1.1 below of UNAIDS estimated adult HIV prevalence in Eritrea (UNAIDS 2008).

Figure 1.1: Estimated Adult HIV prevalence %, 1990-2007



Because of the epidemic more than 60,000 young and productive Eritreans are infected, more than 32,000 children are orphaned and more than 6,000 have died by 2005 (UNAIDS&WHO 2004). Since the liberation of the country, the Government of Eritrea (GOE) has shown a strong commitment in the control of HIV epidemic. In 1992, it put in place the National AIDS Control Program unit (NACP) in the MOH which was later converted into the National AIDS and TB Control Division (NATCoD) in 2003.

The conflict has contribute the spread of HIV, in that it cause a large proportion of people to be internally displaced into camps where they were less protected and lived in crowded camps. Furthermore, it led to other consequences such as disruption of family life, migration to other countries and for military service men, and national youth service recruits disruption from the family. All these may have acted as contributory factors for the transmission of HIV (World Bank 2008).

To avert the looming crisis, the GOE in 2001 signed a \$ 40 million credit agreement with the World Bank and established HIV/AIDS, Malaria, STI and TB (HAMSET I) control project. It is the largest project that is actively engaged in prevention and control of HIV infection. The central element of the HAMSET project is the use of a communication strategy through Behaviour Change Communication approaches (BCC) in order to facilitate change in the behaviours that contribute to the spread of HIV (PATH 2004a). In Eritrea this has been rolled out through a peer education program, which is the main focus of this study.

#### 1.3 Problem Statement

Health intervention programs can be considered to be living entities, this is because they interact with the environment in such a way as to shape it, or be shaped by it. Therefore, it is important for program implementers to be aware of the internal and external factors that may affect the implementation of project activities. However, the latest review report of the MOH reports that there are several problems that hinder effective implementation of the peer education project. First, monitoring and evaluation of project activities have been reported to be weak. Second, there are problems in planning and coordinating activities. Third, difficulties have been cited in selection, recruitment and retaining peer educators and staffs. Fourth, training and supervision are still weak (HPC 2007).

These problems are not isolated to Eritrea alone. Realising these weaknesses, a consultative meeting was hosted by UNFPA and attended by 45 participants from 22 countries the result of which was a checklist for standardising peer education programmes (UNFPA

2001). According to this checklist (Youth Peer Education Toolkit), the following components should be strengthened: planning, recruitment and retention, training and supervision, management and oversight and monitoring and evaluation. This thesis aims analyse the internal and external factors that influence the implementation of the Eritrean Peer Education Program (EPEP), through the SWOT approach with the Youth Peer Education Toolkit as a guide. The SWOT analysis will serve as a starting point for a discussion towards moving to the UNFPA recommended model

# **1.4** Objectives of the Study Objective

To analyze using the SWOT analysis the internal and external factors that influence the implementation of the HIV/AIDS peer education program so as to provide recommendations for improvement.

# **Specific Objectives**

- 1. To analyze the strengths and weakness of HIV/AIDS peer education program in the following domains:
  - a. Planning
  - b. Recruitment and Retention
  - c. Training and Supervision
  - d. Management and Oversight
  - e. Monitoring and Evaluation
- 2. To identify the opportunities and threats of the program implementation.
- 3. To make recommendations to improve the program implementation.

### 1.5 Methodology

This study is based on a review of available literature. The literature reviewed included: ministry of health project documents, evaluation reports, minutes of meetings, project proposals and donor reports, monthly and annual reports, published and unpublished studies. A reference manager 11.0 database was created to assist with tracking and storing search results and documents selected for review. The review process involved first reading the titles of returned results. There after the abstracts were read in order to select papers for full article review. Papers were selected for further review if they reported

on any of the issues that affect the HIV peer education. Figure 1.1 below presents the search terms and search criteria.

### **Table 1.1: Search Terms and Search Criteria**

## Search Terms

The search criteria "peer education", was the main search term followed by: "HIV/AIDS", "Health Promotion", "Health Education", "Monitoring and Evaluation", "Planning", "Recruitment and Retention", and "training and Supervision".

#### Databases

Pubmed <a href="http://www.ncbi.nlm.nih.gov/pubmed/">http://www.ncbi.nlm.nih.gov/pubmed/</a>. , Google scholar http://scholar.google.nl/, Science direct http://www.sciencedirect.com/, Health Promotion International http://heapro.oxfordjournals.org/, Journal public Health of http://jpubhealth.oxfordjournals.org/ and Health Education Research http://her.oxfordjournals.org/, the Communication **Initiatives** http://www.comminit.com/

In addition, documents reporting on the peer education and HIV/AIDS from KIT and VU libraries were also reviewed

Papers were included in the review if they addressed any of the issues that affect the implementation of peer education programmes or other HIV/AIDs programs.

### 1.6 Conceptual Framework: SWOT analysis

This thesis is based on UNFPA's Peer Education Standards Checklist (Y-PEER). This checklist will guide a SWOT analysis of the EPEP project. SWOT analysis is a strategic planning method used for scanning the internal and external environment of a program, it examines the Strengths, Weakness, Opportunities, and Threats involved in a project or in a business venture (CDC 2009). The aim of SWOT analysis is to identify the key internal and external factors that affect program implementation. The internal factors within an organisation could act as strength or a weakness towards the implementation of a given activity. External factors operate outside the organisation and could provide an opportunity for improving or scaling up an activity or threaten the successful implementation. Internal factors are within the control of the organisation while most of the time the external factors are outside its control (see figure 1.2).

Figure 1.2: SWOT Analysis Framework

	Strengths	Weaknesses
Internal	<ul> <li>Planning</li> <li>Recruitment and Retention</li> <li>Training and Supervision</li> <li>Management and Oversight</li> <li>Monitoring and Evaluation</li> </ul>	<ul> <li>Planning</li> <li>Recruitment and Retention</li> <li>Training and Supervision</li> <li>Management and Oversight</li> <li>Monitoring and Evaluation</li> </ul>
	Opportunities	Threats
External	<ul> <li>Access to Hard-to-reach population</li> <li>Decentralisation Policy</li> <li>Community responsiveness to</li> </ul>	<ul> <li>Government Policy</li> <li>Poverty</li> <li>Reliance on donor funding</li> <li>Duplication of services</li> </ul>

Adapted from: UNFPA Peer education program (Y- PEER) 2000.

The SWOT analysis was conducted following the Y-Peer education checklist that was developed by UNFPA. This checklist is organised into five domain, planning, recruitment and retention, training and supervision, management and oversight and monitoring and evaluation (see annex 2). These domains have sub-sections with a brief description of what ones needs to examine when evaluating a peer education program. The Y-peer was developed based on experience of several countries from developing and developed world.

### 1.7 Limitations of the study

The current study is based on a review of project documents, published and unpublished data. The analysis focused on SWOT analysis. This subject the study to several limitations due to the method used. For effective program evaluation a mix of method should used. Qualitative approaches present an opportunity for project staff to offer their understanding of the difficulties and challenges that a project is facing. This approach also permits the examination of community and other contextual factors that affect the success of the project. Therefore, this study is limited to the extent to which it can make conclusions on these factors. Overall the findings of this study

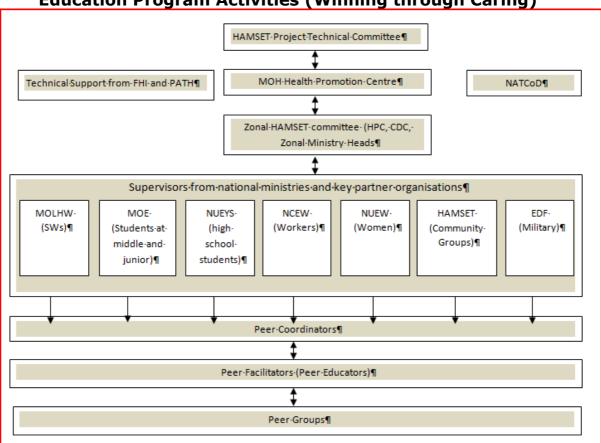
are important in helping project implementers in Eritrea and elsewhere to reflect on these factors.

# **CHAPTER 2: Overview of the Eritrean BCC program**

### 2.0 Program origins and History

EPEP was started in 2001, with the launch of HAMSET project that received technical assistance from USAID, Family Health International (FHI) and PATH. At the project onset a multi-sectoral Behaviour Change Communication sub-committee for HIV and AIDS was established from both government and non-government actors and provided a framework for the coordination and development of the intervention. Thereafter, a formative research on STI, HIV and AIDS was conducted in all six zones. This led to the development of a communication strategy and objectives for the EPEP. Figure 2.1 presents the organisational structure for the EPEP.

Figure 2.1: Organisational Chart for the Eritrean HIV/AIDs Peer Education Program Activities (Winning through Caring)



Source PATH 2004

NB: CDC: communicable disease control; SWs sex workers; EDF Eritrean Defence Forces; FHI Family Health International; HAMSET HIV/AIDS, Malaria, Sexually Transmitted Infections and Tuberculosis Control Project; HPC Health Promotion Centre; MOE, Ministry of Education; MOH Ministry of Health; MOLHW Ministry of Labour and Human Welfare; NATCoD National AIDS and Tuberculosis Control

Division; NCEW National Confederation of Eritrean Workers; NUEYS National Union of Eritrean Youth and Students; NUEW National Union of Eritrean Women.

In June 2001, a strategy implementation workshop was held and model communities were established, roles and responsibilities were discussed and finally a rough activity plan was drafted. In November 2001, AIDS competency training was given to focal persons from line ministries, associations and other implementing partners. In 2002, EPEP¹ was started in selected model communities in all six zones(Ken Kutsch& Alazar Mehreteab 2001).

### 2.1 Program Strategies, Goals and Objectives

Both the strategies and objectives of the intervention were formulated based on the findings of the formative research. The communication strategy puts an emphasis on the following points: First, that the Eritrean caring impulse is the strongest resource in combating fear, stigma and shame in the epidemic. Second, communication processes have to be participatory, interactive, and response-based and aimed at increasing ownership of information. Third, individual cases of behaviour change and attitude change have to be magnified to the larger community and be sensitive to the rural population.

The Goal of EPEP is to enable individuals, their peers and the community as a whole to change behavior individually and collectively(PATH&MOH 2002). This will be achieved through the six objectives listed below.

- ➤ To increase the capacity and skills of individuals to openly discuss issues related to sexuality, STI and HIV/AIDS with their partners, peers and seniors.
- > To create a deeper understanding of the difference between exposure to HIV and infection by HIV, as well as between HIV infection and AIDS.
- > To create deeper understanding of the benefits of prompt treatment for STIs as of reducing vulnerability to HIV.
- > To increase understanding of and confidence in abstinence, fidelity and condom use as options in preventing HIV infection.
- > To create skills in negotiating safer sex and condom use between individuals.
- > To create an understanding of the benefits and importance of voluntary counseling and testing.

<sup>&</sup>lt;sup>1</sup> EPEP was given a local name Begbrawi Haliyot Netawet" translated "Wining through caring strategy"

## 2.2 Target Audience and Program Staffs

The EPEP strategy primarily targets students (both junior and secondary schools), sex workers, women and workers. This thesis will focus on the youth<sup>2</sup>. The secondary target groups include: teachers, business leaders, administrative/senior government officials and health workers. The program personnel are from: Health Promotion Center (HPC), Zonal HPC officers, NATCoD, Ministry of labor and Human Welfare (MOLHW), Ministry of Education (MOE), National Union of Confederation of Eritrea (NCEW), National Union of Eritrean Youth and Students (NUEYS), National Union of Eritrean Women's Association (NUEW), Project Management Unit (PMU), Peer coordinators and Peer facilitators. See table 2.1 below for a description of the roles and responsibilities of the program actors.

Table 2.1: Responsibilities of staffs of the program

HPC head quarter	Coordinate the overall BCC program in the country
Zonal HPC officers	Coordinate the BCC program in their respective zone
NATCoD	collaborate in VCT/STI services
MOE	Responsible for junior school students
MOLHW	Responsible for sex workers activities
NUEYS	Responsible for high schools students activities
NEUW	Responsible for women activities
NCEW	Responsible for workers activities
Peer coordinators	Coordinates from 10-20 peer groups
Peer facilitators	Lead the discussion of one peer group

N.B. people who work in MOE, MOLHW, NUEYS, NUEW and NUEYS are called supervisors

## 2.4 Programme Activities and Sites

The scope of EPEP strategy encompasses peer-facilitated learning, development of IEC supporting materials, participatory theater, interactive radio (mass media) and advocacy. The strategy emphasizes interaction and dialogue among peer groups (peer education). The elements of peer education program are: planning, selecting and keeping peer educators; training; follow up and supervision; monitoring and evaluation. The methods used for peer group activities include: group discussion, role plays, time-line, picture code, inviting guest speakers, referral for STI/VCT and magnification activities through radio and theater. Initially 15 intervention sites (model communities) were selected; this is estimated to reach about 30,000 peers. Criteria for selection include population, prevalence of disease, audience concentration, and existence of services, and potential for

These are people aged between 15-35 years based on the definition by National Youth Development Information Centre <a href="https://www.nyc.gov.sg/research/youthdefinition.asp">www.nyc.gov.sg/research/youthdefinition.asp</a>

collaboration and spread of HIV. At present the model communities have been increased to 52. Discussions are held in each population group once a week (1-2 hours) and takes place in a setting that is comfortable to the audience, this is usually where the peer are residing (see table 2.2).

**Table 2.2 Program Coverage** 

Name of Zoba	No of peer coordinators	No of Peer facilitators	No of Peer groups	No of Peers	No of Supervisors
Anseba	11	131	131	3471	5
Debub	26	524	387	9675	7
Gash Barka	18	261	150	3933	6
Makeal	9	280	278	6649	8
SRZ	5	80	74	2715	9
NRZ	10	279	279	6870	10
Total	79	1555	1299	33,313	45

Source: Health Promotion Center 2008

### 2.5 Budget and Administrative Arrangement

Since 2001 the program has been funded by HAMSET project. From 2001-2005 it received technical support from USAID. Currently, EPEP also receive funding from the Global Fund. The project does not have its own budget; this is because it is integrated in other programs. The Health Promotion Center based at the Ministry of Health is responsible for coordinating the entire program. However, the overall implementation of the program has been done at the zonal level.

### 2.6 **Program Theory**

The peer education program is as behavioral change strategy that is based on the Diffusion of Innovation theory. This theory states that certain individuals from the community acts as agents of behavior change by disseminating information and influencing group norms amongst their peers (Rogers 1983). This means that an idea, practice or product that is being introduced at a given point in time gets diffused or spread to a wide audience using various communication channels.

## **CHAPTER 3: Strengths and Weaknesses**

### 3.0 Planning

Planning is essential for an organization to focus its future direction and outcomes or results that it desires to achieve (Anderson 2009). According to Anderson, one of the leading causes of failure in any organization is not having a strategic plan. This has been supported by the World Bank through a review of 24 national strategic plans (World Bank 2006). This review indicated the main weakness were, having too many plans which were not informed by evidence, setting priories which were not in line with the main problems, absence of result based strategies, and poor financing (World Bank 2006). Planning as used in this thesis refers to the process of creating and maintaining a set of activities required for achieving the objectives of the peer education project. This section evaluates the strengths and weaknesses of the Eritrean BCC strategy planning process where EPEP is one component of the BCC strategy.

## Mobilizing the main Stakeholders

According to Eritrean EPEP work plan, the main stakeholders in the peer education project appear to have been mobilized, to the extent that they have been informed and offered an opportunity to participate (Gopinath 2001). The stakeholders who have been mobilised include: government officials, youth groups, women groups, community leaders, religious leaders and health professionals, technical staff from development partners like USAID, World Bank and United Nations. This is one of the strengths of the projects because technical personnel working for the development partners usually are experts in their field and thus give useful insight in to the organisation also operate in other countries this enables the sharing of lessons and good practices which is likely to improve the planning process. But other stakeholders appear to have been left out, these include: key policy makers who are the technical personnel based in the MOH, groups residing in rural areas, factory workers, truck drivers military, national youth service administrators of these institutions. comprehensive stakeholder analysis is done at the designs stage, this gives planners an overall picture of those who are likely to benefit, be affected of affect the project (CDC 2009). This helps inform planners about risks and assumptions that they make as they draw up their project plans.

### **Ensuring active Participation of the Target Group**

According to the BCC work plan, the target groups especially the youth Are targeted as beneficiaries, but have not been allowed adequate opportunity to contribute to program activities. Other target groups (women, sex workers and workers) have equally not been meaning involved in planning, or decision-making. However, the strength is that they have been clearly identified as the target groups and given priority to benefit from the program (MOH 2001).

## **Crosscutting Issues**

Development projects are entities that actively interact with their environment. Thus, the context in which a project sits has a direct bearing in the way it shapes itself to achieve objectives or is shaped by these factors. Therefore, the importance of careful planning cannot be over emphasized. Contextual factors must be carefully considered, challenges anticipated and incorporated into the plan (UNAIDS& PENNSTATE 1999). This may be a key weakness in planning of the Eritrean peer education project. This is because the project concept was simply adopted from the Kenyan model (PATH 2004a). It is not clear how this model was appraised to take into account differences in contextual factors between the two countries. Youth in Eritrea may differ from those in Kenya in terms of the way they interacted with their elders, access to sexual and reproductive health information, in their social practices and solidarity thereby influencing their ability to act on new information. In Eritrea it is not easy for the youth to talk openly about their sexuality, either amongst themselves or with parents and elders (HPC 2006b). Further, the youth tend to be extremely shy when issues of sexual and reproductive health are brought up in the presence of both boys and girls. It is likely, that the boys and girls would be freer to talk about sexual and reproductive issues when they are separated into same sex groups. Researchers have argued for the inclusion of gender equity into peer education project programs and have also cited its importance in the success of program (Population Council 1999).

### **Refine General and Specific Program Objectives**

According to the EPEP strategic implementation plan, one of the strengths of the Eritrean peer education project is that the vision, mission and objectives have been clearly defined and described. While the long term goal of a project could remain largely unchanged, the objectives could be further refined to reflect changing circumstances,

as the project is implemented. However, the objectives of the peer education project have remained static (PATH&MOH 2002).

### **Identify Target Audience**

One of the strong points of the peer education project is that at least a baseline survey was done at the onset of project implementation. From my personal experience although there are notable gaps in the way this activity was conducted, it is encouraging that decision-makers and planners realised the importance of a baseline survey. Apart from defining and locating the target population, this baseline did not involve the youth in order to understand their needs (HPC 2006a). The strength of the planning process is that it identifies different target audience such as youth (both junior and high school students), women, factory workers and sex workers. These are the ones who are listed as target audience, even though there are other target groups that have been identified but activities that that target them have not been implemented (HPC 2005a). There was no clear criterion for selecting the target audience such as prevalence, vulnerability or risky behaviours.

### **Identify the needs of the Target Audience**

In the EPEP project KAP surveys are usually conducted annually. Project review documents from EPEP, do not document if a needs assessment has been done either amongst the target groups or in the community (HPC 2005a).

#### **Available Resources**

A review of the Eritrean BCC program underscored that the strength of the peer education project is that there, was availability of funding from the World Bank funded HAMSET project at the same time there was technical assistance from USAID. One weakness is that the peer education project is entirely reliant on donor funding. Planners did not explore other sources of local funding to carry on the project after the current funding stream is through. This directly affects project sustainability in terms of financial soundness and capacity building. The planners did not put structures into place to ensure that there is capacity building for the local staff to take on the technical roles for which USAID was offering (HPC 2005). There are also problems at the time of planning, as the Eritrean peer education program, started with 10 staff at the national level and six staff at the zonal level with a total of 16, that is, one staff in each zone. This is far from the number that is required to effectively deliver the program. The staffs at the zonal level are also concerned and busy with other activities other than peer education.

#### **Work Plan**

Although there is an operation work plan for the peer education project it is not based on standards such as the logical framework approach. The work pan is in place, it clearly documents the EPEP's objectives, budget and time-line. However, the work plan is not developed to clearly allocate duties and responsibilities amongst project staff, duties Project staffs are simply asked to draw up a work plan for the entire year.

The strength of the work plan is that the work plan includes different communication channels including mass media and advocacy activities which is integrated within EPEP's activities. Drafting of the work-plan is done without consulting stakeholders and from my experience working in EPEP this process is not based on evidence.

## **Monitoring and Evaluation Plan**

A monitoring and evaluation (M&E) is a tool that is used to ensure the efficient and timely implementation of any project activities (UNAIDS 2000). Looking through the M&E matrix for the Eritrean BCC project reveals some weaknesses (personal observation). First, the matrix is not properly developed, while some indicators are listed, their means of verification is not clearly stated. This has the potential of weakening the entire activity as it could lead to confusion amongst project officers in the way the project monitored. Second, it is not clear who has responsibility for M&E, it seems like a floating activity which could be assigned to anyone at random. Further, the planners did not consider ways in which other actors could participate in implementation and monitoring. Third, although it is commendable that some indicators have been defined for objectives and outputs, none has been defined for activities (HPC 2005a).

#### **Feedback Mechanisms:**

A review of the proceedings from the EPEP workshop meeting held in Keren, shows that there are proper feedback mechanisms amongst project implementers and actors that work closely with EPEP e.g. HAMSET, MOH, line ministries. However, project implementers felt that their linkages with civil society, NGO and faith based organisations were weak. Further, a review of project document indicate that linkages with the target audiences and the community were even weaker as they have not been meaningfully involved in the project (HPC 2006b).

### **Resource Mobilisation and Sustainability Plan**

Projects operate in a resources limited environment. Most proposals are funded on a time limited agreement, further many donors operated on fixed schedules with specific periods upon which they could accept responses to their calls for proposals for funding.

Therefore, for a project to be financially sound, resource mobilisation activities have to be well planned, and be set as an ongoing activity (World Bank 2006). The importance of a sound resource mobilisation strategy is thus important for projects that are seeking other alternative ways of sustaining their operations. However, this seems to be a weakness, as EPEP largely depends on World Bank for their funding. Thus, program activities are always affected when funding delays, and to the best of my knowledge, I do not know of any plans that are in place to ensure that the EPEP project is sustained beyond its current term.

#### 3.1 Recruitment and Retention

### Recruitment

## **Identify Sources and Channels for Recruiting Peer Educators**

The strength of the EPEP project is that the channels for recruiting peers are clearly identified. In Eritrea peer educators are recruited through a variety of channels. One, the MOH advertises for peer coordinators in the local newspapers. Second, is through social networks where the peer educators who have already been recruited are asked to recommend and talk to other peers in their regions about the project and to bring them along if they were interested in becoming peer educators. The weakness of EPEP is that recruitment of peer educators is not done through social networks (PATH 2004a). Most peer educators and peer coordinators are recruited through MOH and line ministries.

### **Decide on Criteria for peer Educator Selection**

Although there is a clear selection criterion, there is a gap between what is documented on paper and what actually happens on the ground. The weakness is that there is no standardised and transparent interview process. There is also conflict of interest between the partners (line ministries) and MOH in selecting peer coordinators. For, example, MOH views that it is the one that is properly mandated to recruit the peer educators while the line ministries also view that they have authority to recruit. The strength of the recruitment process is that it is done with the help of partners and MOH.

### **Set Clear Expectations**

As far as I know, the roles and responsibilities for the peer educators are clearly stated in project documents. However, peer coordinators do not seem to communicate clearly to the peer educators about what is expected of them. This is because; the MOH project report indicates that many peers are facing problems communicating some concepts,

this could be a weakness because what is expected of them was not clarified.

# Establish a standardized and transparent interview and selection process

There is a procedure for selecting peer educators. However, it is not clear how this procedure was arrived at, who are the stakeholders involved, or if it was standardized and transparent. The major weakness is that this procedure is rarely followed in the field. After, an advertisement or mobilisation process, when potential peer educators turn up it is only the zonal health promotion officer and the peer coordinator who decide which peer get recruited (HPC 2005b). It is not clear if they followed the prescribed selection criteria. This is may lead to selection of peers who are not motivated enough to carry through with the task or they may lack the required skills. This may contribute to drop-outs. While recruiting appropriate peers may be a daunting task, UNFPA, suggests that such a selection criteria should take into account considerations such as age, sex, motivation, acceptability by the target audience, previous experience, personal traits, and other characteristics that are relevant for the programme (UNFPA 2001).

### Retention

### **Document Expectations**

Although the peer educators are aware of their responsibilities, in terms of communicating to their peers, their expectations are not documented. This is a weakness as there is document for the peer educators to refer to while in the field, regarding what is expected of them.

# Establish means for continuous communication, including feedback

There are monthly meetings between superiors, peer coordinators and peer educators; this forum allows communication and input of feedback and review of activities for the past month. In addition, progress reports are collected regularly by the peer coordinator. This is an opportunity for the exchange of information between peer educators and the peers.

## **Establish an Incentive System**

The incentive available in EPEP mainly include is a payment to all peer coordinators (US \$100 monthly) and peer educators (US \$10 every 3 months). However, there is a huge discrepancy in the amount of

incentive provided between peer educators and peer coordinators. This may serve to de-motivate the peer educators. Another weakness is that there is no incentive for peers educators or peer coordinators who perform exceptionally well. Further, there are no non-monetary incentives provided in to the peer educators (PATH 2004a).

## **Establish Supervisory and Mentoring Systems**

The supervisory function is very weak; this is because of problems in the overall coordination of the project (HPC 2007). For instance, if a supervisor detects a flaw, it should be addressed by the project management promptly. The weakness of in supervision is also due to the fact that all supervisors work on a part-time basis and are not remunerated for their services. Mentoring systems are equally weak; peer educators who are good in their work are not encouraged to take on a mentoring role in order to assist others to develop their skill to their level.

# Offer Opportunities for increasing involvement and responsibility

Analysis of project documents and reports did not uncover any evidence that the peer educators were being offered opportunities to get more involved in project activities. This is a major weakness; if this was done it could act as a motivating factor, just like promotion in conventional careers.

### 3.3 Training and Supervision

### **Arrange for qualified trainers**

Effective peer education programs rely on qualified trainers. Most of the training in Eritrea relies on the project staff. However, one of the weaknesses in that the trainers have only received initial training, and have not had refresher training ever since. The trainers are also busy with the day-to-day activities of the project. Therefore, the trainers engage in training on a part-time basis. Another weakness is that the trainers have no academic training on heath promotion or in the field of peer education. According to a report from the review workshop of the EPEP, the trainers are still lacking in skills in some areas of peer education such as: facilitating training, flexibility to the trainers needs, innovation - a mix of methodologies e.g. short lectures, group works, discussions etc (HPC 2006a).

### Select a quality training curriculum

The training manual that is currently being used is the Splash! Peerled learning process developed by PATH. The Splash (!) approach to peer learning is not simply fact based. The peer educators are trained to lead their peers through a series of high quality, intense discussions and engagements that take place over a long time with a small group of community members (HPC 2006b). The other strength is that the training manual uses several innovative tools such as: story-telling, time-line, picture codes and role play, all of which encourage community interaction (PATH 2004b). The weakness is that the manual includes only basic information about HIV/AIDS prevention, the difference between HIV & AIDS, the importance of VCT, condom use skills training, destigmatization of HIV and AIDS, and care for PLWHA. The manual is only translated into two languages Tigrinya and Arabic, which do not represent all ethnic groups in the country. Another weakness if that the curriculum is not modified to fit the Eritrean cultural context; it is simply translated into local languages. This is the only manual used for training of peer education program.

## **Arrange for appropriately Sized Groups**

In Eritrea EPEP project, one trainee group should be comprised of from 15-25 participants. However, most of the time, there is a large group (25-50) due to financial and time constraints. This is because the project managers want to reduce cost, but this affects the participation of peer educators during the training session.

### Structure agenda and time to meet training needs

There is a clear timetable of activities to guide training activities in EPEP. However, the training agenda is arranged without consulting the peer educators. All the same the time allowed for training appears to be adequate for the delivery of the objectives of the peer education project.

### Provide relevant materials and handouts

The EPEP project provides training material at no cost to the participant. Materials provided include: printed PowerPoint presentations of the days lecture, and other publications that the trainers consider important to the trainees learning. However, some handouts are in English, and a majority of them are not translated into the local language. The training handouts are prepared by the trainers with no participation from the peer educators.

# Use interactive, participatory, and skills development approaches

The Eritrean peer education project was designed to include several participatory approach methods as indicated above; however, the methodology in the ground is limited to the formal way of teaching. Most of the discussions are done with the help of the training manual. See figure 3.1 below.

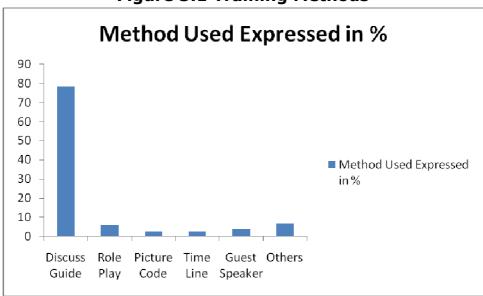


Figure 3.1 Training Methods

Source: Health Promotion Centre semi-annual report 2008

# Implement tools and methods to evaluate training and training participants

Although the training process in EPEP is evaluated, trainee's knowledge is not assessed through formal means. Usually the trainers just ask question at random to the trainers to gauge their understanding during a training session. To the best of my knowledge, there is no post training evaluation that has been conducted so far amongst the peer educators.

### **Discuss Ethical Issues**

Ethical issues are considered in the EPEP project, the trainers understand that they have to respect personal issues. It is worth noting that there is a gender mix in training, this affects the way the participant deliberate on issues relating to sexual and reproductive health.

### Involve the target groups at all stages

Target groups are not involved at all stages of the project. This is because project activities are mainly carried out by project staffs. This is a weakness in that the needs and views of the target groups are not taken on board to shape project activities. The peer education can be considered as a top-down activity (HPC 2005b).

### **Supervision**

## Arrange for trained, aware personnel

All the supervision activities are done from the MOH staffs who have no formal training in supervision. Further, since the project inception, the supervisors have not been trained or mentored, even during the period when the project receive technical assistant from USAID.

### Ensure that peer educators are well prepared

Despite the lack of supervision skills by the program staff, the supervision activities that are in place are supportive it helps the peer educators, to learn from their weakness and builds on their strengths.

### Continually reinforce motivation and ethical behavior

The supervisors in EPEP give encourage the trainees however; the supervision is very weak due to logistics problems such as: fuel and car that hamper the transportation of the supervisors from visiting the peer while they are at the field.

# Manage the group dynamic and encourage team building

The supervisors in the EPEP do their best to manage group dynamics. One advantage is that the trainers are conversant with the Eritrean context and understand the peers (HPC 2005b). But the extent to which they participate to facilitate team building is not clear. It could be that the peers themselves aggregate to form teams, or it could be that the trainers facilitate the process.

## **Share responsibility with peer educators**

The extent to which peer educators participate in sharing supervisory responsibilities and feedback is quite weak. The peers are mainly involved as recipients of training, and they are given limited chance to participate in supervisory functions.

### 3.4 Management and Oversight

Management and oversight remain a weak function, in the Eritrean Peer education project. This is because the supervisory function is quite weak as well.

### **Ensure compliance with program standards**

It is not very clear how project managers ensure that standards are adhered to across the all activities conducted by EPEP.

## Ensure technical competency of the management team

There is gap in technical competency; this is because the project relied on FHI, to provide capacity building activities. However, at present, this benefit is not present since USAID left and there is no training that has been conducted to train EPEP staff on programme management.

# Establish and maintain quality expectations of program activities

Apart from the training manual, as far as I know, the program managers and other staff have not yet had a session to establish quality expectations for the peer education project. Therefore different peer coordinators, each deliver the peer education training in the way that they see fit. There are no standard procedures of conducting the training session, methodologies and approaches also vary across the regions (HPC 2007).

# Establish effective administration of human and financial resources

The EPEP project does not have its own administrative structures; the management of human and financial resources is integrated within the MOH. Therefore, for administration and management of finances, EPEP relies on the structures at the MOH.

### **Establish a transparent decision-making process**

From my experience, decisions regarding programme operations for the entire day-to-day activities are decentralized to the zonal level (Zobas). The MOH appoints representatives for each division, there are six representatives stationed at each of the six zones. They sit in the HAMSET committee and facilitate decision making. They comprised of several stakeholders such as: personnel from other ministries and division, community representatives and other actors. It is not clear as to whether this process is transparent, but the process is largely dominated by the MOH, as it has the largest members sitting in the committee. Minutes from decision making session are drawn along with zonal priorities which are sent to the MOH for funding (HPC 2008).

# Establish a process for youth (target group) participation in decision making

As already stated, the target audiences do not have an active role in decision making, this is because they are largely seen as trainees and not part of the management team. Therefore, they have narrow space for influencing decision or for shaping the design and appraisal of project activities to better fit their training needs.

## **Use M&E for decision-making**

Even though progress reports are collected there is little evidence to show that they are used during decision making to improve the program or plan future activities. But the results from the KAP surveys are not utilized in improvement of the program.

# Promote cooperation and networking

There is some degree of networking with other stakeholders, other ministries and United Nations office. But networking is not actively promoted as a program activity.

## Establish linkages and referrals to services and commodities

EPEP is run as a project on its own and is not integrated with NATCoD. This affects the link and referral to services such VCT by the peer educators. The link to the ministry of information is also weak affecting programs that desire to use the media for HIV/AIDS prevention campaign.

## **Establish Sustainability Plans**

One of the strength is that the project management unit is always scanning ways of improving the sustainability of the project. One of the measures they have instituted is cost containment, in order to reduce the overall project cost towards a level that the MOH could afford on its own (HPC 2007).

## 3.5 Monitoring and Evaluation

### **Establish relevant, clear objectives**

The program activities for the EPEP are clearly defined, however, these objectives to do not fulfill the other criteria as they have not been stated in measurable terms, and are not time bound. Some of them seem achievable though.

## **Establish functional, relevant indicators**

Process indicators are clearly defined, but the outcome indicators have not yet been defined. The process indicators are general as they have not been defined for each target group.

### Include M&E in the work plan from the start

At the project outset an M&E strategy and work plan was put in place with the assistance of USAID. But the implementation has become weak, following the departure of USAID.

## **Implement Baseline Assessment**

One of the strengths is that a baseline survey was done at the onset, and the findings have been used to evaluate the project. However, this activity was not done to the required standards as there were disruptions due to the conflict at that time.

### Develop monitoring and tools and a measuring system

There are monitoring tools including: questionnaires, weekly session, report, observation checklist. These tools were adapted from the Kenyan model and were not pretested in order to adopt them to the Eritrean context. These tools are used regularly by the program management unit.

### Ensure capacity to plan and implement M&E

There are capacity gaps in M&E amongst the project staff of EPEP. At the onset they received technical support from USAID, but following their exit, no M&E training has been done.

# Establish means for youth participation in planning and implementing M&E

At the onset of the project there was participatory M&E training that included the youth. However, this was only done once, and has not

been repeated again. This is because the project staffs have not considered the participation of the youth as an important project activity.

## **CHAPTER 4: Opportunities and Threats**

### 4.1 Opportunities

# **Access to Hard-to-Reach Populations**

Although little information is available to assess whether there are unidentified vulnerable groups that are yet to be targeted by EPEP, there are some groups who have not been adequately reached. This includes: sex workers, youth working for the military and those recruited in National Youth Service. These present an opportunity for EPEP to scale up its targeting and intervention activities.

### **Decentralisation policy**

Decentralisation refers to the process in which principals (officials at the headquarters) transfer authority and responsibilities to agents (based in regions) for the implementation of a given activity (Hollister 1998). The MOH in Eritrea has decentralised some decision making and control over resources to the regions. Although, appointed officials at the zonal level appear to simply fulfil directives that are handed down from the MOH. Because of the decentralised structure, local officials implementing EPEP activities have an opportunity to target their activities in order to better respond to the specific needs of target groups residing at the region. Decentralised structure allows the collection, analysis and storage of data to take place at the local level. This data could then be used to local planning and decision making. The rational for decentralisation is that decisions at the local levels will be made faster and bottlenecks that may be causing programme delays will be visible. However, one pitfall of decentralisation is that the local authorities to which functions are decentralised may not have the capacity to effectively take on the new responsibilities which has the potential for undermining effective implementation of peer Thus, decentralisation programmes. presents opportunity, for EPEP to strengthen the implementation of programme activities at the regional level.

## **Communities responsive to the program**

Practitioners have pointed out that when communities are responsive to the peer education program and effectively take part in project activities; this creates an opportunity for them to develop a variety of skills (Bandura et al. 2000). From my experience, I have observed that the Eritrean people appreciate the importance of interventions aimed at prevention and control of HIV. Thus, the increased responsiveness allows the EPEP to expand its activities, unlike if the community was not responsive to the program. Further, the literature cited above, argues that the benefits of a responsive community are threefold. One, that the peer education programme benefits from the wealth of

information that community members bring onboard which helps shape local program activities to better address local needs. Two, by taking part the community develops useful skills such as conflict resolution, increased self esteem, increased knowledge and awareness of health related issues. Third, when processes are open, transparency and accountability in project implementation and management of programmes resources is likely to improve as local decision makers have to defend their choices both to the target group and to principals at headquarters.

### Political will at the district and national level

The MOH and government officials of Eritrea both at the national and district levels, are committed to supporting activities that aim to prevent and control HIV. This has been facilitated by the Eritrean government putting in place a strategic direction and resource mobilisation for implementation of HIV/AIDS activities. This has helped create an enabling environment for EPEP to conduct its activities in Eritrea.

### **Multi-sectoral Approach**

So far EPEP has been conducting activities on its own, or together with other line ministries. The line ministries that have been involved at some point during program implementation include: MOLHW, MOE, NUEYS, NCEW, NUEW, HAMSET, and EDF but their roles are limited compared to MOH's role in EPEP. There is an opportunity to use the collaborations that MOH has put in place in working with other sectors through the other ministries or other private partners. Nevertheless, this is an important step towards using a multi-sectoral approach to strengthen EPEP's project activities. There are many other actors in the field of HIV/AIDS in Eritrea, thus there is a great opportunity to collaborate with private sectors and civil societies.

### Favourable working relations with other actors

If there is favourable working relations with other actors for example local or international NGOs this presents an opportunity for strenathenina programme activities. This could be through collaboration to conduct certain activities together and hence helping to multiply gains and save on costs. Apart from the government policies which have always been at loggerheads with the NGOs, past experience indicates that EPEP has had good relations with other actors and as a result received technical and financial support from these actors. Favourable work environment presents an opportunity for EPEP to develop new collaborations and to establish links with new actors.

#### 4.2 Threats

### **Government Policy**

beginning of the epidemic, the non-governmental organizations (NGO) and community based organizations (CBOs) have a played a leading role in designing and delivering HIV/AIDS programs. Most of the donors have left because of the difficult Eritrean policy environment. In 2005, the Eritrean government asked USAID to leave the country. At present because of these policies, the operational environment is not favourable to for international NGOs. NGOs have been at odds with the Eritrean government and the activities of some NGO have also been brought under government control (Foran 2009). The number of international NGOs working in the country has dropped significantly from 37 in 2005 to 5 in 2009 according to aid workers. Even as EPEP continues to explore ways in which to fundraise from donors or partner with other NGO's, changes in government policy that affect these partners threatens collaborations that have been drawn up. This is a serious threat that EPEP project manager should beware of and possibly draw up contingency plans. Given the numbers of international NGOs that have since abandoned operations in Eritrea, this is a frequently occurring threat to collaborations with international organisations.

## **Poverty**

Eritrea is classified as one of the poorest countries in the world; about seven of ten people living below the minimum standard living in 2000. This have been aggravated because of the border conflict with Ethiopia. This poses a threat to the successful implementation of the EPEP in that most youth may be engaged in income generating activities and thus will not be able to attend information session delivered by the peer educators. In such a situation, it is difficult for people to pay attention to the health messages that are being disseminated, as they are more concerned with their daily livelihood.

#### Reliance on Donor funding

EPEP relies on donors to finance the bulk of its activities. Another source to finance project activities has not been established yet. This is a threat to EPEP in that should the donor support stop then it is likely that project activities will stop as well.

### **Duplication of services**

Aside from EPEP there are similar prevention programs that are run by the MOH, NGOs and other line ministries. However, because of poor coordination, many of the activities are duplicated, for the World Bank Rapid Result Initiative (RRI) that aims to influence behaviour within 90 days. Many times the RRI ends up targeting audiences from the areas

in which EPEP operates. Realising the disadvantages posed by the duplication of services, the MOH, with the help of other partners like the World Bank are working on framework that will assist in joint planning and project implementation amongst different partners. Duplication of services amongst different organisations poses a threat to EPEP, because it has the potential to weaken the anticipated impact of the project.

# Conflicting values and attitudes about the program

From the beginning there was a debate regarding who will be responsible for EPEP, whether it was HAMSET, NATCOD, HPC or the Line ministries. Finally it was decided that Health Promotion centre of MOH should be responsible for EPEP. This did not go well with the NATCOD, and the other actors. NATCOD and the Health Promotion Centre have expressed concerns that EPEP should be integrated into the National HIV/AIDS Control Program. The tension that exists between these organisations poses a threat to effective implementation of project activities.

## War

The current no-peace-no-war environment in the country paralyzed the entire system of the country and especially the health sector. Because of the current unsettled political environment, the majority of young Eritreans (youth) have been recruited in the military service. This affects the EPEP directly or indirectly in the following domains first, is psychological impact among the youth. Second, it limits the activities of EPEP. Third, it is hard to reach the internally displaced because of the war. Fourth, most youth after completing their junior and high school are usually required to join the military or to serve in the National Service. Once they are in these organisations, it is difficult to reach them with the peer education program. Also it is also costly for the MOH to keep training to replace those who leave the program to join the military.

# **CHAPTER 5: Discussion, Conclusion and Recommendations**

#### 5.0 Discussion

This section discusses the findings of the SWOT analysis for the EPEP and discusses the implication for project implementer. The chapter concludes by offering recommendations aimed at improving and strengthening EPEP.

Reviewers of peer education programmes have described a number of difficulties in assessing the effectiveness of peer education programs. An mechanisms for reporting evaluation results organisations contributes to this problem. Even when attempts at evaluation are made, the evaluation methods are sometimes not clear, making it hard to assess the impact of the intervention (Mellanby et al. 2000). This is observation is consistent with the difficulties that are faced in the EPEP programme. Other criticisms of peer education evaluation include poor reporting of any difficulties adhering to the planned methods, a lack of control group, pre-test and post-test comparison, and problems controlling for the wide range of possible influences (Backett-Milburn and Wilson 2000). This study conducted a SWOT analysis of EPEP in order to highlight areas that the project implementers should address in order to facilitate the achievement of the broader programme goals and objectives.

Although EPEP seems to have involved most stakeholders, the youth who are the main targets of the project have not been opportunity to participate in the programme. The youth are largely involved as recipients of training. This makes EPEP lose out on an opportunity to benefit from the wealth of knowledge that could help make project activities to fit the needs of the youth. Experience from Turkey, the National Education Programme on Reproductive Health shows given the necessary training and opportunity to develop their skills, the youth can manage project activities just as well as other professional (REF). EPEP could learn from this experience and begin to not only allow opportunity for the youth to participate but also space for them to assume greater responsibility within the project as the further develop their skills.

In EPEP there are more male trainees as compared to female trainees. In addition the issue of gender has not been addressed by the project management unit. Therefore, there is a danger the project will end up with more male peer educators, because of the Eritrean culture males feel shy when talking about issues of sexuality it is likely that they will be biased towards male peers. This has implications because it has the potential to further marginalize girls in terms both training and in terms of receiving information disseminated by the peer educators.

Currently the peer coordinators use the Splash training manual; this forms the basis of the peer education curriculum in EPEP. The Splash manual focuses only on prevention and control of HIV/AIDs. Therefore, the manual lacks sexuality and reproductive health component. This has been cited as an important component for the success of peer education program (AIDSCAP 1997;Svenson 1998;UNFPA 2001). There are also problems with the delivery of training, for example, it more like a passive lecture - largely one way communication. But experiences from other settings continue to reiterate the importance of a participatory approach, especially in delivering peer education that is meant to impart knowledge and develop skills simultaneously (Fee &Youssef 1993;Flanagan & Mahler 1996). Further, the peer educators have not facilitated sessions where the peer educators could practice their newly acquired skills amongst themselves before venturing into the field.

The objectives in the peer education programme are clearly defined, but are lacking two key components: measurability and time bound. The advantage of objectives being "SMART" (Specific, Measurable, Achievable, Realistic and Time bound) is that the project unit have a strategic direction in which to work towards. This will help the project unit shape activities accordingly to fit the objectives, or address areas that may be causing a given objective to lag behind.

The project staffs have not taken time to identify the needs of the target audience besides knowledge, Attitudes and Practices Study (KAPS) that was part of the baseline survey. However, the baseline survey was not comprehensive enough as it was done during a time when Eritrea was at war with Ethiopia. Therefore, important information could have been missed as there was disruption to normal community life due to the war.

The EPEP has not developed strong links with other programs, currently there are links with other line ministries and national organisation such as Youth Associations and Women Associations. In Eritrea, there are other NGOs such as Red Cross, World Lutheran federation and Self-Help NGO that are involved in similar activities (peer education). However, the EPEP, has not developed links to with these NGOs. At the same time the EPEP has no linkage with other community driven initiatives such as CHMRP, RRI and the Ministry of Defence peer education program. Inter-organisational collaborations continue to be emphasised as an effective way in which to multiply the impact of projects, this is usually accomplished by drawing a joint strategic plan. This plan helps ensure that activities are not duplicates among organisations that are involved within similar activities (Debattista and Lambert 2009).

Recruitment and motivation are important issues to be considered when evaluating the process which contributes to the successful implementation of the peer education project. Most of peer education programs are done through peer educators who volunteer their services. Project reports from other contexts; indicate that along the way the principles of volunteerism seem to wane away and some peer educator drop out (Backett-Milburn & Wilson 2000; Population Council 1999). The issue of motivation like recruitment depends on the social context, but the compensation should be determined by the level of responsibilities, quality of performance and time contributed (AED 1999; UNFPA 2001). Further, non-financial incentives such as commending peers who perform exceptionally well, or allowing excellent performers to take on more responsibilities within the program activities have also been shown to be equally effective (Ann&Avis 1999;FHI 1997). Literature also suggests that implementers of the peer education projects should be wary of a common pitfall that of selecting a peer who may not be a model youth. Therefore, recruiter should be interested in getting some form of character reference from the community whenever possible

A selection strategy that has become more popular in published literature is the use of social network analysis and nomination techniques to identify and select peer educators. For example, in South Africa, peers were asked to nominate their peers through social networks. However, in Botswana the peer educators are assigned by the project management (Ann&Avis 1999;FHI 1997;Ronald 2003;Visser 2007). The basic prerequisite for becoming a peer educator is to be a peer, and the person must be similar to their intended audience in age, sex, occupation, education level, place of residence (Flanagan & Mahler 1996).

The initial and ongoing training to both peer educators and program staffs is important in for program implementation. Inadequate skills and training for peer educators is the main reason for the program failure (Ann&Avis 1999). According to AIDS CAP study, it less expensive to implement the peer education program if the initial training is through (AIDSCAP 1997). UNAIDS review of peer education also propose that it is good to assess the background and experience of participant before the content of the training is finalised (UNAIDS& PENNSTATE 1999). It is also important to engage the use of experts in the field interactive learning to help design training and help adapt curricula and make the delivery approach more appealing. The training offered also needs to be more practical participatory and based on skills building (Evangeli et al. 2009; UNFPA 2001).

Peer education approach relies heavily on part time peer educators who often need close supervision. Due to lack of supervision, peer educators may become discouraged and stop doing their work (AIDSCAP 1997). The

skills of supervisors are also a determinant factor during supervision and can affect the quality of supervision. Project staffs who supervise must be technically competent as well as motivational and supportive (Svenson 1998). Also opportunities for Training of Trainers (TOT) have not been utilised in EPEP, thus the project is missing out on the opportunity for senior trainers to mentor junior trainers. Further, EPEP supervisor have mentioned that they often lacked the necessary logistics for them to effectively conduct field supervision.

EPEP also has areas of weaknesses in the area of management and oversight. In the area of human resources there appear to be an absence of service contracts that include clear job descriptions for project staff. This makes the management of project staff difficult. Duties in EPEP, are allocated on a random basis, thus since there is not documentation on duties, it is difficult to hold project staff responsible for tasks that have not been accomplish.

An effective M&E system should comprise of: (i) a monitoring and evaluation unit, (ii) clearly stated programme goals; (iii) objectively verifiable indicator; (iv) data collection and analysis plan and (v) a data use plan (Debattista & Lambert 2009; UNAIDS 1999). EPEP has a number of weaknesses. First, the evaluation unit is comprised of only one permanent staff. Second there is no formal training for persons involved in M&E. EPEP's M&E system is also not integrated in the national HIMS of the MOH. Another pitfall is that stakeholders are not involved in M&E activities. This has the potential of undermining the success of the project. Further, the tools necessary for effective M&E have not been developed, and the ones used currently in use have not been standardised.

# 5.1 Conclusion

Eritrea's response to prevention and control of HIV/AIDS has included a peer education programme that has been implementing activities since 2001. The Eritrean government plays an important role in providing strategic direction and mobilising donor funding for the implementation of project activities. The findings from this study, indicate that the criteria for selecting both the peer educators and peer coordinators does not follow international standards-advertisement, interviewing and selection based on merit. Further, there are weaknesses in the skills of the trainers. This is because they do not utilise participatory approaches in delivering training to the peer educators. EPEP has weak links with other organisation or sectors that are involved in similar areas. Further, target audience and the community have not been meaningfully involved in programme activities. As a result work plans are centrally developed by the top management and handed down, to the project implementers. This has contributed to further

weakening M&E and project implementation. The capacity of EPEP to effectively conduct M&E is quite weak; this is because of poor reporting, poor M&E tools and trained personnel.

#### 5.2 Recommendations

This section offers recommendations to EPEP in order to improve the programme implementation.

- EPEP should ensure that they create opportunities for the youth to participate in programme activities beyond simply offering the peer education training. The Youth Peer Education Toolkit is useful starting point towards shaping EPEP towards creating opportunities to participate.
- Consider undertaking a study assess the causes that are leading to gender imbalance in recruiting peer educators This will help project implementer to develop a strategy to address gender imbalance.
- The method used to share information by the peer coordinators should be skill based rather than on AIDS facts, such methods should include: theatres, role play, drama, practicing amongst peers.
- The objectives of the EPEP should be revised to include aspects of measurability and Time-bound in order for them to fulfil the SMART criteria. For example, the anticipated number of peer educators to be trained, or the target audience to be reached within a given duration should be clearly stated.
- Comprehensive needs assessment should be done amongst the target group, in order to obtain an accurate picture of local conditions to inform the development of strategies.
- The EPEP project should do more collaborate with other actors who are implementing similar projects or those who are likely to add to the successful achievement of the objectives.
- The project unit can consider using financial and non-financial incentives to motivate the peer educators and possibly address the problem of drop out.
- Ongoing capacity building training is needed in order to ensure that peer coordinators are using participatory approaches and that they gain skills to make training sessions more appealing to the trainees.
- Consider having a TOT to strengthen supervision and ensure that capacity building of upcoming supervisors is taking pace, further the project unit should ensure necessary logistics is in place to enable supervisors accomplish their duties.
- EPEP should develop its own policy guideline, to govern the activities of the project including human and financial resources management.
- To improve its M&E system EPEP should seek to develop the M&E unit by employing a few more officers, these officers should have

- adequate capacity to perform M&E functions or be trained for the same.
- The program management unit should strive to make M&E participatory and all-inclusive with peer educators target groups and the community meaningfully involved.
- The program management should ensure that proper documentation of EPEP activities.

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**Annex 1: Map of Eritrea** 



## **Annex 2: UNFPA PEER Education Checklist**

The following are sub-components of the Peer Education Standards Checklist organised around five domains namely:

# 1. Planning:

- Mobilize main stakeholders
- Ensure active participation of youth
- Consider cross-cutting issues
- Refine general and specific program objectives
- Identify target audiences
- Identify the needs of the target audience
- Identify available resources and try to fill gaps
- Develop a work plan
- Develop an M&E plan
- Establish feedback mechanisms
- Coordinate and establish linkages with other programs
- Develop a resource mobilization and sustainability plan

### 2. Recruitment and Retention

#### Recruitment

- Identify sources and channels for recruiting peer educators
- Decide on criteria for peer educator selection
- Set clear expectations
- Establish a standardized and transparent interview and selection process

### Retention

- Document expectations
- Establish means for continuous communication, including feedback
- Establish an incentive system
- Establish supervisory and mentoring systems
- Offer opportunities for increasing involvement and responsibility

# 3. Training and Supervision

# **Training**

- Arrange for qualified trainers
- Select a quality training curriculum
- Arrange for appropriately sized groups
- Structure agenda and time to meet training needs

- Provide relevant materials and handouts
- Use interactive, participatory, and skills development approaches
- Implement tools and methods to evaluate training and training participants
- Discuss ethical issues
- Involve youth at all stages

# **Supervision**

- Arrange for trained, aware personnel
- Ensure that peer educators are well prepared
- Continually reinforce motivation and ethical behavior
- Manage the group dynamic and encourage team building
- Share responsibility with peer educators

# 4. Management and Oversight

- Ensure compliance with program standards
- Ensure technical competency of the management team
- Establish and maintain quality expectations of program activities
- Establish effective administrative of human and financial resources
- Establish a transparent decision-making process
- Establish a process for youth participation in decision making
- Use M&E for decision-making
- Promote cooperation and networking
- Establish linkages and referrals to services and commodities
- Establish sustainability plans

## 5. Monitoring and Evaluation

- Establish relevant, clear objectives
- Establish functional, relevant indicators
- Include M&E in the work plan from the start
- Develop monitoring and tools and a measuring system
- Ensure capacity to plan and implement M&E
- Establish means for youth participation in planning and implementing M&E