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Abstract

CDC2024 - Working within existing systems for the integrated scale up of an innovative sexual and reproductive health programme for young people in Mwanza, Tanzania

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Issues: Effective implementation of complex reproductive health (RH) interventions can be hampered by limited capacity for integration across sectors. The MEMA kwa Vijana programme Phase 2 (MkV2) aims to build local government capacity, by supporting district authorities in the scale up of a multifaceted adolescent sexual and reproductive health (ASRH) intervention in all schools and health units in 4 districts of Mwanza region, Tanzania.

Description: In 2005 10 Regional government officials were trained as Regional Trainers and Supervisors (RTS). The RTS trained 77 District level officials (DTS) across 3 sectors (community, health and education) to implement scale up activities including community mobilisation and training of 519 teachers and 212 health workers.

Triangulation of qualitative and quantitative data from (i) pre and post questionnaires; (ii) observations of 70 DTS led and RTS supervised activities; (iii) 42 informal interviews and; (iv) 8 FGDs with 42 DTS, will evaluate the impact of the programme on: (i) acceptability and understanding of ASRH programmes; (ii) ASRH knowledge; (iii) communication and training skills among district officials, and identify factors facilitating and inhibiting integrated scale up within government structures.

Lessons learned:

- Involvement in MkV2 improved understanding and acceptance of the intervention, ASRH knowledge, ability to discuss SRH openly and key training skills;
- Involvement of district decision makers improved integration of implementation activities;
- Despite their willingness, the participation of District officials was hampered by the burden of other responsibilities. This was compounded by high rates of staff turnover.
- Sectors have developed autonomous systems including activity planning and reporting which hamper integration

Recommendations: Working within local government structures will enable large scale implementation of MkV2. Joint cross sector meetings should be conducted to reduce sector specific discrepancies. This will take time and lessons should be learnt as the process continues; we should not “dance faster than the drum” [RTS Education].