# AED · IN
# AFRICA

ACADEMY FOR EDUCATIONAL DEVELOPMENT

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ACADEMY FOR EDUCATIONAL DEVELOPMENT

## AED ·
**Academy for Educational Development**
Connecting People **>** Creating Change

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ALGERIA

LIBYA

EGYPT

WESTERN
SAHARA
(occupied by Morocco)

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LESOTHO

# AED in Africa

Founded in 1961, the Academy for Educational Development (AED) is an independent, nonprofit, charitable organization that operates development programs in the United States and throughout the world. A total of 52 project offices have been established in Africa, Asia, the Middle East, Latin America, and Europe and Eurasia as well as across the United States. Since our inception more than 40 years ago, the size of the staff has grown to 1,200.

For more than 30 years, AED has worked to support African development in health, education, leadership development, and the environment. In Botswana, Tanzania, and Uganda we promoted some of Africa's first AIDS prevention programs. We are also funding research in Ethiopia, Ghana, Tanzania, and Zambia that will target stigma and its role in AIDS prevention. Working with governments and the private sector, AED staff have supported programs that saved millions of children from diarrheal dehydration, immunizable diseases, and malnutrition. Today, we are partnering with pharmaceuticals to provide sustainable access to antimalarial bed nets.

In education, AED has pioneered the work on girls' education and on educational reform. Working with the Kellogg Foundation, we are supporting the development of a regional leadership network for the countries of southern Africa, including South Africa, Botswana, Lesotho, Mozambique, Swaziland, and Zimbabwe. Project offices have been established across the continent in such countries as Botswana, Côte d'Ivoire, Ethiopia, Gambia, Ghana, Kenya, Lesotho, Madagascar, Mali, Senegal, Uganda, and Zambia.

This directory, which presents an overview of AED's programs in Africa since 1975, illustrates our proven experience in helping our clients inhabiting the second largest continent to meet the complex challenges of the future.

Current AED Programs Include:
- HIV/AIDS Prevention and Impact Mitigation
- Child Health and Health Sector Reform
- Education Sector Reform and Development
- Information and Communication Technologies' Training
- Nongovernmental Organization (NGO) Capacity-Building
- Training and Work Force Development
- Social Marketing Initiatives for Health Communications
- Conflict Management and Resolution

# BENIN

**Strategic Technical Assistance for Results with Training (START) Task Order: Benin U.S.-based Training Program (2003–2005)**
**Funding: USAID**
The Benin program offers services to support advanced U.S.-based training which includes both educational and health programs.. We are providing services for two master's degree candidates in curriculum development as well as four short-term trainees in the implementation of HIV/AIDS programs.

**LearnLink Task Order: Benin Community Networking Services Centers (1998–2001)**
**Funding: USAID**
The Academy assisted a local NGO in establishing three Community Networking Services (CNS) centers in different regions of Benin. LearnLink worked with the Songhai Center, a Beninese NGO, to establish CNS centers in each of Songhai's three regional centers: Porto Novo, the nation's capital; Savalou, an important commercial hub in Benin's central region; and Parakou, Benin's third largest city in the northern region. The CNS centers were designed to help extend the successful Songhai experience throughout the country.

The three sites in Benin in which the CNS centers were established had a poor telephone infrastructure and scarce electrical facilities. Innovative approaches to overcome these barriers, such as solar energy supplementation and wireless radio modems for data transfer and Internet connectivity, were tested under this activity. The centers are equipped with networked computer workstations that have multimedia capabilities, e-mail, Internet access, and a variety of off-the-shelf and locally-produced learning materials.

# BOTSWANA

### Botswana Prevention of Mother-to-Child Transmission Social Marketing Initiative (2004–2005)
**Funding: The Centers for Disease Control and Prevention**
AED developed and implemented a national Prevention of Mother-to-Child Transmission (PMTCT) social marketing campaign for Botswana designed to increase the level of knowledge about PMTCT; foster positive attitudes; and promote HIV testing, utilization of PMTCT services, and support for HIV- positive pregnant women among intended audiences. Project tasks also included developing a five-year social marketing strategy, annual work plans, and implementation of all activities during the first year of the plan, including regular monitoring and evaluation of the effectiveness of the campaign. The project is expected to result in an increase in the number of pregnant women being tested for HIV and using PMTCT services, including informed decision-making among mothers regarding replacement feeding, with increased support from partners, families, and communities.

### Botswana Strengthening Human Resources Management Capacity (1996–1997)
**Funding: Government of Botswana; World Bank**
AED worked with the World Bank to implement a ten-month project to assist the Directorate of Public

Service Management (DPSM) of the Government of Botswana in improving its operation and services. The project focused on human resource systems and information technology for implementation of a personnel management system and consisted of four components: evaluation, performance management systems, staff training, and information technology.

**AED Botswana (1992–Continuing**
The Academy established AED-Botswana as a nonprofit, charitable organization registered as a Company Limited by Guarantee in Botswana. The primary objective of the program was to provide management, training, evaluation, and other technical services in the southern Africa region. AED-Botswana offers services financed under contracts or grants for which only organizations incorporated or registered in Botswana or other countries in the southern Africa region are eligible. In 1992 and 1993, AED-Botswana began providing short-term assistance for various agencies in the southern Africa region, including Social Impact and Policy Analysis Corporation Ltd., Southern Africa Development Community (SADC), United Nations Development Programme (UNDP), Association of Training and Development Officers, and Botswana Confederation of Commerce, Industry, and Manpower. The scope of work ranged from facilitating workshops on curriculum development for managers to evaluating human resource development projects throughout the SADC region. AED-Botswana has carried out consultancies, project evaluations, and workshops for the British Council, the SADC, and UNDP. Today, AED-Botswana remains competitive in southern Africa and well-equipped to help sustain socioeconomic development efforts in the region.

### Botswana Development Training Program (1982–Continuing)
**Funding: USAID; Government of Botswana**

In the early 1980s, USAID funded a ten-year work force skills training program to respond to the critical shortage of trained professionals from all sectors of this republic in south-central Africa. AED's primary role was to manage training programs for professionals from strategic development ministries, parastatal agencies, and private-sector firms. Participants pursued degree and nondegree programs in fields of study including; economics, computer science, business administration, public affairs, agriculture, allied health and nursing, and tourism. As a result, thousands of Batswana were trained in Botswana, the United States, and other countries.

When USAID funding was phased out, the Government of Botswana continued to invest in human resource development under the Botswana Development Training Program. AED has administered programs for more than 1,000 students from Botswana, placing them in appropriate academic institutions in the U.S. and monitoring their progress.

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# DJIBOUTI

**The Education Quality Improvement Program 1 Associate Award: Djibouti Assistance to Education Project (2003–2006)**

**Funding: American Institute for Research; USAID**

The Education Quality Improvement Program 1 (EQUIP1) is a worldwide effort designed to improve the quality of education at the classroom, school, and community levels. Through EQUIP1, AED and its partners are implementing the Djibouti Assistance to Education Project, which is aimed at improving student learning in grades 1-12. This objective is being pursued through three separate but interlocking sets of interventions. The project is providing technical assistance to help strengthen the capacity of Djibouti's Ministry of Education to implement its ambitious reform plans that focus on improving the quality of instruction in schools, increasing the role played by parents and communities in management of local schools, and increasing access to education through the improvement of school infrastructure, particularly sanitation and water facilities. One strategy for improving instruction will involve the provision of computer equipment to encourage the use of technology in the classroom. A specific focus has been placed on increasing access for girls to education by providing incentives for girls to enroll and providing materi-

als and training to teachers to encourage girls' participation in the classroom.

The three principal elements of the program are fully integrated. The selection of schools for construction activities, for example, is made only after communities have organized themselves and made commitments to help manage and maintain school facilities after they have been rehabilitated. Similarly, the rehabilitated schools serve as laboratories for implementation of the educational reforms. The project team is working closely with ministry counterparts to ensure that the reforms are carried out in the targeted schools as well as to monitor impact of the reforms on student learning.

# ERITREA

**Strategic Technical Assistance for Results with Training Task Order: Developing Capacity Skills and Leadership Training for Eritrea (2002–2004)**
**Funding: USAID**
Under the Strategic Technical Assistance for Results with Training (START)/Developing Capacity Skills and Leadership Training Project for Eritrea, AED has trained more than 600 Eritreans working in a variety of fields. Programs have focused on three areas: improving the country's primary health care system, promoting sustainable economic growth, and developing Eritrea's human capacity. Working with our field office in Asmara, AED has administered in-country,

U.S.-based and third country, short-term training programs in areas such as nursing, primary education, water resources management, and financial management. In addition, 15 participants have pursued graduate and postgraduate degrees in the U.S. and in Eritrea under this initiative.

**Eritrea Technical Assistance and Support Contract Project Child Health Technical and Support Contract (2000–2003)**
**Funding: USAID; John Snow, Inc.**
During the Technical Assistance and Support Contract (TASC) Project, AED provided technical services in information, education, and communication (IEC) and behavior change program development, cam-

paign development, and monitoring and evaluation, in order to promote public health through child and reproductive health initiatives. IEC capacity-building occurred at both central and zonal levels, with activities focusing on gaps identified by the Ministry of Health in these health-related areas. The overall objective of the project was to support continual activities to increase sustainable integrated primary health care in an effort to reduce maternal, infant, and child morbidity. AED provided the services of a full-time IEC specialist posted in Eritrea and short-term technical assistance in maternal and child health, training, and safe motherhood. These activities supported improved reproductive, maternal and child health, nutrition, reduction of infectious disease, and prevention of sexually transmitted diseases, including HIV/AIDS.

# ETHIOPIA

**Ethiopia Child Survival Project — Essential Services for Health in Ethiopia — The Child Health and Health Sector Reform Project; (2003–2008)**
**Funding: John Snow Inc.; USAID**
AED, in conjunction with John Snow, Inc. (JSI) and our partners, is working closely with the Federal Ministry of Health, the regional health bureaus (RHBs), and at the woreda level to achieve the results required in the Child Health and Health Sector Reform Project, known locally as the Essential Services for Health in Ethiopia (ESHE) Project. The overall purpose of the project is to contribute to the Government of Ethiopia's and USAID's goal of improved family health in Ethiopia. To this end, AED is implementing the Behavior Change Communication and nutrition programs, and with the JSI team, we are designing and implementing an integrated and coordinated program of child survival and health sector reform interventions that will contribute to strengthened health policies at the federal level and improved health services in the three focus regions. The ESHE Project will reach an estimated 6.5 million direct beneficiaries in 60 focus *woredas*.

### Ethiopia - Strengthening the Essential Nutrition Actions in Preservice Training (2003–2004)
**Funding: The Carter Center**
Since mid-2003, AED, through the LINKAGES Project, has been working with The Carter Center in Ethiopia and our partners under the Ethiopia Public Health Training Initiative to strengthen the preservice training given in the area of nutrition, especially during situations of emergencies and HIV/AIDS. To this end, AED developed relevant training materials in the Essential Nutrition Actions (ENA) approach that cover both the theoretical and technical aspects of this approach as well as its practical aspects for undertaking community-level work. Since the project's inception, preservice trainers from all five of The Carter Center's teaching institutions (Addis, Dilla, Jimma, Gondar, and Alameya) have been trained in two courses: the ENA technical course and the ENA counselor's course. Training materials, including trainers'manuals (hard and CD-ROM copies), binders with teaching transparencies, and trainee handouts, were produced and distributed. Other teaching materials also were procured and distributed to the five institutions. Key individuals from these training institutions have also been selected as local trainers to carry on similar work under a new second contract awarded by The Carter Center to AED/LINKAGES.

### Ethiopia Basic Education System Overhaul, BESO I (1995–2002)
### Ethiopia Basic Education Strategic Objective, BESO II (2002–2007)
**Funding: USAID**
Since 1995, AED has worked with the Ethiopian Ministry of Education at the national and regional levels to improve the quality and equity of primary education through the Basic Education System Overhaul and Basic Education Strategic Objective projects (BESO I and II). Under BESO I (1995 - 2002), the project focused on strengthening

the capacity of the national Ministry of Education in Addis Adaba in policy and planning and the capacity of the Regional Education Bureaus in two regions, Tigray and the Southern Nations, Nationalities, and Peoples Region (SNNPR), primarily through improved in-service and preservice teacher education. BESO II (2002–2007) is building on the success of BESO I by expanding the project to all 11 regions of Ethiopia.

BESO II is focused on achieving results in three areas: teacher education, teacher-learner support systems, and educational planning and management. In teacher education, BESO is supporting the regional education bureaus in building the capacity of local education officers and school directors to support a school- and cluster-based model for teacher development. To improve preservice, the project is working with the teacher training institutes to strengthen and update their programs to pre-

pare new primary school teachers and is also supporting Ethiopia's first national distance education program for teacher training.

The improvement of teacher-learner support systems involves the development of media and materials to support active learning in the classrooms. BESO continues to work with Ethiopia's Educational Media Agency to provide interactive radio programs for teaching English in grades 1 and 2. The project is also developing self-instructional teacher kits that will provide teachers with materials in active learning, continuous assessment, gender issues, HIV/AIDS education, and management of large classes. Finally, the project is working with the central Ministry and the regional bureaus of education to improve planning and management. Core activities in this area include the development and implementation of a decentralized planning and budgeting system, a personnel management information

system, and a materials management information system.

BESO has made important achievements in a number of key areas over the past nine years. The most notable accomplishment has been in teacher education. A new teacher education curriculum oriented to today's methodologies and a new cluster- and school-based in-service teacher training model are being implemented nationally. Ethiopia's first distance education program is now reaching 21,000 primary school teachers. Prior to 1995, teachers may have attended training once every ten years; now they participate in in-service support sessions once a month.

# GHANA

**Ghana Capacity-Strengthening for HIV/AIDS Prevention and Impact Mitigation (2004–2009)**
**Funding: USAID**

During the next five years, AED will be implementing (Ghana INFORM), a coordinated project that seeks to use an evidence- and research-based approach to identify most-at-risk groups, to understand their needs, and to develop targeted interventions based on these results. AED leads the Ghana INFORM effort and provides technical expertise in capacity-building, as well as incommunity planning, in order to support the project's four interrelated goals: (1.) conducting operations research and second-generation surveillance to guide evidence-based HIV programming across the continuum of care; (2.) supporting the establishment and expansion of interventions among most-at-risk groups and in high transmission areas; (3.) strengthening capacities of the national response at all levels; and (4.) maintaining and ensuring HIV/AIDS program information and results reporting integrated with the Government of Ghana program. The project also includes an array of research, capacity-building, and clinical interventions with public, private and NGO sector partners as well as other donors and USAID implementing organizations. While working with partners at the national, regional, and com-

munity levels, AED plans to implement interventions with commercial sex workers and use the PLACE methodology to identify high-risk locations in Ghana.

### Ghana Sustainable Change Project (2004–2009)

Through the Ghana Sustainable Change Project (GSCP), AED is working to improve the health of Ghanaians through the use of state-of-the-art communications and social marketing initiatives. The project, which was designed to support all of the USAID Mission's health programs (e.g., child survival, maternal and reproductive health, and HIV/AIDS), is an integral part of the Mission's overall Country Strategic Plan: "Empowering Ghanaians through Partnerships to Build a Prosperous Nation." GSCP's four main objectives are to: (1.) strengthen public and private capacity for sustainable behavior change communication (BCC) activities at all levels; (2.)

develop and implement BCC and information, education, and communication (IEC) activities in reproductive and child health as well as HIV/AIDS prevention, care, and support; (3.) improve the capacity of government, decision-makers, and opinion leaders to advocate in support of the programs and activities that influence positive behavior change; and (4.) expand the social marketing of products and services that will support positive behavior change. AED is also working to establish a new national coordinating council for communications and marketing.

### The Education Quality Improvement Program 2 Associate Award: Ghana Basic Education Comprehensive Assessment System (2004–2006)

The Education Quality Improvement Program 2 (EQUIP2) is a worldwide effort targeted at improving educational policy, systems, and management. Imple-

mented through the EQUIP2 program, the Ghana Basic Education Comprehensive Assessment System (BECAS) Project focuses on developing a new, comprehensive National Education Assessment (NEA) and School Education Assessment (SEA) for primary grades 1-6. The emphasis throughout test development is on educational relevance and suitability of the tests. BECAS comprises three assessment components, as follows:

- **The National Education Assessment (NEA):** This test is a curriculum-based, competency-assessment program that reflects the entire curriculum and samples the performance of schools across the educational regions of Ghana. It provides national indicators for Primary 3 and Primary 6 on educational achievement in English, mathematics, and two Ghanaian languages (for a subset of regions).
- **The School Education Assessment (SEA):** This test is a minimum-competency-based test that reflects the basic elements of the curriculum considered essential to the grade-level performance expected for student continuation. SEA is given at grades Primary 2, Primary 4, and Primary 6. After the first administration when NEA and SEA will be given together, the tests will be administered in alternate years.
- **Continuous Assessment:** Part of the plan to ensure comprehensiveness for BECAS is to supplement these larger testing programs with continuous assessment (CA) procedures and measures developed for grades Primary 1 to Primary 3. The intention of this early systematic assessment is to indicate to the teacher what learning problems students are experiencing in the classroom, so that the teacher can make adjustments directly during the process of instruction.

### Ghana Quality Improvement in Primary Schools/Improved Learning Through Partnerships (1997–2004)
**Funding: USAID**

The Quality Improvement in Primary Schools (QUIPS) Project in Ghana was implemented in collaboration with the Government of Ghana by a consortium led by AED. At the start of the project, the project team took the name Improving Learning through Partnerships (QUIPS/ILP), to reflect the project's commitment to work with all stakeholders in close partnership toward the achievement of the goal of improving the quality of teaching and learning in Ghana's primary schools.

The project's four main components were curriculum and materials development; in-service professional development; education management improvement at district, regional and national levels; and school infrastructure improvements. From the outset, a central feature of QUIPS/ILP's overall implementation strategy was a commitment to using an appreciative inquiry/assets-strengthening approach in working with district education staff, school level staff, and community members to find ways to improve the overall quality of teaching and learning at the classroom level.

A total of 215 schools in 69 districts benefited from the QUIPS/ILP in-service teacher professional development program under the contract. Approximately 1,700 teachers, head teachers, and circuit supervisors directly benefited from the training. In the area of management improvement, more than 700 Ghana Education Service officers in the 69 target districts benefited from a series of three QUIPS/ILP management training programs. Each district prepared a district grant work plan that was implemented in the final two years of the project. Infrastructure improvement projects reached a total of 215

schools, constructing 632 new classrooms, 81 teachers' quarters, and 9 staff rooms and libraries, and renovating 247 classrooms.

Positive impact on pupil learning and changes in teacher behavior and head teacher practices were documented. The percentage increases in both mathematics and English performance from the baseline were considerable each year, and improvements were sustained after QUIPS/ILP was no longer active (from its two-year cycle of interventions) in the particular cohort of schools. The general pattern of changes in teacher behavior showed improvement over time in the use of pupil-focused instructional practices: teachers use a variety of teaching methods that allow pupils to participate actively in lessons; teachers encourage pupils to demonstrate their understanding of lesson content; and learners ask questions and teachers provide feedback that encourages further effort.

## West Africa Regional Health Program Action for West Africa Region (2003–2006)
**Funding: EngenderHealth; USAID**
AED is a subcontractor to EngenderHealth in the new West Africa Regional Project (WARP), a five-year USAID-funded reproductive and child health project. Of the four strategic objectives (identifying and sharing best practices, advocacy, strengthening of African institutions, and health reform), AED is responsible for the advocacy of reproductive and child health priorities.

## Strategies for Advancing Girls' Education Phase II Ghana (2002–2004)
**Funding: USAID**
Using a multisectoral approach, AED engaged grassroots committees comprising religious and business leaders to make girls' education a new priority in Ghana. On the basis of lessons learned in implementing girls' education programs in the five SAGE countries,

SAGE Ghana Phase II continues to strengthen the capacity of the Girls' Education Unit (GEU) at all levels. This process included training this unit in the use of the Monitoring and Evaluation System (MARS) at all levels; redesigning, updating, and restoring the GEU database system; and training GEU staff and regional and district education officers in data collection, data entry, data analysis, data utilization of girls' education indicators, and report development. AED also assisted the GEU in developing a Five-Year Action Plan. Community-level interventions implemented by the Academy included assessing activities completed under the community action plans; training girls' education subcommittees in leadership, facilitation, convening skills, guidance, and counseling; training members of the Girls' Clubs on self esteem, self-confidence, reproductive health, and safe sexual behavior; continuing the SMC/PTA training in leadership, gender issues, and girls' education; and enabling members of the Girls' Education Subcommittee to train parents to acquire the skills necessary to effectively address girls' issues.

Through this project, AED mobilized the business sector, organized a Business Roundtable on Girls' Education with representatives from a variety of major businesses in Ghana, and developed a partnership relationship between several businesses and schools with an emphasis on rural schools. Meanwhile, the SAGE Ghana II staff began to mobilize the media and the business sector to create and implement ways to further the cause of girls' education in Ghana. As a result, AED created a Media Task Force at the national level and obtained commitments from a daily newspaper, a main radio station, and a television station to broadcast a regular program on girls' education.

**LearnLink Task Order: Ghana Community Learning Centers (1997–2000)**

AED worked with three NGOs in Ghana to establish Community Learning Centers (CLCs) to enhance basic education, train teachers, develop local businesses, strengthen municipal administration and civil society organizations, and provide health care information. To ensure broad public access and maintain their education focus, the CLCs were set up in the offices of three community development and training NGOs: the Central Region Development Commission in Cape Coast, the Centre for the Development of People in Kumasi, and Partners for the Internet in Education in Accra. The CLCs built on the telecenter concept but emphasized the learning functions of the communication technologies that were made available, thereby increasing access to basic education and life-long learning opportunities. In addition, learning needs assessments were conducted to ensure relevance to community priorities, and CLC staff were trained to help visitors become familiar with the technologies, resources and services offered at the Centers. To promote long-term sustainability, fee and management structures were put into place, community involvement was increased, and collaboration with the private sector was actively promoted.

# GUINEA

**Community Support and Equity in Guinean Primary Education (2001– 2005)**

**Funding: World Education; USAID**

Projet de Participation Communautaire à l'Education de base pour l'Equité et la Qualité (PACEEQ) is being implemented by a consortium led by World Education and composed of AED, Save the Children, the Education Development Center (EDC), and the Research Triangle Institute (RTI). Drawing on the approaches of World Education and Save the Children during previous years, the project focused on building the skills and capacity of parent associations (APEAE) to play an effective role in managing educational resources for their children.

A total of 230 existing APEAE are to be strengthened and 650 new APEAE are to be created in order to build a network of APEAE federations and a strategic partnership with local alliances as well as address quality and equity issues in education. Over the course of the five-year contract, the program will cover 881 schools located in 19 prefectures of the regions of Labe, Faranah, Boke, Kankan, N'zerekore and Mamou. AED serves as a key partner providing technical support to the field operations of World Education and Save the Children. Drawing on our accomplishments implementing the SAGE activity in Guinea, AED will work to promote and support community participa-

tion in problem-solving and the implementation of action plans to improve girls' education at the local level. Acting in a technical advisory and training-of-trainers' capacity, AED will promote greater equity and access for girls, as well as contribute to improved educational quality for all primary school students, particularly girls. AED is responsible for:

1. Developing, testing and finalizing training materials on girls' education to be integrated into the equity component of the APEAE training program;
2. Assisting the project team with the delivery of training to a team of core trainers composed of Regional Program Coordinators and prefectoral level animateurs;
3. Adapting and field-testing training materials for use by local alliances;
4. Facilitating the formation and training of new local alliances;
5. Monitoring the implementation of action plans to promote girls' education at the community and subprefectoral levels;
6. Organizing forums at the local, prefectoral, and national levels to disseminate actions undertaken at the community level to promote girls' education.

# KENYA

**Academy for Educational Development Orphan Support Pack (2004–Continuing)**

**Funding: AED is initiating a fundraising campaign.**

AED launched the Orphan Support Pack Project to provide urgently needed services and personal items to the caregivers of children under five who have been orphaned by AIDS in Kenya. The pack includes a prepaid card good for full immunizations as well as preschool fees, weekly home visits by a trained community mentor, and a caregiver support group for one year. Also included are a "sippy cup" and bowl, a washcloth and soap, a blanket, a ball, a school uniform, a notebook, pencil and crayons, and materials to create a parents' memory book.

For Phase 1, AED is mounting a campaign to raise funds to provide orphan support packs to 1,000 children in Kenya over the next two years. Each pack costs $100 for a year's worth of services and materials. The packs will be assembled in Kenya to support the local economy. Distribution of the first packs will take place in early 2005, when sufficient funds are raised to cover orphans in entire villages. The Orphan Support Pack is the newest initiative of AED's Change Through Children campaign, which is working to break the cycle of poor health and nutrition and

inadequate education affecting millions of children in developing countries.

### Expanding Speak for the Child (2004–2007)
**Funding: Children's Investment Fund Foundation**
This new project both expands Speak for the Child in numbers and ages and enables further expansion by providing goods that attract the community-based organization partnerships needed to scale up quickly. The age range is now extended from 0 to 5 years to 0 to 8 years. Special funds are provided for organizational support to local implementing partners (LIPs), school uniforms, a medical fund at the local clinic for visits and medicine, seeds, blankets, and insecticide spray (since bed nets are infeasible in this area). These funds are in addition to the previous services, such as weekly mentoring, preschool fees, immunization support, and caregiver support groups, which will continue. It is hoped that these

goods and services will extend to approximately 7,350 orphans over the next three years.

### Speak for the Child-Improving Care of AIDS-Affected Children in Kenya (2000–2003)
**Funding: Children's Investment Fund Foundation**
The goal of this project was to improve the care of children under age five in AIDS-affected communities of Kenya. AED helped support families and communities in improving the physical, psychosocial, and emotional care of these vulnerable young children. AED analyzed existing efforts, built models for effective support to communities caring for young children affected by AIDS, disseminated information, sponsored exchange visits among community-based organizations (CBOs) and churches, developed training modules on home and community-based care for young children affected by AIDS, and offered training for master trainers. AED

also launched community-based model programs and local capacity-building partnerships. With Ready to Learn, we assisted with participatory assessment and mobilization, program design, community-based monitoring and evaluation, and tools and strategies for use and adaptation by interested community groups in other areas. In its three years of operation, Speak for the Child has significantly improved the lives of 356 young orphans, yielding impressive results:

- **Immunization:** 95 percent of enrolled children were fully immunized.
- **Education:** 94 percent of eligible children were enrolled in preschool.
- **Nutrition:** 59 percent of caregivers were combining foods to improve children's diets.
- **Verbal interactions**: 57 percent of caregivers began talking to the children, telling stories, trying to talk in a gentle manner, and attempting to listen more.
- **Stimulation:** 49 percent of caregivers were spending more time with the young children, providing play materials, encouraging them to socialize.
- **Night terrors:** 49 percent of caregivers understood and allayed young children's fears by explaining death and parents' absence and reassuring children about fears of abandonment.

### Kenya Electric Power Demand and Energy Management Project (1999–Continuing)
**Funding: World Bank**

AED provides technical leadership for this project by developing the Kenya Power and Lighting Company's (KPLC) Demand Side Management (DSM) programs. AED designed the initial market assessment and are working with KPLC to design appropriate programs, including outreach and educational programs, as well as the overall monitoring and evaluation efforts.

### Kenya Radio Language Arts Project (1980–1986)
**Funding: USAID**

In 1986, AED successfully completed a six-year program for USAID entitled Extension of Rural Primary Schools in Kenya. This effort, also known as the Kenya Radio Arts Project, was the second in a series of four significant research programs on the use of interactive radio to deliver direct classroom instruction. The project was designed to develop an English language arts program for primary school students that would use radio as the medium of instruction. Over a seven-year period, AED worked with the Kenya Institute of Education, USAID, and the Center for Applied Linguistics to develop a new model of interactive radio education to extend quality instruction to teach English in the formal school setting where conventional teaching may be restricted because of the poor distribution of educational resources.

During the course of this project, AED developed 585 lessons, teacher guides, and student worksheets to teach English to students in grades 1 through 3. As a result of this project, more than 2,000 rural children, in seven different linguistic regions, learned English by radio. After one year of broadcasts, test results demonstrated that first grade radio pupils improved 50 percent in listening and 23 percent in reading skills over pupils in conventional classrooms. AED published a major book on the project entitled Teaching English by Radio, which summarized some of the key principles applicable to radio education programs that were validated by the Academy's experience in Kenya. Building on this experience, the project was replicated in parts of Lesotho where another Academy project implemented a pilot effort using radio lessons in selected primary schools.

# LESOTHO

**United Nations Population Fund Reproductive Health Program and Advocacy in Lesotho (1999–2002)**
**Funding: United Nations Population Fund**

AED was the executing agency for the United Nations Population Fund's (UNFPA) and the Government of Lesotho's Reproductive Health (RH) Program and assisted the Ministry of Health in developing and implementing a national communication strategy aimed at improving reproductive health. The project focused on the three components of the country's reproductive health effort: (1.) RH Services and information, education, and communication (IEC); (2.) family life education; and (3.) advocacy on population and gender. AED's Resident Adviser, based in the office of the Ministry of Environment, Gender, and Youth Affairs, managed the execution of all three components and provided technical assistance in IEC and behavior change. We also assisted the Ministry of Health in developing and implementing a national reproductive health policy, including a behavior change communication strategy and an adolescent health strategy. In conjunction with our partners, AED developed a work plan focusing on the reproductive health needs of young people and in particular on the AIDS epidemic. Another activity focused on helping the Ministry of Education

to develop and improve its population and family life education programs through curricular activities. In addition, AED assisted the Ministry of Environment Gender and Youth Affairs in developing its policies and programs to promote advocacy for the overall population and reproductive health field. Finally, in collaboration with the Ministry of Planning, AED helped to coordinate the overall effort and establish special national mechanisms for all ministries and NGOs to work together.

# LIBERIA

**Global Civil Society Strengthening (GCSS): Liberia Community Peace-Building and Development (2002–2007)**
**Funding: USAID**

The Community Peace-Building (CPBD) program, sometimes referred to as Diompilor, was designed to mobilize communities, strengthen civil society, and build peace in war-torn Liberia. The AED-led consortium implements this project and provides overall financial management and technical assistance in social marketing. This program uses a participatory approach where 600 communities drive the process of identifying and addressing their needs with assistance from 20 Liberian NGOs. The capacity of local groups is strengthened through continual targeted training and technical assistance. A public information strategy, implemented through radio and other means, promotes peace, stability, and development in Liberia.

As a result of the project, five core Liberian partner NGOs were selected to receive training and technical assistance to build their organizational capacity. Diompilor has also begun activities in 98 communities in Montserrado, Margibi, and Grand Bassa counties. In each of these communities, facilitators have been selected and trained in the social mobilization and development process known as REFLECT, a

process founded by Action Aid combining literacy training, awareness building, and social action. The organization of the Liberia Resource Mobilization Committee has also been facilitated by AED. This committee brings together Liberian-Americans, Liberians, and other friends of Liberia in the U.S. to mobilize material, in-kind, human, and financial resources for peace-building and development activities in Liberia.

# MADAGASCAR

**Strategic Plan for Reform and Development of the Education Sector (Plan Strategique de Reform et de Developpment du Secteur Educatif) — Ministry of National Education and Scientific Research (2004)**
**Funding: World Bank**

The nation of Madagascar sought to perform an organizational analysis of the operations of the Ministry of National Education and Scientific Research (MENSR) and to produce a handbook that would enable the Ministry to restructure its operations. A team of consultants led by AED assisted the Ministry by producing functional definitions of department responsibilities, including outcome-oriented job descriptions, performance indicators, and decision-making authority; restructuring proposals, including definition of communication channels within the central Ministry (horizontal and vertical) and with DIRESEB and CISCOS; specifying professional development needs (a training plan) for core staff that might include training on the job or off site; and developing a facilities assessment specifying such needs as technology upgrading and orientation to the effective use of technologies.

# MALAWI

**Education Quality Improvement Program 2 Associate Award: Malawi Education Sector Policy, Planning, Education Management Information System Support Activities and Higher Education Strategic Plan Development (2003–2005)**
**Funding: USAID**

The Education Quality Improvement Program 2 (EQUIP2) is a worldwide effort targeted at improving educational policy, systems, and management. Through the EQUIP2 program, AED and its partners are implementing the Malawi Education Sector Policy Project, an integrated set of support activities to address primary constraints to system improvement - policy, systems and strategies, and organizational capacity. The project is organized in three components. In the first, Improved Strategic Planning and Management for the Policy Implementation Framework, the project provides support to Ministry of Education science and technology planners to orchestrate a more efficient strategic planning and management process. This component includes activities that address policies, strategies, and planning for teacher education and HIV/AIDS. The second component, Strengthen Education Management Information Systems, offers support to strengthen the Education Management Information System (EMIS) through targeted needs assessments, in-country training of

Ministry, division, and district-level personnel, and procurement of computers. Finally, under the third component, Develop Strategic Business Plans for the Universities of Malawi and Mzuzu, assistance in preparing five-year strategic business plans is given to the vice chancellors of the universities. While each of the project components has distinct objectives, the project is being implemented in an integrated fashion with common operational strategies to ensure that all activities are mutually reinforcing.

### Malawi National Implementation for District Education Plans Phase II (2003–2005)

**Funding: Japan International Cooperation Agency**

This program represents Phase II of the micro-planning component of the National School Mapping and Micro-Planning Project. During the implementation of the micro-planning component, several training workshops were conducted in which district education plans (DEPs) were prepared by district education officers, district governmental officers, and community leaders. The education plans drafted during the workshops were well received by the Ministry of Education, Science, and Technology (MoEST).

As a result of the positive outcome of Phase I, the follow-on project is working with MoEST to set up a sustainable system to use, update, and implement the DEPs. Through the project, all 33 districts of Malawi have updated their education plans and education officials have received training in reviewing and updating these plans as well as in financial management. Six districts have piloted projects to enhance school-level capacity in planning and implementation of activities designed to improve school quality.

### Umoyo Malawi HIV/AIDS Support to NGO's Capacity-Building for Quality (2003–2005)

**Funding: Save the Children Federation, Inc.; USAID**

Save the Children, with AED and its other partners, manage the Capacity-Building for Quality (CBQ) Project which was created to reduce new HIV infections through increased use of NGO-provided preventive care and support services; improve capacity of the NGO sector for HIV programs and services; increase availability of VCT and other HIV-related services; refine quality of HIV-related services; and increase demand for VCT and other HIV prevention and support services. The CBQ Project is implemented under the Umoyo Network, a partnership program that is well-established in Malawi and recognized nationwide. AED helps to provide a comprehensive package of technical support for HIV-related services along the continuum of care. The program's strategic objective was to increase use of preventive services and practices and focus on increasing the capacity of at least 15 Malawian NGOs to provide HIV-related support services, which in turn would contribute directly to reduced HIV/AIDS infections. To achieve the objective of increased use of preventive services and practices, the CBQ project assists each individual subgrantee NGO in identifying its support needs across a broad range of HIV-related technical and managerial areas. AED uses the local and regional expertise of the partner organizations to meet those needs through training, mentoring, and monitoring to subgrantee NGOs, individually and collectively.

### Malawi Saving Newborn Lives Program (2003)

**Funding: Save the Children Federation, Inc.**

The Saving Newborn Lives (SNL) program highlighted the critical need for improved neonatal care and applied resources to support the improvement of such care in

Malawi. AED assisted SNL in developing and finalizing its Behavior Change Communication strategy by using data from formative research and other newborn-related literature. AED also helped develop appropriate messages and materials to promote the selected behaviors.

### UNC Malawi Maternal Mortality and Weaning Project (2001–2004)
**Funding: The Centers for Disease Control and Preventio**

Safe Mother/Safe Baby, a study by the AED Center for Nutrition in collaboration with the University of North Carolina at Chapel Hill and the Centers for Disease Control and Prevention (CDC), was designed to compare the effectiveness of different interventions in preventing mother-to-child transmission of HIV in Malawi during breastfeeding. AED enrolled 1,260 HIV-positive pregnant women in Lilongwe, Malawi, beginning in January 2003 for this study. In addition to providing antiretrovirals to newborns and their mothers, moth-

ers received a nutritional supplement designed by AED while they were breastfeeding. AED also trained local health workers on how to counsel and support mothers on exclusive breastfeeding habits and evaluated the impact of these interventions on HIV transmission as well as on maternal and infant health.

### Malawi Human Resources and Institutional Development Project (1988–1995)
**Funding: USAID**

The Malawi Human Resources and Institutional Development (HRID) project was created to improve the overall quality of personnel in professional, technical, managerial, and administrative positions in the public and the private sectors, to develop a strong institutional capacity for training in Malawi, and to offer institutional support for small- and medium-sized enterprise development. AED was responsible for the selection and support of all consultants for the project. Long-

term consultants, referred to as Operational Experts, carried out four primary responsibilities: (1.) filled posts left vacant while Malawian counterparts receive long-term training; (2.) provided on-the-job training for counterparts; (3.) trained others in the department or agency; and (4.) served as resources to the ministry, company, or association on general issues that transcended specific job responsibilities. During the course of the project, 25 long-term consultants were placed in Malawi and approximately 60 Malawians received master's degrees in the United States. By the end of the project, Malawi's institutions for postsecondary and nondegree training were significantly strengthened. Both the public and private sectors were staffed by trained and skilled personnel at technical and managerial levels, and the government had improved capabilities for managing the process of human resource development.
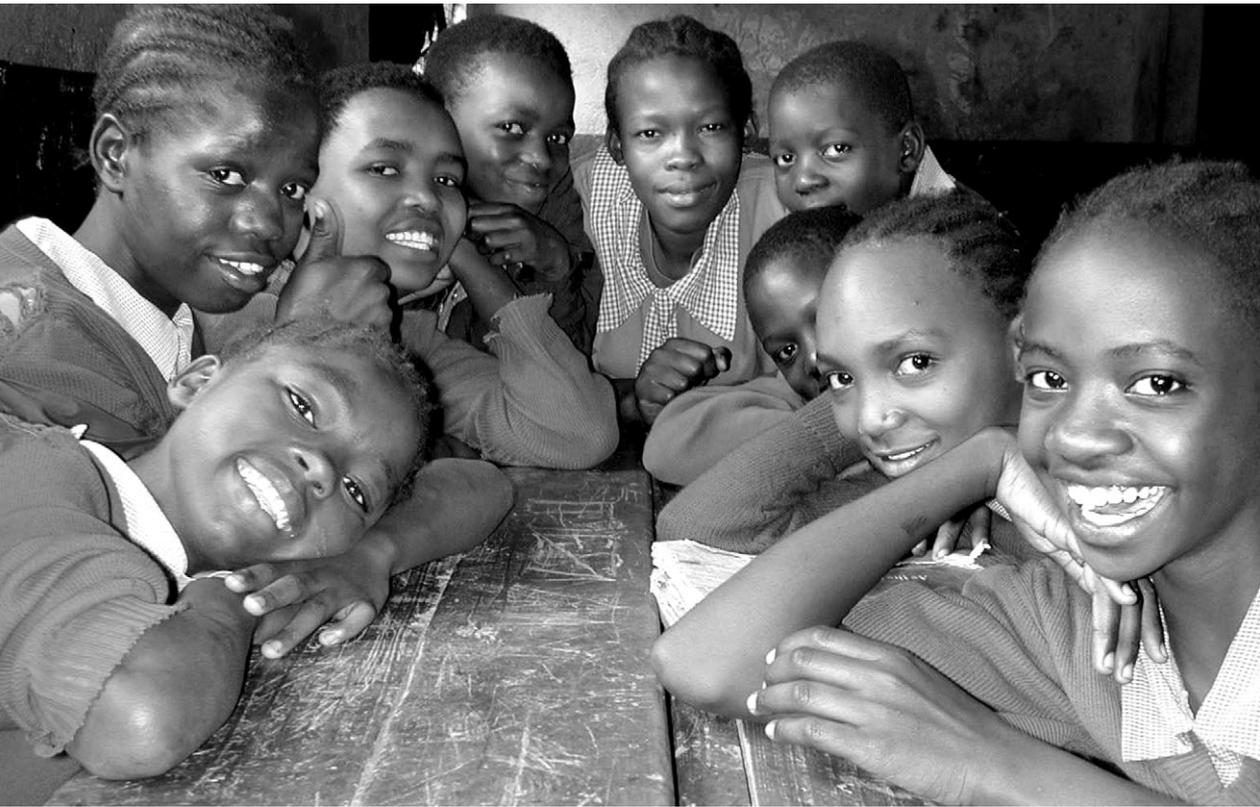
# MALI

**Education Quality Improvement Program 2 Associate Award: Mali Regional Action Planning and Decision-Making Project (2004–2009)**
**Funding: USAID**

The Education Quality Improvement Program 2 (EQUIP2) is a worldwide effort targeted at improving educational policy, systems, and management. Implemented through the EQUIP2 program, the Mali Regional Action Planning and Decision-Making Project is a five-year effort aimed at improving the capacity of the regional directorates of education to plan, manage, implement, and assess quality improvement. AED and its partners are working toward two primary objectives: (1.) strengthen management capacity in all 15 regional directorates; and, (2.) set up adequate education planning, monitoring, and financial management systems. The capacity of the regional directorates to collect and use data for planning, particularly regarding to HIV/AIDS and gender, receives special emphasis. Second, in each of the 15 regions the project will develop a Regional Education Development Fund (REDF) that will serve as an incentive for effective planning and analysis.

### Teacher Training via Radio in Mali (2004–2007)
**Funding: Education Development Center, Inc.; USAID**

The Mali Teacher Training via Radio (TTvR) project is an initiative designed to strengthen the delivery of in-service support to public and community schools. AED is collaborating with the Education Development Center to ensure that gender considerations are integrated into the project's radio programming, print materials, and digital adaptations. AED is responsible for expanding the dissemination of teacher training materials via the Community Learning and Information Centers (CLICs). The CLIC project is establishing multipurpose community centers in 13 communities in Mali, with the purpose of increasing the access of underserved Malian communities to a wide range of development-related information through computers, the Internet, and other technologies. Under the Teacher Training via Radio project, AED is initiating outreach strategies that are intended to benefit up to 800 schools in order to ensure that teachers from the schools targeted by the project are able to access re-broadcasts of the radio programs as well as other paper-based and digital educational materials in audio and video formats via the CLICs.

### The dot-ORG Associate Award: Mali — Community Learning and Information Centers (2003–2005)
**Funding: USAID**

In response to the development challenges that Malians face, USAID/Mali, through the dot-ORG Associate Award project and AED, is enabling local NGOs, teacher training centers, local mayoral offices, rural development parastatals, and private radio stations to establish and operate at least 12 Community Learning and Information Centers (CLICs) across the country. These multipurpose centers offer reliable public access to a wide range of development-

related information through computers, the Internet, and other technologies. The CLICs are designed to meet community needs and actively support development objectives of the Government of Mali and USAID/Mali. The centers offer a range of fee-for-use services, including Internet access (where available), development-oriented information, e-mail accounts, training in computer and Internet use and applications, desktop publishing, WorldSpace radio programming, information and communication technologies (ICT) services for local entrepreneurs, and customized local development content. AED is working closely with the Government of Mali and local and international NGOs in Mali to help them use these CLICs as outreach and service delivery tools to underserved parts of the population.

# MOROCCO

**Morocco Basic Education Improvement Program (2003–2005)**
**Funding: Japan International Cooperation Agency; KRI International Corporation**
AED is participating in a two-year effort to improve the quality of basic education in the rural areas of Morocco. A project team of nine consultants conducted a sector review and began designing the program, selecting and training the trainers, and conceptualizing the techniques for baseline and post-pilot surveys. We are now implementing the project within two regional academies as well as in schools in 11 pilot communes within four selected rural provinces. Newly trained trainers from the selected provinces and a research assistant will train more than 100 stakeholders at the principal and school council management levels in the school quality improvement cycle. This training is followed with training of provincial staff in the consolidation of school level plans. Additionally, training is provided to school-level stakeholders in preparation of proposals that the Japan International Cooperation Agency will fund. Schools and communes implement their quality improvement plans monitored by the project team. At the completion of the project, the post-pilot survey designed by AED will reveal what interventions have proven successful in improving the quality of schools in selected rural areas.

**The dot-ORG Associate Award: Information Technology in the Service of Women in Politics Project (Morocco)/ IT for the Political Empowerment of Women (2002)**
**Funding: Research Triangle Institute; Morocco Trade and Development Services**

The bilingual (French and Arabic) Information Technology in the Service of Women in Politics Project (Les Technologies de L'information au Service de la Femme Politique), represented AED's first associate award under dot-ORG and the first in a two-phase information and communication technologies (ICT) training program to increase the political participation of Moroccan women. This program was part of a national effort to increase the number of female political candidates in Morocco and to build their capacity to use ICTs. The hands-on training organized by AED included: electronic networking through e-mail, listservs, and on-line discussion fora; Internet research (search engines, Web portals, and Web sites) to seek information in order to be better informed decision-makers; and use of word processing, Excel, and Power-Point to make effective presentations. The participants were a mix of candidates nominated by the national political parties and other unaffiliated women active in various NGOs.

In addition to the formal training activities during a three-day event organized by AED, the women participated in discussions around broad issues of ICTs, gender, and policy-making. To prepare for the ICT training and to build indigenous capacity, ten Moroccan women participated in an intense, five-day training-of-trainers (TOT) activity. The expert TOT trainers developed and implemented the TOT program with assistance from Morocco Trade and Development Services (MTDS), another dot-ORG resource partner organization. The first participant training event was conducted with ten women under the supervision of the two TOT trainers. Under the supervision of these trainers, the ten

Moroccan trainers subsequently trained 46 female political candidates and NGO representatives in the use of ICT to enhance political campaigns, strengthen advocacy skills, carry out Internet research for informed decision-making, and better serve their communities. Additional ICT training events were planned to give the ten trainers the experience of planning and carrying out an activity with limited supervision. This second phase gave 100 women living outside of Rabat and Casablanca an opportunity to learn basic computer and Internet skills. Women involved in community development in Morocco represent a group of activists that, with training, are among the most likely to become politically active.

### LearnLink Task Order: Morocco Computer-Assisted Teacher Training (1999–2001)
**Funding: USAID**

AED improved educational quality in Morocco by incorporating technology into teacher training,

increasing educator access to information and communication technologies (ICTs), and promoting ICT use in education. The Computer-Assisted Teacher Training (CATT- PILOTE) project team worked with the Ministry of National Education to implement a national master plan for ICT training and professional development that set a course to bring computers into Moroccan classrooms by 2005.

AED produced educational technology training materials, including six training modules which offered instruction in how to use multiple computer software applications at varying levels of sophistication, educated a core group of teacher trainers and student teachers, and provided opportunities for networking among teachers and administrators at Centres de Formation des Instituteurs (CFIs) or teacher training institutes. After connectivity was established at the centers, IT-trained educators had the opportunity to network with counterparts at

other CFIs and around the world. The Web site developed through the project serves as a portal for CFIs, resources, and bibliographies. The site houses CATT-PILOTE project items such as the self-competency tools, learning modules, collaborative software, a bulletin board for messages, and a help line. In addition, the Web site at ibtikar.ac.ma offers teachers and administrators a vehicle for multiple "innovations," the English translation of the Arabic word ibtikar and overarching project concept.

### Indefinite Quantity Contract: Agricultural Higher Education (1986)
**Funding: USAID**
As part of a continuing series of impact evaluations of agricultural higher education projects, AED conducted an assessment of the institutional impact of the Agronomy and Veterinary Institute of Hassan II University. The results of the assessment were incorporated into a strategy the Academy developed to help improve USAID's agricultural higher education projects.

### Subsector Analysis of Vocational / Technical Education (1980–1981)
**Funding: USAID**
AED conducted an analysis of current and planned development in technical and vocational education in Morocco. The team prepared a report that considered the ultimate effectiveness of the government's strategies for addressing Morocco's needs for vocational and technical training as well as the benefits of formal education. The report also addressed whether changes in those strategies were desirable, the suitability of further support for components of these strategies by international donors, and how change could be effected. The report also examined the potential impact of improved vocational education activities on productivity and agricultural outputs.

# NAMIBIA

**The dot-EDU Associate Award: Alliance to Promote Information and Communication Technology in Namibian Schools Project (Namibia GDA Schoolnet) (2003–2006)**
**Funding: USAID; Education Development Center, Inc.**
With a countrywide fiber optic backbone, Namibia's information and communications infrastructure is among the most sophisticated in Africa. Given its impressive infrastructure and the potential that infrastructure offers, the Government of the Republic of Namibia has identified information and communication technology (ICT) as a principal driver of progress and embarked on an ambitious reform program to liberalize the sector, expand rural excess, and apply the technology to development problems. For this project AED is developing affordable Internet-connectivity solutions to serve Namibia's most historically disadvantaged populations living in remote rural areas. We are also reinforcing the government's efforts to further extend the use of ICTs in the education sector, expanding the availability of ICTs throughout the school system, and enabling schools to provide students with an education relevant to skills needed for the modern world.

**The dot-EDU Associate Award: Initiative for Namibian Education Technology Project (2003–2005)**
**Funding: USAID; Education Development Center, Inc.**
Designed to speed the adoption of information and communication technologies (ICTs) within the Namibian education system, the Initiative for Nambian Education Technology (iNET) project works both at the school and ministerial level to foster the development of technology champions and improve ICT policies throughout Namibia. In order to increase access to educational data and inform policy development and planning in Namibia, AED is revamping existing Teacher Resource Centers housed in teachers colleges in the towns of Windhoek, Ongwadeva, Rundu, and Katima, thereby creating a network between all 13 regional offices of the Ministry of Basic Education, Sport, and Culture. AED is also establishing networked computer labs in the Colleges of Education, which include peripherals and Internet connectivity.

**LearnLink Task Order: Computer-Assisted Teacher Training/ Educational Development and Support Network (2000 - 2001)**
**Funding: USAID**
The computer-assisted teacher training (CATT) activity in Namibia was designed to strengthen professional development for educators and ensure continuous assistance for teachers and administrators through IT training, networking, and resource development activities. The project offered new opportunities for improving teacher preparedness and educational management through a vehicle that promoted knowledge sharing and more equitable distribution of educational resources to those most in need. The educational community in northern Namibia was able to draw on multiple multimedia methods-e-mail, listservs, chat messaging, Web sites, discussion fora, file sharing, and voice and video-for strengthening the educational system. Through a project-based learning

approach capacity-building efforts for educators included Web-based, CD-ROM, and face-to-face training. Trainers, many of whom were women, supervised instruction using a digitized set of 20 modules based on National Institute for Educational Development's (NIED's) Teachers' Basic Competency Manual.

A local NGO, SchoolNet and its "Kids on the Block" (computer-savvy youth aged 15-22 years), provided volunteers for connecting equipment for the program. Sites included NIED in Okahandja and Teacher Resource Centers (TRCs) in Ongwediva, Katima Mulilo, and Rundu, located in historically disadvantaged northern regions of the country where teacher preparedness is low. In addition, a local radio personality contributed time to connecting a server. Project activities included assistance with the development of an ED's Net (Educational Development and Support Network) Web site for facilitating communication, research, training, and creating a virtual community of teachers, principals, advisory teachers, inspectors, and education researchers to share wisdom and experience.

## Namibia Basic Education Support Project II (1999–2004), Educational Quality Improvement Program 2Associate Award: Namibia Basic Education Support Project III (2004–2009)

**Funding: USAID**

The Namibia Basic Education Support Project II (BES II) was intended to bolster instructional and educational management systems and development of Namibian capacity to manage these systems on a sustained basis, especially at the lower primary grades 1 through 4. The project focused on three major results: (1.) improving the quality of classroom instruction using learner-centered education and continuous assessment methods; (2.) improving the quality of school management through tech-

nical assistance and training to principals and their supervisors, the circuit inspectors; and (3.) involving parents and communities in improving their schools.

The project approached the challenge of sustainability through a multitiered structure of interlocking, mutually reinforcing activities, each of which addressed an element of sustainability. The first element of the strategy was to build the capacity of Circuit Support Teams (CSTs) from the Ministry of Education to work with school staff and parents on in-service training for teachers and principals and school improvement planning. The second element was to build capacity at the cluster (four to five schools) and individual school levels to manage local training and school improvement planning with minimal support from the CSTs. At the individual school level, the project created a participatory process whereby teachers, parents, and other community members are empowered to participate in the

educational system. Finally, the project successfully developed a process through which teachers and schools carry out self-assessments to monitor progress in improving school performance in a wide range of areas.

By the end of BES II, the project had expanded to include more than 400 schools in 22 circuits in the six northern regions. More importantly, the Circuit Support Teams now had the capacity to expand innovations to the other 900 schools in the north. The impact of the project on the behavior of teachers was impressive. Results from classroom observation data show that more than 80 percent of teachers demonstrated mastery of at least two learner-centered methodologies.

The Education Quality Improvement Program 2 (EQUIP2) is a worldwide effort targeted at improving educational policy, systems, and management. Phase III of the BES project is being implemented through EQUIP2. The new

project continues to work in the same six northern regions while expanding coverage of project interventions to include upper primary grades 5 and 6 and tackle new challenges to improve the quality of primary education in three areas. The project increases the resilience of the basic education system to cope with the HIV and AIDS epidemic. The project tests strategies to address teacher absenteeism and provides support to keep orphans and other vulnerable children in school. The project continues to improve the effectiveness of decentralized education management and building the capacity of the regional education offices. It also works to improve the quality of language, math, and science instruction through in-service and preservice teacher education.

# NIGER

**United Nations Population Fund Gender Initiative in Niger (2002–2004)**
**Funding: United Nations Population Fund**
Under the Niger Gender Initiative, AED was tasked with planning and implementing activities in coordination with seven different ministries and with local NGOs women's legal rights, women's political participation, women's access to reproductive health services, and girls' education. The purpose of the initiative was to improve Niger's existing legal, political, social, and institutional conditions in order to render them more favorable to gender equity and equality. To ensure the success of the project, AED focused its efforts on policy dialogue, social mobilization, capacity-building, information/communication campaigns, technical assistance, and training. Other project activities involved addressing gender equity issues in central and regional development plans and programs; developing a legal, administrative, and economic environment which enables gender equity and equality; making political and other opinion leaders aware of women's rights issues and of the need to implement relevant international conventions ratified by Niger; and strengthening the capacity of appropriate ministries within the government as well as NGOs.

**United Nations Population Fund Sexual and Reproductive Health Initiative for Youth and Adolescents in Niger (2002–2004)**
**Funding: United Nations Population Fund**

The United Nations Population Fund (UNFPA) requested that AED be the executing agency for a five-year program, the Youth Initiative, focusing on the reproductive health of youth and adolescents. This program was designed as a decentralized initiative targeting three of the country's most important regions and approximately 25 percent of its youth population. The intended audience for the Youth Initiative were all young people aged 10 to 24 in five districts within three priority regions of Niger (Agadez, Zinder, and Dosso). At least 300,000 youth were direct beneficiaries of this initiative in the three regions. Other youth groups in other districts indirectly benefited from this initiative especially through the national level efforts. AED coordinated inputs from all contributors, including from UNFPA technical staff, and recruited project advisers and staff. The program was part of the overall assistance of UNFPA to Niger, which included a gender initiative, executed by AED, and a reproductive and sexual health initiative focusing on safe motherhood.

The Youth Initiative worked toward achieving sustainable changes in specific behaviors, attitudes, and other normative and social factors which affect the sexual and reproductive decision-making of the youth. Positive results included the establishment of lasting partnerships, capacity-building among the participating ministry personnel, the mobilization of more than 2,000 youth teams in the national and international AIDS scenario competition, "Scenarios de l'Afrique," the development of a reference guide for use by Imams and other religious leaders for discussions on adolescent reproductive health issues, a Knowledge, Attitude, and Practices (KAP) study looking at reproductive health

behaviors in the target regions of the project, training sessions for rural radio broadcasters to address health issues in their regular programming, development of a comprehensive adolescent sexual health curriculum to be incorporated into the standard curriculum at the national schools of public health, the development of a lexicon of reproductive health terminology in three languages, and the provision of technical assistance to the Ministry of Basic Education for the development of an AIDS strategic plan. At the local and national levels, the project also coordinated a range of outreach and educational efforts targeting the youth served by local NGOs through peer education efforts and a range of cultural events, including traditional and popular musicians and theater groups.

# NIGERIA

**Enabling Environment Program (2004–Continuing)**
**Funding: USAID**
To be successful in designing and implementing programs that respond to the range of challenges in HIV/AIDS and tuberculosis (TB) prevention, treatment and care, child survival, and reproductive health, there must be an enabling environment. The Enabling Environment Program conducted by the Futures Group International in cooperation with AED and other partners seeks to foster partnerships of organizations that can enhance the environment for integrated health and education programs. The program builds political and popular support for health

and education programs; improves policies, planning, and financing; creates public-private partnerships; marshals accurate, current, and relevant policy information; enhances local capacity to use advocacy and information; and improves coordination and cooperation among national and international partners.

**Global Development Alliance: Youth, Education, and Self Reliance Project in Nigeria (2003–2005)**
**Funding: USAID; ChevronTexaco**
The Global Development Alliance (GDA) is a USAID-sponsored program to build public-private partnerships to fund development projects. Under a GDA umbrella

project, AED is working to improve the education and entrepreneurial skills of youth in the Youth, Education, and Self Reliance Project in Nigeria (YESNigeria). This project is piloting an innovative approach that brings together experience from two sectors, education and economic development, to assist youth in two communities of the Eastern Delta region in Nigeria. The project is concentrating on four objectives: (1.) improving the basic literacy and numeracy skills of in-school youth in junior and senior secondary schools; (2.) introducing youth to basic business development and entrepreneurial skills; (3.) enabling youth to develop and implement businesses; and (4.) engaging youth in local community service activities. After school, youth are taught by facilitators who are either teachers from the local schools or small-scale entrepreneurs.

# RWANDA

**The dot-ORG Associate Award: Information and Communication Technologies for Elections and Community Access (2002–2004)**
**Funding: USAID**

AED helped the National Electoral Commission of Rwanda enhance its use of information and communication technologies (ICTs) to manage the country's voter list. AED provided technical assistance, hardware, software, and staff training to support database development and management. We assisted the commission in printing high-quality voter registration cards. The project created, in partnership with local entrepreneurs, Community Internet Centers (CICs) in two to four Rwandan communities. These centers provide local residents with access to a variety of affordable resources, including computers with Internet access, Web page development, computer training, on-line professional development, and e-mail, fax, phone, and photocopying services. The CICs allow local Rwandan development organizations, NGOs, government agencies, and businesses to convert existing information and training materials into different digital formats.

# SENEGAL

**Educational Quality Improvement Program 2 Associate Award: Children's Learning Access Sustained in Senegal and Senegal's Improved Teacher Training Project (2003–2007)**
Funding: USAID

The Education Quality Improvement Program 2 (EQUIP2) is a worldwide effort targeted at improving educational policy, systems, and management. Under the EQUIP2 program, the Children's Learning Access Sustained in Senegal (CLASSE) Project is aimed at improving access to and quality of middle schools. The need to focus on improving middle school education is a direct result of Senegal's success at increasing the numbers of children completing primary school. The project's strategy marks an important step in meeting the ambitious goals for expanding middle school set in Senegal's Ten-Year Education Plan. The challenge for the CLASSE Project is to create effective schools and classrooms through concrete operational policies, effective and sustainable systems, and institutional capacity. CLASSE Project activities are organized into access and participation, decentralization, policy and capacity, and monitoring and evaluation. Senegal's Improved Teacher Training (SITT) Project is an additional component of the CLASSE Project that focuses on improving teacher and school director educa-

tion. By the end of the project, the system for delivering this support will have been field-tested with 700 teachers in the three target regions.

# SOUTH AFRICA

**Community-Based Voluntary Counseling and Testing (2004–Continuing)**
**Funding: The Centers for Disease Control and Prevention**
AED is helping increase access and use of Voluntary Counseling and Testing (VCT) programs for HIV/AIDS prevention. Working with local nongovernmental organizations to increase their capacity to provide information and training, AED holds stakeholders' workshops, provides technical training in VCT management, and measures program results to ensure the project is having the desired effect. National frameworks for referral systems are under development including national guidelines for

implementation and coordination of large-scale procurement and distribution of HIV test kits for 75-100 partnering organizations.

**International Program to Prevent and Control Micronutrient Malnutrition Community-Based Vitamin A Intervention Using CDCynergy (2002–2004)**
**Funding: The Centers for Disease Control and Prevention**
AED developed a community-based vitamin A intervention for South Africa using CDCynergy. The purpose of this project was to test the usefulness of the micronutrient edition of the CDCynergy CD-ROM as a planning, training, and evaluation tool for staff in developing

countries. Jointly implemented by AED and the University of Western Cape, the goal of this community-based intervention included increasing the number of children in the target community between the ages of 6 months and 24 months that required vitamin A supplementation at clinics and increasing the awareness and consumption of vitamin A-rich foods, including a new crop, orange flesh sweet potato.

**GreenCOM II Task Order: South Africa — Capacity Building, Public Awareness, Outreach, and Education to Address Global Climate Change (2002–2003**
Changes in global weather caused by greenhouse gas emissions can lead to droughts, floods, and other natural disasters-all of which result in lowered standards of living. As the biggest producer of greenhouse gases in Africa, South Africa wanted to lead the continent in education and action on the issue of global climate change. Although

South Africa had developed environmental education curricula on energy conservation for schools and the public, few educational materials were devoted to climate change. The GreenCOM Project used communications, education, public awareness, and outreach capacities for a successful partnership with the Department of Environmental Affairs and Tourism (DEAT), USAID, provincial governments, and Republic of South Africa (RSA) government stakeholders. The objective of the project was to increase public awareness about climate change, to move the RSA climate change agenda, and to include the topic of climate change in school curricula.

The South Africa Global Climate Change (GCC) Project attempted to create a sustainable environment by educating the public on the importance of global climate change. A significant portion of the education program underscored the link between reduced greenhouse

gases and improved health, a better economic situation, and an improved quality of life overall. The project aimed to move the climate change agenda by engaging the public through training seminars, educational programs, and media campaigns and by helping to plan demonstration projects and other outreach activities. The project also created an incentive for schools to use the new GCC curriculum. AED sponsored a school-based national competition that provided prizes and recognition to those schools that were the first and the best at integrating climate change topics into their coursework.

### South Africa Education Indefinite Quantity Contract (2000–2005)
**Funding: USAID**
USAID established the South Africa Education Indefinite Quantity Contract (IQC) as a vehicle to provide technical assistance and management/logistics support to the South African Department of Education, South African universi-

ties, and South African NGOs. Building on the activities and accomplishments of the South Africa projects AED had conducted under the Advancing Basic Education and Literacy Projects (ABEL 1 and 2), AED assembled a diverse group of South African collaborating partners, including NGOS, private companies, and universities. AED and its partners were required to compete for individual projects under specific task orders. Over the life of the project, AED was awarded nine task orders. Following are brief descriptions of the major task orders completed by AED and its partners:

- Educator Exchange Programs allowed teachers from South Africa and the United States to exchange ideas and experiences related to the struggles they faced in providing quality education to students from disadvantaged families.
- AED conducted a mid-term evaluation of the Tertiary Education Linkages Project

(TELP), a USAID-funded project aimed at improving the quality of education at 15 historically disadvantaged universities in South Africa.

- AED placed two long-term advisers in the Limpopo Province Department of Education (NPDOE). An Education Planner completed a three-year effort to improve the NPDOE's Education Management Information System (EMIS). A Human Resources Management Specialist assisted senior department officials in the rationalization and restructuring of the NPDOE.

- The Teacher Resource Centers (TRC) project funded the procurement and distribution of equipment and supplies for educator resource centers in four provinces: Eastern Cape, KwaZulu Natal, Northern Cape, and Limpopo Provinces.

- The School Management Team (SMT) Manuals project for KwaZulu Natal produced and distributed 12 school management modules to more than 6,000 schools in the Province. All of the manuals were translated from English into IsiZulu and Afrikaans. The project also provided training for school inspectors throughout KZN Province, who in turn had to provide training and technical assistance to senior managers at all schools in the Province. AED and its partners developed an innovative approach for motivating inspectors by linking their training with credit toward an advanced degree at the University of Durban.

### South Africa Adult Basic Education and Training Project (1999–2002)
**Funding: USAID**

USAID initiated the South Africa Adult Basic Education and Training (ABET) Project in response to the increasing demand for education for adult learners to make up for the lack of opportunities during the Apartheid regime. AED collab-

orated on this project as a sub-contractor to a South African NGO, Project Literacy. Project Literacy and AED provided support to the Eastern Cape and the Northern Province departments of education in the implementation of pilot efforts to train adult learners in two subject areas — agriculture and small, medium, and micro-enterprise. The emphasis on practical subjects was intended to motivate adult learners to improve literacy skills while improving their income-earning skills. The project trained 270 educators to deliver the program. The courses ran in 45 Public Adult Learning Centers; a total of 2,645 adult learners participated in the program. On the basis of the success of the pilot project, the National Department of Education decided to expand the two subjects to all provinces.

## Support for Gender Strategies for the CISCO Networking Academy Program in Ten Focus Countries (1999–2000)

**Funding: Cisco Learning Institute**

AED's Ready to Learn Center assisted Cisco Systems in improving the recruitment and retention of female participants in its international Networking Academy Program (CNAP). With academies in more than 60 countries, CNAP provided training to secondary school-level students in computer networking and prepared them for industry-standard certification as networking professionals. The Ready to Learn Center assessed and analyzed data concerning CNAP participants to determine whether Cisco's program was successfully training females for technology careers within its sites in Africa, Latin America, South Asia, Eastern Europe, and the Middle East, and identified problems and opportunities for improvement. The project then developed strategies for attracting, retaining, and sustaining female

CNAP participants and graduates, adapted these graduates for the specific cultural contexts of selected focus countries, and disseminated recommendations and findings.

**South Africa Nongovernmental Organization Evaluation (1996)**
**Funding: W.K. Kellogg Foundation**
This review of the Kellogg Foundation's community-based projects in South Africa was intended to provide the foundation with an understanding of the range and intent of these projects and the lessons that could be learned from their implementation. The report examined the specific grassroots needs the projects were designed to meet, the obstacles encountered in implementation, and the impact that Kellogg Foundation funding had on the project's outcome and sustainability. The evaluation also included a discussion of the foundation's strength in the region and offered options for further strengthening its initiatives.

# TANZANIA

**Marketing for Reproductive Health, HIV Prevention, and Child Health (2004–Continuing)**
**Funding: USAID**

For the Marketing for Reproductive Health, HIV Prevention, and Child Health (T-MARC), AED is using an integrated, multipartner approach to increasing access to reproductive health, HIV/AIDS, and child survival products. We are developing strategic partnerships with local NGOs and private and commercial organizations to identify synergies across projects with collaborating agencies working in HIV/AIDS, reproductive health, and maternal and child health issues. Formulating partnerships across all sectors and interests ensures that information is shared and that efforts are mutually reinforcing to make health products available and affordable for all consumers, especially for those most vulnerable. AED's approach uses field programs with sophisticated market segmentation strategies that draw on epidemiological, socio-economic, and geographic factors, purchasing behaviors for products and services, and distribution coverage. This segmentation is the result of innovative behavioral and formative research. This multifaceted approach to marketing health in Tanzania is a new model for interventions around the world.

**The dot-ORG Associate Award: Applying a New Generation of Information Technology at Community Internet Centers — ACCESS Digital Opportunity Through Technology and Communications Alliance for Information and Communication Technologies Access and Application (2002–2005)**
Funding: USAID

AED is piloting new configurations of information and communication technologies (ICTs) in order to strengthen and increase the impact of Community Internet Centers (CICs) and other points of access to the Internet in underserved areas of developing countries, particularly for USAID target populations. Activities under this award include: WiderNet Digital Library for African Universities via Satellite; PEOPLink CatGen; and Tanzania Workshop on Web development for USAID and partners.

**GreenCOM II Task Order: Tanzania (2001–2004)**

A study conducted for the development of Tanzania's National Environment Action Plan (NEAP) identified six major environmental issues within the country. These issues included loss of wildlife habitats and biodiversity, deforestation, land degradation, deterioration of aquatic systems, lack of accessible, clean water, and pollution. Through this Task Order in Tanzania, Green-COM worked with a large number of government agencies, local and international NGOs, and local communities to support the sustainable management of natural resources and to improve the conservation of coastal resources and wildlife in targeted areas. Through learning biodiversity conservation, understanding how they can protect their national parks, managing game reserves, and coastal and marine ecosystems through sustainable management, the people of Tanzania were able to realize the beauty, value, and fragility, of their

natural resources. This understanding and knowledge helped the local communities work to preserve their wild land and encourage the productive potential of their coastal lands and waters. To achieve these goals, GreenCom conducted several activities in Tanzania to encourage public participation, communication, and awareness in local communities. With local District officials, AED organized environmental award schemes among coastal communities aimed at raising environmental awareness through public participation. Another activity was the conduct of training-of-trainers' workshops for members of both award scheme committees in order to empower and encourage them to carry out sustainable programs on their own. Workshops for teachers and leaders of youth clubs were instituted to encourage them to assist the parks in the various programs.

# TUNISIA

**Tunisia Computer Project: Tunisia Regional Institute for Informatics and Telecommunications (1986–1991)**
**Funding: USAID**

In an effort to modernize various sectors of its economy, the Government of Tunisia worked to improve its capacity to design and implement computer applications and to improve its research and development potentials in telecommunications. To help Tunisia accomplish this task, AED strengthened the Regional Institute for Informatics and Telecommunications (IRSIT), a research and development institution, and assisted in developing a new private institute of technology, the Carthage Institute of Technology, which offered undergraduate and graduate programs. Project activities included four major components: (1.) technical support for research and development; (2.) development of pilot projects in various sectors of the Tunisian economy; (3.) training of Tunisian professionals and faculty personnel; and (4.) institutional support for IRSIT.

To demonstrate the use of modern automation and to set forth economical solutions to pressing sectoral problems, IRSIT initiated four pilot projects offering assistance to the Gafsa Phosphate Mines in southern Tunisia (a major source of foreign currency for the country):

the Tunisian petroleum company; the Ministry of Telecommunications for its data transfer and network needs; and to selected ministries for office automation. In addition, proposals were solicited from Tunisian universities for research in areas relevant to the petroleum industry, agriculture, and the industrial sector. The project provided training for junior- and senior-level IRSIT staff in management and computer applications as well as applied research techniques. AED also promoted an exchange of scientists between the consortium institutions and IRSIT senior staff. The project assisted IRSIT in hosting a major international colloquium on the use of Arabic in computing, which involved speakers from some ten countries as well as demonstrations of computer equipment (some developed in Tunisia) capable of multiple language use.

During the life of the project, AED provided for the installation of 130 microcomputers and training in

their use at the Centre Bourguiba de Micro-Informatique, the major educational institution for secondary school students seeking multilingual instruction and courses in computer literacy. In addition, AED developed a training-of-trainers' program for secondary school teachers and conducted a major feasibility study for Tunisia Carthage Institute of Technology's proposed graduate and undergraduate academic program for approximately 3,000 bachelor's, master's, and doctoral students. The project successfully linked IRSIT through international data exchange networks to both U.S. and major foreign institutions, and with AED's help, IRSIT developed internal operating procedures comparable to those used in U.S.-based research and development organizations for the assessment and implementation of commercially feasible research projects.

### Tunisia Technology Transfer Project (1982–1986)
**Funding: USAID**

AED worked to develop institutional links between Tunisian and U.S. institutions in order to enable the transfer of technology in engineering and related fields, management information, and manpower planning. The overall aim of this project was to assist the Government of Tunisia's Ministry of Higher Education and Scientific Research (MHESR) in strengthening its capabilities as well as the capabilities of specialized institutions of higher education, primarily in the fields of science and engineering education. Among the principal elements of the project were the placement and follow-up of Tunisian students and the training of Tunisian personnel. The Academy provided a long-term adviser to assist the Tunisian Scientific Mission and University Bureau in Washington in the placement of Tunisian students in U.S. universities. AED also conducted a comprehensive study of Tunisia's needs and supplies for university-trained engineers, which was beneficial to the MHESR in determining allocation of scholarships for study abroad. A team of Academy consultants also conducted a study of English language training at Tunisian institutions of higher education. Under this project, the Academy developed technical specifications, purchased, and shipped to Tunisia microcomputers to be used by various Departments and Institutes as well as technical and English language books and library materials.

During AED's involvement, 50 bachelors, 40 masters, and 16 doctorate degrees were completed, along with three programs in medical research in one of USAID's first major projects to train undergraduates in U.S. institutions. Fields of study were largely focused on engineering, computer science, and business degrees. To acquaint Tunisian educators with U.S. training facilities, a total of 57 deans,

directors, and faculty of these institutions became involved through the project in internships, study tours, and visits to U.S. educational institutions. A total of 47 U.S. educators visited Tunisia. AED also helped to design, install, and train computer operators in a participant tracking system that was placed in the Tunisia Scientific Mission in Washington, D.C.

# UGANDA

**Education Quality Improvement Program 2 Associate Award: Uganda Strengthening of the Education Management Information System Project (2003–2004)**
**Funding: USAID**

The Education Quality Improvement Program 2 (EQUIP2) is a worldwide effort targeted at improving educational policy, systems, and management. Implemented through the EQUIP2 program, the Uganda Education Management and Information System (EMIS) Project was designed to provide technical support to the Ministry of Education to enhance and strengthen its decentralized EMIS. AED implemented a coordinated set of activities aimed at developing a sustainable EMIS. A school mapping exercise was conducted using a geographical information system (GIS) to correct the existing schools registry for future data collection. Intensive training was provided to regional and national staff on EMIS tools, procedures, and equipment that were put in place by earlier assistance efforts. EMIS was expanded from 20 districts to all 36 districts and training was provided to staff in the 16 additional district education offices so that they are able to develop, interpret, and present EMIS reports. The project created a mini-census that will be updated twice a year to highlight student, teacher, and financial needs at the district level. The project also

developed a Wide Area Network (WAN) to provide Internet services between all major offices of the Ministry of Education and Sports.

Finally, the project assisted the Ministry with producing a long-term strategic investment plan for education. The team ensured that: (1.) different levels of education receive appropriate emphasis; and (2.) adequate attention is paid to linking education with the country's overall development needs within the context of the Poverty Eradication Action Plan.

### Education Quality Improvement Program 2 Associate Award: Uganda Teacher Development and Management System Project (2003–2004)
**Funding: USAID**
Under this Education Quality Improvement Program 2 (EQUIP2) Associate Award, AED fielded an evaluation team to assess the functioning of the Teacher Development and Management System (TDMS)

and particularly to review the role of the Coordinating Centre Tutor (CCT). With the expansion of the TDMS nationwide, inadequate staffing and funding were contributing to a decline in the quality of the system. Moreover, confusion existed regarding the roles and responsibilities of the CCTs and the inspectors, the other education officials connected to schools at the local level. The evaluation report provided analysis and recommendations to help the Ministry of Education strengthen the TDMS and its relationship to the district education offices and the Inspectorate.

### LearnLink Task Order: UGANDA: Connect-ED-Training Uganda's Teachers with Technology (2000–2003)
**Funding: USAID**
To improve Uganda's telecommunication services and education, the Connect-ED Project supported activities to improve the quality of education. In close cooperation with Uganda's Ministry of Educa-

tion and within the framework of the U.S. Education for Development and Democracy Initiative, this AED/LearnLink-implemented project increased computer literacy among teachers and equipped nine educational centers. AED prepared a multimedia, on-line teacher training curriculum based on a student-centered learning approach and the Ugandan core curriculum, which enabled teachers and student teachers to integrate information and communication technologies (ICTs) into the classroom.

All Connect-ED activities encouraged the increased use of information technology for education as a means of promoting democracy and increasing access to economic opportunities. Moreover, the activities delivered urban and rural equipment, training, and resources as a means of enhancing the Universal Primary Education policy in Uganda. Connect-ED helped the Institute of Teacher Education, Kyambogo (ITEK) to advance its core curriculum with the creation of a series of Digital Resource Library CD-ROMs and an Online Multimedia Curriculum to assist and enable adult learners to use ICTs and integrate computers into student learning and to gain expertise in subjects taught in the classroom (ITEK Web site with multimedia curriculum: www.itek.ac.ug). Preservice and inservice teachers now have access to two new multimedia and computer-training laboratories offering approximately 20 workstations at the ITEK, where educational research and testing of curriculum is continual. These educational improvements increased rural students' literacy, reduced inequities among children, and advanced school administration and the professional development of primary level educators.

**Irish AID to Uganda Education Reform Expansion (1997–2000)**
**Funding: USAID**
Irish AID recognized the benefits of coordinating education reform activities supported by its own grant

funds with similar efforts of other international donors in Uganda. Toward that end, AED agreed to administer the expansion of certain educational reform initiatives to the Rwenzori district of Uganda.

## Uganda Support for Primary Education Reform Project (1993–2000)
AED and its partners played a major role in assisting Uganda to reform its primary education system through the Support for Primary Education Reform Project (SUPER).  The SUPER Project provided support to the Ministry of Education and Sports to improve the teacher education system, improve management of education system, increase community participation, and promote girls' education.The centerpiece of the SUPER Project's accomplishments was the design and establishment of the Teacher Development and Management System (TDMS). As originally developed, TDMS was anchored by 23 primary teacher

colleges. These colleges, in addition to providing traditional campus-based preservice teacher education programs, also directed and supported a network of 539 resource centers, or coordinating centre schools. The coordinating centre schools were served by outreach staff, called coordinating centre tutors, from the teacher training colleges. Each tutor supported schools in a nearby network and helped promote a distance education program for teachers to improve their formal qualifications.

The SUPER Project trained more than 50,000 community mobilizers, headmasters, and primary school teachers. It provided grants to nearly 1,000 schools to promote girls' education and it distributed 2 million textbooks. Finally, the project also helped support policy development and implementation and improve management of the overall education system.

# ZAMBIA

**Education Quality Improvement Program 2 Associate Award: Zambia Improving Information and Strengthening Policy Implementation (2004–2009)**
**Funding: USAID**

The Education Quality Improvement Program 2 (EQUIP2) is a worldwide effort intended to improve educational policy, systems, and management. Under this EQUIP2 Associate Award, AED and its partners are helping strengthen the capacity of the Ministry of Education to function more effectively at the district and school levels. The project has four main components. AED is building on earlier work that it has completed in Zambia to expand the existing Education Management and Information System (EMIS) to all districts within the country in order to have the EMIS become a useful management and planning tool for the district education offices. Second, the project assists the Ministry of Education in implementing its newly outlined policy of decentralization. The capacity of district- and school-level officials will be strengthened through improvements in management, the use of effective tools, and training in the operation of democratic institutions. The project assists the Ministry in strengthening the capacity of district education boards and schools. The project supports policy monitoring and research implemen-

tation to strengthen the capacity of planners and decision-makers at the national level to better address specific issues and implement specific policies, particularly related to HIV and AIDS. Finally, the project supports monitoring and evaluation to measure its impact and to strengthen the capacity of the Ministry to manage reform.

### Strategic Technical Assistance for Results with Training Task Order: Zambia (2002–2003)
**Funding: USAID**

The Strategic Technical Assistance for Results with Training task order for Zambia (START- Zambia) provided administration, support, and follow-on activities for two academic trainees and short-term technical training for eight trainees in the fields of economic growth, basic education, democracy-building, child health, reproductive health, and HIV/AIDS interventions.

### Strategic Technical Assistance for Results with Training — Zambia Economic Growth, Basic Education, Health, Democracy, and Growth (2003–2006)
**Funding: USAID**

Under this Strategic Technical Assistance for Results with Training task order for Zambia (START-Zambia), AED is administering U.S. based short-term and academic programs in education, economic growth, health, and democracy-building.

### Zambia Framework for Gender and Sustainable Development (1994)
**Funding: World Bank**

In collaboration with World Bank staff, AED assisted a Zambian team of governmental and development professionals in preparing a strategy paper for addressing gender issues. We also drafted an operational framework that set out a viable strategic thrust for enhancing sustainable development through a more conscious incorporation of

gender issues in programs and projects. A computer model was developed as the tool for presenting the strategies and developing a process for implementing them. This model was used at a workshop held in Zambia, which included government policy-makers and the NGO community in order to review and present a critique of the draft framework. Those comments were then incorporated in the draft final paper, which assisted policy-makers in identifying areas for policy action and filling data gaps to reduce gender differentials in economic participation while enhancing the capacity of women and men to respond to macroeconomic change.

# ZIMBABWE

**Zimbabwe Public Health Communication (2001–Continuing)**
**Funding: World Bank**
In 2001, AED provided a specialist to review the information, education, and communication (IEC) component of the Zimbabwe Family Health Project and, in collaboration with other team members, the pedagogical aspects of training activities. In addition, an AED senior communication specialist was asked to review and provide comments on the AIDS prevention plan devised for Zimbabwe. As a result, our specialist assessed the Knowledge, Attitude, and Practices (KAP) survey, newspaper, and other print campaign materials and provided recommendations for

improving the plan. Today, we are still actively involved in the public health sector in Zimbabwe providing technical assistance or communications support whenever and wherever it is needed.

**Zimbabwe Early Childhood Education Project (1993–1997)**
**Funding: W.K. Kellogg Foundation**
Fellows under this program matriculated in undergraduate programs in the United States in early childhood education. AED provided credential reviews, organized the placement of students, provided cross-cultural orientation, and monitored the program and campus visits. This project helped to develop professionally trained staff

to administer and supervise the Early Childhood Education and Care Program of the Zimbabwean Ministry of Education and Culture (MEC). At the beginning of the project, five MEC staff members were awarded academic fellowships and enrolled in the bachelor's degree program in early childhood education at DePaul University in Chicago, Illinois. AED monitored the participants' academic programs and designed and managed short-term programs to supplement their academic studies. Additional activities included a study tour of Migrant Head Start centers and a specially designed training-of-trainers' mini-course.

### Zimbabwe Manpower Development Project (1992–1997)
**Funding: USAID**

Continuing its long-term support for Zimbabwe's private-sector development, AED, in conjunction with USAID, provided the second phase of the Zimbabwe Manpower Development Project (ZIMMAN). Building on the work of the first phase, which focused on long-term education and training for the public sector and on strengthening institutional capacity, AED concentrated on the short-term training needs of Zimbabwe's private sector and assisted the public sector in strengthening its efforts to promote private-sector development. The objectives of this project included enhancing private-sector productivity; increasing national economic growth by developing a support industry for small- to medium-sized enterprises (SMEs); advancing the long-term local capacity to sustain support for SME businesses; and developing private-sector evaluation mechanisms that could be used for policy dialogue.

The ZIMMAN II Project focused on assisting different segments of Zimbabwe's economy and the needs of SMEs who were seeking new skills and technologies for survival and growth. To strengthen the private sector and the economic environ-

ment for SMEs, four integrated strategies were implemented simultaneously by AED and our partners: (1.) local training and consulting firm development; (2.) SME development; (3.) industry association development; and (4.) private-sector enabling environment development.

## Zimbabwe Basic Education and Skills Training (1984–1990)
**Funding: USAID**

For the Basic Education and Skills Training (BEST) Project, AED provided trained personnel to fill faculty positions in the fields of engineering, medical sciences, education, and business to assist in developing more relevant, effective, and efficient education and training systems. Specific activities for the Ministry of Education involved assistance in using computers to enhance the Ministry's capability to process data, grade and process examinations, and conduct research. We assisted the Ministry with computerizing its payroll and offering training for the administration of a

computerized national examination system. AED also developed a computerized database system for the regional offices, purchased and installed equipment, and trained Ministry personnel to use the system. The last activity of the project was the development of a scholarship tracking system and training Ministry personnel in its use.

At the conclusion of the project, the Technical College Bulawayo was a major computer training center and the University's Faculty of Education had a well-established Human Resources Research Centre. The Ministry of Education now has the capacity to process large numbers of examinations in an accurate and timely manner and can access data on personnel, enrollments, and budgets in any of its district offices. The government is also able to monitor Zimbabweans receiving training in other countries as well as their respective fields of study. These enhanced capabilities provided Zimbabwe with improved

work force planning and utilization, increased efficiency, better training capabilities, and more technical personnel who are better trained.

## Zimbabwe Computerized Management Information System (1981–1989)
Beginning in 1981, AED worked with the Ministry of Education in Zimbabwe to develop both a regional and centralized computerized Management Information/Decision Support System in nine regions throughout the Ministry's central structure. Using a combination of custom developed programs and available software from several vendors, AED worked directly and through subcontractors, to implement strategic planning, budgeting, payroll, personnel, and fiscal accounting functions within the Ministry. As part of a collaborative effort involving long-term advisers, short-term technical assistance, local counterparts, and local contractors, all nine extant regions in Zimbabwe were automated. The regional offices were fully automated with mini-computers and eventually converted to personal computers. All major operational functions of the regional offices were automated, staff was trained, and virtually all schools in the system (which expanded during that period to more than 5,000) were completely mapped.

The Ministry instituted a country-wide communications capability involving the physical transfer of information via paper, diskette, and magnetic tape as well as the capability to interconnect regions and the head-office via telephone lines. A central element of the computerization effort was assistance to the regions and the Ministry's central office in operating the complete system after installation. Accordingly, many Ministry employees participated in on-the-job training alongside the AED team. We also arranged for all procurement-related activities, including com-

petitive bidding for more than
$1.75 million in software and hard-
ware, legal agreements, export
licenses, and post-installation
acceptance.

In Zimbabwe, the educational sys-
tem reached unprecedented levels
of access.  It systematically
improved its overall quality at the
primary and secondary level and
increased teacher mobility and pro-
motion according to seniority and
qualification. Because of the
automation effort, the processing
period for the registration and pay-
ment of new teachers shrank from
three months to two weeks. The
system installed is being successfully
managed and maintained entirely
by resident Ministry personnel.

# MULTICOUNTRY PROJECTS

**Partnerships for Learning Undergraduate Studies Program (2004–2006)**
**Funding: U.S. State Department**
AED administers the Partnerships for Learning Undergraduate Studies (PLUS) Program, an undergraduate scholarship program for students from North Africa, the Middle East, and South Asia, which identifies and supports undergraduate-level study in the social sciences and humanities at accredited higher educational institutions in the United States. The program is responsive to the needs of a select cadre of academically talented undergraduate students who exhibit leadership potential in contributing to the economic, political, and social development of their region. In 2004, 71 students received scholarships to complete the final two years of their university studies in the United States.

**Capable Partners Programmatic Objectives: Conflict Sensitive Monitoring and Evaluation in West Africa (2003–2008)**
**Countries: Ghana, Sudan, and Zambia**
**Funding: USAID**
The Capable Partners Programmatic Objectives (CAP) is designing and facilitating a workshop to examine conflict-sensitive monitoring and evaluation in conflict-affected countries in West Africa, the Mano River Region in Particu-

lar. Participants included USAID staff, PVOs, and local NGOs from countries in the West Africa Regional Project (WARP). Under CAP's Global Care Initiative1 (the Advocacy Fellows' Program), CAP is working with NGO networks in Ghana, Sudan, and Zambia to provide advocacy skill-building, to facilitate participatory organizational assessments, and to deliver technical assistance.

The primary purpose of the Capable Partners Leader with Associate Cooperative Agreement is to strengthen local NGOs, local NGO networks, and intermediate support organizations (ISOs) across sectors, to make them more effective as service providers or as advocates. Leader recipient activities carry out a core worldwide program, in collaboration with Missions, to enhance local NGO and ISO capacity. In addition to the core leader program, Missions and bureaus may also issue associate awards to implement programs to carry out NGO capacity strengthen-

ing programs aimed at improving organizational capacity as well as strengthening partnerships among the NGO sector, government, and business.

**Global AIDS Program Technical Program Support Services; Strategic Technical Assistance for a Global Epidemic (2004–2009)**

**Countries: Angola, Botswana, Brazil, Cambodia, China, Cote d'Ivoire, Democratic Republic of Congo, Ethiopia, Guyana, Haiti, India, Kenya, Malawi, Mozambique, Namibia, Nigeria, Rwanda, Senegal, South Africa, Tanzania, Thailand, Uganda, Vietnam, Zambia, and Zimbabwe Funding: The Centers for Disease Control and Prevention**

AED is providing technical, program, and support services for the Centers for Disease Control and Prevention's (CDC's) global efforts related to HIV/AIDS prevention, support, and mitigation. The contract allows a select pool of awardees to bid on individual tasks

as issued by the CDC and Global AIDS Program Technical Program Support Services (GAP) and serves as one of the primary mechanisms by which the CDC will implement the President's Emergency Plan for AIDS Relief (PEPFAR). The contract mechanism, entitled Strategic Technical Assistance in a Global Epidemic (STAGE), is managed within the AED Center on AIDS and Community Health (COACH) and provides such services as needs assessment, planning, evaluation, training, technical assistance, and formative research. Services will be competed through individual task requests and may be implemented within any of the 25 CDC/GAP countries.

## Enhancing Behavior Change Communication in Border and High Transit Sites of Botswana, Lesotho, Namibia and Swaziland-Southern African Development Community Regional HIV/AIDS/STI Project (2004–2006)

**Countries: Botswana, Lesotho, Namibia, South Africa, and Swaziland**
**Funding: Southern African Development Community; Department for International Development, UK (DFID)**

AED is working to strengthen the enabling environment in which women, men, and young people most vulnerable to HIV infection in Botswana, Lesotho, Namibia, and Swaziland (BLNS) can reduce their HIV-related risk behavior. The project's primary focus is on High Transmission Areas (HTAs), in particular, Cross Border and High Transit Sites (CBS and HTS). AED is responsible for initiating behavior change efforts to address youth-centered, gender-sensitive behavior change communication interven-

tions established or enhanced in the selected CBS/HTS. These behavior change strategies include capacity-building and monitoring and evaluation components. AED is also responsible for ensuring that competencies, systems, and equipment are increased within the BLNS national AIDS programs and selected CBS/HTS and for improving capability for advocacy and service delivery for people living with HIV/AIDS.

### HIV Prevention: Rapid Interventions (2004)

**Countries: Botswana, Cote d'Ivoire, Kenya, Rwanda, South Africa, and Tanzania**
**Funding: The Centers for Disease Control and Prevention; John Snow, Inc.; U.S. Department of Health and Human Services**
AED assisted John Snow, Inc. (JSI) in carrying out brief projects in Botswana, Cote d'Ivoire, Haiti, Kenya, Rwanda, South Africa, and Tanzania to promote injection safety over a ten-month period.

These projects, which entailed strong components of behavior change, advocacy, and communication, were designed to ensure that policies and strategic plans of actions were developed to reduce demand for unnecessary injections and to help guarantee the safety of those injections that were needed.

### Preventing the Medical Transmission of HIV (2004)

**Countries: Ethiopia, Nigeria, and Uganda**
**Funding: USAID; John Snow, Inc.**
In conjunction with John Snow, Inc. (JSI), AED carried out brief projects in Uganda, Nigeria, and Ethiopia to promote injection safety over a ten-month period. These projects, which entailed strong components of behavior change, advocacy, and communication, were designed to ensure that policies and strategic plans of actions were developed to reduce demand for unnecessary injections and to help ensure the safety of those injections that were needed.

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### Health Communication Partnership (2003–2007)

**Countries: Ghana, Mozambique, Namibia, and Nigeria**
**Funding: USAID**

A continuation of the Population Communication Services Project, the Health Communication Partnership (HCP) contract links a team of five leading institutions, including AED, together to strengthen public health in the developing world through strategic communication programs. HCP works to create an environment that supports individuals, families, and communities to act positively for their own health and to advocate for, and have access to, quality services. This integrated communication approach to improving health is based on growing evidence that strategic health communication can influence behavior. It addresses the following global health issues: reproductive health and family planning, HIV/AIDS, child survival and child health, infectious diseases (including tuber-culosis and malaria), maternal health, nutrition, and governance for health. HCP activities and tools include: assessment and program design; state-of-the-art research and evaluation methods; tools and frameworks recognized as best practices; evidence-based programming; strengthening the capacity of developing country organizations; and integrated national health communication strategies.

Under the HCP umbrella, AED organizes and implements the Sports for Life (SFL) program, an international regional health effort currently operating in Nigeria and Zambia, which uses sports events to involve youth, especially rural youth and males, in reproductive health (RH) and HIV/AIDS prevention activities. Through the SFL program, AED strengthens HIV/AIDS community outreach activities using sports events; coordinates community outreach events by Sports for Life ambassadors (e.g., sports teams and sports celebrities in Africa) to

advocate and give motivational talks on reproductive health and HIV/AIDS issues; organizes community-level adolescent reproductive health campaigns; coordinates a wider use of sports events and role models used in RH/HIV/AIDS activities, with a particular regard for a gender-balanced approach.

### Ambassador Girls' Scholarship Program — East Africa (2003–2008)
**Funding: U.S. Department of the Interior**
Recognizing that girls are often not allowed to complete their education for various reasons and therefore not fully integrated into the economy or political systems, AED is ensuring that resources are dedicated to help expand the potential roles of girls and women in all aspects of the various societies in East Africa. We are focusing, in particular, on strengthening girls' access to educational opportunities within East Africa and providing support to girls so that they may continue with their education.

### The Educational Quality Improvement Program 2 (2003–2008)
**Countries: Ghana, Malawi, Senegal, Uganda, and Zambia**
**Funding: USAID**
The Education Quality Improvement Program 2 (EQUIP2) focuses on improving educational quality at the cross-community, district, and national levels through educational policy, systems, and management. The project, which operates in Africa, Latin America, and the Middle East, works to assist countries in developing, managing, and monitoring education sector policies and plans that support national macroeconomic plans; reinforcing national Education for All (EFA) planning committees, the decentralization of education, and the involvement of civil society in planning for education and out-of-school children and youth programming; supporting the design, development, and improvement of education data collection, storage, analysis, and application systems;

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and strengthening education administration, management, finance, and planning.

EQUIP2 program activities include: fostering policy dialogue on the role of education in national development and competitiveness; encouraging the participation of civil society and the private sector; addressing the challenges of education finance; balancing the role of the government, private sector, and communities to explore alternative approaches; supporting decentralization planning, local school system management, and school-based management; improving national data collection, analysis, and use through MIS capacity and national assessments and development of standardized survey and analysis methods; creating uniform data collection, storage, and analysis formats for all EQUIP awards; strengthening national EMIS management; analyzing, disseminating, and promoting the use of education data for policy formulation and

implementation; developing policies and systems addressing priority issues, including school-to-work, primary to secondary transition, AIDS and education, gender equity, school readiness, incentives for private provision of learning systems, and reaching the underserved; and planning of education systems in crisis and post-crisis situations, including refugee education, national emergency education plans, and interventions targeting children affected by HIV/AIDS.

## Managing African Conflict Indefinite Quantity Contract (2003–2008)
**Funding: USAID**

The Managing African Conflict (MAC) Indefinite Quantity Contract (IQC) is a tool for USAID to implement conflict programs in Africa. It can be used by USAID regional, bilateral, and non-presence country (NPC) Missions and other U.S. Government entities operating in Africa. The AED MAC Consortium is a core team of

both U.S.- based and African part-
ners that combine breadth and
depth of analytic capacity with
multisectoral, on-the-ground, long-
term experience on the continent.
In addition to the core partners,
AED is part of a network of global
analytic institutions comprised of
nine of the leading academic
research institutions in the world
focusing on conflict prevention,
mitigation, and response (CPMR).
AED has also identified a group of
local African NGOs that may be
called upon to partner in the imple-
mentation of task order activities.
The range of possible CPMR activi-
ties includes: conflict assessments;
CPMR training; small and large
grants; general institutional
strengthening; the study, testing,
and dissemination of effective
approaches; CPMR activities to
prevent or mitigate violence; meet-
ings and conferences; monitoring
and evaluation; and conflict advi-
sory services to USAID.

### Microsoft Research Study China and North Africa (2003)

**Countries: Morocco, Tunisia, and Algeria**
**Funding: Microsoft Corporation**
AED collaborated with Microsoft
on the China and North Africa
study that was a follow-up to our
first research analysis focusing on
public technology access centers.
Microsoft's Community Affairs dis-
tributed AED's first study, which
covered nonprofit public technol-
ogy access centers in approximately
15 varied countries, to all of their
subsidiaries worldwide. Following
the release of the first report, China
and North Africa, which were
included in the original study,
requested that Community Affairs
conduct a similar review for them.
In response, AED assembled con-
sultants with regional experience to
prepare a report on public technol-
ogy access centers.

### Global Development Alliance Public-Private Alliance in Education; (2002–2007)

**Countries: Ethiopia, Nigeria, South Africa, and Uganda**
**Funding: USAID**

AED brought together an alliance of private-sector companies, local and international foundations, NGOs, and universities to create the Public-Private Alliance in Education under USAID's business model the Global Development Alliance (GDA). This five-year project, which was created to improve education quality worldwide, comprises five main activities including an Internet portal designed by AED with Sun Microsystems that provides a single-stop place for educators in Africa and Latin America to share lesson plans and tips for instruction. AED is also creating tools to help policy-makers measure countries' progress in providing universal primary education and identify the best ways to support countries in different phases of reform. Additional alliance activities include the creation of an accelerated learning project in Nigeria to prepare out-of-school youth for work.

The development of a Global Learning Portal Network was a crucial element of the GDA. This free and easy-to-use Web site for education (http://www.glpnet.org) gives educators access to educational resources and services, as part of our efforts to improve education and support global Education for All initiatives. Through both the growing membership of on-line communities and the collection of education-focused resources, users can rapidly find the information they need as well as connect with other educators in their communities and around the world. Some of the tools available include: free Web-based e-mail accounts; education-topic e-mail discussion lists (listservs); Web-based chat for live discussions; and instant publishing features for collaborative projects and on-line journals.

### Public-Private Partnership to Promote Handwashing with Soap (2002–2004)

**Countries: Ghana and Senegal**
**Funding: World Bank**

In collaboration with partners, AED developed a global initiative aimed at promoting the use of handwashing with soap in developing countries. Handwashing plays an important part in the efforts to reach the Millennium Development Goals related both to: (1.) health improvements, and (2.) access and effective use of water supply and sanitation services, two of the five major goals agreed to by UN member countries at the World Summit on Sustainable Development.

AED provided technical assistance and partnership coordination with soap companies locally as well as globally. In 2001, partnerships were established in Ghana and Kerala, India. We supported implementation of the handwashing campaign in Ghana and monitored and assessed the various project campaigns. AED also conducted research on the cost-effectiveness of handwashing interventions and promoted global experience sharing and continued advocacy. Once the results were monitored and the lessons documented and disseminated, the project expanded into other countries, including Senegal.

### Strategic Technical Assistance for Results with Training Task Order: Africa Agriculture Capacity Development Training Initiative (2002–2004)

**Countries: Ethiopia, Mali, South Africa, and Zambia**
**Funding: USAID**

The Strategic Technical Assistance for Results with Training (START) Task Order: Africa Agriculture Capacity Development Training Initiative provided needs assessments and training plan development in Ethiopia, Mali, South Africa, and Zambia. AED completed assessments, institutional analyses, and training plans and implemented a limited number of

short-term, quick-impact training programs in agriculture training and capacity development in order to strengthen agriculture-related nongovernmental organizations in these selected countries.

### The dot-EDU / Learning Systems Program (2001–2006)
**Countries: Namibia, Democratic Republic of Congo, and Uganda**
**Funding: USAID**
The dot-EDU partners provide assessments, pilots, and technical assistance to increase the reach, quality, and gender equity of programs in basic education, teacher training, and higher education through information and communication technologies (ICTs). In addition, dot-EDU develops distance learning programs using multimedia and CD-ROM technology and provides new solutions for learning systems in countries suffering the effects of civil unrest, natural disasters, and HIV/AIDS.

### The dot-ORG / Access and Applications Program (2001–2006)
**Countries: Mali, Morocco, Rwanda, South Africa, and Tanzania**
**Funding: USAID**
The dot-ORG partners provide assessments and pilot activities which assist Missions in incorporating information and communication technologies (ICTs) in cross-sectoral programs; support in networking NGOs; backup in establishing networks for community Internet centers and other systems which bring ICT to the underserved, including off-grid and wireless solutions; support to networks of entrepreneurs, especially women; and assistance in developing an ICT work force, inclusive of women.

**Strategic Technical Assistance for Results with Training (2001–2006)**
**Countries: Benin, Eritrea, Ethiopia, Mali, South Africa, and Zambia**
**Funding: USAID**
The USAID-funded Strategic Technical Assistance for Results with Training (START) contract, succeeds the Global Training for Development (GTD) contract, which AED has implemented since 1996. Under GTD, AED assisted USAID in conducting needs assessments, developing training plans, and strengthening its monitoring and evaluation systems. AED designed and implemented short- and long-term training in areas such as economic growth, education, NGO development, private enterprise development, health and population, the environment, agriculture, democracy, and governance and public administration. START expands the portfolio of services provided under GTD to include, development of local institutional capacity, conflict prevention and mitigation, and distance learning.

Training programs are carried out in the United States, in country, and in third countries.

**HIV/AIDS Global Workplace Prevention and Education Program Strategically Managing AIDS Responses Together in the Workplace Program; (2001–2005)**
**Countries: Nigeria, and Zimbabwe**
**Funding: U.S. Department of Labor, International Labor Affairs Bureau**
As AED works to address diverse issues such as health, education, nutrition, environmental conservation, and work force preparation, we have taken leadership in developing tools to reduce the impact of HIV/AIDS around the world. With a cooperative agreement from the U.S. Department of Labor, AED is implementing the workplace prevention and education program in the Nigeria and Zimbabwe.

Strategically Managing AIDS Responses Together in the Workplace (SMARTWork) offers HIV/AIDS initiatives that are effec-

tive and practical. Too often, businesses have been asked to carry the burden of workplace interventions alone. SMARTWork, a program that involves business, labor, and government as equal partners, is engaged in the following activities:

- Helping large and small organizations conduct situational analyses;
- Training key staff from both management and labor to plan and implement coordinated responses to HIV/AIDS;
- Identifying specific policies and initiatives that best respond to the needs of a particular work environment;
- Using case studies so that learning is experience-based; and
- Teaching industry standards and documents progress.

**Energy and Environment Training Project Task Order: Public Understanding and Participation (2001–2002)**
**Countries: Nigeria, South Africa, and Zambia**
**Funding: USAID**

The Energy and Environment Training Project (EETP) Public Understanding and Participation Task Order introduced a results-oriented systematic approach to key players within USAID and its different offices, e.g. energy, environment, health, and social order, that can be applied in forecasting, development planning, and program management. AED demonstrated the necessary tools and methodologies needed to reach a variety of communities in order to inform, educate, and advocate for change in energy sectors. We worked collaboratively with USAID to introduce a systematic five-step approach to social marketing and demonstrated how it creates acceptance of the bureau's needs among diverse internal and

external audiences and stimulates the behavior change process.

This social marketing process was used to address a variety of needs in products and actions, from increasing energy rates to changing public opinion or effecting policy. AED also assisted USAID in streamlining its existing practices by including all of the social marketing steps to guarantee reaching strategic objectives and intermediate results. AED helped USAID build its institutional capabilities to create public awareness on a wide array of energy issues as well as to adopt guidelines to best manage its diverse resources.

**REDUCE and ALIVE Africa (2000–Continuing)**
**Countries: Ethiopia, Ghana, Mali, Mauritania, Mozambique, Nigeria, Senegal, and Uganda**
**Funding: Ministries of Health; USAID, Africa Regional Office of World Health Organization; World Bank; and Save the Children's Saving Newborn Lives Initiative**
AED pioneered the REDUCE and ALIVE advocacy tools for safe motherhood
and newborn survival. REDUCE is an advocacy process used to stimulate policy dialogue and strategic planning on maternal health and safe motherhood. Even though more than 515,000 women die each year from complications of pregnancy or childbirth, women's health does not figure prominently in health budgets. The goal of REDUCE therefore, is to mobilize decision-makers to take appropriate action to reduce maternal mortality and morbidity.

The REDUCE process uses interactive computer models with international and country-specific data to estimate the impact of poor maternal health and care on: maternal and infant deaths; short- and long-term illnesses, injuries, and disabilities; and productivity. REDUCE's models also examine health and obstetric factors contributing to maternal mortality, morbidity, and disabilities. Using the best empirical data available REDUCE projects the survival, health, and economic impact of maintaining the status quo versus implementing known interventions that result in reductions in mortality and morbidity. Data provide sound arguments for giving higher priority to maternal health in policy formation, strategy development, and resource allocation.

ALIVE is an advocacy model for saving newborn lives. This tool builds on REDUCE and adds models specific to newborns in order to create a policy environment supportive

of newborn health by stimulating policy dialogue and strategic planning on this neglected health crisis. Advocates for maternal and neonatal health and safe motherhood from government agencies, civil society, and the media can use REDUCE and ALIVE to raise awareness of the consequences of inadequate maternal and neonatal care.

### Advance Africa (2000–2005)
**Countries: Nigeria, Rwanda, Senegal, and Zimbabwe**
**Funding: USAID**
AED is a member of Advance Africa, a USAID centrally-funded consortium charged with rapidly increasing the availability and use of sustainable, quality family planning (FP) and reproductive health (RH) services in sub-Saharan Africa. The Advance Africa team helps Missions map national programs to determine critical gaps and identify best practices and state-of-the-art interventions to fill these gaps. Team members help program managers formulate strate-

gies to apply best practices to accelerate program expansions and enhance service delivery capacity. Further, the consortium works to build partnerships among public and private as well as health and nonhealth organizations and to strengthen the information system capacity to collect, analyze, and report results through working with partner organizations.

Advance Africa also implements family planning initiatives within the broad context of Africa's HIV/AIDS pandemic. The project team works with USAID to find the most effective strategies for integrating FP/RH and HIV/AIDS interventions and assists with design, implementation, and support strategies for new initiatives such as dual protection, post-abortion care, adolescent RH care, and community-based approaches to FP/RH.

**United Nations Population Fund Information, Education, and Communication/Advocacy Training Project (2000–2003)**
**Countries: Cameroon, Côte D'Ivoire, Mali, Senegal, and Togo**
**Funding: United Nations Population Fund**

This United Nations Population Fund project was designed to build the capacity within African institutions to provide training in advocacy and information, education, and communication (IEC) in West and Central Africa in the areas of reproductive health and HIV/AIDS prevention. The Côte d'Ivoire-based Regional Training Center (RTC) established partnerships with five African training institutions with the goal of institutionalizing a sustainable, non-subsidized, regional training program. Employing three full-time trainers, the Center offered courses at the regional level covering a wide range of topics relating to population-related IEC and advocacy, including materials and message

development, counseling and inter-personal communication, training of trainers in advocacy, IEC planning and management, research and evaluation, strategy development, and Behavior Change Communication and social marketing.

The RTC also offered national-level courses on demand and expanded its activities into Anglophone Africa. To ensure sustainability of the training program, tuition costs were fully covered by the participants and/or their sponsoring organization. Approximately 100 participants from local and international NGOs and UNFPA field offices took part in the six regional- and national-level courses offered in 2000.

## NetMark: A Regional Partnership for Sustainable Malaria Prevention — NetMark Plus (1999–2007)

**Countries:Ghana, Mail, Nigeria, Senegal, Uganda, and Zambia**
Funding: USAID

NetMark is an innovative approach which seeks to prevent malaria in Africa by promoting insecticide-treated materials (ITMs) through collaboration with the commercial sector and by helping open and build a sustainable commercial market for ITMs in sub-Saharan Africa. This partnership with the commercial sector distinguishes NetMark from traditional social marketers of ITMs, who rely largely on donor subsidization for their operations and product procurement. NetMark initially focused on four countries in Africa and estimated that, at the end of five years, the project's inputs would result in a commercial capacity to annually procure as many as 3 million nets and 7 million single-dose treatments. NetMark represents a sustainable, cost-effective, high impact and large-scale approach to

development that combines the complementary resources of a donor and private business in a mutually beneficial way. The private sector gains entry into difficult markets, expands its product line, increases brand equity, and contributes to the well-being of their consumers while improving business. Using USAID funds, NetMark assesses the potential market for ITMs and then works with its commercial partners, Ministries of Health, and local organizations to build a culture of ITM use through strategic investments in regional and national demand creation and public education.

In September 2002, USAID amended the cooperative agreement with AED to allow for an expansion of NetMark into new countries and broadening its mandate beyond the program's original focus on commercial expansion. Now referred to as NetMark Plus, the program is designed to create better links between the three components of Roll Back Malaria's

Strategic Framework for Scaling Up Insecticide-Treated Netting (ITN) Programmes in Africa: commercial expansion, subsidized time-limited interventions (market priming), and sustained equity provision interventions (targeted subsidies). NetMark Plus plays an active role in the movement to eliminate taxes and tariffs on ITNs and supports country efforts to access the resources of the Global Fund. NetMark Plus continues to work with its commercial and communication partners to develop and implement consumer-focused marketing campaigns based on behavioral and traditional market research.

**Strategies for Advancing Girls' Education — Women in Development Technical Assistance Project Task Order- Girls' and Women's Education Initiative (1999–2002)**
**Countries: Democratic Republic of Congo, Ghana, Guinea, and Mali**
**Funding: USAID**

Strategies for Advancing Girls' Education (SAGE) strengthened local ownership of girls' education by engaging traditional and nontraditional actors, such as the public and private sectors, central and decentralized government units, religious and business leaders, the media, and NGOs, in implementing local solutions with local resources in support of girls' education. SAGE conducted research on educational quality and best practices for girls' education and organized workshops that brought together policy-makers, practitioners, advocates and scholars to share knowledge and disseminate strategies for advancing girls' education.

In all cases, SAGE exceeded its original targets for the intermediary results concerned. More than 200 community-based actions to promote girls' education were recorded during the fourth year of SAGE, far surpassing the target of five established at the onset of the project. The Guinea program is the most important example of a design which focused on capitalizing and building upon existing institutions. SAGE Guinea provided invaluable technical assistance to the National Alliance, National Working Group, Media Task Force, and the Local Alliances. Emphasis in this case was on improving technical and organizational capacities and rendering them more operational. In addition, Guinea facilitated the formation of a national fund for girls' education (FONSEF). AED also held a National Forum on Girls' Education, which brought together more than 200 community and national-level stakeholders from both the public and private sectors, to produce a national strategy.

In Mali, SAGE designed a life skills curricula for future integration into the national educational system as part of ongoing curricular reform being undertaken by the Ministry of Education. SAGE Mali developed training materials for female leadership training of parent association (APE) members and community action planning in support of gender equity. In each case, SAGE undertook training of trainers of their partner PVOs/NGOs, in order to render community level training activities more responsive to persistent social constraints to girls' education. As a result, 51 communities received leadership training, six from SAGE directly, and the remainder from the PVOs/NGO trainers.

In Ghana, SAGE partnered with the Girls' Education Unit (GEU) of the Ghana Education Service (GES). The purpose of this partnership was to strengthen the capacity of the GEU in planning, monitoring, and evaluation. In addition, SAGE facilitated a workshop for the development of a handbook for Regional Girls' Education Officers (RGEOs) and District Girls' Education Officers (DGEOs). SAGE also worked in 35 communities to enhance the capacity of School Management Committees (SMCs) to develop community action plans for girls' education. SAGE facilitated the formation of girls' education subcommittees in order to increase the number of active female members on the SMC, as well as girls' clubs.

In Congo, SAGE was challenged by the political and economic instability in the country, which had made parents shoulder more and more of the financial burden of educating their children. In spite of this, SAGE trained one hundred teachers in six pilot schools in girlfriendly classroom practices; provided gender training and action planning workshops in their community sensitization program; and developed a successful media campaign for girls' education. SAGE

Congo was also successful in developing partnerships with the religious sector. Ten large religious communities undertook consciousness raising events at school, in the community and at church, raised funds, and provided subsidies to girls from poor families to ensure that they remain in school.

### Food and Nutrition Technical Assistance Project (1998–2008)

**Countries: Ethiopia, Ghana, Madagascar, Mozambique, and Uganda**
**Funding: USAID**

The Food and Nutrition Technical Assistance (FANTA) Project seeks to maximize the impact of nutrition and food security-related programs implemented by USAID and its partners in developing countries. FANTA provides technical assistance in nutrition and food security-related program design, implementation, monitoring, and evaluation as well as nutrition and food security policy and strategy development. This program has an unprecedented opportunity to influence the quality and nutrition impact of food security and Title II food aid programming, both through its role in providing direct assistance to private voluntary organizations (PVOs), Missions, host governments, and the USAID Bureau for Humanitarian Response (BHR) and through its role in facilitating technical exchange and cooperation with other Center for Population, Health and Nutrition of the Global Bureau (G/PHN) activities.

### W.K. Kellogg Foundation Southern Africa Leadership Regional Network (1998–2006)

**Countries: Botswana, Lesotho, Mozambique, South Africa, Swaziland, and Zimbabwe**
**Funding: W.K. Kellogg Foundation**

AED is managing a comprehensive project aimed at supporting leadership development in the Southern Africa region. The Leadership Regional Network (LeaRN) initiative focuses on issues of equitable access to land and secure tenure

rights; innovative approaches for rural economic enterprise; community and district-level health care delivery systems; and development of democratic institutions based on African values. Through activities in these areas, LeaRN supports W.K. Kellogg Foundation's overarching Africa Program goal of alleviating poverty and promoting development in rural communities.

Administered by AED, the LeaRN Study Grants and Awards Programs consist of three program areas: study grants, dissertation awards, and special awards. The LeaRN Study Grants Program supports master's and doctoral degree studies in Southern Africa and the United States undertaken by emerging leaders from the Southern Africa region, while the LeaRN Dissertation Awards Program supports thesis research in Southern Africa by graduate students studying in the region. The LeaRN Dissertation Awards Program recognizes research which focuses generally on rural

communities and which clearly contributes to the body of knowledge relating to organizational and institutional transformation, strengthening of community capacity, and/or leadership development at the community level. The LeaRN Special Awards consist of two types of awards: the Desmond Tutu Footprints of Legends Leadership Award recognizes eminence in community, organizational, or political leadership, and the Five Awards for African Leadership in the 21st Century honor leaders in the fields of youth leadership, innovative practices for the elimination of poverty, scholarship on renowned African leaders, women's leadership, and empowerment of disabled people.

From 2000 to 2002, LeaRN identified and AED administered the activities and awards of 34 study grants' fellows, 10 dissertation awardees, and 3 Desmond Tutu awardees, representing all six countries in the region. AED plays a crit-

ical role in linking the study grants and awards to an African context through thesis projects associated with their home communities and workshops addressing leadership issues in the Southern Africa region.

### Micronutrient Support Activity (1998–2005)

**Countries: Democratic Republic of Congo, Ethiopia, Ghana, Madagascar, South Africa, Uganda, and Zambia**
**Funding: International Science and Technology Institute; USAID**

AED provides technical assistance to efforts that encourage the consumption of vitamin A and other micronutrients in Africa, including the integration of micronutrient supplementation into Child Survival programs, policy dialogue and advocacy, public- and private-sector cooperation in food fortification, expansion of private sector markets, community-based behavior/dietary change, donor coordination, and monitoring and evaluation of impact. We test innovative tech-

nologies to increase vitamin A and iron consumption among high-risk groups, particularly women and children. AED has specific technical and implementation responsibility for promoting public/private cooperation for the interventions and social marketing and behavior change components of the project. AED also provides technical assistance for the project's policy dialogue and advocacy activities.

### Behavior Change Innovation, State-of-the-Art Activity (1998–2005)

**Countries: Ethiopia, Ghana, Guinea, Kenya, Madagascar, Malawi, Mozambique, South Africa, Tanzania, Uganda, and Zambia**
**Funding: USAID**

Through the Behavior Change Innovation, State-of-the-Art Activity (CHANGE Project), AED develops and tests new and improved behavior change tools to yield measurable changes in key institutional, community, family,

and individual behaviors within the context of the Child Survival, Maternal Health, and Nutrition Results Packages. The project provides USAID with global leadership in understanding the critical role of effective behavior change strategies in reaching health and nutrition development goals and in developing effective tools to achieve these goals. The CHANGE Project works with local governments, USAID cooperating agencies, private voluntary agencies, and NGOs to integrate behavior change strategies into new and existing child survival, maternal health, and nutrition activities. Collaboration with these various groups helped the field confront difficult issues concerning sustainability, community participation, reaching the hard-to-reach, and reducing long-term costs. Project activities include: technical support to test innovative approaches to affect the perceptual and structural determinants of behavior change; program-driven research to develop

effective interventions and strengthen evaluation of impact and effectiveness; policy analysis and advocacy to assist partners at the international, national, and project levels; interventions with private voluntary organizations (PVOs) to increase community-level activities and test innovative strategies and technologies; and increase private sector partnerships and sustainability of behavior change activities.

### Energy and Environment Training Project (1998–2003)
**Countries: Senegal and South Africa**
**Funding: USAID**
For the Energy Environment Training Project (EETP), AED provided results-oriented technical training essential to promoting USAID's energy and environment programs and to reducing of long-term threats to the global environment. Program areas of emphasis included energy sector policy and planning, renewable energy, energy efficiency,

energy and environmental infrastructure and technology transfer, energy privatization and restructuring, and cleaner, more efficient generation, transmission, distribution, and use of energy. EETP offered USAID missions an easy-to-use mechanism to access specialized technical training and related services in fields that supported the mission's energy and environment strategic objectives. Specific services of EETP included: assisting the mission in strategic and program planning for energy and environment-related training; identifying off-the-shelf training courses to meet Mission needs, screen candidates, provide orientation, and administer all aspects of participants involvement; designing and conducting tailored training anywhere in the world in response to specific technical needs; and organizing and conducting industry- and region-specific management and technology tours, on-the-job apprenticeships, and U.S. cultural orientation.

## LINKAGES: Breastfeeding and Related Complementary Feeding and Maternal Nutrition Program (1996–2006)

**Countries: Benin, Burkina Faso, Ethiopia, Ghana, Kenya, Madagascar, Malawi, Mali, South Africa, Tanzania, Uganda, Zambia, and Zimbabwe**
**Funding: USAID**

LINKAGES is a USAID-funded global program providing technical assistance to organizations promoting breastfeeding. LINKAGES supports comprehensive country activities to improve exclusive breastfeeding rates and related complementary feeding and maternal dietary practices and to extend the offering of the lactational amenorrhea method (LAM) as an effective, modern method of contraception. AED provides technical leadership and program direction with LINKAGES' partners. Tools used by LINKAGES and its partners include a results-oriented behavior change methodology, training modules for health care

providers and community workers, mother-to-mother support groups, social marketing strategies, policy analysis and advocacy materials, and monitoring and evaluation instruments. Four applied research studies were also designed to identify program strategies that are most effective in bringing about positive behavior change and improved health of infants and women.

Stronger, healthier infants are the result of the efforts of LINKAGES and its partners in more than a dozen countries. As a result of AED's involvement, the timely initiation of breastfeeding rate increased by 100 percent in Ghana and Madagascar (from 32 percent to 62 percent and from 34 percent to 69 percent). The exclusive breastfeeding rate increased by 80 percent (from 46 percent to 83 percent) in Madagascar and by 15 percent (from 68 percent to 78 percent) in Ghana. Harmful mixed feeding of infants less than six months old declined by 40 percent

in Zambia, from 42 percent to 25 percent. This statistic represents a critical change in communities trying to reduce the transmission of HIV between mother and infant while still retaining the life-saving benefits of exclusive breastfeeding. The LAM rate also increased twentyfold in Madagascar (from 2 percent to 47 percent).

**Global Communications and Learning Systems (1996–2003)**
**Countries: Benin, Ghana, Morocco, Namibia, and Uganda**
**Funding: USAID**
The purpose of the Global Communications and Learning Systems (LEARNLINK) Project was to strengthen learning systems essential to sustainable development using culturally appropriate communication and educational technologies. AED gathered a team of professionals with experience in developing countries and in IT issues, to accompany the education, thinking, and design processes required to successfully incorporate information and

communications technology (ICT) into new or continuing projects. The LearnLink team educated Mission personnel regarding available technologies; counseled on appropriate technology that would respond to the specific requirements of a particular situation; and offered best scenarios for implementation, monitoring, and evaluation of results. LearnLink was designed to improve learning worldwide whether that learning was taking place in the classroom, the courtroom, the home, on the job, or in the street. Through the LearnLink Project, AED integrated digital, distance, and interpersonal communication to enable more people to talk to each other, organize, become exposed to new ideas, practice new skills, and interact with a new generation of machines, people, and systems.

Specifically, the project fostered computer instruction in schools and learning centers, helped develop radio courses for distance learning and teacher training, explored the feasibility of interactive multimedia kiosks-one-stop communication shops-in rural villages, and used Internet connectivity to monitor and protect human rights. AED also supported assessments and Internet end user applications in conjunction with the Africa Global Information Infrastructure Gateway Project (Leland Initiative) of the Africa Bureau. AED's National Demonstration Laboratory for Interactive Information Technologies was the major mechanism for collecting, assessing, and disseminating information about LearnLink interventions around the world.

### Global Training for Development (1996–2002)
**Countries: Benin, Ethiopia, Guinea, Liberia, Morocco, Senegal, Uganda, and Zambia**
**Funding: USAID**
Through in-country training and technical assistance, AED assisted USAID in ensuring that training was applied in the workplace while also emphasizing the importance of

women's participation in the development process and the use of distance learning technologies and interactive communication techniques for development and training. The Global Training for Development Project was intended to offer technical services to USAID Missions and USAID/Washington Bureaus, including the provision of an integrated package of participant trainee support services, U.S. or third country placement, program monitoring, administrative support, and technical assistance. Training supported all Mission strategic objectives, with activities in economic restructuring, democracy, social sector reform, small and medium-sized enterprise development, bank and tax reform, accounting, rule of law, anti-corruption, social sector reform, youth development, NGO strengthening, conflict resolution, energy reform, health care reform, and election reform. Short-term training under the task order was for groups of eight to 14 and included observational

visits, job shadowing, lectures and participatory activities, while the small number of long-term programs was limited to nondegree and master's degree programs.

### Sustainable Approaches for Nutrition in Africa Project (1995–2003)

**Countries: Benin, Burkina Faso, Cote d'Ivoire, Ethiopia, the Gambia, Ghana, Guinea, Kenya, Malawi, Mali, Senegal, South Africa, Tanzania, Togo, Uganda, Zambia, and Zimbabwe**
**Funding: USAID**

The Sustainable Approaches for Nutrition in Africa (SANA) Project was implemented as an initiative to increase the capacity of African institutions and networks in West, East, and Southern Africa to conduct nutrition advocacy, disseminate lessons learned from successful programs, and use participatory learning methods to train nutrition and health program managers in diverse skills for nutrition design, management, and

monitoring and evaluation. The SANA Project was designed to:

- Provide a full-time field adviser based in Eastern Africa to monitor project-supported activities and to assist in organizing activities and subagreements with African partner institutions.
- Support the East, Central, and Southern Africa Health Community (ECSAHC) Secretariat, headquartered in Arusha, Tanzania, through a subagreement to hire a nutrition training coordinator and provide funds and technical assistance to develop and maintain a nutrition advisory group and expert subcommittees in the region.
- Enter into sub-agreements with nutrition centers of excellence in the region, such as the University of Zimbabwe, Uganda's Makerere University, and the University of Nairobi, to develop and implement training courses and modules, as well as operations research workshops.

- Supervise, monitor, and report on the progress of the project and its success in implementing Bellagio ideals.

Positive results of this project included: (1.) development, testing, and sustained use of new approaches for training in monitoring and evaluation, consultative research for program design, nutrition advocacy, and use of participatory methods for program planning by University partners; (2.) training of approximately 200 Africans in these skill areas; (3.) creation of a regional network of nutrition focal points in West Africa to share lessons learned and better practices; and (4.) production and dissemination of tools for nutrition advocacy.

### Family Health and AIDS Prevention Project in West and Central Africa (1994–2000)

**Countries: Burkina Faso, Cameroon, Cote d'Ivoire, and Togo**
**Funding: USAID**

AED worked to improve access to reproductive health services and products and strengthened service integration and quality improvement in order to maximize their use. The project targeted support to the reproductive health needs of women, adolescents, and migrants. Our work was characterized by a strong focus on strengthening private-sector programs and developing links between the private and public sectors. To accomplish our objectives and foster long-term sustainability, AED promoted regional institutional capacity and resources, strengthened collaboration with USAID Collaborating Agencies, and leveraged financial support from other donor agencies. We also provided technical assistance in service delivery, training, operations research, and social marketing.

### Environmental Education and Communication Projects GreenCOM I (1993–2000)

**Countries: Gambia, Guinea, Madagascar, Malawi, Mali, Morocco, Namibia, Niger, South Africa, Tanzania, and Uganda**
**Funding: USAID**

Environmental problems increasingly threaten global life support systems - the atmosphere, water and food supplies, and a vast store of other biological resources. Both industrialized and developing countries contribute to these threats, and growing awareness exists of the need for common stewardship of the planet's natural resources.

The GreenCOM project was launched by USAID in 1993 to use education and communication to help people in developing countries solve environmental problems. As the agency's vision expanded to address the critical links between protecting the environment and natural resources and improving livelihoods, increasing agricultural

production, and building democracy with vibrant civil societies, Green-COM's scope of work became more comprehensive and integrated. AED and the GreenCOM team provided expertise in environmental education and communication (EE&C) to a broad range of environmental programs ranging from improving irrigation and watershed management to ameliorating industrial pollution . The project focused on promoting public awareness and support for new environmental policies and practices.

The evolution of the GreenCOM project over 12 years of work in more than 30 countries led to an approach called Systemwide Collaborative Action for Livelihoods and the Environment (SCALE). SCALE provided a framework for increasing the impact of development projects by:

- Engaging significant segments of a country's (or region's) population in actions that generate simultaneous top-down/bottom-up change;

- Designing programs that fit the particular social, economic, and political context in which an environmental problem occurs; and

- Combining multiple social change methodologies–advocacy, social marketing, education, mass communication, social mobilization, and conflict resolution - in unique ways.

In North Africa, GreenCOM collaborated with USAID and a wide variety of partners ranging from host country governments to farmers and schoolchildren. In Egypt, for instance, project staff built a diverse team to address conservation of the Red Sea. Each partner plays an important role in conserving fragile coastal and terrestrial ecosystems and, acting in concert, they contribute to systemwide change in how Red Sea resources are used.

## Basic Support for Institutionalizing Child Survival (BASICS I and II) Project (1993–2004)

**Countries: Benin, Cameroon, Democratic Republic of Congo, Eritrea, Ethiopia, Ghana, Guinea, Kenya, Madagascar, Mali, Morocco, Niger, Nigeria, Senegal, Uganda, and Zambia**
**Funding: USAID**

BASICS I, USAID's premier child survival project was implemented by the Partnership for Child Survival, a joint venture of AED, John Snow, Inc., and Management Sciences for Health. In conjunction with our partners, AED worked to achieve the greatest possible country-level impact on major threats to child health and provide technical leadership in policies and programming in order to strengthen child health interventions. BASICS II focused on four areas that have proved effective in reducing mortality: effective and sustainable child immunization, perinatal and neonatal health, nutrition and growth promotion, and integrated

approaches to child health. Working worldwide, BASICS endeavored to increase coverage of, access to, and use of immunization (EPI), diarrheal disease control, malaria, acute respiratory infection (ARI), and related child survival services. A hallmark of the BASICS approach to the design and implementation of all activities was the integration of four core technical areas: (1.) disease-related technical support; (2.) service delivery support; (3.) communication and marketing; and (4.) planning and management. The BASICS team provides long- and short-term technical assistance, human resource development, and information dissemination as well as operations research, surveys, pilot projects, and small grants in order to continue and sustain reductions in morbidity and mortality among children.

### Profiles I and II — Strengthening Support for Nutrition (1993–1996)
**Countries: Senegal and Uganda**
**Funding: USAID**

AED collaborated with the United Nations Children's Fund (UNICEF) to develop a PROFILES computer model as well as a series of presentations to heighten awareness among decision-makers concerning the importance of nutrition to a country's economic development. PROFILES is a powerful micro-computer model designed by AED to demonstrate the effects of protein energy malnutrition, micronutrient deficiencies, and feeding behaviors on mortality, fertility, health costs, worker productivity, school performance, and mental development. Country data on population, nutritional status, and economic conditions are fed into the model and used to calculate trends in various consequences. Parameters such as the costs of clinic visits and the prevalence of breastfeeding in the first six months of life can be modified online to permit policy-makers to see immediately the effects of different assumptions. Major PROFILES applications were performed for Uganda (for the World Bank) and Senegal (for USAID).

### Support for Analysis and Research in Africa Project (1992–2005)
**Countries: Benin, Burkina Faso, Cote D'Ivoire, Ethiopia, the Gambia, Ghana, Guinea, Kenya, Malawi, Mali, Senegal, South Africa, Tanzania, Togo, Uganda, Zambia, and Zimbabwe**
**Funding: USAID**

The AED-led Support for Analysis and Research in Africa (SARA) Project team seeks to increase the use of research, analysis, and information to support improved Health and Human Resources (HHR) policy formulation, resource allocation, strategies, and programs in Africa. The project focuses on ensuring the use of quality information by Africans, USAID Missions, and other donors supporting HHR development in Africa. The overall

goal of the SARA Project is to improve health and nutritional status, increase literacy and educational achievement, and decrease the fertility rate in Africa in support of developing the potential for long-term increases in human productivity. We also work to increase the efficiency, effectiveness, equity, and sustainability of health, nutrition, education, and family planning systems in Africa. SARA's technical emphasis includes: basic education, child survival, health care policy, population and reproductive health, HIV/AIDS and other infectious diseases, crisis prevention, transition, and mitigation.

The SARA Project comprises two major components. The Research and Analysis component assesses the impact of sectoral policies, strategies and programs in Africa; increases countries' and donors' capacity to respond to new problems and emerging issues based on quality information and analysis of solutions; and improves delivery of

HHR services by assessing and recommending cost-effective strategies and interventions. The second component involves dissemination activities that ensure and promote broad-based utilization of information for policy formulation, resource allocation decisions, strategy development, and programming in Africa. The project funds workshops, publications, technical assistance, and other activities to disseminate information to African policy-makers and program managers, as well as to USAID and other international donors. SARA also aims to improve the link between policy-makers and researchers in Africa, by promoting the use of research findings in policy and program development, and by identifying policy information needs for research attention.

In the education sector, SARA is working with the Education Research Network for West and Central Africa (ERNWACA), providing guidance with institutional

growth and technical activities. SARA is also collaborating with the Education Research Network for Eastern and Southern Africa (ERNESA) to assist in the synthesizing of gender-related research reports from eight regional countries and in supporting a series of advocacy meetings with ministry staffs to bring attention to the gender disparities in education in their countries. SARA has published a series of policy papers for the Africa Bureau relating to their sectoral priorities, along with numerous other publications, syntheses, and translations, and has provided these documents to a large mailing list of professionals working in and for African development.

## Advancing Basic Education and Literacy Projects (1989–1999)

**Countries: Botswana, Ethiopia, Ghana, Malawi, Mali, Namibia, South Africa, Swaziland, and Uganda**
**Funding: USAID**

Advancing Basic Education and Literacy Projects (ABEL) I and II were USAID's primary mechanisms for assisting host-country governments and USAID Missions in designing, implementing, and evaluating basic education programs. Focusing in particular on issues of gender, access, and equity, AED drew on the tools, methods, and research findings developed by USAID and other donors during the preceding three decades and adapted these materials to country-specific conditions as USAID undertook new projects. ABEL helped to improve basic education systems through: (1.) dissemination of proven tools, methods, and research findings; (2.) technical and managerial support for USAID missions initiating basic education

projects, emphasizing core operations and management issues; (3.) designing and implementing pilot projects and research; and (4.) providing short-term training to build capacity within education ministries, schools, and classrooms.

### Nutrition Communication Project (1987–1995)

**Country: Burkina Faso, Cameroon, the Gambia, Ghana, Ivory Coast, Kenya, Mali, Mauritania, Morocco, Niger, Sahel, Senegal, Sudan, Swaziland, Togo, and Zaire**
**Funding: USAID**

The Nutrition Communication Project (NCP) was designed to improve host country capacity to design, implement, and evaluate public education programs and messages aimed at improving nutrition behavior, particularly as it related to maternal and child health. AED supported growth monitoring and promotion, as well as vitamin A and iron deficiency interventions, through this project. We also promoted maternal nutrition, breast-feeding, and sound child-feeding practices, particularly during weaning or bouts of diarrheal disease. These activities were able to stand alone or be linked to PL 480 Title II feeding programs, primary health care delivery, or other child survival programs, such as immunization or oral rehydration therapy.

### AIDS Technical Support Project: Public Health Communication Component (1987–1994)

**Countries: Burundi, Cameroon, Ghana, Ivory Coast, Malawi, Morocco, Rwanda, South Africa, Swaziland, Tanzania, Tunisia, Uganda, and Zambia**
**Funding: USAID**

AED served as the prime contractor for this USAID-sponsored AIDS Technical Support Project: Public Health Communication Component (AIDSCOM) program. The research and development effort was aimed at assisting 25 countries in improving the quality of their AIDS prevention programs through education and communication in order to

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reach populations at high risk for HIV infection. The Public Health Communication component built upon AED's successful experience with social marketing and public health communication in creating solutions uniquely suited to the needs of AIDS education and prevention around the world. AIDSCOM comprised three major components. The communication support portion helped answer questions about how to best apply communication to the control of AIDS. The second element, short-term technical assistance, provided specialists AIDS communication planning, behavioral and market research, counseling and support services, media planning, medical and mental health provider training, condom marketing, and evaluation and dissemination efforts. The third segment ensured that results, lessons, and materials developed under the project were made available worldwide.

## Communication for Child Survival (1985–1995)

**Countries: The Gambia, Lesotho, Malawi, Mali, Morocco, Mozambique, Nigeria, Senegal, Sudan, Swaziland, Tanzania, Tunisia, Uganda, and Zaire**
**Funding: USAID**

From 1978 to 1985, USAID conducted the Mass Media and Health Practices Project (MMHP) in Honduras, Ecuador, Peru, the Gambia, and Swaziland. MMHP, a research and development project, which focused on teaching oral rehydration therapy (ORT), demonstrated definitively that an intensive health communication program could produce dramatic positive changes in the health behavior of large population groups. The HEALTHCOM I Project (1985–1990), managed by AED, expanded these efforts into 15 countries and promoted additional technologies, such as immunizations, malaria control, growth monitoring, and breastfeeding. HEALTHCOM I was a demonstra-

tion and dissemination phase, providing donors, NGOs, and private-sector groups with additional evidence that communication is effective in bringing about changes in health practices.

HEALTHCOM II (1989-1995) continued to pursue the goal of bringing about key changes in health practices at the community, family, and individual levels by applying innovative, systematic, communication knowledge and technology. These projects were the first attempts to develop an effective public health communications strategy in support of national diarrheal disease control programs. They addressed two of the most serious problems facing the diarrheal disease control community: how to increase consumer-demand for diarrhea control-related products such as oral rehydration salts and how to ensure that those products and the related behaviors which make them effective are learned and practiced by those most in need. In Nigeria, for example, AED con-

ducted two operation-research studies aimed at improving the quality of interactions between health workers and parents attending clinics, especially during health education sessions. In the first study, new interactive educational materials (particularly an immunization flipchart) and training in participatory teaching techniques for the health workers were introduced. The second study aimed to alter consequences women experienced when seeking vaccinations for their children. By upgrading clinic processing of patients, clarity of communication on immunization facts, the quality of health worker/care-taker interaction and fathers' knowledge of immunization, which played a significant role in determining whether or not his wife went to the clinic, AED made mothers' experience with the immunization program more rewarding. Vaccination coverage rates also increased.

### Radio Learning Project (1985–1990)

**Countries: Kenya and Lesotho**
**Funding: USAID**

The object of the Radio Learning Project was to apply interactive radio instruction (IRI) methodology to improve the quality and efficiency of, as well as the access to, primary school instruction and to assist in strengthening host country institutions so that they would be able to continue developing radio-assisted educational programs after external funding had ceased. AED provided assistance to the appropriate developing country agencies (principally Ministries of Education) to ensure that improvements to the teaching of basic primary school skills in developing nations through the implementation of interactive radio were carried out.

### Social Marketing for Change (1984–1993)

**Countries: Cote d'Ivoire, Ghana, Kenya, Liberia, Malawi, Mali, Mauritania, Rwanda, and Zimbabwe**
**Funding: USAID**

SOMARC was created to work closely with host country governments, USAID Missions, and private-sector agencies to use commercial marketing techniques to increase the availability of contraceptive products, information, and services to low-income consumers. The project also funded and designed contraceptive social marketing (CSM) projects intended to reach couples not served by existing public or private delivery systems. The Academy had responsibility for the development and administration of contraceptive retail sales efforts in sub-Saharan Africa. The full-time Academy representative to the project was the manager for the African programs. Since 1985, activities were conducted in nine African countries

under the Academy's direction. National contraceptive retail sales programs sponsored by SOMARC were implemented in Ghana, Liberia, and Zimbabwe. Feasibility studies, prior to implementation of a national program, were conducted in Mali, Cote d'Ivoire, Malawi, Zimbabwe, Liberia, and Rwanda, while other contraceptive social marketing activities, including technical assistance, took place in Kenya, Liberia, and Mauritania.

### Technologies for Primary Health Care (1983–1993)

**Countries: Cameroon, Chad, Djibouti, the Gambia, Guinea, Kenya, Mali, Sahel, Tunisia, and Zambia**
**Funding: USAID**
Technologies for Primary Health Care (PRITECH) was a consortium of experienced, internationally known organizations led by Management Sciences for Health, whose mission it was to promote effective diarrhea treatment and sound prevention measures wherever children

suffered from diarrhea. At the time the PRITECH project began, five million children were dying of diarrhea every year with most of these deaths being preventable. Because oral rehydration therapy (ORT) was proven to be more effective in preventing deaths due to diarrhea than traditional intravenous therapies, PRITECH's task was to increase the use of ORT wherever children suffer from diarrhea, whether in urban hospitals or in rural homes. Recognizing the vital importance of good nutrition in diarrhea treatment and prevention, PRITECH also sought to teach mothers the value of breastfeeding, proper weaning practices, and adequate feeding as part of ORT during and after diarrheal episodes.

AED was an active collaborator in the PRITECH Project to provide technical assistance in ORT and immunizations to more than 20 developing countries over a five-year period. PRITECH supplied short-term consultants to more than 35 other countries; sponsored confer-

ences in Asia, Africa, and Latin America; developed new diarrhea-control curricula for nursing schools in Africa and for medical schools worldwide; and collaborated with the World Health Organization, the United Nations Children's Fund, and many private voluntary organizations in developing in-country partnerships with governments in support of diarrhea-control program. The Academy was responsible for the health communications, community education, and social marketing components of PRITECH's activities.

### Population Communication Services (1982–2000)
**Countries: Ethiopia, Ghana, Kenya, Mali, Nigeria, Rwanda, Senegal, Tanzania, Uganda, Zaire, and Zimbabwe**
**Funding: USAID**
The Population Communication Services Project (PCS) was charged with developing greater public awareness of family planning and promoting wider use of freely chosen contraceptive methods in devel-

oping countries through improved communication between private- and public-sector institutions. As a member of the consortium, the Academy was specifically involved in mass media planning, organization of international seminars and workshops, and information services. During all stages of program design and implementation, we offered technical and financial assistance to family planning agencies.

In Mali, AED provided support to the Association Malienne pour la Promotion et Protection de la Famille. In Nigeria, Academy staff assisted in monitoring continuing family planning information, education, and communication (IEC) programs and developing new project proposals including: School of the Airwaves, a weekly radio drama on health and family planning and TV Melodrama Serial, a television program to raise people's consciousness about family planning concepts. In Senegal, AED provided continuing technical assistance to the USAID

bilateral Family Health and Population Project (SFHPP). The major activity was an IEC needs assessment and the development of an IEC strategy. The needs assessment and the strategy were presented to policy-makers during a workshop hosted by the SFHP Project. Other activities included technical assistance visits, assistance to the USAID Mission in obtaining print and audio-visual materials and equipment for the project and planning and implementation of a message design workshop. In Tanzania , AED conducted a preliminary IEC needs assessment and determined the need for PCS project support and technical assistance to UMATI, the national voluntary family planning association, which had been involved with print and radio and was eager to strengthen its program. In Uganda, Academy staff assisted in carrying out an IEC and training needs assessment in Uganda for the Health Education Department of the Uganda Ministry of Health. In Zaire, AED assisted eight Zairian

family planning information and service organizations in developing a national family planning IEC work plan and strategy. In Zimbabwe, we provided technical assistance in developing family planning communication activities. This included assisting in uniting the four-year IEC plan with the Zimbabwe Child Spacing and Fertility Council.

**Indefinite Quantity Contract (IQC): Education, Training and Human Resource Development (1975–1978; 1978–1984; 1984–1987; 1990–1993; 1994–1998) Countries: Botswana, Burundi, Ethiopia, Guinea, Kenya, Lesotho, Namibia, South Africa, Tanzania, and Zambia**
Funding: USAID

Under three indefinite quantity contracts in education and human resources, AED successfully conducted approximately 100 assignments in all geographic regions and at all levels of education. During this period, Academy staff and consultants designed 34 educational

training projects, conducted 21 cost-effectiveness studies, and prepared 28 project and impact evaluations. Examples of assignments undertaken during the contract include evaluating education and human resources development programs in Zambia and conducting a sector assessment of the education sector in South Africa to help identify appropriate investments to increase opportunities for black South Africa.

### Indefinite Quantity Contract (IQC): Evaluation and Development Information (1989–1992)

**Countries: Botswana, Chad, Guinea, Kenya, Niger, Nigeria, Tunisia, and Zaire**
**Funding: USAID**
Under this rapid-response technical services contract, AED responded to a number of work orders. We performed an evaluation of the Tunisia Technology Transfer Project and assessed PVOs and NGOs in Chad. The Academy also designed a plan for evaluating the

impact of returned participant trainees in Kenya under the Training for Development Project. We also performed an assessment and design for automating the customs service in Niger under USAID's economic reform program in order to improve the country's customs processing and information systems.

### Indefinite Quantity Contract (IQC): Education and Human Resources (1978–1984)

**Countries: Cape Verde, Guinea, Guinea-Bissau, Lesotho, Morocco, Swaziland, and Tunisia**
**Funding: USAID**
The purpose of AED's second Indefinite Quantity Contract in the Education Sector with USAID was to provide the agency with quick-response advisory services concerning the design, assessment, and evaluation of education programs and projects and related USAID policies and procedures. As a result, the Academy examined and designed education tasks across Africa. In Guinea-Bissau,

AED designed and taught instructional courses and teaching methodology to primary teachers. The Academy also reviewed proposals for a secondary-level English education program and assisted in developing an implementation plan for Tunisia. We conducted a study of vocational skills training programs in Morocco and we designed a teacher-training project in Swaziland for primary- and secondary-level teachers. For Lesotho, we trained audiovisual technicians in radio script writing techniques for the production of nonformal education programs, and in Cape Verde, we designed and taught courses on manual arts and crafts and teaching aids for primary teachers.

### Indefinite Quantity Contract (IQC): Education and Human Resources (1984–1987)
**Countries: Malawi, Morocco, and Sierra Leone**
**Funding: USAID**

This project provided short-term technical assistance to USAID Missions worldwide for such tasks as sector assessments, feasibility studies, project design, evaluation, conference planning, and research. The evaluation of educational programs, the design of systems to decentralize basic educational services, and the assessment of curriculum for English language training were but a few of the ways in which the Academy provided short-term assistance to USAID Missions and developing country agencies in basic education, technical training, and human resources development. Building on its demonstrated depth and breadth of experience in long-term project management, Academy staff and principal consultants designed, implemented, and evaluated projects; conducted research,

sector assessments, surveys, and feasibility studies; and coordinated conferences.

A total of 35 work orders were carried out successfully during this contract. The Academy's services were conducted in all geographic regions at all levels of education. AED staff and consultants performed evaluations of the "BEST" Project in Zimbabwe, the Agricultural Education Project in Rwanda, and the USAID-assisted Institutions of Agricultural Higher Education in Sierra Leone and Malawi. We also performed an impact evaluation of USAID-assisted Institutions of Agricultural Higher Education in Morocco and assessed English language training programs in Mali, Somalia, Morocco, and Tunisia. The Academy also convened a workshop to present evaluation findings on USAID-assisted institutions of agricultural education.

# ADDITIONAL INFORMATION

If you would like additional information about any of the programs and projects listed in this directory, please refer to the Projects Database on the AED Intranet at http://intranet.aed.org/dbtw-wpd/menu.htm. More information on the projects can be found by typing the name of the project, as it appears in the directory, in the title or keyword field of the database. In addition to the information available in the directory, you can find a list of partner organizations and countries served as well as the AED contact, Group Name, and Center where the project resides.

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