



MEN'S CLUB FINAL REPORT NOVEMBER 2020



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List of Acronyms

ANC	Antenatal Care
BCC	Behavior Change and Communications
BPC	Birth Preparedness Class
CHC	Community Health Committee
CHU	Community Health Unit
CHV	Community Health Volunteer
DHB	District Health Board
DHO	District Health Officer
DHIS	District Health Information System
FCI	Female Community Influencer
FIC	Fully Immunized Children
FGM	Female Genital Mutilation
HMIS	Health Management Information System
IDSR	Integrated Disease Surveillance and Response
IMAM	Integrated management of Acute malnutrition
IMNCI	Integrated Management of Neonatal and Childhood Illnesses
IPC	Infection Prevention and Control
MC	Men's Club
MCI	Male Community Champions
MCH	Maternal and Child Health
MEAL	Monitoring, Evaluation, Accountability and Learning
MNCH	Maternal Newborn and Child Health
MoH	Ministry of Health
PNC	Postnatal Care
RHC	Referral Health Centre
RMNCH	Reproductive Maternal Newborn and Child Health
SBA	Skilled Birth Attendance
TBA	Traditional Birth Attendant
WRA	Women of Reproductive Age

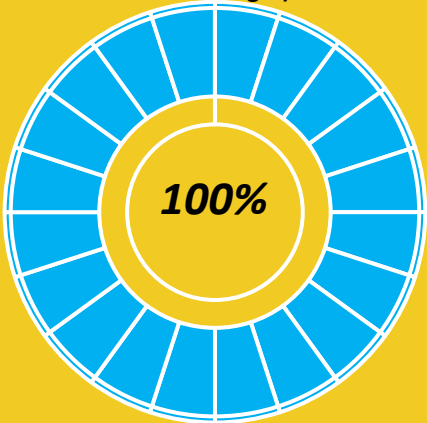
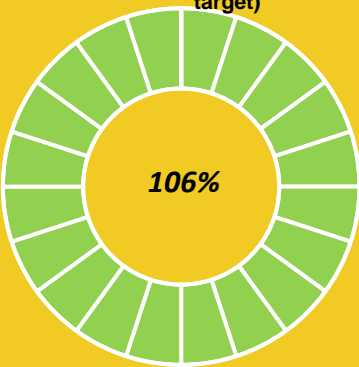
Project Description

Name of Award	Somali Advocate for Health and Nutrition (SAHAN)		
Donor	DFID		
Lead Partner	PSI		
Country Office	Somalia	Grant Number	204903-102
Award Start Date	July 2020	Award End Date	November 2020
Award Duration	5 Months	Award Location	Gedo, Somalia
Budget	Total Award Amount in donor currency : 220,214	Total Spent in Reporting Period in donor currency:	Burn rate:
Contact Person	Europe Maalim- BCC Coordinator		
Summary of Award, Target Groups and Locations	The Men's club is an intervention that seeks to increase Men's knowledge on maternal and child health matters and shift men's attitudes, beliefs, and perceptions on their role in maternal and child health decisions and practices. It is a series of sessions facilitated by male community influencers around places where men regularly congregate for social activities. It is being piloted in Belet Xaawa, Dollow, and Luuq Districts, Gedo region.		
Reporting Period:	1 st July to 30 th November 2020		

Progress Report based on result framework as described in the Log frame

Activities & Outputs

Activity 1: Conducting sessions for Homogenous men that have wives between the age of 15-49 years & U5 children

Status	Completed	
Objective	To improve knowledge & awareness among men on health matters.	
Progress	The men's club sessions were initiated in August to November 2020 in three districts that implemented previous two prototypes: Hooyo Ku Hooyo and BPC. There has been an increased interest in the men's club concept. We have seen many men showing interest in joining even though the sessions could only accommodate a maximum of 10 to 12 participants. During the project period, all the districts of men's club intervention were able to reach the target for the number of sessions (756) that were planned to be conducted as per the implementation plan.	
Outputs created	<p style="text-align: center;">% of target sessions conducted (overall progress towards target)</p>  <p style="text-align: center;">100%</p> <p><i>Figure 1: Percentage of target sessions conducted</i></p> <p>Additionally, the project targeted 2,016 participants, but reached 2,187 participants translating to 106% of the target participants. There has also been increased knowledge and awareness among men on health matters whereby at the initial start of the project, 29% of the men reported to start saving for the arrival of their unborn babies. In the subsequent quarter, this increased to 45%.</p> <p style="text-align: center;">% of target participants reached (overall progress towards target)</p>  <p style="text-align: center;">106%</p> <p><i>Figure 2: Percentage of target participants reached</i></p>	<p>During the project period, 756 men's club sessions were conducted for homogenous men across the three Districts. This translates to 100% of the target session conducted during the project period.</p>

Activity photos



Figure 3: Session ongoing in Luuq District

Activity 2: Referral of pregnant women & U5 children to the health facility by the Men’s club participants

Status	Completed
Objective	To improve healthy seeking behaviours and encourage uptake of health services among WRA.
Progress	During the project period, 986 women of reproductive age and children under five years received referral cards from the MCIs based on the need identified. The MCIs issued referral cards to the men whose pregnant wives had never been to the health facilities for either ANC visit, facility delivery, or had children under five years who never got or defaulted immunization. The MCIs also issued referral cards to WRA and under-five children who had interrupted their health care seeking behaviours and linked to a health facility. Also referred are children with diarrhea, malnutrition, and other childhood illnesses. Few beneficiaries did not turn up to the health facility even after being issued a referral card. The MCIs did the follow-up visits consistently to actualize all the health facility referrals.
Outputs created	From the inception of the project to the end, the MCIs issued 986 referral cards during the project period. Of these, 953 women of reproductive age and caregivers of under five years were successfully referred to the health facility by the MCIs during the project period. This translates to 97% effective referral for men’s club across the three Districts during the implementation period.

Activity photos



Figure 4: A successful referral for a pregnant mother accompanied by her husband


Activity 3: Follow up discussions for Men's club participants

Status	Completed
Objective	To initiate couple's conversation on health matters at household level & to encourage men to prepare themselves financially for pregnancy and childbirth.
Progress	The MCIs ensured there was a consistent follow-up discussion for men who attended the sessions across the three districts. The follow up was to ensure couple's conversation were initiated at the household level and encourage men to prepare themselves financially during their wives' pregnancy and childbirth journey. The follow up can be more than once due to some session's participants being unable to initiate the discussion with their spouses during the first follow up visit and given a second chance to see if they commenced the discussions. Others are visited twice due to being unable to go to health facilities, and they were issued with referral cards.
Outputs created	During the project period, 1,973 homogenous men were followed up for discussions by the MCIs across the three district implementing the Men's Club prototype during the project period. This translates to 87% of the follow-ups for the men's club participants across the three Districts during the project period.




Figure 5: A man receives a follow up visit and couple counselling at his home in Farjano, Belet Xaawa

Activity 4: Monthly supportive supervisions by project teams & stakeholders

Status	Completed
Objective	To conduct OTJ training/coaching for the MCIs and to engage key stakeholders in the monitoring of project implementation and progress.
Progress	<p>Mentoring and coaching form the basis for improving the capacity of MCIs to enable them to improve their skills. Just like the Female Community Influencers, MCIs are a crucial pillar in the demand creation project; therefore, investing in and increasing their skills through constant support supervision, mentoring, and coaching is the program's key priorities.</p> <p>During the supervision and monitoring visits, we learned that the men appreciated the program and were ready to attend all the three sessions. Men felt they were previously forgotten and are happy now that they have been given a priority in this project, which has proven beneficial. A community member said, "previously, health education was given to only women, especially when it concerns reproductive health. I was shocked to see men being given a chance to benefit from such initiative to know our families' well-being and more impressing the sessions are given by men only who join us at our common places where we meet and chat on a cup of tea", he added. The community looks forward to the program reaching more men to achieve a positive, healthy seeking behaviour to reduce the maternal and child mortality rate in the region and Somalia as a whole. The MCIs appreciate how the community received them and participate in the sessions. They thanked the participants of the sessions for sharing some health tips with them, which will help them understand their health priorities and practices. Generally, all the teams were fair and could follow the BCC skills strategy well.</p>
Outputs created	Six supportive supervision was conducted by MCH team lead in this quarter across all the three District (two supervision for each district).
Activity photos	 <p><i>Figure 6: A mentoring and coaching session for an MCI ongoing in Dollow District</i></p>

Activity 5: Monthly review meetings & discussions

Status	Completed
Objective	To analyse the performance of the MCI teams and to discuss with key stakeholders about the achievements, challenges & recommendations.
Progress	<p>The monthly review meetings accord the project team with a platform to discuss the targeted performance of the reproductive, maternal, neonatal, and child health (RMNCH) indicators. These meetings provide a forum to analyse the MCIs' monthly data from their reports, data from the link facilities, challenges encountered during implementation, and successes. As scheduled, we were able to conduct Program Monthly Review Meeting every month.</p> <p>In the last month of the project, project closeout meetings were held across the three districts. The sessions were led by the representatives from the Ministry of health and Local Authority. Also in attendance were, DMO, DHB chairperson, Data Clerk, MCH Lead, and all MCIs from the respective districts.</p> <p>The MCH Lead thanked the MCIs and the program team on the excellent work and commitment to reach men in their comfort zones to sensitise them on healthy behaviour change to better their families' health and men's involvement on RMNCH. They also congratulated the MCIs for their community feedback. The Matron shared how the service utilisation in the facilities increased during the first two SAHAN prototypes of HkH and BPC and challenged the MCIs to follow suit and double the current figures.</p>
Outputs created	Nine monthly review meetings were conducted for the MCIs and key stakeholders such as DHB, DHO across all the Districts (three review meetings for each district) during the project period.
Activity Photos	 <p><i>Figure 7: Project Close out and review meeting in Luuq District</i></p>

Activity 6: Joint Quarterly supportive supervisions by MoH, DHB & project teams

Status	Completed
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Objective	To assess the implementation and progress of the Men's club prototype by key stakeholders i.e., the MoH & DHB and to identify some of the challenges faced by the team in the community.
Progress	<p>The Ministry of Health JL has the overall responsibility of all health and nutrition interventions in the region. It has a decentralized district health management team (DHMT) representative in all Gedo Region districts.</p> <p>The District Health Office (DHO) team in each of the three districts works closely with all the health and nutrition partners, plays an oversight role on all community-based health interventions by conducting monthly/quarterly supportive supervision visits.</p> <p>The community appreciated how this program supported them in terms of service delivery. In terms of proper and prior information related to health education, the linkage of beneficiaries to the health facilities, especially pregnant mothers, access timely information to deliver at the facilities and get safe delivery. The MOH team reports that the Men's Club intervention has positively influenced the health-seeking behaviours by empowering men to be champions in the community. With the intervention, many men are now aware of their wife and children's health status. Men are now more involved in their families' welfare, like taking the children to the hospital when they are sick, helping their wives at home when they are pregnant, and advising them to go to the hospital for a check-up, especially the pregnant ones.</p>
Outputs created	A joint supervision team conducted three joint quarterly supportive supervision across all the three districts (one joint supervision for each district).
Activity photos	 <p><i>Figure 8: Joint MOH quarterly support supervision in Belet Xaawa District</i></p>

Results (key indicators)-This quarter

Indicator	Baseline	Target (as in LF)	Progress towards the target-project period	Status						
# of Men's club session participants who attended all 3 sessions in this month	0	2147	1938 <table border="1"> <tr><td>BH</td><td>98%</td></tr> <tr><td>DL</td><td>96%</td></tr> <tr><td>LQ</td><td>83%</td></tr> </table>	BH	98%	DL	96%	LQ	83%	Completed
BH	98%									
DL	96%									
LQ	83%									
% of Men's club session participants who completed attending all the 3 sessions in this month	0%	50%	90% <table border="1"> <tr><td>BH</td><td>98%</td></tr> <tr><td>DL</td><td>96%</td></tr> <tr><td>LQ</td><td>83%</td></tr> </table>	BH	98%	DL	96%	LQ	83%	Completed
BH	98%									
DL	96%									
LQ	83%									
% of Effective Referrals in this month	0%	50%	97% <table border="1"> <tr><td>BH</td><td>93%</td></tr> <tr><td>DL</td><td>95%</td></tr> <tr><td>LQ</td><td>99%</td></tr> </table>	BH	93%	DL	95%	LQ	99%	Completed
BH	93%									
DL	95%									
LQ	99%									
% of followed up men who started discussion with their wives after the sessions in this month	0%	50%	87% <table border="1"> <tr><td>BH</td><td>89%</td></tr> <tr><td>DL</td><td>90%</td></tr> <tr><td>LQ</td><td>85%</td></tr> </table>	BH	89%	DL	90%	LQ	85%	Completed
BH	89%									
DL	90%									
LQ	85%									
% of Men who started family saving for New born preparation in this month <i>N.B: The proportion of this indicator depends on the number of men whose wives are pregnant. The % shown might be interpreted as the number of men whose wives are pregnant at the time of the session and who started saving in preparation for the newborn</i>	0%	50%	38% <table border="1"> <tr><td>BH</td><td>29%</td></tr> <tr><td>DL</td><td>40%</td></tr> <tr><td>LQ</td><td>43%</td></tr> </table>	BH	29%	DL	40%	LQ	43%	Completed
BH	29%									
DL	40%									
LQ	43%									

a) Indicator performance per district

Even though the Men's Club prototype had a lesser implementation period as compared to the Hooyo Ku Hooyo prototype, the impact and outcomes were good. When compared to the first month of the implementation period, there has been increased session completion rate, especially in Luuq District. Initially, Luuq had a 73% completion rate, but by the end of the project, the cumulative success rate was at 83%. The percentage of the men's Club session participants who completed the three sessions has been over 90% for Belet Xaawa and Dollow, showing a significant impact and interest in the Men's Club sessions. The effective

referrals at 97% across the three districts reflect the achievement of the project's goals in incorporating men in maternal and child health matters in the Somali context. Additionally, several men financially prepared for a newborn increased by 16% compared to the previous quarter.

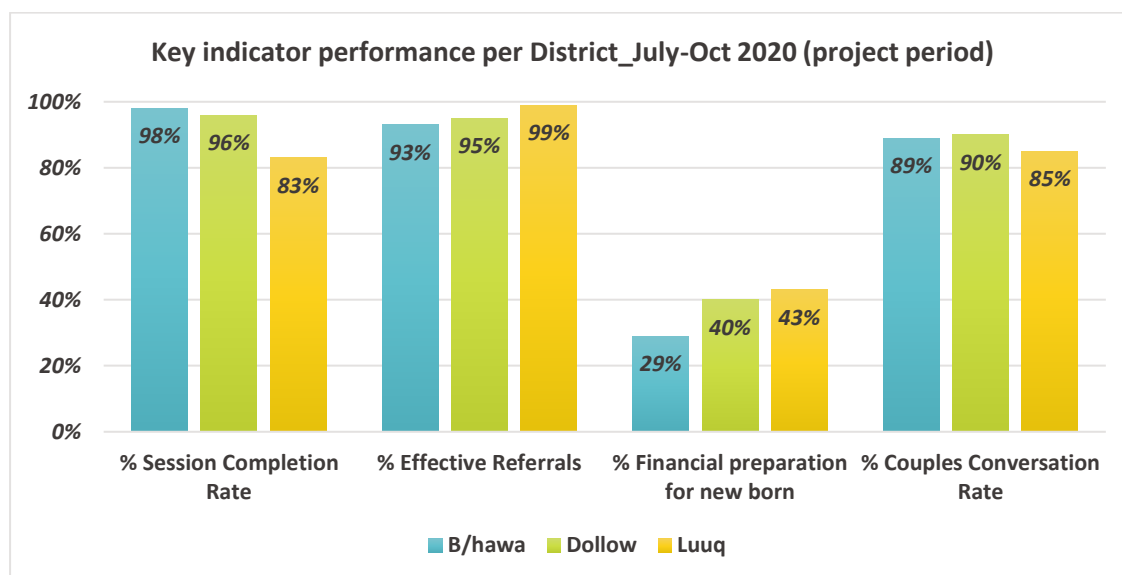


Figure 9: Key indicator performance per district

Challenges & Lessons Learned

The following table summarizes the challenges we have faced during the reporting period and the lessons learned / solutions for each challenge.

Challenges	Lessons learned / solutions
Insecurity challenges in some sites that hinders continuous monitoring and coaching sessions. There has been incidents of sporadic gunshots and stray bullets in Dollow districts. One of our MCI was shot by a stray bullet	Project team to be aware of their surroundings and observe possible insecurity situations in their area.
In some districts, project participants ask for tokens beside the normal refreshment being provided.	MCIs to manage expectation of the participants and explain to them aims and deliverables in a polite and respectful manner.
Participants are generally flouting the COVID-19 measures and are not keen to observe standards that may protect themselves and the team on possible transmissions.	The project team and MCIs will be persistent in health education on the myths and misconceptions surrounding COVID-19 narratives like, the virus is not in existence. Distribute IEC materials with key health message on COVID 19.

