

ADOLESCENT REPRODUCTIVE HEALTH EDUCATION

(TC-97-05-13-0)

EXECUTIVE SUMMARY

REQUESTER: Bahamas Family Planning Association

EXECUTING AGENCY: Bahamas Family Planning Association

BENEFICIARIES: 1150 direct beneficiaries (teachers, counselors, parents, youth leaders, others) who will receive training; and indirectly, the majority of the 52,000 adolescent youth population of The Bahamas.

FINANCING: IDB/Japan Trust Fund
for Consultancy Services: US\$1,240,800
Local counterpart funding: US\$ 359,200
Total: US\$1,600,000

TERMS: Execution period: 2 1/2 years
Disbursement period: 3 years

ENVIRONMENTAL REVIEW: The Committee on Environmental and Social Impact reviewed the document on December 19, 1997 and had no comments.

OBJECTIVES: The primary objective of the project is to contribute to a reduction of the incidence of unintended adolescent pregnancy and sexually transmitted infections (STIs) in The Bahamas through a reproductive health information, education and communication (IEC) program and media campaign. A secondary objective is to strengthen the institutional capacity of the Bahamas Family Planning Association (BFPA) to expand and sustain its activities.

DESCRIPTION: The IEC component, which comprises the core of the project, will develop and implement a variety of activities designed to complement and expand on reproductive health education geared to adolescents in on-going GOB and NGO programs. The project activities include: i) a school-based intervention program that will train teachers, guidance and peer counselors, and educate parents; ii) a wider community education and outreach initiative to coincide with the above efforts; and iii) the development of educational and information materials to support these endeavors including culturally

appropriate teaching materials to be integrated into the national primary and secondary school curriculum.

The institutional strengthening component will provide BFPA management and staff with on-the-job training and technical support to improve the organization's capacity to expand and sustain activities in the area of adolescent education and to improve data monitoring and management. In order to ensure the long-term sustainability of the organization, specialized training will be contracted to assist the BFPA Board of Directors and management prepare a three to five year strategic plan and fundraising program.

**PROCUREMENT OF
GOODS AND
CONSULTING
SERVICES:**

In accordance with the agreement establishing the Japan Trust Fund for Consultancy Services, the Bank has identified a Japanese consultant firm for the project. The firm identified is the Japan Organization for International Cooperation in Family Planning (JOICFP), an NGO specialized in reproductive health education and family planning that has with 30 years experience implementing international technical cooperation projects.

BENEFITS:

The project is expected to contribute to reducing adolescent fertility rates and the risks of contracting sexually transmitted diseases (STIs), including AIDS. Information, education and counselor services on adolescent reproductive health will be improved, more accessible and more effective, especially on the islands of New Providence and Grand Bahama where 80% of the population lives and most project activities will take place. The project would contribute to increasing the capacity of young girls and boys to communicate and to protect themselves, and encourage their taking greater responsibility for their own health.

At the end of the project, there will be a collection of materials which can be utilized repeatedly for many years beyond the project, including a module for teaching reproductive health issues within the national Family Life and Health Education curriculum, and a cadre of local trainers specialized in this field. BFPA would improve its monitoring and management capabilities and capacity to deliver adolescent reproductive health education and services.

RISKS:

The project may face challenges related to the nature of Bahamian society and reluctance to deal openly with the issues of pregnancies out of wedlock and

STIs, including AIDS. This risk would be mitigated, however, by the growing level of national awareness and the expanding network of governmental and community support for BFPA and its activities.

**THE BANK'S
COUNTRY STRATEGY:**

The Bank's most recent country strategy paper (1996) supports the Government's continuing efforts to encourage private sector led growth by improving competitiveness and economic diversification. In the social sectors, the Bank's strategy is to support better targeting of social services, including improvements in health coverage and health-related infrastructure projects in potable water and sewerage.

**SPECIAL
CONTRACTUAL
CONDITIONS:**

Prior to the first disbursement, the Executing Agency shall present to the Bank: (i) the signed letter of understanding with the Government (para 3.9); and (ii) the terms of reference for the consultant firm (para 3.9). The Bank will establish a Revolving Fund for up to 10% of the total project cost.

I. BACKGROUND

A. Adolescent reproductive health situation in The Bahamas

- 1.1 Adolescent motherhood and problems associated with adolescent sexual activity have become more prevalent in The Bahamas in the past 10 years. While the country's overall fertility rate has declined, it is declining more slowly among adolescents 13-19 years old. Although current data on adolescent fertility is limited for The Bahamas, public and private professionals and policy makers in both the health and education sectors in The Bahamas agree that it has become a significant social and economic concern for the country. Between 1994 and 1995, an average of 67 per 1000 adolescents gave birth, 92% of whom were single. Early single motherhood has many negative consequences for young girls. Rates of pregnancy and birth related complications, including low birthweight, are higher among adolescent girls than adult women. In addition, most teen mothers are not able to complete their schooling, and, therefore, face significant difficulties obtaining employment and supporting themselves and their children. Economic insecurity and social isolation often lead young girls into serial monogamous relationship with men, many of whom are 8 to 10 years older. As a result, repeat pregnancies are an increasing concern: in 1995, approximately 22% of the reported adolescent births were of second, third or fourth children.
- 1.2 The Bahamas has the highest annual incidence rate of HIV/AIDS in the English-speaking Caribbean, and is among the three countries with the highest incidence rates in LAC. The Ministry of Health's 1996 report on national health indicators ranks AIDS as the leading causes of death for the 15 to 44 year old age group, and among the top two causes of death for 1 to 4 year old. The number of new HIV positive females and children has recently out-numbered the new cases of HIV positive males. Approximately 6% of known HIV carriers are teenagers, but since this age group is often not tested for HIV, those that have been identified are mainly clients in pre-natal clinics or traced to contacts of older HIV positive persons. In general, education and health policies and programs have not been effective in addressing the needs of adolescents, and, as a result, STIs including syphilis, gonorrhea and AIDS, have become more of concern among teenage women in The Bahamas.

B. Health and educational services

- 1.3 The Government of the Bahamas began to prioritize reproductive health education and services only in the last several years. The services which have been offered by the Government to prevent pregnancies in The Bahamas have traditionally been designed for adult women and not for teenagers. By law, girls under 18 years old may seek contraceptives from public health services only with the authorization of a legal guardian. For many years, The Bahamas Family Planning Association (BFPA) has played the pivotal role raising national awareness of reproductive health issues, and in providing education and services which have not been accessible for many segments of the population. Over the past 3-4 years, the government, BFPA, and other health care providers in The Bahamas

have become increasingly alarmed at the incidence of teenage pregnancies and HIV/AIDS, and have been giving greater priority to developing comprehensive programs to address these issues.

- 1.4 In 1995, the Ministry of Health began to design the country's first national family planning policy and program. The draft National Family Planning Policy, which was submitted to the Minister in late 1997 and is pending approval, includes aspects of the twelve "pillars" of reproductive health established at the International Conference on Population and Development (ICPD) held in Cairo in 1994. In sum, it prioritizes: (1) universal accessibility to reproductive health care; (2) reduction of early adolescent pregnancies; (3) reduction of the incidence of morbidity and mortality due to reproductive health disorders; (4) empowerment of males and females to exercise reproductive rights and to take responsibility for their sexual and reproductive health; and (5) health education, information and skill-building for informed decision-making.
- 1.5 The National Reproductive Health/Family Planning Programme, which was launched in April 1997, aims to establish comprehensive reproductive health and family planning (RH/FP) clinical services, primarily through community clinics; expand public adolescent health services; strengthen the capacity of RH/FP service providers; and provide a health education and promotion program for the general public. The program is still incipient in its implementation, and has not yet developed its capacity for outreach, education and service delivery, especially for the adolescent community. For the foreseeable future, the Government will continue to rely heavily on BFPA for educational materials and community outreach. In fact, the Ministry of Health's draft logical framework for the program specifically identifies BFPA as a primary contributor to its training, education, community outreach and networking activities.
- 1.6 Currently there are public sector educational efforts being carried out which could contribute more effectively to raising public awareness and knowledge of reproductive health issues, including family planning and STI prevention. The Ministry of Education in 1991 incorporated a Family Life and Health Education (FLHE) program into the curriculum for primary and secondary education that includes topics related to human sexuality and reproductive health. Unfortunately, the FLHE curriculum is not universally applied nor standardized, and teachers receive no special training on human sexuality and reproductive health issues. Moreover, there are few support materials for FLHE classes and none which are culturally oriented to The Bahamas. The draft National Family Planning Policy specifically emphasizes the integral role of that FLHE should play in promoting healthy life skills and sexual behavior.
- 1.7 Several other governmental and non-governmental programs which address adolescent health and development issues have been launched in The Bahamas over the past few years. These include the Department of Social Services' Program Providing Access for Continuing Education (PACE) for pregnant girls to continue their schooling during pregnancy (they are not allowed to attend school), the

Ministry of Youth, Sports and Culture's Youth Enterprise Project for school drop-outs, the AIDS Secretariat's pilot peer counselor program, and the Generations Program and Police Athletic League which provide mentoring and structured activities for at-risk boys. The sponsors of these programs, and other organizations that target adolescents, have approached BFPA to provide training in family planning and reproductive health so that they can more effectively integrate these issues into their programs. They have also emphasized the need to: (1) more actively target males; (2) strengthen parent-child communication skills; (3) foster the support of community leaders, including religious leaders; and (4) give special attention to Haitians, especially those with limited English-speaking capacity.

C. Bahamas Family Planning Association

- 1.8 The Bahamas Family Planning Association was founded in 1985 and is a member of International Planned Parenthood Federation (IPPF). Since its inception, BFPA has sought to address a wide spectrum of needs for reproductive health education and counseling services in The Bahamas. Its activities include counseling, education, information dissemination, workshops and a speakers bureau conducted by BFPA staff and volunteers. From its headquarters in Nassau, BFPA also operates a public clinic serving 3,000-4,000 clients a year with pap smears, breast and pelvic examination, pregnancy tests, contraceptives and counseling.
- 1.9 BFPA has achieved a respected and influential position in The Bahamas through its public education activities as well as its effective networking and inter-institutional coordination on family planning and other reproductive health issues. The success of its efforts has been reflected in the growing demand for the organization's services from government and community organizations. To date, BFPA has provided 60 seminars and talks to approximately 3,000 adolescents, educators, health care providers, social workers, community police, religious and community leaders, has participated actively in the development of the national policy and program on family planning, and has collaborated closely with other organizations to establish joint activities related to reproductive health and family planning. The Government recognizes the important role and comparative advantage of BFPA in reaching important groups of the community which are often not reached by public services, including at-risk adolescents, school drop-outs, parents, community leaders and the Haitian community.
- 1.10 The BFPA core group of speakers and trainers for its public outreach and educational programs is comprised primarily of doctors, nurses and other professionals including members of the Board of Directors who volunteer their services, the Executive Director and several members of the staff. Traditionally, Bahamian NGOs rely upon the population's strong commitment to community service to carry out their activities, therefore BFPA's reliance upon volunteers to undertake public education activities is in keeping with national NGOs' standard operating procedures. BFPA's permanent paid staff of eight, relatively small by some international standards, is one of the larger NGO staffs in The

Bahamas. The organization's financial base has been relatively stable over the past five years. Its annual income is based on patient fees, local donations and sales of services to government of approximately US\$130,000, according to audited financial statements and annual reports. In addition, to these income streams, BFPA has received extraordinary cash grants from IPPF in 1994 and 1995 of US\$65,000. In summary, BFPA has a small but solid institutional base both administratively and financially; with the proposed project BFPA will have an opportunity to deepen its technical expertise and develop into a more mature institution. (paras 2.17 - 2.19).

D. Bank strategy

- 1.11 The Cairo Conference on Population and Development and the corresponding LAC regional plan of action highlight the important links between reproductive health and social and economic development. At Cairo, the Bank asserted the need to develop comprehensive, accessible reproductive health services, and to address the high rates of unintended teen pregnancies throughout the region. Reproductive health has been identified as one of the Bank's flagship themes for 1998, which will include the development of its first reproductive health strategy. This technical cooperation will directly support the implementation of the reproductive health agenda agreed to in Cairo by the governments of the region, and will provide valuable lessons for future IDB initiatives in this area.
- 1.12 This operation is also consistent with the Bank's social sector strategies, as they are set forth in the Eighth Replenishment, to promote preventive health education and services, advance the social and economic status of women, combat poverty, and meet the "health care and education needs of young people so that they may share fully in the economic and social development of their societies." It also directly supports the Bank's strategy to strengthen civil society's organizations, and complements the Bank's infrastructure loan portfolio in The Bahamas which seeks to improve the general health of the population through potable water and solid waste management projects.

II. THE PROJECT

A. Objectives

- 2.1 The project goal is to contribute to a reduction of the incidence of unintended adolescent pregnancy and sexually transmitted infections (STIs) in The Bahamas.
- 2.2 Specifically, the project would:
 - a. Develop and implement a reproductive health information, education, and communication (IEC) program for adolescents, and the adults who influence them, to increase their knowledge about how to prevent unintended pregnancy and STIs, and;

- b. Strengthen BFPA's institutional capability to expand and sustain its activities in the area of adolescent reproductive health education.

B. Description

- 2.3 The project reflects the priorities identified through consultation with a broad range of governmental and non-governmental organizations and key stakeholders working in the areas of adolescent health, development and education in The Bahamas. It is comprised of an Information, Education and Communication component which will aim to reach adolescents and adults who influence them through several existing venues and programs. An institutional strengthening component will provide BFPA with improved technical capacity to meet its expanded role under the project and support in strategic planning and fundraising to increase its long-term feasibility.

1. Information, education and communication (IEC) component

- 2.4 This component includes a variety of IEC activities designed to complement and/or expand the scope of other on-going governmental and non-governmental programs geared to adolescents. To ensure the long-term impact and sustainability of these efforts, the project will develop standardized educational materials and a local cadre of trainers and community leaders with knowledge on adolescent reproductive health. It is estimated that approximately 1150 individuals will be direct beneficiaries of training and educational workshops, the majority of whom will be in positions to teach, counsel, mentor or provide health care to the school age population of The Bahamas. The project's training activities will target a select number of schools and programs on the islands of New Providence and Grand Bahama and will undertake additional efforts in community education, outreach and materials development/dissemination to reach a much wider audience throughout The Bahamas.

a. School-based interventions

- 2.5 The project will provide training for approximately 200 public primary and secondary school teachers and guidance counselors on New Providence and Grand Bahama to increase their capacity to effectively incorporate reproductive health issues into Family Life and Health Education classes and student counseling. ^{1/} (8 workshops for teachers/counselors from 15-20 schools.) The project

^{1/} In 1995, there were 61,769 students enrolled in the Bahamian school system (46,895 in public and 14,874 in independent schools), and 3,430 teachers (2,550 in public and 880 in independent schools). On New Providence and Grand Bahama, there are 59 schools, 34 primary, 3 all-age, and 15 secondary schools. In public secondary schools, there are usually only two teachers assigned to offer FLHE classes, which creates an extremely high student to FLHE teacher ratio of approximately 1:500. In primary schools, all teachers are expected to introduce relevant FLHE topics into their classrooms.

will also offer workshops for a group of teachers and counselors from private schools on New Providence and Grand Bahama, and on the Family Islands where the Ministries of Education and Health have detected increasing incidence of teenage pregnancies and STIs (4 workshops for approximately 100 teachers/counselors are planned). All workshops will focus on building reproductive health knowledge, communication skills and participatory teaching methods. In order to expand the impact of the efforts, the project will introduce the reproductive health materials and teaching methodologies to the faculty and a select group of student teachers at the College of the Bahamas' teacher training college.

- 2.6 Seven schools will be selected 2/, for a more in-depth, multi-faceted pilot intervention that will include: (1) on-site training, monitoring and feedback for teachers and guidance counselors; (2) developing and testing educational materials and teaching modules for FLHE classes; (3) education and outreach to parents; and (4) training and supervision of peer counselors, including several of Haitian origin, to become a knowledgeable cadre of adolescents who can provide complementary information and support to their peers (3 workshops for approximately 75 peer counselors; 7 outreach meetings with approximately 350 parents, as well as periodic follow-up meetings are planned). The selection of schools for the pilot intervention will be determined jointly by the Ministry of Education and BFPA. Preference will be given to those schools in which there appears to be higher incidence of teenage pregnancy and at risk children. Primary schools will be selected from a group of feeder schools within the same districts as the participating secondary schools.
- 2.7 The project will assign a trainer to each pilot school to coordinate with officials, teachers and students in carrying out the following activities: (1) selection of teacher-trainees and peer counselors; (2) workshops for teachers and counselors; (3) weekend training workshops and periodic meetings for peer counselors; (4) regular visits to the schools to serve as an on-going school resource person; (5) mid-term and end-of-year evaluation workshop with teachers/counselors; and (6) data collection and monitoring throughout the life of the project. Trainers will also coordinate and facilitate outreach activities and informational meetings with the parents, either directly or through parent-teacher associations and local church groups, and organize periodic educational events, such as video presentations or panel discussions, for the student body outside of FLHE classes.

b. Community education and outreach

- 2.8 The activities in the schools will be complemented by efforts to gain the support of adults influential in the lives of adolescents, and to provide reproductive health training to adults who work directly with adolescents in different settings. The project includes workshops and meetings specifically tailored to reach

2/ Two secondary and two primary schools on New Providence, and one secondary and two primary schools on Grand Bahama.

parents and community leaders, including Haitian parents and community groups, community nurses and other primary health care providers, and programs working with boys, male and female high school drop-outs and high-risk children. The community education and outreach program will be delivered primarily through existing programs and organizations which have already expressed interest in the program. (Approximately 17 short workshops or meetings are planned to directly benefit approximately 435 individuals). To ensure the success of these activities, BFPA has already fostered a productive, collaborative relationship with many of the target groups. 3/

- 2.9 The content of community education and outreach activities will focus on raising awareness and knowledge of (1) adolescent reproductive health issues; (2) methods of pregnancy and STI prevention; (3) local options for reproductive health care and counseling services; (4) building parent-child communication skills, and increasing capacity to discuss reproductive health issues, and (5) promoting responsible sexual behavior and parenthood.
- 2.10 For the programs which already target specific groups of adolescents, training and outreach will be geared to integrating a reproductive health and family planning component into on-going activities. The project's trainers will provide staff, volunteers and peer leaders with reproductive health information, and guidelines for (1) teaching groups of teens information and skills needed to protect their health, and (2) referring them, as necessary, to providers of reproductive health care and counseling services. The project will collaborate with the Ministry of Youth, Sports and Education to ensure that staff which also work with groups of adolescent on the Family Islands are also included as participants in training workshops.
- 2.11 Boys and girls of Haitian origin will be fully integrated into the school-based interventions (at least one of the primary and secondary schools selected for the pilot intervention will have a significant representation of students of Haitian origin), and other community education activities. In addition, parents of Haitian origin who require special outreach in Creole will be offered educational materials and outreach activities related to adolescent reproductive health through their community organizations, including church groups and the Haitian Cultural Association.
- 2.12 A group of community nurses and private primary health care professionals on New Providence and Grand Bahama will be sensitized and trained in approaches of outreach and service delivery geared to adolescents. The MOH has specifically requested that BFPA assist in their efforts to develop a cadre of trainers who can

3/ For example, the Ministry of Youth's youth enterprise and youth leadership programs, Generations Program, Community Police Athletic League, Catholic and Protestant church groups (adult and youth leaders), the Department of Social Services.

gradually assume responsibility for training all other community nurses who will be contributing to the implementation of the National Family Planning Programme. In order to expand the number of nurses with the knowledge and skill necessary to better serve the adolescent population, the project will also introduce the reproductive health materials and teaching methodologies to the faculty and a select group of student nurses at the School of Nursing. Faculty for the School of Nursing will also collaborate in the development of the training materials.

- 2.13 Finally, the project will support public education activities which will be comprised of a series of media programs and public service announcements. The educational materials developed by the project, described below, will be disseminated broadly by participating governmental and non-governmental organizations and participants of the training and educational workshops to other adolescents, parents, community groups, teachers, counselors, health and social workers.

c. Materials development

- 2.14 The project will develop materials to support the activities described above. These materials will include adaptation of prototypes successfully utilized in other countries to the Bahamian context, and development of new materials with messages and images that are particularly relevant to Bahamian adolescents. The materials listed below will be developed by a materials development specialist, in collaboration with other project staff, an Inter-Agency Coordination Committee (see 2.21), and through other technical/graphics support on a contractual basis. Groups of adolescents will be organized and encouraged to actively participate in the design of several educational and public outreach materials:

- a. Modules on reproductive health for FLHE classes in schools; and a manual compiling successful lessons and teaching notes for FLHE teachers;
- b. Resource booklets and fact sheets for teachers, parents, adolescents and local organizations;
- c. Posters, educational video, radio programs 4/, and public service announcements for t.v. and radio for public outreach;
- d. Audio tapes and translation of some materials into Creole for Haitians who are not English proficient.

4/ The project will work closely with 3-4 of the national radio stations which have weekly talk show and community forum format programs. The estimated listening audience for these programs is 100,000 throughout The Bahamas. The project will develop scripts, invite guest speakers, including adolescents, and prepare public service announcements.

- 2.15 To support the development of educational materials, the execution of the workshops and seminars, and facilitate project data monitoring, the project will purchase computers, software and audio-visual equipment for BFPA, and provide office supplies and materials for the period of project execution.

2. Institutional strengthening component

- 2.16 The project will build upon BFPA's established and impressive networking and coordination skills, and demonstrated strengths in training and public education. The project will increase the organization's coverage and activities, and expand its inter-institutional network. Therefore, it must increase its capacity to design training materials, to gather and analyze pertinent data, and develop a long-term strategic plan. In this respect, the institutional strengthening component will provide: (1) on-the-job training for BFPA management and staff; and (2) technical assistance for BFPA staff and Board of Directors to develop a three-five strategic plan and fund-raising plan.
- 2.17 On-the-job training for BFPA management and staff will be provided by the consultants contracted to assist BFPA in the execution of the project and to contribute lessons learned from previous experiences in other countries. In particular, the materials development consultant will provide training in the production of materials to the BFPA Education Officer; and the data monitoring and computer specialists will train BFPA staff in the collection, analysis and management of data specifically related to this project and other on-going BFPA activities. The project plans to maximize the use of the outside expertise in data collection and monitoring by sharing this consultant's services with the Ministry of Health's Information and Research Unit, which has specifically requested assistance in strengthening its capacity to gather and systematize data related to adolescent health and fertility rates.
- 2.18 Over the long-term, the sustainability of BFPA and its activities will continue to depend on its ability to raise funds through donations and services provided to the Government, and to provide valued services to the community. The Board of Directors will play a key role in assuring the long-term viability and effectiveness of the organization by developing strategic plans and fund-raising. To strengthen their capacity to fulfill this role, the institutional strengthening component of the project will provide training for members of the Board.
- 2.19 The institutional strengthening component will be implemented utilizing long-term consultants as on-the-job trainers, and contracting individuals or organizations to provide short-term training courses either in The Bahamas or overseas (e.g. NGO Foundation for training members of the Board of Directors), and several selected overseas visits for a small number of BFPA and Government policy makers to observe similar programs in other countries.

C. Coordination with government

- 2.20 The project design and implementation plans have been closely coordinated with the GOB and are complementary and supportive of the policies and programs of the Ministries of Health, Education and Social Development. Specifically, the school-based interventions are being coordinated with the national FLHE Coordinators; the training for community nurses will be carried out in conjunction with the Department of Health and the AIDS Secretariat, and the monitoring and data collection efforts will share consultant services with the Ministry of Health.
- 2.21 An Inter-Agency Coordination Committee will be established to review training materials and modules produced by the project, assist in the coordination of the project's IEC activities, particularly those involving schools and health care providers, and review the results and lessons learned from the project. This Committee will include representatives from BFP, the Ministries of Education and Health, including the FLHE Coordinators, the Ministry of Youth, the College of The Bahamas' Teacher's College, the School for Nursing, the Department of Social Services and select representatives from civil society. As a condition precedent to first disbursement of the resources, the Government and BFP should establish this Committee.
- 2.22 The Government will provide three professionals who will work full-time for 28 months as the project's trainers. These trainers will return to the educational and health care system with new skills and communication capabilities at the end of the project. As a result of the project, the Government will receive culturally appropriate teaching materials in reproductive health for the FLHE classes, training for public health workers in dealing with sensitive issues of adolescent reproductive health and STIs, and improved capacity to monitor and manage social data.

D. Project evaluation

- 2.23 The project will collect baseline data, and gather both qualitative and quantitative monitoring and evaluation data to measure the direct beneficiaries and outputs, as well as medium-term impacts of project activities. A data analysis and monitoring specialist will be included in the consultant team to refine the project's performance and impact indicators, design data collection methodologies, prepare project trainers to collect monitoring data, and manage the project's information system. The interim and ex-post evaluations will be carried out by outside consultants contracted with the project resources.
- 2.24 Baseline information will be gathered at the beginning of the project from target groups from the intervention schools, including students, teachers and parents. Project activities within the 7 intervention schools will be more closely monitored and evaluated, and compared to control data gathered in schools which do not receive the pilot intervention. In addition, baseline and evaluation data will be gathered to measure the results of training and education activities for a representative sample of adults and

youth involved with the organizations described in community outreach and education component. Special emphasis will be placed on documenting successful practices and lessons learned so that teaching and outreach activities can be improved and eventually expanded within The Bahamas, and can contribute to strengthening of similar efforts elsewhere. At the end of the project, an inter-agency meeting will be organized to present project results and lessons learned.

III. EXECUTION OF THE PROJECT

A. Executing agency

- 3.1 The executing agency is the Bahamas Family Planning Association, a NGO legally established in The Bahamas in 1985. The organization has the institutional capacity to undertake the proposed project. The project design relies principally on the team of national and international consultants for execution and upon BFPA for coordination and public outreach activities.

B. Goods and services

1. Consulting services

- 3.2 In accordance with the agreement signed between the Bank and the Government of Japan, the utilization of the Japan Trust Fund for Consultancy Services (JCF) is tied to procurement in Japan. The Bank has identified an NGO specialized in family planning, the Japan Organization for International Cooperation in Family Planning (JOICFP), as the consultant firm for the project. JOICFP has 30 years international experience executing community reproductive health and family planning projects in 25 countries, including Mexico, Guatemala, Brazil, Colombia and Nicaragua and JOICFP is well qualified to undertake this assignment by virtue of its specialization and experience in working with local communities in training, institution building and public education activities and would be sensitive to the project's needs for cultural appropriateness. Moreover, JOICFP is seen as a "sister institution" to BFPA which lends both credibility and mutual respect to the activities envisioned.
- 3.3 Culturally sensitive activities such as the training activities and community education and outreach will be carried out by long-term national consultants contracted by the consultant firm in agreement with BFPA for the positions of National Project Coordinator (New Providence), the Coordinator in Grand Bahamas island, and four principal trainers.

2. Acquisition of equipment and materials development

- 3.4 The project includes the purchase of office equipment necessary to administer project activities and develop the new training materials. The estimated cost of US\$23,500 for equipment would provide computer hardware and software, photocopier, overhead

projectors, camcorder, TV monitors and VCR and office supplies during project execution. At the end of the project, the equipment would remain property of BFPA. Also included in the project is US\$40,000 budgeted for the publication, printing, and dissemination of educational and teaching materials related to the school-based intervention and workshop components; US\$100,000 for media programs including TV programming, video, radio spots; and US\$400 for the development of audio tapes in Creole. These expenses have been calculated based upon the details of project activities and beneficiaries, and current price quotes obtained in Nassau and in Japan for similar services and contracts.

C. Monitoring reports

3.5 The following reports on the execution of the project will be prepared by BFPA and submitted to the Bank to facilitate monitoring of project performance and impacts:

- a. Initial report. Within the first three months of project execution, the BFPA will submit an inception report to the Bank detailing the schedule of project activities for the first year of project execution. The initial report should indicate the sequence, timing and estimated costs of the materials development and training activities to be undertaken, and an assessment of the human resources required for each activity.
- b. Quarterly progress reports will be presented within thirty days after the completion of each three month period. The brief reports will review the activities undertaken in the preceding quarter, expenses incurred, disbursements requested and reimbursed, activities initiated and underway. Monitoring data should be summarized at least semestraly (including process and results indicators summarized in the logical framework - see Annex I).
- c. Interim and final evaluations will be presented at the completion of the first year of the school pilot intervention, and the first drafts of training materials, and at the end of project execution. These reports will evaluate both the qualitative and quantitative achievements of the project. Significant challenges, lessons learned and any course corrections or revision of project activities should be noted and explained.

D. Cost and financing

3.6 The total cost of the project is estimated to be the equivalent of US\$1.6 million of which US\$1,240,800 would be financed by the Bank with the resources of the Japan Trust Fund for Consultancy Services, and US\$359,200 would be provided by BFPA and GOB as local counterpart contribution. In addition to international consultant services, approximately US\$23,500 in computer and audio visual equipment for the project would be purchased in Japan. The summary costs are presented in the following table:

CONSOLIDATED PROJECT BUDGET (In US\$ thousands)				
	IDB/JCF	BFPA	GOBH	TOTAL
Management and Administration				
1. Consultants	297	0	0	297
2. Equipment and Supplies	23.5	5.0	0	28.5
3. Travel	20	0	0	20
4. BFPH Staff	0	134.5	0	134.5
IEC Component				
1. Consultants	423.9	0	0	423.9
2. Materials Development	140.4	0	0	140.4
3. Meetings and Workshops	12.6	0	0	12.6
4. Staff (Trainers)	0	0	214.5	214.5
5. Travel	277.2	0	0	277.2
Institutional Strengthening Component				
1. Consultants	10	0	0	10
Contingencies	36.2	5.2	0	41.4
Total	1240.8	144.5	214.5	1600

- 3.7 The Bank's contribution, will finance 144 expert/months of international and local consulting services and the bulk of the cost of developing training materials and conducting all workshops and activities planned in this project. The local contribution of US\$359,200 represents the percentage of BFPA regular staff salary expenses chargeable to project activities project during the period of project execution (US\$134,500) and the estimated two year salary value for the three trainers who will be provided by GOB (US\$214,500) as well as the cost of independent annual audits, office supplies and contingencies.

E. Disbursements

- 3.8 The project will have an execution period of 32 months. The disbursement period will be 36 months, allowing several additional months for any eventualities.
- 3.9 Prior to the first disbursement of Bank resources, and in addition to the standard beneficiary obligations in technical cooperation agreements, BFPA shall have signed a letter(s) of understanding with the Government indicating the agreements reached regarding the execution and products of the project including, among others:

(i) the establishment and guidelines of the Inter-Agency Coordination Committee; (ii) the GOB provision of three persons for two years each to be trainers in the project, at no cost to BFPA; and (iii) the collaboration in the public schools and development of the teaching module. Also prior to first disbursement, BFPA shall have negotiated in principle the terms of reference and scope of work with the consultant firm.

F. Environmental review

- 3.10 The Committee on Environment and Social Impact reviewed the document on December 19, 1997 and had no comments.

IV. BENEFITS AND RISKS

- 4.1 This project is expected to contribute to reducing unintended adolescent pregnancies and the risks of contracting STIs in The Bahamas. Information, education and services on adolescent reproductive health will be improved, more accessible and more effective on New Providence and Grand Bahamas. As a result, the project will contribute to reducing the number of repeat teen pregnancies, and increasing the capacity of young girls and boys to communicate and to protect themselves. It will also encourage young men and women to take greater responsibility for their own health.
- 4.2 At the end of the project, there will be a collection of materials which can be utilized repeatedly for many years beyond the life cycle of the project and a cadre of local trainers and community leaders with greater capacity to address adolescent reproductive health issues. The improved monitoring and management capabilities within BFPA would ensure its long-term effectiveness in delivering reproductive health education and services. Given the nature of the organization, its long term financial sustainability will continue to depend on donations from the community, small fees collected for some services, and contracts with the government. To improve the long-term institutional perspective, the Board of Directors, which is comprised of community leaders and doctors, would receive training in strategic planning and fund-raising.
- 4.3 The project may face challenges related to the conservative nature of Bahamian society and reluctance to deal openly with the issues of pregnancies out of wedlock and STIs, including AIDS. This risk will be mitigated, however, by the growing level of national awareness of the socioeconomic impacts of teen pregnancy and STIs, and the expanding network of governmental and community support for the BFPA. In addition, the project has been conceptualized and is being prepared through a process of consultation and collaboration with government, non-governmental organizations and opinion leaders in The Bahamas to ensure a broad base of support and collaboration during and after the life of the project. The project activities are being designed to specifically complement and even to directly

support new or existing governmental programs, primarily those of the Ministries of Health and Education.

- 4.4 To maximize the effectiveness and cultural sensitivity of the project's educational activities, the project has been designed in such a way that all educational, training and community outreach activities will be implemented by Bahamians, whereas the international consultants will provide technical expertise and support backstopping the public outreach activities.

LOGICAL FRAMEWORK
BAHAMAS ADOLESCENT REPRODUCTIVE HEALTH PROJECT

DESCRIPTION	VARIABLE INDICATORS	MEANS OF VERIFICATION	ASSUMPTIONS
Contribute to the reduction of unintended adolescent pregnancy and STIs in The Bahamas.	<ol style="list-style-type: none"> Declining rate of pregnancies among 10-19 yr. old girls. Declining incidence of STIs among 10-19 yr. old girls and boys. 	<p>National health data as collected by the Ministry of Health and BFPA, hospital and clinic records.</p> <p>Ministry of Health statistical reports BFPA, hospital and clinic records.</p>	<p>The overall socioeconomic situation of The Bahamas remains relatively constant.</p> <p>Most pregnancies among adolescents are unintended.</p> <p>More intensive education, counseling and improved information will contribute to a reduction in unintended pregnancies and STIs incidence among teenagers.</p>
<p>Objectives:</p> <p>Develop and implement a reproductive health IEC program for adolescent boys and girls and the adults who influence them, to increase their knowledge about how to avoid unintended pregnancy and STIs.</p>	<p>Increase in RH/FP Knowledge, including pregnancy and STI prevention, of male and female adolescent participants.</p>	<p>Ante-and-Ex-post assessments of participant's knowledge. (Composite knowledge score of a representative sample of (i) students in intervention schools, and (ii) youth in the programs of other participating organizations).</p>	<p>Government continues to support national reproductive health education efforts, particularly those geared to reduce teen pregnancy and STIs.</p> <p>Continued support of schools and parents for the program's educational activities.</p> <p>Access to RH/FP counseling and services increase through the National Family Planning Program and BFPA.</p>
	<p>Increase in the # / % adolescent participants who know of at least two sources of information and services for RH/FP.</p>	<p>Same as above</p>	<p>Sexual and reproductive health education contributes to changes in adolescent behavior.</p>
	<p>Total number of direct beneficiaries of training and educational seminars Target: approximately 1150.</p>	<p>Interim and Ex-post evaluations</p>	
<p>Specific Objectives (con't)</p> <p>Strengthen BFPA's institutional capability to continue and sustain activities.</p>	<p>Additional funds are raised by the Board of Directors for overall program of activities and the Board has developed a strategic plan.</p>	<p>Consultant's report Ex-post evaluations.</p>	<p>Board of Directors assumes active role in strategic planning and fund-raising.</p> <p>Turn-over of Board and staff members is minimal during the life of the project.</p>

DESCRIPTION	VARIABLE INDICATORS	MEANS OF VERIFICATION	ASSUMPTIONS
	Capacity of BFPA staff in financial administrative management, program planning and materials development improved.	Consultant 's report Interim and Ex-post evaluations.	
<u>Components/Activities</u>			
Information, Education and Communication (IEC)			
School Intervention: Training of Teachers/Guidance Counselor	<p>Total # of teachers/counselors who complete the training (m/f)</p> <p>Targets: 200 public school on NP and GB, 100 private school and/or schools from Family Islands; minimum of 30 faculty and student teachers at College of the Bahamas.</p>	Project progress reports	Ministry of Education and school principals continue to support and endorse project activities.
	<p>Improvement in teacher performance teaching RH within FLHE classes</p> <p>(e.g. Presentation of accurate RH information in FLHE class, ability to field RH questions, use of non-didactic techniques, etc.)</p>	Trainers' reports on teachers performance in 7 intervention schools; and project evaluations.	Most teachers and counselors will remain involved over the life of the project.
Training of Peer Counselors	<p>Total # of adolescents who complete peer counselor training (m/f)</p> <p>Target: 75 per counselor on NP and GB</p>	Project progress report	
	% of peer counselors who carry out program of activities in primary and secondary schools.	Trainers' reports of performance of peer counselors from intervention secondary schools; and project evaluations.	Overall acceptance of peer counselors by school-aged youth.
Sensitization and Education of Parents	<p>Total # of parents who attend sensitization/ educational sessions</p> <p>Target: 350 parents from 7 intervention schools as well as PTS's from other schools. (m/f)</p>	Project progress reports	Acceptance of the majority of parents of the school-based reproductive health education program.

DESCRIPTION	VARIABLE INDICATORS	MEANS OF VERIFICATION	ASSUMPTIONS
Community Education and Outreach:	# of sensitization and training sessions implemented, Target: approximately 17	Progress Reports	Support of the Bahamian community for efforts to reduce rates teen pregnancy and STIs in The Bahamas, and reproductive health education for adolescents.
	# of beneficiaries, per target group (m/f) Targets: approximately 400 community leaders, parents and leaders from Haitian community, staff and volunteers from programs targeting males, programs targeting out-of school youths, community nurses and other health professionals, faculty and/or student teachers from School of Nursing		
	Increase in the knowledge of participants on adolescent sexuality and reproductive health issues	Ante- and ex-post assessment of participants knowledge (composite knowledge score).	
	Increase in #/% of participants who know at least one source of information and/or services for adolescent RH.	Same as above	
	Increase in #/% of participants who incorporate RH issues into programs and activities with adolescents.	Interim and ex-post evaluations	
Materials Development and Dissemination	All educational and community outreach materials are developed (or adapted from pre-existing one)	Progress reports	The Inter-Agency Review Committee and pretesting will ensure quality and relevance of the materials.
	# of copies disseminated, by type of material, and by target audience Targets: 250 modules for FLHE, 250 teaching manuals, 5,000 posters, 5000 resources booklets & fact sheets, 120 audio tapes and other materials translated into Creole.	Progress Reports	

DESCRIPTION	VARIABLE INDICATORS	MEANS OF VERIFICATION	ASSUMPTIONS
	# of radio programs, t.v. programs and/or service announcement aired during the life of the project. Target: minimum of one program bimonthly aired nationally.	Progress Reports	
Institutional Strengthening: Training of BFPA staff	BFPA receives technical assistance and training on financial management, strategic planning, data management and analysis, and materials development.	Final reports of consultants hired for project execution; progress reports	BFPA staff work closely with project consultants during project execution. Turnover of BFPA staff is minimal during the life of the project.
Materials Development	BFPA staff develop or utilize project materials for other on-going RH activities	BFPA annual reports; Interim and Ex-post Evaluation	BFPA continues to implement its other on-going educational activities during the life of the project.
Data Management and Project Monitoring	Computerized data management and monitoring system set up and running efficiently within BFPA.	Final report of consultants hired for project execution; project progress reports.	
Strategic planning and fund raising by the Board of Directors.	Multi-year strategic plan, including fundraising plan, is developed and implemented.	Final report of consultant hired for project execution; and ex-post evaluation.	Board of Directors assumes active responsibility for strategic planning and fund-raising activities.

PROPOSED RESOLUTION

COMMONWEALTH OF THE BAHAMAS. NONREIMBURSABLE TECHNICAL
COOPERATION FOR AN ADOLESCENT REPRODUCTIVE HEALTH
EDUCATION PROJECT

The Board of Executive Directors

RESOLVES:

1. That the President of the Bank, or such representative as he shall designate, is authorized, in the name and on behalf of the Bank, as Administrator of the Japan Trust Fund for Consultancy Services established pursuant to the letter agreement dated February 15, 1995 between the Government of Japan and the Bank, to enter into such agreements as may be necessary and to adopt such other measures as may be pertinent for the execution of the plan of operations referred to in Document AT-_____ with respect to a technical cooperation with the Bahamas Family Planning Association for an Adolescent Reproductive Health Education Project.
2. That up to the sum of US\$1,240,800 is authorized for the purposes of this resolution, chargeable to the resources of the Japanese Trust Fund for Consultancy Services.
3. That the above-mentioned sum is to be provided on a nonreimbursable basis.