



TUPANGE PAMOJA

NEWSLETTER | ISSUE 2



Implementers conducting Sisi kwa Sisi Coaching on TCI University

SISI KWA SISI COACHING ON EVIDENCE-BASED INTERVENTIONS FOR FAMILY PLANNING



Paul Nyachae, Project Director, The Challenge Initiative (TCI) East Africa – *Tupange Pamoja*

Dear readers, we trust you enjoyed our first newsletter issue and welcome you to our second issue that highlight's Tupange Pamoja's peer-to-peer coaching strategy

...continued on pg 2 >>

STAFF VOICES - MEET MARY AND MAGDALENE.

By Mary Joseph & Magdalene Mbondo

Most health facilities lack the essential skills to implement TCIs evidence based high impact interventions in family planning and AYSRH. In cities where Tupange Pamoja is implementing, there is a shortage of skilled providers. Through Sisi kwa Sisi coaching, Tupange Pamoja is building the capacity of health providers to

enhance the quality of FP services and resolve this gap.

Celebrating their successes and learning from the challenges, Mary Joseph and Magdalene Mbondo–Tupange Pamoja city focal persons, share their experiences in coaching and training health care workers.

...continued on pg 2 >>

>>...continued from pg 1

“Sisi-kwa-sisi”! Sisi-Kwa-Sisi (a swahili term loosely translated “from us for us”) is an innovative peer-to-peer learning strategy that uses counterpart coaching and mentorship to transfer knowledge and skills. A substantially cost effective capacity building approach that is vital in facilitating program scale in limited resource settings.

In this issue, you will hear from TCI staff on their experience with Sisi-kwa-Sisi coaching at the geography level and we share stories on how your cities have applied this strategy at different levels. It also contains an update on TCI University including an introduction to an exciting and free learning effort dubbed ‘TCI U Thursday’!

I wish to thank the Ministries of Health of Kenya, Uganda and Tanzania and the local government leadership across the three countries for their continued leadership and governance, our partners for their commitment in implementation and the Bill and Melinda Gates Institute for Population and Reproductive Health, for their visionary guidance and support.

And now, because learning is a treasure that will follow its owner everywhere, I invite you to read and learn from the contents of this issue. Don't forget to Sisi-Kwa-Sisi with your colleagues as well! 

Happy reading!
Paul

QUICK TIPS

- Focus on that which you can change
- Involve leadership and local community gate keepers during FP advocacy campaigns
- Addressing sociocultural attitudes to contraceptives is vital in improving uptake by young people.

>>...continued from pg 1



Mary (on the left) and Magdalene sharing their experience on coaching implementers at TCI sites

WHAT WE HAVE LEARNED

According to Mary, the Tanga City manager, it is more manageable to focus on that piece we can change: creating a conducive environment where women and girls' access to quality reproductive health through coaching health providers on best practices in family planning.

Magdalene exemplifies the importance of leadership and local community involvement, in raising awareness on the benefits of family planning. Thanks largely to the support of the local government leadership, the coaches at city level are now able to provide quality services at local facilities. In addition, frequent and systematic training for providers to offer reproductive health services; and sensitization of all members of the healthcare system on the same is critical for program success.

“When I joined the Challenge Initiative, we were introduced to a unique coaching model where we would identify and select experts within the Ministry of Health whom we coached so that they could coach their peers. At first, we were able to reach approximately 25 coaches and another 150 participated in whole site orientations organized by the health facilities in Nairobi County”, says Magdalene

WHAT DID NOT WORK

Competing tasks and ever-increasing demand for reproductive health services has persisted. High staff turnover of the coached health providers mostly from administrative reposting. Nonetheless, we are creating a pool of coaches, we hope will buffer these challenges.

WE HAVE ACHIEVED

Thanks to Sisi kwa Sisi approach, we have master coaches in all Tupange Pamoja supported facilities. The coaches now rove as master trainers and coach their peers at facility and community level. A Sisi kwa Sisi coaches database has been created to provide a one-stop directory for information on available coaches and ease access to this resource.

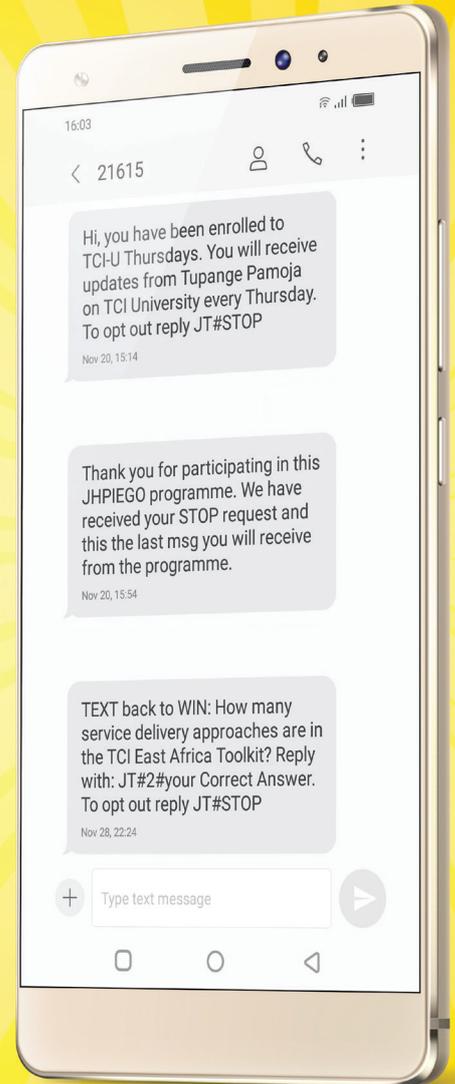
OUR PLAN

To continue coaching our implementers to become better than us in family planning programming. Also, to ensure Sisi kwa Sisi lives on, we will continue learning to better support our women, men and youth to access quality reproductive health services.

TCI U THURSDAYS LAUNCHED

This is an interactive SMS sharing and learning concept where we are engaging with implementers across East Africa to offer updates, encourage learning and get rewarded.

To enroll send a text to SMS code 21615 and join us every other Thursday to learn and win great prizes!



WHAT'S NEW WITH TCI-U?

- Assessment certificates are now emailed to you immediately upon scoring a passing grade.
- You can also now receive a certificate for completing an entire Program Area.
- Assessment questions have been added to all approaches! Gain more achievements!
- New proven approach added to EA's toolkit on PFP based on TCI implementation and results in Tanzania.
- Updated guidance from TCI Implementation in
 - Improving Family Planning Commodity Management and
 - Increasing Access to Family Planning Through In-Reaches

WEBINAR ALERT:

East Africa Hub hosted a webinar on Attracting Youth to Integrated Community Outreaches. The webinar provided insight on how to ensure outreaches offer a safe space for adolescents and youths to access sexual and reproductive health information and services thus breaking barriers that hinder traditional access at fixed facilities.

Listen to the webinar recording here: <https://tciurbanhealth.org/topic/webinar-attracting-youth-to-integrated-family-planning-outreaches-in-east-africa>

SISI KWA SISI COACHES SPOTLIGHT



Janet Adongo (front row center) with the facility makeover team in Nigeria

clinic makeover and worked with the voluntary health teams (VHTs) for client mobilization in the community.

It was very interesting to learn that the 72-hour clinic makeover creates mindset change among key stakeholders on family planning service delivery. I learnt how to incorporate advocacy, demand generation, service delivery and continuous monitoring and evaluation throughout the activity in order to make it a success. In all the phases of the 72-hour clinic makeover, continuous consultations are critical as the commitment from stakeholders ensures smooth processes flow."

What was appealing about the 72-hour clinic makeover?

"When we were preparing program designs for cities in Kampala, we relied on TCI U to identify the activities to focus on. Every now and then the issue of the quality and standards of family planning services was brought up by the implementers. They were willing to offer the services, however the facilities lacked designated service areas, equipment – like insertion

sets, procedure lamps, storage area for commodities/supplies, water source, furnished waiting space including procedure couches. As the implementers were navigating TCI U, they saw the Nigeria 72-hour came up, they asked us if this was possible. We agreed and embarked on a learning visit with one of the implementers to learn more about the makeovers."

What did you learn?

"I am honored to have gone to Nigeria to participate in a 72-hour

What do you like best about the Sisi kwa Sisi Coaching on the 72-hr Makeover in Nigeria?

"The process is now documented on TCI U and we have so conducted eight facility makeovers. Every time we visit our implementers from other cities they always ask us when you are coming to coach us, we want to do the makeover even if it is a small thing to help us serve our clients"



Miss. Kylie Gyubi

TRANSLATING KNOWLEDGE TO PRACTICE

ARUSHA – TANZANIA

By Owen Mwandumba,

Part I: Learning + Practice

Passionate about saving lives, Kylie Gyubi has been a champion in remodeling health care provision in Arusha District. In less than a year, she has helped her district to improve service provision focusing on reproductive health with startling success.

As a registered nurse, working as a provider at Moivo Dispensary in Arusha District, Gyubi brought an innovative approach to her facility which supported them to emerge the best among 15 health facilities in the region.

For her, it all started when she was selected to join two other health providers from her district to attend a three day orientation in Dar es Salaam organized by The Challenge Initiative Project on an intervention dubbed "Sisi kwa Sisi".

"It was December 2018 when I was nominated by my district nursing officer Mrs. Augusta Komba, to join the District Reproductive Health and Child Coordinator (DRCHCo) and the Family Planning Coordinator to attend a three-day mentorship in Dar es Salaam to learn and experience practically on how to provide health care services whilst focusing on key high impact intervention on reproductive health including family planning". Says Gyubi.

While in Dar es Salaam during these makeovers, Gyubi and fellow staff from Arusha learned how their counterparts are modeling changes. She was specifically interested in understanding the details of provision of family planning services specifically to youth.

"We visited, Ubungo, Kigamboni and Temeke municipalities which are among TCI geographies and we were exposed to various key impact areas such as on how they are providing friendly services to youth, empowering

unskilled attendants like watchman, cleaners, and other technical staff on the basic information needed while attending to clients at the facility (Whole Site Orientation). We also learned how they conduct outreach and in reach services including having a special day dedicated to working clients who can't attend services on weekdays" added Gyubi

When they come back to Arusha, Gyubi wanted to transform her Dispensary at Moivo by adopting some of the interventions she had learned. Her plan was to start mentoring her fellow providers focusing on youth friendly services. Upon arrival, she immediately embarked on her ambitious plan. In less than two months, Moivo Dispensary was established as a youth friendly service site and formed a group for pregnant women below 25 years, where they could access reproductive health services in privacy. They expanded their work week to include Saturdays to accommodate working women.

"I was very ambitious and every day I imagined how helpful this will be if I adopt some of the methods we have learned. Thank God that our District Nursing Officer (DNO) Mrs. Augusta Komba, was very supportive. She was so happy to see that we are transforming Moivo Dispensary with innovations adopted during Sisi kwa Sisi training. Besides that, I have established Enyoito Girls Group, First Time Parent Group, Moivo Boys Group and Bodaboda Group" says Gyubi.

"I wanted something different for my team to commemorate International nursing Day. This year the theme was "Health for All" so the success of the Sisi kwa Sisi model at Moivo Dispensary drove my ambition to have all nurses in my district empowered with new skills. I opted to include it in our plans, and set a team that helped many facilities to learn about best practices done in Moivo Dispensary". Says Mrs. Augusta Komba.



Arusha District Nursing Officer Mrs. Augusta Komba speaking to a group of women attending a clinic at Olturumet Hospital

Part II: Diffusion

For years, Mrs. Komba the in-charge of all nurses in the district (DNO), had dreamt of celebrating International nurses' Day differently from the very common traditional way of having a party and speeches. When she visited Gyubi at her facility and saw the transformation Moivo Dispensary was going through, something sparked in her mind. It was an idea to diffuse the training Gyubi and her team received in Dar es Salaam during the International nurses' Day. She wanted all the nurses from her district to learn and practice as part commemoration of this day.

To make the event more exciting the team prepared a checklist with items that would be ideal for each facility in the district to learn and improve on. Then for over a month, they managed to visit and orient staff from the regions 15 facilities supported by TCI, through coaching and mentorship on how to conduct community dialogues, integrated FP outreaches, in reaches, data management and use.

"All nurses were well equipped through these visits. To assess the impact, we set aside five days before the International nurses Day for facility evaluation on progress made. From the evaluation, Moivo Dispensary emerged the winner with a score of 80% followed by Mungushi Dispensary and Kioga Dispensary both at 78%", says Gyubi

TCI's Sisi kwa Sisi approach has now been adapted beyond the 15 health facilities supported by TCI in Arusha District. Mrs. Komba believes that this approach could help expand access to sexual and reproductive health services beyond her district as she promised to continue supervision visits on a quarterly basis.



Beth (in pink) providing coaching to a colleague at Busia HC IV facility

At the beginning of the mentoring relationship, each mentor/mentee pair creates goals for the period with a focus on family planning, and adolescent and youth sexual reproductive health. "With this training, I am now more confident and able to counsel women, men and girls feel comfortable when they come to seek for information or services. Tupange for Better Cities is indeed helping us to break through the barriers to accessing sexual and reproductive health services for all," adds Beth.

Mentors support mentees with strategies for providing quality services, combating myths and misconception, integrating services within delivery points, and overall professional development. Members communicate through the various platforms such as WhatsApp or face-face and share their experiences.

"Following the training, I now dedicate my time to coach my peers too. We organize whole-site orientations on a quarterly basis and even mentor other providers during in reaches and outreaches. When I returned to work, I wanted to help more women, men and girls achieve their goals. Some young girls tell me they want to become nurses like me; it is my calling to help them", says Beth.

Working with her mentor, Beth has been able to learn how to provide post pregnancy family planning services including post-abortion care. Developing more mentors for family planning and reproductive health, has far-reaching benefits. In many cases, the providers are able to provide better care and are more responsive to the needs of their clients. Similarly, they are able to increase access to services within their communities creating more responsive and efficient health systems.

"As the focal person in this facility, am not only confident in provision of family planning services, but also determined to ensure all facilities in Busia Municipality has qualified providers. If all of the facilities could coach more providers, we would have great success. Things will change and it will be easier to talk to the program implementation team to advocate for more resources for family planning," Beth concludes.

SUPPORTING HEALTH CARE PROVIDERS TO SAVE THE LIVES OF WOMEN

BUSIA - UGANDA

By Dr Nathan Tumubone,

In Uganda, gaps in human resource for health are among the factors underlying low provider performance for services in particular reproductive health. While there are efforts to supporting health care providers to provide quality services, mechanisms for motivating and training them are lacking.

Wanyenze Beth is a committed nurse determined to change the delivery of family planning services in Busia Municipality. "Having a keen interest in family planning, I kept asking the in-charge of the Municipal if she would be willing to coach my colleagues and I on how to offer modern contraception—providing just information made me realize this is what I wanted to do. Later on,

we were invited for family planning mentorship sessions organized by the Ministry of Health and The Challenge Initiative (TCI) on provision of long acting reversible contraceptives (LARCs). This training also provided for low cadre workers to join and learn with their peers." Beth explains.

"I learnt so much during the mentorships including how to address the myths and misconceptions around family planning. When women and men came to the facility previously, I could not answer their questions confidently. In many ways, providing quality family planning services should be inherent in what we do," Beth says.



FROM ALLOCATION TO EXPENDITURE: TACKLING TEEN PREGNANCY IN NYAMIRA COUNTY

NYAMIRA - KENYA
By Nancy Aloo,

Despite having a family planning program, Nyamira County had limited budget and capacity among health workers to meet the sexual and reproductive health needs of adolescents and youth. This challenged the county's ability to consistently deliver high quality youth-friendly services for many young girls and boys. But, when the Tupange Pamoja team was invited to Nyamira to market The Challenge Initiative's (TCI) adolescent and youth sexual reproductive health (AYSRH) approaches – the County Health Management team immediately allocated funds to address the high teenage pregnancy rates.

According to the Kenya Demographic and Health Survey (2014), more than 28% of girls in Nyamira between 15-19 years have already begun childbearing, which is considerably higher than the national average rate of 18%. Specifically, 4.3% are pregnant with their first child and 23.5% have ever given birth compared to 3.4% and 14.7%, respectively, at the national level.

In response to these challenges, TCI helped the county conduct integrated outreaches at all their health centers targeting first-time parents ages 15 to 24. The county bought a vehicle to drive community health volunteers through urban centers to talk to young women about modern child birth spacing methods, including addressing myths and misconceptions.

“During the outreaches, the crowds have been swelling from about 15 people a day to even 65. Most of them are young girls and mothers. Some come carrying their children. We listen to them and explain to them the different methods available at the health facilities,” said Nelson Osoro a community health volunteer based at the Nyankongo community unit.

Although services were available, commodities were in short supply as well as trained providers who could offer youth-friendly services. Using the Commodity Management approach from TCI University, commodities were redistributed and the team was

trained on forecasting and re-ordering FP commodities. At the beginning of the year, the Reproductive Health Coordinator mobilized all key personnel to refine their strategic and annual work plans to include:

- Strengthening the capacity of the health teams to effectively offer youth-friendly services
- Increasing access to accurate information on contraception services through radio programs
- Integrating family planning into routine RMNCH services and
- Reviving community health units to create platforms to talk about family planning at the community level

RESULTS

After successfully conducting 15 integrated outreaches in Nyamira, the county's efforts are beginning to bear results. Over 2,900 first-time mothers received services at all sites supported by TCI. According to HMIS data, 4,595 women ages 15-24 years received a family planning method, an 82% increase from the previous year (see chart below).

DATA RUSH



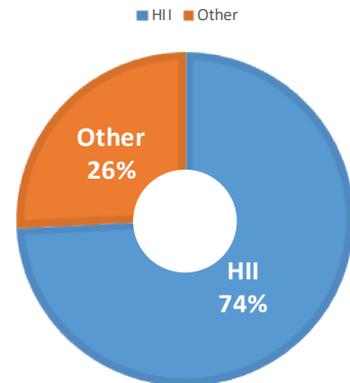
2,305

Coaching sessions conducted

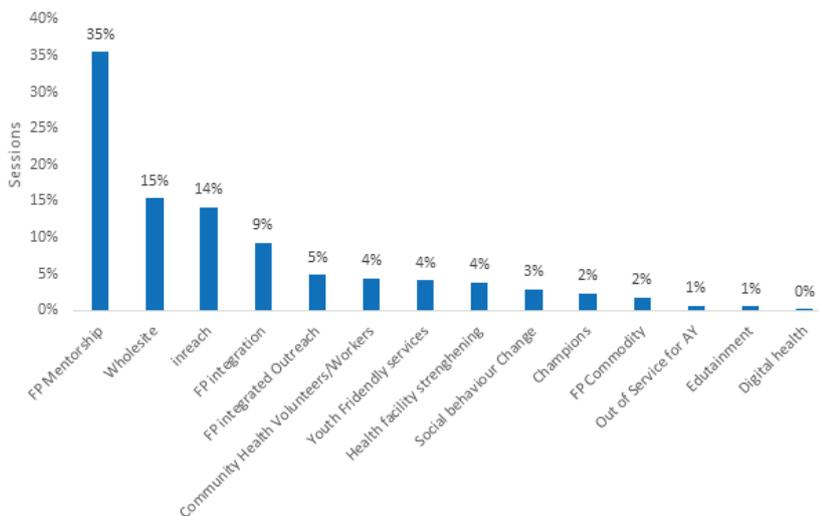
DISTRIBUTION OF COACHING BY THEMES

74% of the coaching sessions reported were on the high impact interventions with the rest being on accountability, leadership, TCI U orientation and navigation.

COACHING BY CATEGORY

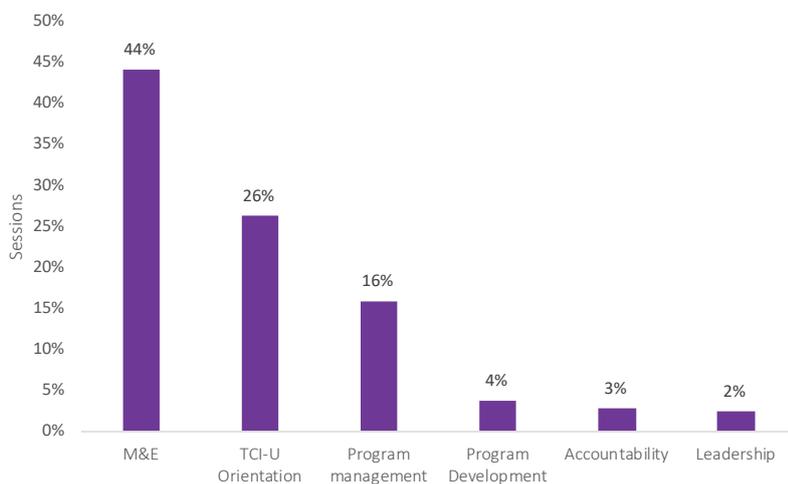


Distribution of HII interventions by sessions reported



(Source: Program data as 31st October)

Distribution of other areas coached by % of total sessions (n=609)





"After the Sisi-kwa-Sisi coaching, our outreach numbers have multiplied by more than three times. We have now started conducting targeted outreaches and we only integrated 2-3 other services to avoid losing focus. We are now referencing TCI-University toolkit to ensure that we are adopting what has proven to be the best practices."

Miss Pauline Ochola, Embakasi East Sub-County, Nairobi.



"Sisi kwa Sisi is a powerful way of sharing knowledge. As individuals, we have been able to exchange knowledge and experience with each other, and take it back to our facilities. Ultimately, learning takes place between us as we interact at a personal level - we trust each other."

Ziada Sella, Reproductive and Child Health Services Coordinator - Dar Region.



"The TCI focal person at Nansana Health Centre II-Wakiso District, Uganda coached me on engaging community members when talking about family planning including door to door mobilization when we have outreaches and in reaches. As a result, the local Council Chairperson in my village always calls me to go and talk about family planning when they convene their meetings. What can I tell you? Even my social status has been elevated because of TCI. I will also coach my fellow village health teams"

Nalunkuma Susan - VHT Nansana Municipality

SPOTLIGHT INTERVENTION – SISI KWA SISI COACHING

Sisi-Kwa-Sisi [Swahili word loosely translated 'from us-by-us'] is Tupange Pamoja's innovative peer-to-peer learning strategy that uses counterpart coaching and mentoring to facilitate knowledge and skills transfer to foster greater diffusion, sustainability and scale up of FP/AY High Impact interventions.

GUIDING PRINCIPLES



Adhering to the **Lead-Assist-Observe coaching framework**, Tupange Pamoja coaches provide technical support at the initial stages of identifying "experts" in different thematic areas i.e. service, demand, advocacy, M&E etc. These individuals are identified based on their demonstrated competency to implement a particular approach as well as their willingness to serve as a coach to their peers. At city or facility level, the coachee's supervisor may also be involved so that joint observations can be made.



TCI University remains the guiding source of information during all coaching sessions including access to the online community of practice and WhatsApp Groups for continued support.



Selection of theme areas and facilities for coaching is **data-driven** provided through various sources including TCIs PMIS provided within the TCI dashboard, PMA Agile survey results and HMIS service data.



The frequency for coaching varies from city to city based on the local government dynamics and the identified needs.

Type of Sisi-kwa-sisi

- Intra-geography / Sub-geographies
- Inter geography
- Inter country
- Amongst TCI staff

Area of Coaching

- TCI High Impact Interventions
- M&ER and data use
- Program management
- Financial management
- Leadership

Key outcomes

- Decreased cost of coaching
- Rapid diffusion of innovations
- Sustained capacity
- Recognition of champions and coaches

PICTURE SPEAK



The Challenge Initiative (TCI) team at the ICPD25 Nairobi Summit



Courtesy call on Nairobi County health officials with TCI and Bayer AG team



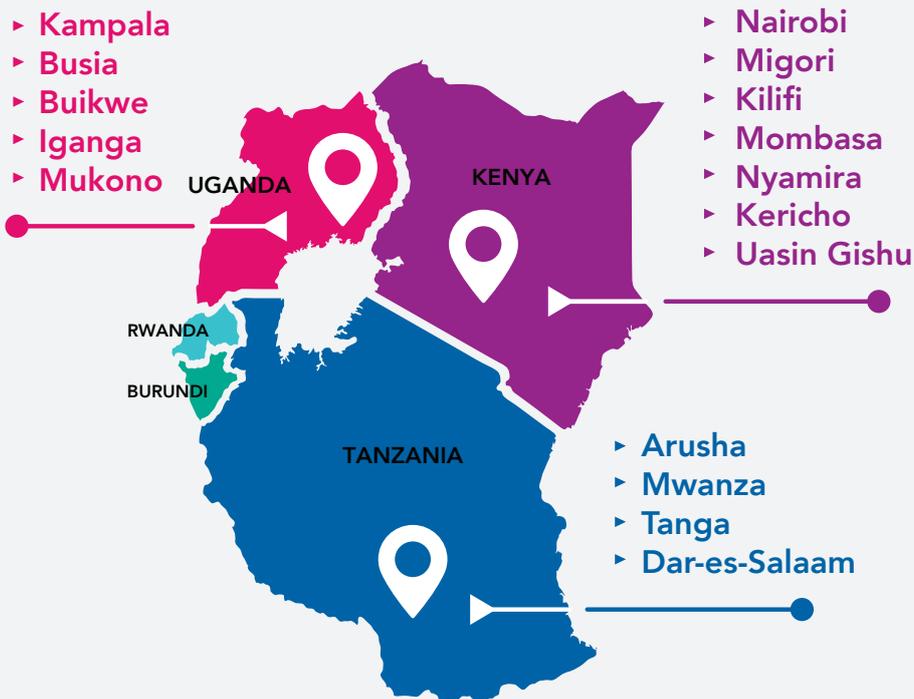
Dr. Clea Finkle - Program Office at the Bill & Melinda Gates Foundation engaging with health care providers from Mukono Health Centre IV

PICTURE SPEAK



Meeting with CEC Health Dr Anisa and CEC Gender, Culture & Sports Ms. Mwangovya and Dr Clea Finkle from the Bill & Melinda Gates foundation in Kilifi County

EAST AFRICA FOOTPRINT



📍 Plot 72, Block 45B, Victoria Area,
New Bagamoyo Road
✉ P. O. Box 9170, Dar es Salaam, Tanzania
☎ Tel: +255222771346/0756888388

📍 2nd Floor, Arlington Block 14 Riverside,
off Riverside Drive
✉ P. O. Box 66119-00800 Nairobi, Kenya
☎ Tel: +254732134000

📍 Lower East Naguru Rd.
✉ Kampala, Uganda
☎ Tel: +256393202937

✉ tci-eastafrika@jhpiego.org