



**USAID**  
FROM THE AMERICAN PEOPLE

# *ParlerHealth*



## **West Africa Regional Mission | Regional Health Office ParlerHealth October 2021 Edition**

*Volume 9, Issue No.*

### **NOTE FROM THE OFFICE DIRECTOR**

Greetings everyone!

Welcome to the new look of USAID/West Africa's Regional Health Office quarterly ParlerHealth newsletter of activity updates, programmatic highlights, resources and announcements.

You may have noticed that the format of this issue looks different from our typical newsletter. We are currently experimenting with new formats of communications outreach. Please bear with us as we experiment and identify a new way to keep you in the loop.

This issue's highlights include:

- Updates from our partners
- Resources

- Announcements

As always, I hope you find this newsletter interesting and relevant to your work. For any questions or comments regarding this and future newsletters, please contact Christiana Ayine ([cayine@usaid.gov](mailto:cayine@usaid.gov)) and Alaa El-Bashir ([aelbashir@usaid.gov](mailto:aelbashir@usaid.gov)).

Regards,

Akua Kwateng-Addo  
Regional Health Office Director  
USAID/West Africa

## Activity Updates

# Family Planning/Reproductive Health

## USAID/West Africa Commemorates World Contraception Day

USAID/WA Regional

Access to voluntary family planning (FP) services is vital for safe motherhood and healthy families. Having a choice of modern contraceptives allows couples to plan and space births, ensuring families have the means to properly care for their children. In the infographic below commemorating World Contraception Day 2021, check out how USAID's partnership with other stakeholders is increasing contraceptive investments and improving health outcomes in West Africa.



Read more about the USAID/West Africa health Program [here](#).

## **USAID Survey: 58 Percent of Youth Lack Access to Modern**



### **Family Planning Knowledge in Nigeria**

*Youth gather to discuss family planning.*

USAID/Nigeria

According to a new study, a majority (58 percent) of Nigerian youth had little knowledge about modern family planning and prevention of diseases during their first sexual experience. Among respondents who had already engaged in intimate relations, only 29 percent had used any form of contraception.

USAID, through the Youth-Powered Ecosystem to Advance Urban Adolescent Health activity, empowers teenagers from ages 15-19 in Kano and Lagos states with health services, education, and life skills that will guide them to make informed choices about their future. Recently, the Youth Ecosystem activity conducted a study among adolescents including guardians, community influencers, and health care providers aimed to provide more context and information on factors that guide adolescent behavior and available sexual health services.

Survey respondents had previously visited a wide range of healthcare providers in Lagos and Kano, including private sector providers, and had some knowledge about contraception. However, a majority of the adolescents, parents, and influencers all believed that the quality of sex education was poor in their communities. Nearly two

thirds of parents felt inadequately equipped to provide information on reproductive health. Despite this, 64 percent were unwilling to allow adolescents to seek information outside of their community, even if they were sexually active.

Research findings shaped elements of program design such as identifying appropriate project locations, highlighting opportunities for private sector engagement, and training healthcare providers in client-centered family planning, while reinforcing community structures that support adolescents. The Youth Ecosystem activity also trained more than 70 healthcare facilities in youth contraception provision. In only three months, 200 youth began using contraception for the first time.

Read more about USAID/Nigeria's health program [here](#).

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## Family Planning Game Changers: Bureau for Global Health Commemorates World Contraception Day



*Photo credit: PATH/Gabe Bienczycki*

Excerpts from Bureau for Global Health webpage:

More than six decades after the introduction of the first oral contraceptive pill, access to modern contraception has transformed the lives of millions of people around the world. By empowering individuals with the ability to choose whether, when, and how many children to have, modern contraception has improved global health and well-being—protecting the health of mothers and children, advancing gender equality, and [accelerating progress toward the Sustainable Development Goals](#). Throughout its history, USAID has supported access to contraceptives by investing in the development of nearly every modern contraceptive method on the market, providing leadership on [high-impact practices for family planning](#), and investing in cutting-edge programming to holistically improve access to a broad range of contraceptives and family planning.

On September 26, USAID joined the world in celebrating World Contraception Day and recognizing the impact of contraceptives on the health and well-being of all individuals. Read more about the family planning game changers piece [here](#).

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## Why Do Young People in West Africa Stop Using Contraceptives?



*Youth inclusiveness in contraceptive use*

Authors: Cathryn Streifel and Aïssata Fall, PRB

Across West Africa, there is growing discussion about approaches to address barriers to sustained youth contraceptive use. [PRB](#), [Réseau des Femmes Sénégalaises pour la Promotion de la Planification Familiale](#), and [Knowledge SUCCESS](#) hosted a policy dialogue on May 26 with policymakers and youth leaders to explore solutions.

The event featured several presentations and a discussion with the Honorable Assoupi Amèle Adjeh, a parliamentarian from Togo; Dr. Siré Camara from Guinea's Ministry of Health; Magistrate Fatimata Sanou Toure from Burkina Faso; and Mayor Angelo Evariste Ahouandjinou of Abomey-Calavi, Benin's largest municipality.

Fatou Diop (Alliance Nationale des Jeunes pour la Santé de la Reproduction et la Planification Familiale – Senegal) and Rachid Awal (African Youth and Adolescents Network – Niger) pointed to provider bias as a challenge for young people and offered policy recommendations based on a PACE [policy brief](#). Hervé Bassinga, a researcher at the Institut Supérieur des Sciences de la Population, shared his findings that many best

practices for sustaining youth contraceptive use are not reflected in policies in Benin, Burkina Faso, Guinea, Mali, and Togo.

Three lessons emerged:

- Youth should be included in the policymaking and program design process and their role should not be limited to youth sensitization.
- Greater consideration must be given to how laws and policies are applied and experienced by users.
- Contraceptive continuation must be considered alongside contraceptive access to achieve the greatest impact.

To learn more, [read this recap](#) on the PRB page and [watch the discussion](#).

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## **USAID Educates Nigerian Youth about Teenage Pregnancies**



*Adolescent school girls being educated on reproductive health care.*

USAID/Nigeria

Through the Youth-Powered Ecosystem to Advance Urban Adolescent Health (Youth Ecosystem) activity, USAID empowers teenagers aged 15-19, in Nigeria's Kano and Lagos states, to think differently about what they want for their future by providing them with health services, education, and life skills.

USAID is combatting unintended teenage pregnancies by improving access to free or subsidized contraception and sexual health education through the activity's Youth Hubs – and referrals to public and private healthcare providers.

In commemoration of 2021 World Contraception Day, the Youth Ecosystem activity collaborated with the Lagos State Ministry of Health and Ministry of Youth and Social

Development to host activities which included a debate on the misconceptions about contraception and presented a drama highlighting challenges around sexual health.

In highlighting the benefits of adolescent contraceptive use, the event also dispelled associated myths such as the assertion that contraceptive provision encourages promiscuity and that contraceptive use disproportionately benefits girls, rather than boys and girls equally.

Read more on USAID/Nigeria health program [here](#).

## HIV/AIDS

### Accelerating Index Testing in Togo - Story of Afi.



*A psychosocial counsellor conducting HIV counselling in a health center in Lome, Togo. Photo credit: USAID/WA #EAWA Project*

#### USAID/WA Regional Ending AIDS in West Africa Project (#EAWA)

On a Tuesday morning, a beaming Mrs. Afi sits in the consultation room of the health facility of the local NGO FAMME in Lome, Togo, accompanied by her husband and their youngest son. The family is present for their second routine consultation and antiretroviral therapy (ART) renewal.

Afi's happy face is in contrast with the one she had three months ago, when she was crying in this very same room after discovering she was HIV positive. Today, Afi tells us her story.

A little over 3 months ago, Mrs. Afi came to this center for consultation following the recommendation of one of her friends. She had noticed her rapid weight loss although she was eating properly coupled with pimples on her thighs that had not healed for over 6 months of self-medication. During her consultation, the medical assistant counseled her and offered to check her HIV status, which she accepted. Unfortunately, her test came back positive. According to her, that day was like a descent into hell because she already saw herself humiliated, even repudiated by her husband, whom she knew to be quite severe, especially in her status as first wife and not the favorite. After a long interview with the psychologist at the center, Mrs. Afi finally agreed to take her ARVs. Explaining the benefits to her, the psychologist suggested to her to have two of her children and eventually her husband tested. She agreed to bring her children but categorically refused to bring her husband, fearing his outbursts of anger.

A week after starting treatment, Mrs. Afi returned for her check-up and brought her children with her for their test: the oldest was negative, the youngest positive for HIV. She recounts how she was even more distressed. The psychologist at the center and the mediator assigned to her continued to support and comfort her during the following days while encouraging her to allow the rest of the family to be tested. Given the risk of intimate partner violence, they suggested the index testing provider approach, which she finally accepted after her first month on ART. With the help of the medical assistant and the psychologist, they devised a strategy and decided to have Afi accompany her husband to the center for treatment. One morning, Afi asked her husband to help her go to the local health center for her care because she was not feeling well. Once there, the provider, after his medical consultation and treatment, offered them both HIV testing. Mr. Komlan, Afi's husband, after much hesitation, accepted the test, convinced by the medical assistant's words. They were both tested, and the results announced: Komlan was also HIV positive. But contrary to Afi's concerns, her husband found himself comforting her instead. Mr. Komlan was also put on ART the same day and agreed to bring his second wife and the two children he had with Afi for testing.

The couple was placed in the care of the mediator who continued the counseling. In the days and weeks that followed, the atmosphere in the family between Afi and Komlan was not violent; on the contrary, he continued to offer Afi his support, even after Komlan discovered that his youngest child was positive, and his second wife was negative. He testified to the mediator that the way the entire team of caregivers had treated him and talked to him from the hospital to the home visit had calmed him down.

That Tuesday morning, in this consultation room, Mr. and Mrs. Komlan, who had come for their ARV refills with their youngest child, were full of words of gratitude to the assistant and the staff.

Afi's story is one of many at the FAMME health facility and other PEPFAR supported facilities in Togo. The good practices of the psychosocial and medical team have led more and more clients to accept index testing, which explains why within the framework of the #EAWA project implemented with the financial support of PEPFAR, the contribution of index testing in the identification of HIV-positive individuals in Togo has risen from 12percent in 2020 to 30 percent in 2021.



In the 24 sites supported by PEPFAR in Togo, the quarterly contribution of index testing in the identification of HIV positive individuals has almost doubled from 17 percent in FY 21 Q1 (372 / 2,198) to 32 percent in FY 21 Q3 (738 / 2,273). The acceptance rate was 83 percent and on average two contacts were elicited by each index case.

Read more about USAID/West Africa health program [here](#).



## **USAID Mali Supports Data for an Efficient HIV Response**



*A device for tracking HIV cascade data. Photo Credit: Canva*

### **USAID/Mali**

USAID is scaling-up KOLOCHI, an electronic reporting system for tracking HIV cascade data across services provided to key populations in Mali. Doctors, nurses, midwives, and peer educators are receiving training to collect and manage HIV data using KOLOCHI, and nearly 500 tablets and 57 laptops are going out to 11 local partners across 23 health districts to enable use of the system.

KOLOCHI is an open-source District Health Information Software 2 (DHIS2) program for data collection, visualization, analysis, and sharing via a web portal and an Android mobile app. DHIS2 supports aggregate and individual data, including the ability to track cohorts of individuals over time for data-driven decision-making. KOLOCHI has been customized to incorporate variables specific to priority and key populations in Mali as a way to better meet the needs of community health centers. Since its inception, KOLOCHI has strengthened HIV programming in Mali by improving data quality, performance monitoring, and client centered case management. [Read more](#) about the KOLOCHI software and how it was developed.

Read more on USAID/Mali's health program [here](#).



## The “Miracle” that gave Anani Traore back his life



*ARV dispensing in Lomé, Togo in one of #EAWA's project site. Credit Photo- USAID/WA #EAWA Project*

### USAID/WA Regional Ending AIDS in West Africa Project (#EAWA)

Anani Traore\* faced an unexpectedly serious problem after the first cases of COVID-19 struck Lomé, Togo, on March 6, 2020. Suddenly, he was thrown into insecurity and anxiety as a person living with HIV (PLHIV) because obtaining regular refills of his anti-retroviral therapy (ART) became an uphill battle and almost came to a stop.

Anani, 28, is a conscientious young man who assiduously follows treatment and other advice he receives from his usual HIV care clinic located within the public hospital, about 8 km from his home. He used to like his visits and knew the staff well because they had helped him in many aspects of his life after he was diagnosed there with HIV in January 2019.

During his monthly visits, he was received at the HIV care clinic without feeling shame or stigma and his privacy was respected. His case worker gave him empathetic attention that allowed him to discuss problems and find solutions together. The chats boosted his self-confidence and gave him new ideas and skills to deal with his diagnosis.

“I panicked after the Covid-19 pandemic started. Travel and public health restrictions made it very difficult to reach the public hospital. Worse still, I had to answer many questions at the entrance and reveal that I need HIV medication. That opened the risk of stigma,” he said. “I was also worried about being infected by this new coronavirus because the waiting time could take several hours, and I had to sit among many patients with various ailments.

“Soon, I became very anxious about my health because I was forced to miss appointments to renew my ART medication. I am very serious about my therapy and

viral load tests because they are the keys to being able to work, fall in love, and have children without putting anyone at risk. I felt helpless and started sinking into a depression. Then a miracle happened! It gave me my life back!” Anani exclaimed.

“The case manager came directly to my home to deliver ART refills. He gave me supplies for several months at once. He also found time to talk to me to reduce my fears about COVID-19.

Many PLHIV in Togo have similarly positive stories to tell about #EAWA innovations to support people like Anani who felt left behind because of pandemic-related restrictions and triage at the entrance to hospitals and clinics.

Read more about USAID/West Africa health Program [here](#).

# Community Health

## USAID Ghana Commemorates Global Handwashing Day



*A school girl washing her hands with soap under running water. Photo Credit: Global Communities*

### USAID/Ghana

On October 15, USAID/Ghana marked World Handwashing Day with a facebook virtual event organized by American Spaces, at the US Embassy Public Affairs Section.

Did you know that only 42% of households in Ghana have access to basic handwashing facilities at home with soap and water? USAID, through Global Communities, works with the Government of Ghana, civil society, and the private sector to improve access to water, sanitation, and hygiene facilities across Ghana. Since 2015, USAID has supported the construction of 21,254 household handwashing facilities (tippy-taps), making handwashing available to 170,000 people. As a result of social and behavior change activities and increased availability of handwashing facilities, handwashing with soap under running water at two critical times (before eating and after defecating) in target communities improved by more than 40% and 38%, respectively, from 2020 to 2021.

Handwashing is one of the most cost-effective public health interventions. The COVID-19 pandemic has given us a window of opportunity to sustain proper handwashing

behaviors, not just to prevent the transmission of COVID-19, but for the prevention of all infections.

Read more on USAID/Ghana health program [here](#)

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## USAID Guinea Supports Seasonal Malaria Chemoprevention Campaign to Reduce Severe Malaria in Young Children



*Community health workers look on as a young mother administers preventive malaria treatment to her child.*

By: Ousmane Condé, USAID/Guinea

With an estimated 250,000 children under five years of age, the Labé region in Middle Guinea has a high incidence of severe malaria in children during the rainy season. According to the health authorities in Labé, a low level of awareness, the failure to use modern preventive measures such as insecticide treated bed nets, poor sanitary conditions, and large household size are the major factors responsible for the high malaria incidence in the region.

The USAID-funded StopPalu+ activity has supported Guinea to implement the seasonal malaria chemoprevention (SMC) campaign since 2017 in selected districts to reduce the number of children with malaria. In 2021, the first of four monthly rounds of the SMC campaign occurred from July 3 to 7, where more than 800 community health workers and community distributors issued prophylactic medication to prevent malaria in over 250,000 children under five years. In 2020, they reached 95 percent of targeted children in the region and hope to reach 100 percent this year.

Dr. Mamadou Houdy Bah, Regional Director of Health of Labé expressed his satisfaction: *“Before the SMC strategy, there was a child death due to malaria nearly*

every day in the health centers in this region, especially during the peak period in October. The introduction of the SMC campaign with the StopPalu+ activity has enabled us to overcome this challenge”.

Read more on the USAID/Guinea health program [here](#).

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## Community Action Cycle Approach Inspires Replication among RISE II Partners



*Coaching Session with the MCMT in Marekou Health Area in Niger.*

### USAID/WA Regional Breakthrough ACTION Project

Breakthrough ACTION is a recognized leader in social and behavior change and capacity strengthening to improve health across Niger. In urban Magaria, Zinder, the project joined with two USAID-funded Regional Food Security Assistance projects, Girma and Wadata, to build competencies in the Community Action Cycle (CAC) approach to community engagement.

Through ongoing coaching and mentoring since January 2021, multisectoral community mobilization team (MCMT) members have been leading the CAC process. MCMT members included regional health department social and behavior change (SBC) focal points, district staff from health, hydraulics, agriculture, women and child protection and community development. The MCMT instructed community leaders to lead their communities in a process of self-diagnosis, analysis and problem prioritization. The MCMT in Magaria visited the surrounding villages and helped community members to identify, analyze and prioritize their problems and to understand the importance of changing behaviors to optimize health and prevent illness.

One Girma staff member commented, "We have been doing communication, not community mobilization." Building on this vision that community mobilization is more effective than communication, Girma and Wadata requested Breakthrough ACTION to train all development agents in the CAC approach.

RISE II partners are embracing and adopting this community engagement approach. They are linking the benefits of SBC approaches with community engagement and realize that SBC goes far beyond communication and knowledge attainment to self-determination and action that ultimately leads to improved behaviors and health.

Read more on Breakthrough ACTION's program [here](#).



## Supply Chain

### USAID's Support Trains Young Guinean Pharmacists in Supply Chain Management



*Fourth- and fifth-Year Pharmacy students at the Kofi Annan University of Guinea pose with their certificates at the end of the training*

By: Ousmane Condé, USAID/Guinea

USAID's Global Health Supply Chain Program - Procurement and Supply Management (GHSC-PSM) supported the Ministry of Health through the National Directorate of Pharmacy and Medicine (DNPM) to provide a training course for 4th and 5th year Pharmacy students at the Kofi Annan University in Conakry.

The training took place from May 24 to 30, 2021, and aimed to equip young Guinean pharmacists with appropriate skills in managing the supply chain of health products at all levels. During the sessions, 56 students were trained on stock management in the following areas: inventory, storage, distribution, quality check of health products, information and logistics management system, and overseeing the functioning of the public supply chain for health products.

At the end of the training, certificates were awarded to beneficiaries on Saturday, August 7, 2021. The training is part of the grassroots capacity building initiative launched by the Ministry of Health.

Read more on the USAID/Guinea health program [here](#).

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## **USAID Health Supply Chain Workforce Empowerment Increases Commodity Security in Burkina Faso**



*A health worker counselling a patient on contraceptive security. Photo credit: GHSC - PSM*

### **USAID/WA Regional GHSC-TA FTO Project**

Availability of drugs in health facilities in Burkina Faso has declined in recent years. The proportion of Generic Essential Medicines Deposits (DMEGs) with a record of zero stock out dropped from 91.8% in 2011 to 14% in 2019. Five health regions stood out with the lowest performance including Centre, Centre-Sud, Centre-Ouest, Nord, and Plateau-Central.

One of the identified causes of this poor performance is the insufficient skills of inventory managers in service delivery points and the lack of visibility of logistics data for decision-making. In order to address this issues, the USAID's Global Health Supply Chain-Technical Assistance Francophone Task Order (GHSC-TA FTO) project has provided, since January 2020, technical and financial support to implement supportive supervision in Burkina Faso. This intervention started as a pilot in two health regions (Centre and Centre Sud). The main objective of this mentoring-based approach to supervision is to replace a hierarchical "audit approach" with a collaborative approach. This innovative approach consists of having supervisors engage with inventory managers during site visits at service delivery points to understand their challenges,



brainstorm together and identify feasible solutions in a collaborative and supportive manner. GHSC-TA FTO project trained pharmacists in health districts who then conduct 10 monthly supervisory visits in each district. One of the supervisors describes her experience in the [video showcasing the supportive supervision activity](#).

After a year of implementation, the project has documented continuous improvement in the performance of inventory managers at service delivery points. This translates into better stock keeping, better visibility of logistics data, and a significant reduction in stockouts in essential generic drug depots in pilot regions.

As of December 2020, the pilot regions provided 100% of their logistics data reports. In the first quarter of 2021, the national reporting rate is only around 23%. The stock out rate of life saving health commodities dropped from 20% in the two regions to 10% in Centre and 7% in Centre-Sud health region. As part of a sustainability plan for this effective intervention, the GHSC-TA FTO project has engaged a civil society organization to assess the satisfaction of reproductive health services beneficiaries as part of a measure of impact on end users.

Read more about USAID/West Africa's health program [here](#).

## USAID Supply Chain Study: Newborn and Child Health Commodities in Mali



*USAID funded health commodities being delivered to a community health center in September*

### USAID/Mali

Despite investments from USAID and others, availability of essential newborn and child health (NBCH) commodities is not yet at a sufficient level in Mali. USAID funded a rapid study to assess where barriers were inhibiting the availability of, and access to, these commodities. The most apparent obstacles for access to the NBCH commodities studied were in the policy domain. The study revealed that these products had not been listed as "preferred" in national treatment guidelines and were not moving through the national supply chain.

The study helped identify ways to increase availability of newborn resuscitation equipment and essential medicines for NBCH in Mali's public sector. Adjustments can be made in terms of both policy and operations to enhance information on commodity availability, improve stock management and facilitate forecasting and quantification. Following the assessment, Mali's Ministry of Health immediately prioritized amoxicillin DT for pneumonia treatment and committed to doing the same for co-packaged

ORS+zinc to catalyze their use and management in the national public health system. Mali's *Comité Technique de Coordination et de Suivi de la Gestion des Médicaments Essentiels* will meet in the coming months to agree on a final plan that addresses opportunities identified by the study.

Read more on USAID/Mali's health program [here](#).

## RESOURCES:

### ENSURING CONTRACEPTIVE SUPPLIES REACH THOSE IN NEED:

The global brief and 25 country briefs estimate the impact of USAID's investment in contraceptives since FY 2017. The impact numbers are calculated by entering the number of contraceptive commodities delivered from FY2017 through FY2020 Q2 into the Impact 2 model.

[Family Planning Impact Briefers from DC](#)

## ANNOUNCEMENTS:

- ECOWAS Best Practice Forum in Health, November 24 - 26, 2021 in Praia, Cabo Verde. Click [here](#) for more information:

### Announcement and call for abstracts



- Coronavirus COVID-19 Global Cases by Johns Hopkins CSSE. Click [here](#) to track cases by country/region and city/province.
- Ouagadougou Partnership Annual Meeting, December 13 - 16, 2021. [More information here](#)
- Introduction of long-acting family planning method to USAID and UNFPA Product Catalogs: announcement by FP2030. [More information here](#)
- Track Africa's progress on the Sustainable Development Goals. [More information here](#).
- International Conference on Family Planning, November 14 - 17, 2022. [More information here](#).
- 2022 International Social and Behavior Change Communication Summit. [More information here](#).

## What's Up Next:

- One Health Day, November 3, 2021
- World Toilet Day, November 19, 2021
- International Day for the Elimination of Violence against Women, November 25, 2021
- World AIDS Day, December 1, 2021
- Universal Health Coverage Day, December 10, 2021

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