Family Planning Around Environmentally Sensitive Regions in Madagascar

Final Report

March 2009
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FOREWORD

In January 2005, USAID/Madagascar requested the Health Communication Partnership (HCP) to assist the Government of Madagascar, specifically its National AIDS Control Committee (SE/CNLS), to develop a behavior change communication strategy targeting HIV prevention among youth and young adults. The Ankoay, or Eagle, approach was launched in April 2005 through the National Scouting Federation which unites six scouting organizations. The Ankoay program was assessed by the SE/CNLS after one year of implementation and was judged a national “best practice” in HIV prevention among youth.

In August 2007, through additional funding from USAID/Madagascar, AED launched Ankoay Doré, a series of level II activities designed for youth groups that had successfully completed the Ankoay program. The initial Ankoay Doré approach added hygiene activities to HIV prevention. In early 2008, with funding under the AED-managed Communication for Change (C-Change) Program, the Ankoay Doré model was expanded to include adolescent reproductive health and environmental activities. The success of this approach has been remarkable and is actively supported by five Malagasy ministries.

Dr. Fano Randriamanantsoa
National Coordinator
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Annex 1: Activity Description from C-Change Workplan
I. INTRODUCTION

In January 2005, the USAID-funded Health Communication Partnership (HCP) began implementing the Ankoay HIV/AIDS prevention program in Madagascar, with the National AIDS Control Committee (CNLS) and the USAID-funded bilateral SanteNet as key partners. Due to the success of the initial Ankoay-Scout program, the CNLS proposed additional prevention work with youth in schools and with sports teams. Complementary programs – Ankoay-College and Ankoay-Sport – were launched in late 2005.

In order to reach a larger audience and increase public health impact, the Ankoay program launched the “Red Card” or Aok’ Aloha initiative in October 2006. The Red Card, a simple, low cost, scalable tool is being used regularly by thousands of Malagasy women in every region of the country. The generic Aok’ Aloha message means either “let’s talk -- wait, I need time to think,” or “back off” depending on the situation in which it is used. CNLS has also judged the Red Card to be a best practice.

In August 2007 shortly after HCP ended, USAID/Madagascar provided sole-source “bridging” funds to AED to continue the Ankoay, Red Card and family planning promotion activities for 12 months. A major activity of that effort, entitled “Empowering Youth and Community-Based Agents to Become Leaders in Child Health, Reproductive Health, and HIV Prevention” (Empowering Youth) was to launch the Ankoay Doré model, a series of level II activities designed for youth groups that have successfully completed the initial Ankoay program. The Ankoay Doré model initially added only hygiene activities to the core HIV/AIDS prevention program.

In early 2008, through the AED-managed C-Change program, the core-funded Family Planning Around Environmentally Sensitive Regions in Madagascar (FPESRM) activity was launched. Originally proposed as a 3-year program, Year 1 of FPESRM was designed to focus on integrating adolescent reproductive health and environmental activities into the Ankoay Doré model. The plan called for taking the program to environmentally sensitive regions during Year 2. Since no Year 2 funds were available to continue FPESRM, C-Change support of the program effectively ended in February 2008. However, continued national support for the Ankoay Doré approach has been remarkable. The CNLS and five national ministries – Health, Youth, Water, Education and the Environment – all actively support and promote this effort. Students and out-of-school youth responded with enthusiasm to the addition of hygiene, adolescent reproductive health (ARH), and environmental activities to the Ankoay program. When asked, youth replied that following eight to nine months of HIV prevention activities in the initial program, they were eager to explore additional themes.

The number of NGOs engaged in the Ankoay movement expanded as it became the “go to” model for a broader range of youth programs and groups. On a regular basis, when officials from NGOs requested funding or technical guidance from CNLS for HIV/AIDS prevention activities, they were encouraged to systematically adopt the Ankoay approach. By December 2008, the Ankoay Doré program was operating in approximately 150 youth groups of 20 to 30 young people each – i.e., a total of 4,500 young people. Community outreach with hygiene, ARH, and environmental protection activities extended the program’s influence to an estimated 25,000 more youth and community...
members. Additionally, at the end of this period the World Bank had approved seven small grants to local NGOs to expand Ankoay and Ankoay Doré activities.

II. THE ANKOAY MODEL

A. BACKGROUND

Madagascar’s vision regarding HIV/AIDS control, as laid out in the 2007-2012 Madagascar Action Plan (MAP), is that “by 2015, Madagascar will be a country where all citizens, especially young people, are aware of personal risks and are actively involved in HIV/AIDS control with the commitment of their leaders. Each individual will have easy access to appropriate prevention methods and will use them in a responsible way. Individuals, families, and communities will provide care and support to people infected and affected by HIV.”

The Action Plan identifies priority populations as those most likely to become HIV-positive and spread the infection, such as Commercial Sex Workers (CSW), youth, and women of reproductive age. The main HIV prevention objectives include improving access to condoms, promoting responsible behaviors (abstinence, faithfulness, use of condoms in high risk situations), and increasing demand for preventive and therapeutic clinical services.

The Malagasy population is approaching 20 million, 16.6% of whom are between the ages of 15 to 24. According to Population Services International’s 2003 Tracking Results Continuously (TRAC) survey, for people aged 15-24:

- 54.2% have had sexual relations and 1.8% have adopted secondary abstinence
- 41.8% have been faithful in the last twelve months
- 65.2% believe that HIV/AIDS can be avoided by being careful in choosing one’s sexual partners

The Ankoay approach, initiated in 2005, is an initiative selected by the SE/CNLS to strengthen behavior change among young people.

B. DESCRIPTION OF THE ANKOAY MODEL

Objective of the Approach

The Ankoay model aims to engage, educate, and promote behavior change among young people in view of “transforming” them into frontline leaders in the fight against HIV/AIDS. The approach includes some 25 activities that employ experiential learning techniques to build young peoples’ capacities to develop life skills such as in communication, forming relationships, learning how to resist peer pressure and to acquire values concerning gender equity.

Program Design

Groups or clubs of young people that participate in the Ankoay program work through a series of highly participatory life skills activities. An activity guide is the central component of a kit which also includes a skit scenario booklet, an individual reflection tool called the “Youth Passport,” and participatory monitoring forms. This combination of materials speaks to a variety of learning styles and
personality types. The activity book promotes the development of positive social norms and skills while the role plays focus on behavior change through role modeling. The youth passport in turn works through individual introspection leading to personalization of the issues. Together these materials and approaches allow youth to “experience” difficult high-risk situations in a safe environment and then “proclaim” their values to the larger community through outreach activities.

The Ankoay model emphasizes enthusiasm and action as the key to learning. Recognizing that behavior change cannot happen in a vacuum, the model encourages young people to engage their parents, peers, and community in the learning process. Finally, Ankoay taps into the peer dynamics of a cohesive youth club, school, or sports team. Public recognition as part of an “Ankoay Team” through a community-wide celebration of success is an important step in strengthening collective efficacy – the notion by members of a youth group that they can make a difference.

“I am so proud to be part of the Ankoay Doré program because it has helped me to master certain skills – sometimes things that are very simple like how to make a tipi-tap” (an easily-designed container for conserving water at home during hand washing). ~ Tsiry, age 15

Starting in August 2007, expansion of the Ankoay program focused on working through smaller NGOs in urban “hotspots”\(^*\) with the goal of engaging a greater percentage of high-risk youth.

C. ACHIEVEMENTS AND IMPACT
(Through December 2007)
- Over 2,170 youth groups engaged in the program.
- 1500 certified Ankoay groups – 150 of which have continued on to the level II Ankoay Doré program.
- Approximately 652,000 young people educated in their communities.
- 4,000 young people participated in voluntary HIV testing.
- Active promotion of the Ankoay model by five ministries (Health, Youth, Water, Education, and Environment), the CNLS, and dozens of international and national NGOs, such as UNICEF, UNFPA, CARE, CRS and Vohary Salama (a consortium of over 25 national NGOs).
- Extensive free radio, TV, and press coverage of specific skill building activities, use of the Youth Passport, role playing and of community outreach at dozens of Ankoay celebrations.
- Seven World Bank funded grants approved and allocated totaling approximately $125,000.
- Financial support from at least 15 organizations, including UNICEF, UNFPA, ADB, and the European Union, totaling over $75,000.
- Adaptation of the approach by the private sector. The Canadian mining company QMM, which has a long-term contract in the south of the island, is piloting a modified Ankoay approach in schools adjacent to their project region.
- Creation of the website www.ankoay.org that will, among other functions, collect testimonials on the use of the Red Card.

III. ANKOAY DORÉ

A. BACKGROUND AND ISSUES
In addition to a vision for HIV and AIDS prevention, the MAP calls for an effective strategy to ensure access to safe water, the promotion of sanitation and health education, including reproductive health, and protection of the environment. The future of Malagasy youth remains at

\(^*\) hotspot is defined as one of the six cities in Madagascar with the highest HIV infection rates.
risk due to early initiation of sex and the limited access to family planning for adolescent girls, resulting in a high pregnancy rate among girls between 15 to 19 years of age.

With respect to its commitment to environmental protection two major threats combine to dramatically reduce the amount of land covered by rain forest. First, with a birth rate that averages 6.9 in sensitive areas or “hotspots,” organizations have understood that their efforts risk being outpaced by population growth. Therefore, they have concluded that a critical intervention to safeguard the environment is boosting the contraceptive prevalence rate. Second, for decades, the population living around forest zones has actively used slash-and-burn agriculture and other harmful practices that increase rice harvests in the short term but degradation of the environment in the long term. The MAP calls for reducing the destruction of both the rain forest and arable land. The situation is critical—the biodiversity of the rain forest is in danger of being irretrievably lost. Nine million hectares of wetland in the country harbor countless endemic species that are endangered. Government programs to protect the environment, including deforestation control, energy saving strategies, and reforestation, are not keeping pace with the destruction.

The Ankoay Doré program was launched by AED in August 2007 with funding from USAID/Madagascar. It constitutes the second phase of the Ankoay program, i.e., it is intended for those groups that have already earned the distinction of being Ankoay.

B. DESCRIPTION OF THE MODEL

Objective
Given the challenges described in the MAP, the Ankoay Doré program was designed to:
• Provide an opportunity for youth who have successfully completed the level I Ankoay program to gain additional skills, especially in the area of community outreach.
• Extend the life skills program to include environmental education and adolescent reproductive health and family planning (ARH/FP).
• Engage additional cohorts of youth, new development partners, and donors in the model.
• Explore the potential synergies between health, water, and environment themes when taught through experiential learning activities.

Strategies and Tools
The level II program has the following elements:
• Broader involvement of youth in community development and peer mentoring. Under the Ankoay Doré approach, groups are asked to increase their commitment to community engagement, not only in the areas of HIV and AIDS prevention and control, but also water, sanitation, and hygiene, environmental education, and ARH/FP. In addition, youth organize group-level activities and perform educational skits to model new behaviors for the community. In order to boost program impact and reinforce learning that has already taken place, each participant in the Ankoay Doré program is encouraged to mentor ten peers or family members.

• Creation of a dynamic mix of individual and collective efficacy. One area central to behavior change that the Ankoay Doré program actively explores is the relationship between strengthened self-efficacy and collective efficacy. The Ankoay Doré program is constructed on the hypothesis that HIV and AIDS related skills will affect mainly individual or self-efficacy
whereas environmental protection activities will bring greater changes in the area of collective efficacy. Although it was not possible to explore the relationship between these domains and behavior change under C-Change core funding, the Associate Award, signed in March 2009, will provide funds to carry out this research.

- **Recognition of success.** A new configuration of goals under the Ankoay Doré program provides opportunities to strengthen the certification process and in turn expand the public recognition and status accorded youth organizations and groups. Ankoay Doré places greater emphasis on youth groups as emerging leaders in behavior change and community development. The requirements related to education of peers, families, and community members are higher in Ankoay Doré than the level I Ankoay program.

**The Ankoay Doré Process**

- **New badges and goals.** The Ankoay Doré program has added three new badges to the program, one each in the areas of hygiene, environmental protection, and ARH/FP. The new badges were developed during a workshop that brought together technical experts and seasoned Ankoay trainers. For each theme, workshop participants collaborated on the configuration of skills and activities essential for youth to learn and that would provide easy entry points for community outreach activities. The individual activities for each badge were field tested with youth teams to insure practicality and clear key principles.

  - To earn the hygiene badge, participants learn about water conservation and sterilization, hygiene practices such as hand-washing with soap, and sanitation issues including utilization of latrines.
  - For the environment badge, youth engage in activities around management of waste and recycling and learn about the damage caused by deforestation. Groups plant vegetable gardens, visit ecological sites, and are taught the importance of reforestation and energy conservation.
  - The reproductive health and family planning badge involves community outreach and distribution of Red Cards, activities around understanding sexuality and puberty, knowledge of abstinence and avoiding early pregnancy.

  "Our group organized a week of plastic bag collection in our neighborhood. It was fun but it also allowed us to protect the environment and also improve the hygiene of our community. Once collected, the bags were sold to a company that recycles plastic. So we earned some money at the same time." — Dina, age 14

- **Commitment letter.** This initial step involves presenting the Ankoay Doré approach to the participants (groups, instructors, authorities, partners) and clarifying any aspects of the program that are not clear. Signing the commitment letter is required before a group can send participants to a training workshop. Partners’ experiences in other community-based efforts suggest that this simple step not only insures that all conditions and responsibilities are
understood at the outset but also helps create a greater sense of purpose among group members.

- **Training of Trainers (TOT) and launching groups.** Rolling out the Ankoay Doré model required that teams of Ankoay trainers receive additional training in the areas of hygiene, environmental protection and ARH/FP for the new badges that the program offers. The 3-day TOT workshops also provided an opportunity to capture additional lessons learned from the Ankoay program. The pool of trainers has been exceptionally skilled in all cases. To launch a youth group in the Ankoay Doré program, six participants must attend a two-day skill-building workshop. Each workshop serves as a platform to launch five youth teams. The Ankoay Doré workshop agenda focuses on transferring skills linked to the new hygiene, ARH/FP, and environmental badges and includes sessions designed to create greater commitment among youth to community service. Once the workshop is complete, the group leaders are responsible for carrying out the Ankoay Doré program. Most groups complete the program after 6 months of effort while some require up to one year.

- **Month 1 follow-up.** Each youth group that has launched activities following a training workshop participates in a monitoring session that serves to measure progress and solve problems encountered since start-up. Program managers remarked that Ankoay Doré groups began implementing activities immediately after the workshops since they were already familiar with the model.

- **Mid-term monitoring.** Trainers visit the youth groups every two months to assist with any difficulties, answer questions, and share successful experiences from other youth groups. Exceptional initiatives carried out by a youth group are reported back to the Ankoay website, which in turn makes them available to a larger audience. Trainers send quarterly activity progress reports against set objectives.

- **Evaluation and certification.** When a youth group has met the goals of the Ankoay Doré program, it carries out an internal participatory evaluation. If the group feels they are ready for certification, they contact a local evaluation committee (instructors, parents, health workers, partners, authorities, journalists, etc.) to carry out an official certification. The evaluation is viewed as a learning process. If in fact a youth group is not ready to be certified, the local committee works with the group to develop a plan to complete the remaining goals.

- **Celebration of success.** Once a youth group has been certified as Ankoay Doré, it organizes a festival with the larger community to celebrate the achievement. Festivals are opportunities for groups to show off their talents and skills in areas such as peer education, village theater, and musical presentation. Neighboring communities and local media are invited to the festivals. This leads to an increase in demand for the participation in the program.

- Linking HIV and AIDS testing to the festivals has had enormous success. The managers of the Ankoay program systematically invited the testing unit of the CNLS to participate in each festival. Since HIV testing is not associated with significant stigma in Madagascar, at each event dozens of youth and community members line up to be tested. Perhaps this surprising result is also associated with the relaxed atmosphere of the festivals. At each celebration, there are several events happening simultaneously – which may provide some “cover” for the testing unit.
Materials Used

Ankoay Doré Kit:
- Ankoay Doré booklet
- Ankoay scenario booklet
- Youth Passport
- Honors brochures
- Ankoay Doré leaders’ guide
- Red cards
- Invitation card, orientation card

Ankoay Doré certification kit:
- Flags
- Banners
- Badges
- Group and individual certificates
- Promotional kits offered by partners

Partners Involved

Government partners:
- SE/CNLS – responsible for the national coordination of HIV and AIDS control in Madagascar
- Ministry of Health and Family Planning
- Ministry of Education
- Ministry of Youth, Sports, and Culture
- Ministry of Water
- Ministry of Environment, Forests, and Tourism

Non-governmental organizations and programs:
- PSI, World Conservation Society, World Wildlife Fund, Hygiene Improvement Program (HIP), the National Scouting Federation, the National Sports Academy, the US Ambassador’s Girl’s Scholarship Program, as well as local associations such as AJESAIA, MIEZAKA, ANJARAMASOANDRO, Ny Menafify, AFAZ/CBN.

“The fact that our group has earned the Ankoay honor and that we are currently engaged in the Ankoay Doré program has given an additional measure of enthusiasm and sense of responsibility to our club. This has resulted in our club being recognized as a communication leader in our village and has also opened several opportunities for us to work with government agencies and other local organizations. For example, the National Government requested our support during national education days devoted to the Madagascar Action Plan.” ~ Youth from Analamanga region (located on the central plateau of the island)

Intervention Zones

The Ankoay Doré program was piloted in seven regions (Analamanga, Vakinakaratra, Amoron’i Mania, Haute Matsiatra, Ihorombe, Anosy, and Atsinanana) of Madagascar.

C. ACHIEVEMENTS AND IMPACT

October 2007 to March 2008
- Three workshops held with partners to share best practices related to hygiene, environmental protection, and ARH/FP and subsequently design activities and set the goals of the Ankoay Doré program.
• Design and production of the *Ankoay Doré* kit (activity guide, complementary booklet, brochures, honors, certification kit).

**April to June 2008**
• Official launch of *Ankoay Doré* program with youth and partners.
• Three training-of-trainers (TOT) *Ankoay Doré* workshops.
• Training of 93 *Ankoay Doré* instructors for 150 youth groups in 6 regions of Madagascar (*Analamanga*, *Anosy*, *Vakinakaratra*, *Haute Matsiatra*, *Ihorombe*, and *Amoron’i Mania*).

**July to September 2008**
• 150 youth groups of 20 to 30 young people engaged in the *Ankoay Doré* approach, i.e., approximately 4,500 total young people.
• Community outreach with hygiene, ARH, and environment protection activities to an estimated 25,000 additional youth and community members.
• 5,000 young people underwent voluntary HIV screening.
• Through a separate but related initiative, the MOH trained health workers from 900 health facilities on ARH using Ankoay materials.
• Regular planning meetings of the expanded Ankoay taskforce which has grown to over 30 members.

**October to December 2008**
• Site visits indicate that youth groups are taking greater community outreach initiatives and assuming higher levels of responsibility than they did before they were certified as “*Ankoay,*” This is in keeping with the overall design of the program which anticipates that when a youth group is publicly recognized as a community leader, its sense of collective efficacy will increase and its members will, in turn, demonstrate greater confidence when organizing community-based activities.
• Dozens of groups have organized “mini-festivals,” half-day development fairs, and celebrations that focus on adolescent reproductive health (including HIV and AIDS prevention games), demonstrations of water purification and correct hand washing, and skits that highlight steps to protect the environment, such as alternatives to slash and burn farming and the importance of recycling.
• Based on the participatory evaluations that the youth groups have completed, C-Change staff expected the first cohort of *Ankoay Doré* groups to be certified in March of 2009. Unfortunately, during the first months of 2009, political problems across the country curtailed the monitoring of *Ankoay Doré* activities and the certification of youth groups that had met their goals. Certifications have now been rescheduled as the first activities to roll out under the new C-Change Associate Award.

**Targets**
• The target of 75 youth groups certified as *Ankoay Doré* by December 2008 has not been reached due to the fact that youth groups have taken longer to complete the program than they themselves and the trainers originally estimated. We anticipate reaching that goal during the first half of 2009.
• Community leaders demonstrated an expanded range of community outreach activities under *Ankoay Doré*. Youth from sports teams, schools, and scout troops are actively being transformed into frontline community leaders. This is ongoing and has attracted attention from government officials at all levels.


**Activities Planned in 2009 and Beyond**

In early March 2009, C-Change signed a four-year Associate Award for “A Cross-Cutting and Comprehensive Behavior Change Communication Program” in Madagascar, with a launch planned during the second quarter of 2009, depending on the political situation. The additional funding from USAID/Madagascar will assure the sustainability of the Ankoay and Ankoay Doré programs through September 2013.

The C-Change Associate Award outlines approaches for continued collaboration with environmental programs. Environmental organizations have expressed their support of the Ankoay Doré initiative and for expanding the program under the Associate Award into more environmentally sensitive regions as was originally planned with Core Funding. C-Change anticipates financial support for these activities during Year 2 of the Associate Award.

Also under the new Madagascar Associate Award, C-Change plans to carry out a formal quantitative and qualitative evaluation of the Ankoay model in 2010. The evaluation instrument will be designed to capture the impact of the intervention, provide insights into synergies between the program themes, and explore how and to what extent the intervention has contributed to a shift in individual behavior and social norms. The indicators for the Core Funded activity are noted below.

- Number of youth organizations that have achieved level II Ankoay status.
- Total number of people that have seen or heard specific integrated population, health, and environment (PHE) messages.
- Total number of youth (male and female) who agree with key pop/environment statement(s), such as “Small healthy families will create healthy communities and healthy environments.”
- Total number of youth (male and female) who can name three methods of family planning.

Although these indicators were not measured under the Core-Funded Activity, they will be taken into account during the evaluation funded by the Associate Award.
SO1 – POPULATION AND REPRODUCTIVE HEALTH

IR 1: Implementation – Global Leadership Priorities

1.1.1 Family Planning around Environmentally Sensitive Regions in Madagascar

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BACKGROUND
Many of the most important international environmental agencies are active in Madagascar because it has richer bio-diversity per square mile of any country in the world. Since the birth rate is as high as 6.9 in environmental “hotspots,” several organizations have concluded that unless the rate declines their efforts to protect the environment will be offset by population growth. Therefore, one of the most important interventions to safeguard the environment is boosting the contraceptive prevalence rate.

Several other factors make Madagascar particularly favorable for an integrated pop/environment program:
- During the past three years, the Ankoay AIDS prevention program has expanded to in over 1500 schools, sports teams and scout troops. An Ankoay Level II program which goes beyond health is being field tested.
- The SanteNet program and Ecoregional Alliances are already working with integrated USAID health and environmental funding.

ACTIVITY SUMMARY
In Year 1, C-Change consulted with USAID Mission Environmental and Health teams and the network of health and NGOs that have been implementing PHE activities – especially WWF, the Eco-Regional initiative and the National Zoo. Working with separate health and environmental teams, C-CHANGE project staff members (who are also working on the “Empowering Youth” program) drew up requirements for adolescent reproductive health (ARH) and environmental badges to be integrated into the Ankoay Dore initiative. In April 2008 a TOT on the environmental badge requirements was held for Ankoay trainers. A second, ARH training is scheduled for mid-June 2008. Ankoay Dore materials have been developed and designed and are ready for production.

In Year 2 C-CHANGE will facilitate the implementation of the Ankoay Dore program principally in three regions, Analamanga, Antsirabe and Anosy, among 100 youth groups. Fifty percent of the implementation funds will be leveraged through World Bank grants that scouting organizations in Madagascar have already received to extend and strengthen the Ankoay program.

C-Change will continue to draw on current grassroots experience, lessons learned from previous PHE efforts and other successful approaches as it facilitates the implementation of the Ankoay Dore program which integrates HIV/AIDS prevention, hygiene, and SRA and
environmental protection activities. C-CHANGE will benefit from Phase I Dore activities to compile a list of “best practices” for community education and outreach.

During year 2 C-CHANGE will develop integrated environment and family planning messages that they can be delivered in a logical manner that resonates with youth and the local population.

C-Change also plans to design an evaluation and monitoring system that measures the impact of this integrated approach on key family planning and environmental behaviors. For example, data available from local health clinics and environmental organizations will be used to monitor the programs over time.

**KEY OUTPUTS**

**Year 2**

1. A series of messages that integrate “do-able” pop/environment actions in a mutually reinforcing manner (September 2008)
2. The implementation of an integrated Level II Ankoay program in 100 youth groups (October 2008)
3. An evaluation and monitoring plan that captures the impact of the intervention and provides insights into how to improve the effectiveness of the next generation of pop/environment programming (November 2008)

**ORGANIZATIONS INVOLVED**

- AED, MOH, National AIDS Prevention Committee, WWF, ERI, National Zoo, National Scouting Federation, World Bank as co-funder

**INDICATORS**

- Number of youth organizations that have achieved Level II Ankoay Dore status
- Total number of people that have seen or heard specific integrated PHE messages
- Total number of youth (male and female) who agree with key population/environment statement(s), such as “Small healthy families will create healthy communities and healthy environments”
- Total number of youth (male and female) who can name three methods of family planning

C-CHANGE MADAGASCAR
Réalisations 2008 et Perspectives 2009
(Accomplishments 2008 and Planned Activities 2009)

Tableaux récapitulatifs

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<th>Objectifs 2009</th>
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<td>• 552 troupes engagées</td>
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