



# Refresher Training on Community Awareness Toolkit

Under Balochistan Rural Development and Community Empowerment (BRACE) Programme

## Rural Support Programmes Network (RSPN)

Quetta Balochistan, 30<sup>th</sup> August - 1<sup>st</sup> September 2021

IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER



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## Acknowledgment

Special thanks to the trainer Mr. Bashir Anjum, Specialist Social Sector/Management Special Projects at RSPN for delivering comprehensive and participatory sessions in accordance with the training workshop agenda and schedule.

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## Background and Objective of Training

The Balochistan Rural Development and Community Empowerment (BRACE) Programme's External Monitoring Mission (EMM) on their third round, noticed a need to make Community Awareness Toolkit (CAT) sessions more interactive. Rural Support Programmes Network (RSPN) shared that the sessions already have activities planned to engage participants; a refresher will help the Community Resource Persons (CRPs) conduct lively and engaging sessions, as they are meant to be conducted. To follow up, RSPN organised a three-day refresher training to train Balochistan Rural Support Programme (BRSP) master trainers so they can roll-out the refresher training to CRPs in each Programme district. BRSP refresher training was held in Quetta from the 30<sup>th</sup> August to 1<sup>st</sup> September 2021

The training was attended by Social Organisers (SO) and Capacity Building Officers (CBO) from eight Programme districts, which include Jhal Magsi, Kech/Turbat, Khuzdar, Killa Abdullah, Loralai, Pishin, Washuk and Duki. Participants from Zhob could not attend the training because their focal person was expected to join the BRACE Programme in a few days. BRSP will ensure he is trained in Loralai, when the sessions are rolled out to the CRPs.

The training was attended by a total of 27 (9 women and 18 men) staff members from BRSP as well as RSPN. This included the Capacity Building Coordinators from BRSP, Manager Human and Institutional Development BRSP, Programme Manager BRACE RSPN, Communication and Visibility Officer BRACE RSPN and Monitoring and Evaluation Officer BRACE RSPN. The training was conducted by Mr. Bashir Anjum Specialist Social Sector, RSPN, who has helped develop the Community Awareness Toolkit.

To ensure the trainings are inclusive and gender sensitive, participants were encouraged to bring their children, dependents or companions with them if they need to, to feel comfortable. As a result, one women participants brought her children with her and another woman participant was accompanied by her mother.

## Proceedings of the Training- Day One

### Introduction of Participants

The training started with a round of introductions. Each participant shared why they thought CAT sessions are important to the BRACE Programme. Some highlighted how CAT was important in the first wave of the COVID-19 pandemic, while others mentioned how CAT is integral to the sustainability of the Community Institutions. Another participant mentioned health is linked to rural poverty and the CAT helps the poor avoid or recover efficiently from health shocks. Some participants linked rural poverty to lack of awareness and said CAT helps people become aware and eventually lift themselves out of poverty.

It was also mentioned that Balochistan Sustainable Development Network (BSDN) has an 80% household participation and the CAT will support this cause.

### Issues and Challenges faced by Field Teams in Implementation of CAT through CRPs

The trainer highlighted the importance of CAT in achieving the overall and specific objectives of BRACE Programme. He mentioned that the interventions in the Programme will not have a sustainable impact, unless the beneficiaries are well informed and aware. He mentioned BRACE Programme aims to give the rural poor a voice, so they can say “this is my right”; this will increase the demand for service delivery.

The trainer highlighted how women are disproportionately affected by poverty, this is because they are not given their rights. The CAT aims to empower women by raising awareness so women are given their rights.

He mentioned poverty is very closely linked to the family size and thus it is important to make them aware of modern contraceptive; this is especially needed for the men beneficiaries.

The minimum age of marriage for girls is 18, as per the constitution of Pakistan. Marrying a minor is punishable by law and the LSOs should request the families committing this crime to reconsider and if that fails, they have the right to inform the police of this criminal act.

The trainer asked the participants to identify the key issues and challenges faced by participants and the CRPs, when implementing the toolkit. The participants wrote the challenges on cards provided to them, which were then displayed on the wall. Some of the issues identified are:

- When the CRPs go to the community to conduct the CAT sessions, the local *ulema* frown upon this
- CRPs don't follow a set schedule to deliver sessions
- The community states that “we know all of this, it would be better if you bring medicines instead of conducting this session” - to this the trainer said, we have to make them realise that “I can only give you information, for services you need to do so and so”
- The community doesn't understand Urdu

- The CRP feels embarrassed to talk about birth spacing. They also hesitate to talk about women in front of men
- Sometimes the community doesn't understand the session, some members don't pay attention, and only make demands
- Lack of time, the community works in the field and doesn't always have the time to sit down for the session
- Transport issue; not all CRP have their own transport, so they struggle to access different villages

The trainer asked the participants when and how have they received the initial CAT training. Mr. Maqsood, (Capacity Building Coordinator, BRSP) explained that he trains trainers on a rolling basis.

When asked how many of the participants have confidently delivered CAT sessions, only three said they have delivered over six sessions, and one said he can deliver up to ten sessions with confidence. A majority of the participants said they can have a good understanding of two to three sessions only. Five participants said they cannot deliver any sessions.

### Discussion on Key Technical Aspects on Different Topics of CAT

The trainer quoted examples from his own life; how he grew professionally from the position of a Social Organiser and went on to complete his Masters in Public Health. He credited his success to investing his time and energy in learning material like the CAT.

He encouraged the participants to work towards growing in their career. If they master how to identify, train and monitor CRPs, they can use this skill in other areas of their job and career. He said they will only gain a true understanding of the material in the field, by observing and guiding the CRPs while they deliver the training.

### Refresher; How to Train CRPs on use of CAT to Conduct Session One to Three

The trainer highlighted aspects of the CRPs presentation:

1. The CRP should be at the decided location before everyone else
2. The CRP should bring the toolkit with him/her
3. The CRP should be able to ask questions, to make it interactive
4. The CRP should make eye contact and maintain their attention
5. CRP should be confident and learn to give the community members confidence

#### 1. Mother and Child Health

Encouraging the participants to imagine themselves as community members in the field, the trainer delivered what an ideal CAT session on "Mother and Child's Health" should look like.

He shared that the EMM has identified an issues; the SMT doesn't ask the community members to repeat the lessons learnt. After delivering the session on mother and child's health, he asked the participants the key points from the session.

He ended the session with asking the participants to spread the word amongst their family members.

Group Activity: The participants were divided into five groups; each group member practiced presenting the session to their respective groups. The trainer went around the room, observing each groups presentation and pointing out areas where they could improve.

## 2. Vaccinations for children

The trainer presented the session, supplementing the information given on the CAT with other bits of helpful information e.g. the immunisation injections cost up to PKR 50,000 to 60,000 per child if purchased privately.

Group Activity: The participants, in each group practiced delivering the session. Any confusions or queries they had while practicing the content of the session, were discussed with the trainer after the group activity collectively.

## 3. Birth Spacing

This session is unique because it follows the three-stepped approach (identifying the problem through visual aid, enabling the participants to relate with the problem, finding the solution together), hence the participants were instructed to engage the community to help them identify the problem.

The trainer went around the room, showing the participants the image on the CAT; then he invited the participants to describe what they saw. He then asked the participants to compare the picture with the situation in their homes to form a link.

The participants shared that the women in the community have very little awareness and knowledge of issues relating to their health. The trainer shared that the CRP should always ask the community members if they can relate with the picture shown, after they have described the picture.

The trainer encouraged the participants to not feel shy delivering this session.

Group Activity: The participants, in each group practiced delivering the session. Any confusions or queries they had while practicing the content of the session, were discussed with the trainer after the group activity collectively.

## Proceedings of the Training- Day Two

### Revision of previous CAT Session

The session started with participants, revising and practicing what they had learnt on day one of the training, within their groups they had made on day one.

Group Activity: The participants, in each group practiced delivering the session. Any confusions or queries they had while practicing the content of the session, were discussed with the trainer after the group activity collectively.

The participants had questions regarding the side-effects of the contraceptive methods. The trainer encouraged them to share these common misconceptions. The participants shared the following:

1. No kids even after leaving the contraceptive pills
2. Extreme weight gain or weight loss
3. Uterus gets bruised up or gets infected
4. The kidneys get badly affected
5. Menstruation cycle gets badly affected

The trainer clarified each misconception by giving details of each method's side effect. He explained that although other methods have side effects and need community member to go to the doctor, using condom as contraception does not. Furthermore, it provides dual protection from diseases as well as pregnancy. The trainer shared that the goal is to create demand and encourage the community members to go to the doctor to see which method is best for them.

#### 4. Nutrition

The session began with the trainer asking questions from the participants about their knowledge of malnourished children. He shared that 48% children in Balochistan are stunted. When speaking of different types of food one should consume, he linked kitchen gardening to this session. He briefed the participants on how having a vegetable patch at home will help them improve the household's nutrition by adding variety of food types at no cost. Details of how to grow a kitchen garden were shared on day three of the training as well.

He shared that one of the recommendations of the EMM was to add a kitchen garden around Community Physical Infrastructure schemes for the community.

Group Activity: The participants, in each group practiced delivering the session. Any confusions or queries they had while practicing the content of the session, were discussed with the trainer after the group activity collectively.

#### 5. HIV and AIDS

The session started with the trainer asking questions regarding the participant's understanding of the disease. He shared the difference between HIV and AIDs. He then shared that people usually contract hepatitis because they drink contaminated water.

The trainer shared that if CRP or SO finds out that a community member has tested positive, it is their prime responsibility to maintain confidentiality. They should counsel the community members to register themselves with the Balochistan AIDS control Programme, DHQ, so the government can purchase and provide the patient with medicines, free of cost. These medicines will elongate the patient's life. The SO and CRP should ensure the community knows they must not isolate the patient.

#### 6. Hygiene and Health

This session is very practical and the CRP should conduct it so.

The trainer encouraged participants to share what they see in the picture given in the CAT. Similarly, the CRP should engage the community to describe the picture to a great detail.

He encouraged the participants to tell the CRP to conduct an exercise, where the CRP fills a glass of water, puts her/his dirty hand (after touching soil) into it and asks all participants if they want to drink it? When they refuse tell them they **have** been drinking water contaminated with feces up till now.

The CRP should also use a soap to show the community members the right way of washing their hands.

The trainer shared that the participants should be encouraged to build latrines, it only cost PKR 3,000 to 4,000 and the CRP can easily link this activity with IGG and savings. A CRP must tell the community that they will have to sell their IGG livestock in case of a health shock because of open defecation, instead they should use their community institutions savings and invest in building latrines. The CRP should encourage President and Manager of each community institution to become change makers.

A participant shared that many people have a latrine at home, yet they still practice open defecation. The trainer said there is a need to change behavior. This can be done by the CRP noting how many CO and VO presidents and managers have made a latrine in their homes, on a board accessible to all; this will encourage others in the community as well.

Group Activity for session 5 and 6: The participants discussed and presented the sessions. They also presented in their regional languages as practice for when they will pass the message on to CRP and community members

## 7. Clean Water and Health

The session started with the trainer asking the participants how contaminated water can adversely affect us.

The trainer encouraged the participants to advocate for clean water. This should be done with as much vigour as shown by beneficiaries when demanding CIF and IGG interventions. He also linked this demand with the CPI schemes; because of budgetary constraints, there are not enough water supply schemes. Joint District Development Committees (JDDC) serve as another forum where the community members can raise their concerns before the government. He said community members should hold their CI leaders accountable as well.

He added that CRP should inform parents to make their children and especially girls aware of changes in their body as they grow. He said CRP should advocate for the girls' right to accessing sanitary napkins.

He encouraged participants not to feel shame and after some convincing they agreed.

Group Activity: The participants, in each group practiced delivering the session. Any confusions or queries they had while practicing the content of the session, were discussed with the trainer after the group activity collectively.

## Proceedings of the Training- Day Three

### Recap

The session started with the trainer requesting the participants to recap their learnings and share any questions or confusions they have regarding the sessions presented on day two of the training. Some participants inquired about the process of constructing latrines in rural households. The trainer explained that the latrine must have three holes, which are cemented to ensure wastage doesn't seep into ground and contaminate drinking water.

### Nutrition Triggering Exercise:

The trainer shared if Social Organiser (SO) want to identify women and children who are malnourished, she can conduct this activity. The SO should ask all pregnant women and women with children of six months to five year of age to gather around. Then SO should measure the mid upper arm circumference measurement of pregnant women as well as the children. For this, the trainer showed the participants what the MUAC tape looks like, how to use it and how to counsel the beneficiaries. He showed pictures from Larkana where the right intervention for malnourished children has improved their life.

Those who are identified as malnourished, should be asked to sit on one side and those who are healthy, should be asked to sit on the other side. Then the mothers of healthy children should share what and how they feed their children, so the other side can benefit.

Less than 11.5 reading on the MUAC, means the infant is malnourished. A mother should feed their infants of six months of age, every hour. For women, a reading of less than 21 indicates malnourishment.

Reading the measurement:

- Yellow: the child has Moderately Acute Malnutrition (MAM)- Multi Nutrient Powder
- Red: the child has Severely Acute Malnutrition (SAM) and in need of medical intervention. The SO should ask District Health Officer if his/her BHQ has the RUTF medication. RUTF costs more than 450 PKR, and the child must have it for 3-4 weeks.
- Green: The child is safe

## 8. Education

The trainer shared that this session is more focused on campaigning than awareness.

He enacted how the CRP must start the session, without opening the toolkit, with asking the community members how many of their children of five to 16 years of age, go to school. This way the CRP will have an idea of how to steer the conversation. The first thing for the CRP to do is to ask the CO president and manager to make a list of names of five to 16-year-old children, by going door to door. This list should highlight to how many of these children are not enrolled in, or going to school. This activity will take a week and it will identify the problem. Then the CRP should see how many children are enrolled and how many teachers are in school. What is the school lacking; water, furniture, teachers etc. Eventually the LSO will write a letter to Deputy Commissioner and the Education Officer requesting their support.

The LSO must first collect this data itself, so the members are confident of the data. This will result in a Union Council Charter of Demand. The LSO can send regular text messages to DC detailing the data and their demands, e.g. “1600 children are out of school, 40 absentee teachers, 3 ghost schools, and so we request you to construct schools in village Landian, union council Garda Babar, district Zhob”.

The participants had follow-up questions in context of their districts, e.g. the government officials not being responsive. The trainer shared ways to overcome these challenges e.g. once the LSO has detailed its demands and is not getting response from the government, the BRSP staff must support them by conducting strategic meetings with the TA and government officials to tap into the budget.

Group Activity: The participants, in each group practiced delivering the session. Any confusions or queries they had while practicing the content of the session, were discussed with the trainer after the group activity collectively.

## 9. Disaster Risk Reduction

The session started with the trainer asking participants of common disasters which have affected their districts. Other than the ones given on the CAT, participants added locust and COVID-19 pandemic to the list.

Some participants shared how drought is a very common problem in their respective districts; collectively the participants and the trainer shared effective and safe ways to store water. Participants shared that drought has also adversely affected the livestock given to beneficiaries as IGG under BRACE. The trainer shared that community must do the following:

1. In areas which are flooded regularly, community to identify a safe space with raised walls
2. Decide on a focal person who will act as “Community Based Early Warning System”
3. Houses to be made as per government’s instructions so they are safe from earthquake

Group Activity: The participants, in each group practiced delivering the session. Any confusions or queries they had while practicing the content of the session, were discussed with the trainer after the group activity collectively.

## 10. Basic Human Rights, Registration and Activism

The session started with the trainer sharing that the European Union is very interested in the community being aware of their rights. He shared that he is happy to see women in the audience however he would be happier if there were more working women.

He linked this session with the session on Education, sharing that we cannot advocate for a school to be set up in one area, unless the children of the area are registered with the government. Percentage of birth registration is less than 30% in Balochistan. The LSOs must rally for this, conduct a survey within their area and then convince community members (not just CI members but all individuals in the area) who have not registered their children, to go get their children registered.

He also told the master trainers that community members must not pay PKR 300 for this service because in reality it is only for PKR 50. If someone is corrupt and charging more, that person should be brought in to an LSO meeting and told that we know you are being unfair and this is criminal.

When one participant shared that many people in his district had gotten themselves a CNIC, he stressed that these rights are for everyone, it is not good enough to have “many” people, but everyone must practice and access their right. He said this will ensure the LSOs are sustainable and more importantly, effective in their goals. Their goal is not to distribute IGG but to sustain the CIs and uplift their community.

Group Activity: The participants, in each group practiced delivering the session. Any confusions or queries they had while practicing the content of the session, were discussed with the trainer after the group activity collectively.

### Method for Rollout to CRP:

The participants shared the CRP meet on a monthly basis, from 10 am to 1 pm. The trainer shared that the time duration of this meeting must be increased. He instructed:

- Four hours are needed to teach one session
- In September 2021, you must teach the CRP the first session
- Ask the CRP to learn the first session from home, then ask them to share their learnings for 45 minutes
- The SO should then show the CRP the ideal way of delivering a session, in 30 minutes
- This monthly meeting is hosted by CBO and SO; if there are 10-12 CRPs, the SMT should make two groups just as was done in the training, and ask the CRP to deliver the entire session, giving 30 minutes to each CRP
- Mr. Akbar, Manager Human and Institutional Development, BRSP, shared that the venue and method for conducting meetings with CRP is going to be changed. The SO will meet with the CRP at the LSO office to train the CRP as well as the LSO Executive body on CAT session. This way the LSO can also be sensitised and equipped to monitor CRP’s session. A participant shared that it will become increasingly difficult for the SOs to conduct different sessions for the 1<sup>st</sup> topic alone for each CRP at LSO level. It was discussed that the LSO can limit its role to monitoring the happening of meeting
- CRP should be taught only one session each month, not more

The trainer shared that the CAT Monitoring Checklist for CRPs is already given in the CAT manual, and should be followed for when the CRP is delivering the session.

### Addressing concerns from External Monitoring Mission

In this session, the trainer mentioned some specific areas of improvements pointed out by the External Monitoring Mission (EMM). He addressed these concerns and guided the participants on ways to resolve them.

## Kitchen Gardening near Water Supply Schemes

The EMM had identified that water was being wasted by leaking faucets around water supply schemes constructed under CPI component of BRACE Programme. He encouraged the participants to identify the flow of water from the taps and use whatever space is available to grow vegetables there. Livelihood Officers should tell people that this is a great opportunity as two to three households near the water supply scheme can make use of the vegetables from this. Another option is to dig a whole near this place, and everyone from the village should throw vegetable and fruit peel to make organic manure; this should be covered up and after one to one and a half month, it can be uncovered to use the manure for their own kitchen gardening or any other activity.

This is not to be delegated to the CRP, but should be led by SOs and LOs themselves.

## Water Harvesting

He also asked the participants to encourage beneficiaries to harvest water by putting a big utensil under a roof-like surface to collect water for usage.

## Impact of the CAT; Monitoring and Assessment

Attending CAT sessions by CRPs: It was suggested that there is a need to do a quick check on the impact of the CAT. Currently there are 15-20 CRP under each SO. In the monthly meeting, SOs should get a schedule of the sessions the CRP will be conducting. The SO should then go to the field to monitor the CRP's presentation of session. Every day the SO should see one CRP. Each session ends with a 'way forward' section; the SO should talk to the attendees about the actions they will take and convince the beneficiaries to follow-up on their learnings by going to the doctor, or registering their kids at birth.

Assessment Tool: The trainer shared a draft of the assessment, on the screen. An assessment questionnaire was developed for each of the 12 session. He ran the participants through the questionnaire for their feedback. These questionnaires are to be filled by the SO, by asking the attendees of the CAT sessions delivered by CRPs, what they remembered from the session. This assessment will monitor if the sessions are effective and community members have absorbed the information presented to them by the CRPs.

Mr. Bashir will share the final assessment form, translated in Urdu, with the RSP staff.

Frequency and method of Assessment: If the CRP has presented her CAT session to 15 people, the SO should take the attendance sheet from her and randomly select three individuals from the list. The SO should then go to the randomly selected individuals house and ask them the questions given in the tool. If the CRP has conducted ten CAT session each month, the SO should use the attendance sheets shared by the CRPs and pick three villages at random, to conduct these assessments. This means nine to ten beneficiaries will be interviewed in a month, which is not too burdensome. This should be done each month for each session delivered, so the beneficiary's memory is fresh.

## Conclusion

The session ended with the participants sharing their feedback on anonymous cards provided. BRSP shared more toolkits for the participants to take to their districts with them.

Hassan Rizvi concluded the session by telling the participants that the “CAT is the backbone of CIs” as the CEO BRSP has guided them.

Mr. Akbar, Manager Human and Institutional Development, thanked the RSPN team for taking out time to support the participants. He said if the SO’s relationship improves with the household level, it will help them carry out their work. He said the Programme is about to close, but if we do CAT sessions well, we can pass this message to the EU that this Programme must be increased as it will help Balochistan’s future. When the manual was made, the staff discussed this amongst themselves to understand the content well. This is an ongoing process, where we keep learning from our experiences. He appreciated the efforts of SOs and CBOs but said we must acknowledge our weaknesses as well to improve and work towards Balochistan’s bright future.

He said that by changing the way the SO trains the CRP; SO will go to LSO and train LSO Executive Body members as well as the CRP, the link between CRP and LSO will strengthen. This will also help CRP become a part of LSO executive body, which will be mandatory from now onwards. BRSP aims to strengthen the link between SMT and LSO. BRSP is discontinuing district level meetings with CRP.

He appreciated the participants for their hard work for the people of Balochistan.

The participants were invited to share their anonymous feedback on the training; what they liked, disliked and improvements they wanted to suggest. A woman participant shared that she liked the session on mother and child health the most. A man participant shared that “I appreciate how the trainer had a good command over the content of the session. He first detailed each session to us and then divided us into groups to practice the session; I learnt a lot from this training”. Another man participant shared “I was happy to learn that delivering these CAT sessions is a form of helping people”. A woman participant shared that although she felt shy during some sessions, she gained an understanding that she needs to put shame aside to deliver some sessions as the content details the reality of life. Two participant shared that they were not delivering such detailed CAT sessions to CRP; this training has been very helpful”. Multiple participants shared their favourite session to attend was that of family planning; if it is delivered properly to the CRP and the community, it will have many benefits.

Some participants expressed the lack of time; perhaps the training should have spanned four days instead of three. A participant suggested “a similar session on religious knowledge should also be conducted by RSPN”. Another participant shared, “the district monitoring and evaluation officers should be invited to attend the CAT training as well, as they might eventually have to evaluate the impact of the CAT session”.

## Way Forward

Throughout the training, the trainer shared ways in which the participants can make use of the information shared in the training.

- The trainer encouraged the participants to start rolling these sessions out when they return to their districts and note the results. He shared that their efforts will not be complete unless they start noticing behavioural change i.e. they see people starting kitchen gardening; getting their children vaccinated and keeping the vaccination records safe; making preparations for delivery and going to the hospital for the delivery.
- CBO to decide on a weekly schedule and once every week, they should dedicate one hour to train SO, who will then train CRPs as well as monitor them during their session delivery.
- All new staff, CBO, SO, CRP should also be capacitated on this.
- The trainer instructed the BRACE team to observe and conduct a session with the field team on each visit.
- Participants of CAT session should be encouraged to build latrines, it only costs PKR 3,000 to 4,000. The CRP and SO can link this with IGG and savings intervention. They can be guided by sharing that “if you are hit with a health shock because of a disease caught by poor sanitation, you will have to sell your livestock IGG. Instead you should use your community institutions savings to build a latrine”.
- He encouraged the staff to check if their district has a Nutrition Health Programme under Government of Balochistan. If so the staff should coordinate with officials from the Programme.
- The goal of these sessions is to make the CIs and community independent; they should not look towards BRSP for help but become self-sufficient.
- The trainer said he will come to field to observe the delivery and impact of CAT session; he will plan another visit when BRSP district people are travelling for their monthly PRG, and conduct further refreshers.

## Annex 1: Agenda

### **Agenda for Refresher Training of RSPs Key Staff on Community Awareness Toolkit under EU Funded BRACE Programme**

30<sup>th</sup> August to 1<sup>st</sup> September 2021, Quetta

#### **Day-1: 30<sup>th</sup> August 2021 (0930 am to 530 pm)**

- Introduction of Participants
- Issues/Challenges faced by field teams in implementation of CAT Through CRPs
- Discussion on Key Technical Aspects on different topics of CAT
- Refresher how to Train CRPs on use of CAT to conduct session 1

#### **Day-2: 31<sup>st</sup> August 2021 (0930-530 pm)**

- Refresher how to Train CRPs on use of CAT to conduct session 4-10
- How to work with concerned local authorities for access to services for topics mentioned in CAT

#### **Day-3: 1<sup>st</sup> September 2021 (0930-530 pm)**

- Refresher how to Train CRPs on use of CAT to conduct session 11-12
- How to work with concerned local authorities for access to services for topics mentioned in CAT
- Use of tools to assess the knowledge of participants of CAT session about their level of understanding of messages understood and intention to practice recommended behavior's/practices

Note: Morning tea break from 1000-1015 am, Lunch Break from 1 to 2 pm and afternoon tea break from 3 to 315 pm

## Annex 2- Attendance Sheet, Training of BRSP Staff, Quetta

**DAY-1**





**Balochistan Rural Development and Community Empowerment (BRACE) Programme**

**Activity: Training of BRSPs Key Staff on Community Awareness Toolkit under EU-Funded BRACE Programme**

**Date: 30<sup>th</sup> August - 1<sup>st</sup> September 2021, Quetta**

**Attendance Sheet**

S. No.	Participant's Name	Designation	Organisation	Cell Phone	Email	Initials
1.	Zahra Rao	M+E officer, BRACE	RSPN		zahra.rao@rspn.org.pk	Z. Rao
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**IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT**





**PROGRAMME TECHNICAL ASSISTANCE PARTNER**







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10.	Nadeem Khan	SO	BRSP	0336-8985335	Nadeem.khan@brsp.org.pk	[Signature]
11.	Sofia	SO	BRSP		sofia	[Signature]
12.	Bashir Anjum	Manager SPN	RSPN	0333-603811	bashir@rspn.org.pk	[Signature]
13.	Sajjad Hussain	BS PM-BRACE	RSPN	03458400201	sajjad.changazi@rspn.org.pk	[Signature]

**IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT**

**PROGRAMME TECHNICAL ASSISTANCE PARTNER**



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16.	Syed / Poshullah	SO	BRSP	0300 2079763		S.P
17.	Naseeb ullah	SSO CB	BRSP	0332 7385821	naseebkhanegmail.com	N.U
18.	Jasmin Khajak	SO + LO	BRSP			J.K
19.	Saima Khaliq	SO / LO	BRSP	03358714830		S.K
20.	Attique Ahmed	SO R keeping	BRSP	03333142866	attiquebaloch@gmail.com	A.A
21.	Ejaz Hussain	SO	BRSP	03331393476	ejaz.hussain@brsp.org.pk	E.H

IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER



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24.	Nabiler Aliq	SO	BRSP			N.A
25.	Shamin Naz	SO / LO	BRSP	03356864196	nazshamin@brsp.org.pk	S.N
26.	Hina Jal	S.O	BRSP	03314064193		H.J
27.	Shamina Kainat	SO / LO	BRSP	03335858246		S.K
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IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER





Day - 2



Balochistan Rural Development and Community Empowerment (BRACE) Programme  
Activity: Training of BRSPs Key Staff on Community Awareness Toolkit under EU-Funded BRACE Programme

Date: 30<sup>th</sup> August - 1<sup>st</sup> September 2021, Quetta

Day 2

Attendance Sheet

S. No.	Participant's Name	Designation	Organisation	Cell Phone	Email	Initials
1.	Muhammad Omer Farooq	Communications Officer BRACE	RSPN	0323-5535588	omer.farooq@rspn.org.pk	[Signature]
2.	Shamina Kainat	So/L0	BRSP	03358588646		[Signature]
3.	M. Akbar Khan	C.B.O	BRSP	0338257976	akbar.achakzai@gmail.com	[Signature]
4.	Syed Rashidullah Agha	So	BRSP	0300 2079763	syed.Rashidullah@brsp.gov.pk	[Signature]
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IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER



S. No.	Participant's Name	Designation	Organisation	Cell Phone	Email	Initials
6.	Zahida	FSO	BRSP	03303613142		[Signature]
7.	Nabila Aliouf	So	BRSP			[Signature]
8.	Attique Ahmed	So	BRSP	03533142866		[Signature]
9.	Nusar Ahmed	S.O Is.A	BRSP	0315-8997632		[Signature]
10.	Ali Ahmed	So K2	BRSP	03540380331		[Signature]
11.	Ejaz Hussain	So	BRSP	03331393476	ejaz.hussain@brsp.gov.pk	[Signature]
12.	Zanra Rao	M+E officer BRACE	RSPN	0834-5241716	zanra.rao@rspn.org.pk	[Signature]
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IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER





S. No.	Participant's Name	Designation	Organisation	Cell Phone	Email	Initials
14.	Syed Rochellah	SO	BRSP	0300 2079763	—	[Signature]
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16.	Zahida	FSO	BRSP	03303613142		[Signature]
17.	Jasmin Khajak	SO - LO	BRSP			[Signature]
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20.	Syed Dilawar Shah	S.O	B.R.S.P	0313-2489184		[Signature]
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IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER



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25.	Shamina Kainat	SO / LO	BRSP	03338582646		[Signature]
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IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER





Day 3



Balochistan Rural Development and Community Empowerment (BRACE) Programme

Activity: Training of BRSPs Key Staff on Community Awareness Toolkit under EU-Funded BRACE Programme

Date: 30<sup>th</sup> August - 1<sup>st</sup> September 2021, Quetta

Attendance Sheet

S. No.	Participant's Name	Designation	Organisation	Cell Phone	Email	Initials
1.	Ejaz Hussain	SO	BRSP	033313476	-	Ejaz
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3.	Nadeem Khan	S.O	BRSP	0336-8985335	Nadeem.khan@brsp.gov.pk	Nadeem
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5.	Sofia	SO	BRSP	/		Sofia

IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER



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8.	Saima Khaliq	SO/LO	BRSP	03352714830		Saima
9.	Nabila Aliq	SO/LO	BRSP		(Nil)	Nabila
10.	Ali Ahmed	SO	BRSP	03340380381		Ali
11.	Atique Ahmed	SO	BRSP	03333142866		Atique
12.	Nasoor Ahmed	S.O	BRSP	0315-8997632	Nasoor.S.O@brsp.gov.pk	Nasoor
13.	Farooq-Ud-Din Coran	Coordinator CB	BRSP	03003826986	-	Farooq

IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



PROGRAMME TECHNICAL ASSISTANCE PARTNER





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17.	Shamim Maq	SO/LO	BRSP	0335-6864196	nareshamim168@gmail.com	<i>Shamim</i>
18.	Sofia.	SO	BRSP			<i>Sofia</i>
19.	Jasmin Khajak	SO-L0	BRSP			<i>Jasmin</i>
20.	Minegul	S.O	BRSP	03314064593		<i>Minegul</i>
21.	Saima Khaliq	S.O/LO	BRSP	03352714830	Saima.khaliq@gmail.com	<i>Saima</i>

IMPLEMENTING PARTNERS FOR THE BRACE'S GRANT COMPONENT



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27.						
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29.						

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PROGRAMME TECHNICAL ASSISTANCE PARTNER



Annex 3- Photographs from the Training





