



Going all-out for human rights and sexual health

Aiming for results in Burkina Faso

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Contents

Acknowledgements	2
Acronyms	3
The German HIV Practice Collection	4
Executive Summary	5
A week in Burkina Faso, seeing PROSAD in action	6
A more comprehensive look at PROSAD	21
Action Area 1: Family planning and sexual health of youth	22
Action Area 3: Promoting women's rights and girls education	25
Action Area 4: Eliminating female genital mutilation	28
Action Area 5: Combating child trafficking and child labour	30
Monitoring and evaluation	34
Lessons learned	35
Peer Review	36
References	38

Acronyms

BCC	Behaviour change communications
BMZ	Germany's Federal Ministry for Economic Cooperation and Development
CERFODES	Centre d'Etudes, de Recherches et de Formation pour le Développement Economique et Social
CESAO	Centres d'Etudes Economiques et Sociales d'Afrique Occidentale
CFA	African Financial Community franc
CNLPE	Comité National de Lutte contre la Pratique de l'Excision
CVS	Committee of Vigilance and Surveillance
DAC	Development Assistance Committee
DED	German Development Service (now GIZ)
DHS	Demographic and Health Survey
FGM	Female Genital Mutilation
FNTF	Fédération Nationale Théâtre Forum
GDC	German Development Cooperation
GDI	Gender-related Development Index
GIZ	German International Cooperation (Gesellschaft für Internationale Zusammenarbeit)
GNI	Gross National Income
GRAAP	Groupe de Recherche et d'Appui pour l'Autopromotion Paysanne
GTZ	German Technical Cooperation (now GIZ)
HDI	Human Development Index
HIV	Human Immunodeficiency Virus
IEC	Information, Education and Communications
ILO	International Labour Organization
InWEnt	Capacity Building International, Germany (now GIZ)
KfW	KfW Entwicklungsbank (German Development Bank)
NGO	Non-governmental organization
OECD	Organisation for Economic Cooperation and Development
PROMACO	Projet de Marketing Social de Condoms
PROSAD	Programme Santé Sexuelle et Droits Humains/Programme on Sexual Health and Human Rights
STI	Sexually Transmitted Infection
UNAIDS	Joint United Nations Programme against HIV/AIDS
UNDP	United Nations Development Programme
VCT	Voluntary Counselling and Testing

German HIV Practice Collection

Peer-reviewed

The German HIV Practice Collection was launched in 2004 by HIV experts from various disciplines to highlight lessons learnt and effective approaches from HIV programmes supported by the German government worldwide.

Proposals for publication are made by managers of German-backed programmes and chosen by an advisory board of HIV experts representing four implementing agencies and the German Federal Ministry of Economic Cooperation and Development. Authors work closely with relevant organizations in the partner countries and the German experts supporting them.

External peer-reviewers with relevant expertise then determine whether the documented approach represents “good or promising practice”, based on eight criteria (see text box). Only reports about practices that meet this standard are approved for publication.

Through this rigorous process, the Collection strives to encourage collaborative knowledge management: getting the right people, at the right moment, to discuss the right topic.

All reports direct readers to useful tools and appear in full-length, short and electronic versions – facilitating discussion and replication or adaptation of practices.

To download the short version of this report and other publications in this collection, go to www.german-practice-collection.org.

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Selection Criteria

- Effectiveness
- Transferability
- Participatory and empowering approach
- Gender awareness
- Quality of monitoring and evaluation
- Innovation
- Comparative cost-effectiveness
- Sustainability

Executive Summary

One of the poorest of all the world's poor countries, Burkina Faso is held back in part by the low status given to its women, youth and children by tradition, local custom and widespread social attitudes and practices.

Officially launched in January 2004, the German-Burkinabe Sexual Health and Human Rights Programme (PROSAD) builds on the work begun by a German-Burkinabe family planning programme launched in 1995. It was chosen for write-up in the German HIV Practice Collection because, over the years, it has become a uniquely sustained, comprehensive and results-driven effort to protect and empower women, youth and children. It has helped raise their own and public awareness of their human rights, including their sexual and reproductive rights, and has provided them with a range of services and mechanisms that allow them to take advantage of those rights.

PROSAD focuses on two of the country's thirteen regions, Est and Sud-Ouest, and has three components. The first focuses on youth and their needs for information and services in the areas of family planning, sexual and reproductive health, and prevention, care and treatment for HIV infection. The second focuses on women and girls and their needs for information about their basic rights and mechanisms they can turn to when their rights are violated, with special attention to stopping female genital mutilation (FGM) and to enrolling and retaining girls in school. The third focuses on children and their needs for protection from child trafficking and the worst forms of child labour.

PROSAD's methods can be summarized as follows. First, it works with key Ministries to build the capacity of their regional, provincial and local branches and to forge partnerships with and build the capacity of NGOs, village councils and others. Results include teams of trained professionals and volunteers in health and social services plus provincial and village committees that share

responsibility for raising people's awareness and intervening when, for example, a woman's rights are violated or a child is trafficked.

Second, PROSAD places heavy emphasis on developing and supporting the use of a range of highly interactive behaviour changes communications (BCC) approaches and tools. Some (e.g., peer education, lay and professional counselling) will be familiar to most readers. Others (e.g., forum theatre presentations and animations using the GRAAP method) will be familiar to readers in Burkina Faso, where they were pioneered and have been used by many other programmes besides PROSAD. Two (primary and secondary school courses on FGM and the Approche Famille method of family counselling) will be familiar mainly to readers already familiar with PROSAD.

Third, PROSAD provides strategic information on which to base effective planning, implementation and monitoring and evaluation. It places particular emphasis on qualitative information, which is greatly enriched by PROSAD's strong commitment to action at the local level, where a range of people contribute their own knowledge and experience of community traditions, customs, attitudes and practices.

Scheduled to last until December 2015, PROSAD has set ambitious targets for achievement. The results, so far, give good reason to expect it will hit all of its targets and surpass some by substantial margins. This publication is issued in the belief that PROSAD already has lessons to teach and tools to offer to any development workers who are dedicated to protecting and empowering women, youth and children. It concludes with peer reviewers' assessments as to how well it meets the criteria of good practice, including transferability of its methods to other countries.

A week in Burkina Faso, seeing PROSAD in action

Briefings in Ouagadougou

We fly from Niamey, capital of Niger, to Ouagadougou, capital of Burkina Faso, late in the afternoon on Sunday, 29 March 2009. It is past midway in the long October-June dry season and temperatures on the ground range from the high 30s to the high 40s Celsius. Through the window, we can see that long stretches of the Sahel are remarkably flat and that desertification is much in evidence. Landlocked Burkina Faso has no navigable rivers and few natural resources. Its 15.2 million¹ people are largely dependent on subsistence and commercial agriculture but its agricultural production is under constant threat by low annual rainfalls, frequent droughts and inefficient agricultural practices. Ranked at 176 out of 177 countries on the United Nations' Human Development Index (HDI), it is one of the poorest of all the world's poor countries and a frequent recipient of emergency food aid.²

The following day, we are given briefings by staff of the German-Burkinabe Programme on Sexual Health and Human Rights (PROSAD) at their headquarters in Ouagadougou. They explain that German Development Cooperation (GDC) is committed to supporting Burkina Faso's efforts to reduce poverty and that GDC's three priority areas of action are agricultural development, decentralization and provision of drinking water and sanitation. Burkina Faso has thirteen administrative regions and GDC's two focus regions are Sud-Ouest (population 0.7 million), which reaches down between Côte d'Ivoire and Ghana, and Est (population 1.3 million), at the opposite side of the country and bordering on Benin and Niger.³

In addition to having those three priority areas of action, GDC recognizes gender inequality and HIV as cross-cutting issues that can stop the country from taking full advantage of its human resources and, thus, of its full potential to make rapid progress on poverty reduction. GDC is committed to supporting efforts to address those issues and to achieve the Millennium Development Goals (MDGs), with

particular emphasis on those that can be achieved only if women, children and youth are protected and empowered through awareness of their rights and the means to take advantage of those rights.



After watching a forum theatre presentation in Diébougou, the audience considers what it has said about relations between men and women.

PROSAD is one of the programmes through which GDC meets those added commitments. It was officially launched in January 2004 and is scheduled to last until December 2015. However, it builds on earlier German-Burkinabe programmes including a family planning programme launched in 1995. Before 2004, these programmes focussed on the Sud-Ouest region and its northern neighbour, the Boucle du Mouhoun region, which stretches up to the border of Mali. In January 2004 when Est replaced Boucle du Mouhoun as one of GDC's two priority regions, PROSAD began establishing operations in Est while consolidating gains and winding down operations in Boucle du Mouhoun.

Because its predecessor programmes go back to 1995 in Sud-Ouest, PROSAD is better established there and has a longer record of measurable achievement. For this reason, the PROSAD team at headquarters has chosen Sud-Ouest for our introductory journey.

¹ Institut National de la Statistique et Démographie et al (2009).

² UNDP (2007).

³ Burkina Faso's 13 regions are divided into 45 provinces. The Sud-Ouest region has four provinces—Ougouriba, Ioba, Noubiel and Poni—and Est has five—Gourma, Gnagna, Komandjoari, Kompienga, and Tapoa.

PROSAD's three components and five action areas

PROSAD has three components with a total of five action areas. This division makes sense for the purposes of research, planning, administration, and monitoring and evaluation but, on the ground, the action areas are so linked that it is not always easy to distinguish one from the other. A PROSAD-supported local association may work in three or four of the action areas and put on a forum theatre presentation that engages audiences in discussion and debate about issues addressed in all of them.

Component I, focus on youth, has two action areas: family planning and sexual health; mainstreaming HIV. The situations it addresses may be summarized as follows:

- Despite its lack of natural resources and extreme poverty, Burkina Faso has one of the world's highest rates of natural population increase. According to recent UN estimates, its population grew from 4.1 million in 1950 to 15.8 million in 2009 and could reach 40.8 million by 2050. Driving the growth is the world's eighth highest fertility rate, with the average Burkinabe woman having 5.94 children during her child-bearing years.⁴ Families have more children than they can easily afford and consequences include stunting and malnutrition and the tendency of many family heads to require that, instead of going to school, children work and contribute to the family economy.
- A 2003 Demographic and Health Survey (DHS) found that HIV prevalence was 1.8 percent and on the gradual decline countrywide, but still on the increase in the two largest cities, Ouagadougou and Bobo-Dioulasso. It ranged from 1.2 percent in Plateau Central region to 3.7 percent in the Sud-Ouest region and 4.2 percent in the Centre (Ouagadougou) region. Young women (15-24) were almost twice as likely as young men to be infected with HIV.⁵

Component II, focus on women and girls, has two action areas: promoting women's rights; eliminating female genital mutilation (FGM). The situations it addresses include:

- More than 80 percent of Burkinabe women are illiterate. While the country's adoption of international conventions and its own laws provide them with basic human rights, they often do not know they have these rights and they rarely have access to mechanisms for redress if their rights are violated. In the 2003 DHS, many said they would like to use modern family planning methods but do not because men make family planning decisions. Three quarters of all women said that, even when ill, they cannot go to a health clinic without the permission of a male relative.
- Of women 15 to 49 years old, 76.6 percent said they have been excised. Though excision has been illegal since 1996 and is on the decline, it is still commonly practiced. Naively assuming "excision" to mean a simple snipping off of the clitoris, we could hardly bear to listen as the PROSAD team told us that it often involves extensive cutting and gouging with crude and unsterilized instruments by old women who know nothing about surgery or the human anatomy. When shown the results in colour photos, we winced and closed our eyes. It is performed without anaesthesia and some of the women who perform it are blind, or nearly so.

Component III, focus on children, has one action area: combating child trafficking and the worst forms of child labour. The situations it addresses include:

- School enrolment is increasing rapidly but, in the 2007/2008 school year, 39 percent of school age boys and 47 percent of school age girls were still not in school.⁶ Many out-of-school children are obliged to work long hours at jobs better suited to adults. Burkina Faso is a country where internal and cross-border labour migration is very common, and children often run away from

⁴ UN (2009).

⁵ Institut National de la Statistique et Démographie et al (2004).

⁶ Heuler-Neuhaus W and Neuhaus E (2007).

home in the hopes they will find better conditions and prospects elsewhere. Instead, they often fall into the hands of child traffickers and end up being forced to participate in even worse forms of child labour.⁷

- An estimated five percent of all Burkinabe children—but eight percent in the Sud-Ouest and Est regions – from 6 to 17 years old are labour migrants living away from their parents. Some 160,000 are believed to be victims of child trafficking. Around 80,000 of those, mostly girls, live and work in the urban areas of Burkina Faso where they are used for domestic labour and often exploited sexually. Around 60,000, mostly boys and many less than ten years old, live and work in Côte d'Ivoire where they are used in agricultural and mining operations.



A Troupe No-biel animation about child trafficking ends with the animators holding up a poster saying “no” to child trafficking and “yes” to education.

PROSAD’s methods

Under PROSAD, the German Technical Cooperation Agency (GTZ) is the leading GDC organization and the German Development Service (DED) and KfW Entwicklungsbank (German Development Bank) are its main GDC partners. The leading Burkinabe partners are, first, the country’s Ministry of Finance and Economics and then its Ministry of Health, Ministry of Social Action and National Solidarity, Ministry for the Promotion of Women, Ministry for the Promotion of Human Rights,

Ministry of Primary Education and Literacy, Ministry of Secondary and Advanced Education and Scientific Research, Ministry of Work and Social Security, National Committee against Female Genital Mutilation, and National Council against AIDS and Sexually Transmitted Infections. PROSAD’s methods can be summarized as follows:

Decentralizing, forging government-NGO partnerships and capacity building.

PROSAD provides training and technical and financial support as it works with the leading Ministries on building their capacity at the national, regional and local levels. It facilitates the building of partnerships with NGOs at all of those levels and with village chieftains, councils and other community leaders and helps build the capacity of these partners, too. It aims to streamline the flow of resources to the front lines and, once the resources are there, to deliver the communications and other interventions that have the greatest impact. This often involves establishing, training and supporting teams of professionals and volunteers and special committees at provincial, departmental/municipal and village levels.⁸

Developing and supporting the use of IEC, including interactive BCC tools.

See next section, starting on page 9.

Providing timely and accurate strategic information.

By issuing annual statistical reports and various special reports, PROSAD helps its many partners keep abreast of the latest information available from Burkinabe government, UN and other sources external to PROSAD. When those sources do not provide sufficiently detailed, timely and accurate information specific to the Sud-Ouest and Est region or their subdivisions, PROSAD commissions special studies. In addition, it provides training and support for the recordkeeping, analysis and reporting that are necessary for effective monitoring and evaluation. It places particular emphasis on qualitative information. This is sometimes provided through interviews,

⁷ Kielland A et al (2002) and Yaro Y et al (2005).

⁸ Provinces are divided into departments (the old system) and/or municipalities (the new system) and most of these embrace a number of rural villages.

focus group discussions and meetings associated with special studies but, on a daily basis, it is provided by local actors with knowledge and experience of local traditions, customs, attitudes and practices.

PROSAD's highly interactive and adaptable BCC

According to the Human Development Report 2007/2008, adult literacy in Burkina Faso is only 16.6 percent among women and 31.4 percent among men.⁹ School enrolment is increasing rapidly but, as mentioned above, almost one-third of school-age boys and one-half of school-age girls are still not in school.

French is the official language but many Burkinabe people have limited proficiency in French. They speak the languages of their own ethnic groups and traditional trading languages when relating to people from other ethnic groups. Forty percent of all Burkinabe are Moore-speaking people and the rest are divided among the Bobo, Fulani, Gurunsi, Lobi, Mande, Senufo, and others. Among them, there are more than 60 languages and dialects. While there are no official statistics on religious affiliation, a roughly estimated 40 percent are Muslim, 40 percent Christian and 20 percent adherents to indigenous systems of belief. However, even the Muslims and Christians adhere to many beliefs and practices that are unique to their ethnic groups or, sometimes, just to their particular villages.

Lack of literacy and a common language together with poor access to electricity and television in many areas mean that printed posters, pamphlets and brochures and mass communications through the print and broadcast media are not sufficient. PROSAD recognizes that there must be other ways to get across messages that most people can understand, that relate to their own particular beliefs and circumstances, and that provide them with knowledge and skills they need to change their own attitudes and behaviour and to get others to change

theirs, too. Accordingly, it has supported development of a range of highly interactive BCC approaches and tools that can be adapted for local purposes. These include:

- **Approche Famille counselling sessions** that engage whole families (i.e. males and females of all generations) in discussion and debate about women's rights, help them identify and resolve their own particular women's-rights-related issues or, if appropriate, help them access the assistance of professional social workers;



A lay counsellor facilitates an Approche Famille session with a family in Batié.

- **Primary and secondary school courses on FGM** that help young people decide for themselves whether or not FGM is a good practice;
- **Forum theatre presentations** that engage people of all ages in discussion and debate about various issues addressed in any or all components of PROSAD;
- **Kit GRAAP-based animations** that use cartoons, acting, dancing and music to encourage people of all ages to think for themselves and engage in discussion and debate about children's rights, child trafficking and the worst forms of child labour;¹⁰
- **Professional and lay counselling** on family planning, sexual and reproductive health, FGM and other issues;

⁹ UNDP (2007).

¹⁰ The Approche Famille, forum theatre and GRAAP methods are described in boxes later in this publication.

- **Peer education** on family planning, sexual and reproductive health and HIV in schools, youth centres and other venues;
- **Dispute resolution** that includes arbitration, assisted by lay counsellors, between women and the village elders or blacksmiths who normally resolve family disputes and, if necessary, resort to professional social workers and intervention by the police or other authorities.

The purpose of our visit to the Sud-Ouest region will be to see some of the above approaches to BCC in practice.

From Ouagadougou to Gaoua

With a rapidly growing population that now surpasses 1.5 million people, Ouagadougou is a low-built and sprawling city. As we head out for the Sud-Ouest region on Tuesday morning, it takes us an hour to reach the countryside. Then we drive across a plain with heavily grazed grass and widely spaced trees, many small villages and family compounds, and agricultural activity everywhere. There are small round grain-storage huts on stilts and countless goats, pigs and chickens roaming freely but each known to have its home and belong to someone.

As we enter the Sud-Ouest region, the land becomes ever hillier and the vegetation ever more lush until it is clear we have left the Sahel and have entered a new geographic zone of savannah, forest, red earth and green hills, a zone known as Sudanese. Nestled among the green hills we find Gaoua, capital of the region and of Poni province. With a population approaching 30,000, Gaoua is the main marketing town of the Lobi people and is known for lively cabarets that attract musicians and audiences not only from Burkina but from Côte d'Ivoire, Ghana and beyond.

We receive a warm welcome at PROSAD's Sud-Ouest regional office, where we discuss our schedule with its staff and they tell us who will accompany us to various sites and events.

Gaoua Youth Centre

It is late afternoon by the time we arrive at the Site SRAJ CM Gaoua (Gaoua Health and Youth Centre) and there are two groups lounging in two separate areas of the L-shaped porch. In one area, young men are playing board games, drinking tea and chatting. In another, young women, boys and small children are watching television.



When a sports event comes on, young men join the others in front of the centre's television.

The manager tells us about the centre and its programmes, while giving us a guided tour. He apologizes for the fact that things are a bit chaotic because they are preparing to move to a more modern and spacious building thanks to increased funding from the Ministry of Health and the regional and district health authorities. Open from eight in the morning to eight in the evening seven days a week, the centre offers social and recreational opportunities that are not otherwise available to Gaoua's out-of-school youth, many of them unemployed and most of them poor. It also welcomes school-going youth and the children of young parents.

The centre has a library and gives young people access to a range of IEC material on sexual and reproductive health, family planning and sexually transmitted infections (STIs) including HIV. It makes condoms and water-based lubricants readily available and provides counselling on family plan-

ning and VCT for STIs and HIV. It also provides peer education, training for peer educators and counsellors, and serves as a venue for Kit GRAAP-based animations and forum theatre presentations.



When we visited, the centre was getting ready to move to this new building.

In Batié, a class on FGM in a primary school

On Wednesday morning, we drive south into Nounbiel province and its capital, a town called Batié, where we attend a combined grade five/grade six class on FGM in a primary school. There are 76 students in attendance, 42 boys and 34 girls ranging in age from 12 to 14 years old. Though the class is large, the teacher is expert at maintaining firm control while being good-humoured and gentle with each child and obviously well-liked.



Many eager hands go up every time the teacher asks a question.

We listen as the teacher asks the children to explain what excision is, who does it and what the pros and cons of it are. They are eager to answer and many raise their hands at once. The teacher takes each answer seriously and, without questioning its accuracy, enters it into the appropriate column on the blackboard.

When the children run out of answers, the teacher asks those who favour excision to gather on one side of the room and those who are against excision to gather on the other side. The class splits 29 for and 47 against excision. The teacher then asks those on each side to put their heads together and agree on the main points their side would like to make in a debate.

During the debate, those for excision say it ensures that when a girl grows up she will be beautiful, pure and desirable to men. A woman who is not excised cannot pray and the spirits of the ancestors will not speak to her. She cannot cook for her husband or else he, too, will become impure. The clitoris kills the sex drive of men. It stinks and attracts flies and removing it will ensure that a woman never gets worms.

Those against excision say the operation, itself, can be extremely painful and can result in extreme bleeding and death. The use of unclean instruments can result in HIV and other infections. Excision can damage a girl, so that child-bearing will be difficult or impossible when she grows older.

While the debate is underway, the teacher adds to the points he wrote on the blackboard earlier. After the debate, he posts simple drawings illustrating the vagina and anus of an excised girl and of an un-excised girl and explains that excision often does serious harm. It sometimes results in complete closing of the vagina so that a girl cannot urinate and suffers acute pain and may die unless she is taken to a doctor for corrective surgery. It sometimes damages the sphincter muscle around the anus, so that a girl has no control over her bowel movements.



Students pass around an illustration while the teacher explains how excision can do serious harm.

For the first time, the teacher states his opinion and, referring to points already made by the children, outlines the main points against excision. At the end, he asks the children to vote for or against excision again by choosing to stand on one side of the room or the other. The pro-excision group has shrunk to less than a third of what it was but there are still hold-outs and they include both girls and boys.

Gold-mining sites at Tanior and Konkere

Still in Nounbiel province, we visit two gold-mining camps accompanied by a provincial representative from the Ministry of Social Action and Solidarity. He explains that these camps are commonly associated with child trafficking and the worst forms of child labour. (An estimated 20 to 30 percent of the world's gold comes from small artisanal mines such as the ones at these camps and an estimated 2 million children work in these mines.¹¹) With PROSAD's support, his Ministry and others partners monitor them for evidence of situations calling for their intervention. To protect children, they have developed a code of conduct and it has been adopted by organized gold miners and is promoted by peer educators and also by Kit-GRAAP based animations (described later in this publication). What we see are temporary settlements that, for the seeming desperation of their residents and the obvious squalor and danger they endure, far surpass anything we have

seen in Hollywood movies about the "wild west" and its rough and ready gold-mining towns.

At Tanior, operations are winding down as it becomes increasingly evident that what gold there was has mostly been found and the gold buyers are moving on. There is still a camp of several hundred young miners and many other men and women who follow the miners from settlement to settlement and sell them goods and services. It is like a bustling urban neighbourhood made of tents, lean-tos and make-shift shacks. As we walk its hot and dusty streets, young women call out in French and English telling us what sexual pleasures they have on offer and asking us which of these we might prefer. Several say they are from Ghana, by way of explaining they speak English fluently.

At Konkere, we see a new camp and learn that the rumour quickly spreads when there is a new find of gold and the gold-buyers are already there waiting for the miners to arrive. Young men, mostly in their early twenties and late teens but some younger form their own informal partnerships of eight or ten men and boys who share the labour of digging a mine, pulling up bags of earth and taking them to a sluice, where any gold is washed and sifted out. There are sluices lined up along four sides of a large square and in the middle of the square sit the gold buyers waiting to pay for grains and nuggets of gold. They display large nuggets near their cash boxes, suggesting that there really are fortunes to be made.



Standing by their mine shafts, the young men say they have dug down 30 metres in three weeks but found no gold yet.

It is mid-day and around 40 degrees Celsius when we walk cautiously through the treacherous field of mines. These consist of shafts just wide enough for the young men's bodies. They go straight down, like water wells, and often have walls of earth little more than a foot thick separating one shaft from the next. Only one miner goes down each shaft at a time and the others lower him in by rope, then lower and raise the bucket for the dirt he digs out of the hard ground. They have been digging for three weeks now and have gone down 30 metres but have found very little gold so far. When they reach a level where there is gold, they will begin digging out sideways and try to avoid digging into neighbouring shafts.

Here is where the worst forms of child labour come in. Being small and light, young boys are easy to lower down the shafts and lift up again and they can fit into tight spaces while digging down at the bottom. It is extremely arduous work and extremely dangerous. The walls and ceilings of these shafts often collapse.



Trafficked into gold mining, these small boys are easy to lower down the shaft and lift up again.

Before leaving, we learn that these young miners and their followers come from all over West Africa but none are Lobi. In fact, the Lobi resent others coming to take their gold. In their culture, gold represents the human spirit born out of the earth and since the act of birth is for a woman to perform, Lobi men and boys are forbidden to dig for it. Later, we see Lobi women

digging shallow holes along the road, putting the earth into vases or pails and taking it home to sift for gold.

In Legmoin, an Approche Famille session

Now, we retrace our tracks through Gaoua and keep heading north until we veer off the main road and look for a small village called Legmoin. There we find two animators and a family of thirteen people waiting for us under the shade of a tree. Sitting on a chair in a central place is the obvious matriarch and sitting on the periphery are her husband and his sister. With them are two middle-aged women, two younger women, four men ranging from mid-teens to late twenties, three boys, and three infants.

The senior animator is a man and he plays a PRO-SAD tape on women's rights: to think, to speak, to get paid for their work, to participate in decisions that impact on their own and their children's health and welfare, and to keep their children and inherit property when their husbands die. He then tries to get a discussion going. Everyone is hesitant and a bit too polite and deferential, until the other animator intervenes. She is related to this family through marriage, she explains to us, and she knows they have some things they should talk about but do not talk about. In an emphatic but good-humoured way she provokes them ("come on, say something, where is your tongue?") until a shy younger woman begins to speak softly and then ever more passionately, telling us a long and gripping story.

Legmoin is her mother's village and this is her mother's family. They did not have to take her and her children in but they did after the terrible things that happened to them. She married a man from Legmoin and he took her to live in Côte d'Ivoire. They had one child and she was pregnant with another when she became ill. Everyone said she had AIDS and her husband ran away. It turned out not to be AIDS and she recovered but he was gone and never came back. The last she heard, he was with another woman.

The second child was born and she was desperate, not seeing how she would ever be able to keep two children sheltered, fed and clothed. When a woman is abandoned by a man, she cannot go back to her father's family because she no longer belongs to them. With nowhere else to go, she came here but she feels so ashamed, knowing that she and her children are a burden. She speaks ever more forcefully as she explains that she is very angry. "We are his wife and children but he left us. He has never done anything to support us. It is not right."

The rest of the family have been listening intently and wait for her to finish. Then one of the other women says, "My sister, you never speak. We did not know all of these things you have just told us. What has happened to you is very wrong. I wonder what we can do about it." The animators say the law is not strong and the fact that the scoundrel now lives in Côte d'Ivoire is another complication, but this is obviously something they must look into and talk about again. They must try to help this young mother and her children and they must also try to stop this from happening to other mothers and children.



Usually quiet, this young mother says she hates to be a burden on her mother's family while they listen to her story.

Box 1. Approche Famille

A typical Burkinabe family has around 13 members and consists of all males and females of all ages and all social strata who are related by kinship and organized around a particular holding of land, whether they are residents or non-residents. It is the primary vehicle for socializing individuals and it is their first and last refuge in times of trouble.

In 2006 and 2007, PROSAD worked with the Ministry for the Promotion of Women and the Ministry of Social Action and National Solidarity to develop a training module and tools for a new approach that uses the family unit as the setting for education and training aimed at promoting women's rights and putting an end to FGM and violence against women.¹² This new approach is currently being tested and refined in a PROSAD-supported collaboration between the two ministries and two associations in the Sud-Ouest region, Maalka in Batié and Sonti Yelaben in Legmoin. The five steps in the testing process include:

1. Selecting and training ministry staff and association members as resource persons who understand the basics of the approach and have the skills to train community members as animators of family sessions and to follow up with any action that may be appropriate.
2. Conducting a study before launching the approach in each community, interviewing a sample of families to assess their members' knowledge, attitudes and practices.
3. Selecting and training community members as animators capable of introducing the three topics—women's rights, violence against women and FGM—discussed in separate family sessions (one for each topic) and then of animating discussions. The resource persons do this training by guiding the trainees through actual family sessions.
4. Organizing forums of opinion leaders in each community with the aim of getting their active support for the approach and for appropriate changes in attitude and behaviour.
5. Putting the trained animators to work facilitating family sessions. There are two animators for each session, one male and one female. As they introduce the topic for that session they play a 15-minute audiotape on the topic. Afterwards, they animate discussion with the aims of getting even the shyest family members to express themselves and of identifying where there is family conflict now or likely to be family conflict in the future and of suggesting ways of calming or avoiding the conflict. If appropriate, they may also refer problems to the resource persons for further action.

¹² PROSAD (2007a) and (2007b).

In Diébougou, a Kit GRAAP-based animation

Driving further north into Sud-Ouest's Bougouriba province, we stop in its capital and main town Diébougou, population 18,000, for two nights. On Thursday morning, we find a company of four young men and four young women waiting for us at an outdoor theatre. They are participants in the Troupe "No-Biel" ("with one voice") Animation programme which, since 1997, has been training and supporting local groups of amateur performers in the techniques of using acting, dancing and music to bring lessons alive and make them highly inter-active.

Recently, this company has received training in the use of the Kit GRAAP techniques and material developed through PROSAD's collaboration with the Groupe de Recherche et d'Appui pour l'Autopromotion Paysanne (GRAAP). These are designed specifically to address the issues covered by PROSAD's Component III: children's rights, child trafficking and the worst forms of child labour (See box 2.).

Box 2. The three-step GRAAP method: to see, to reflect, to act

For decades, the Groupe de Recherche et d'Appui pour l'Autopromotion Paysanne (GRAAP) has been developing and refining what has come to be known as the "GRAAP method" of animations to support community self-development in Burkina Faso and throughout West Africa. Based in Bobo-Dioulasso, the Centres d'Etudes Economiques et Sociales d'Afrique Occidentale (CESAO) collaborates with GRAAP in providing training to local animators who speak local languages and are intimately familiar with local beliefs, attitudes and practices.

The GRAAP method makes use of cartoons encased in plastic that adhere to a "flannel," a special cloth that can be pinned to a wall or hung over a board propped on an easel. Highly interactive, the method leads participants through three steps: to see, to reflect and to act.

Today, the company has no audience other than us, so some of them pretend they are in the audience as they show us how they animate a lesson. The head of the company asks the audience a series of questions and, as they answer, he posts cartoons that illustrate the answers. Eventually, all of the cartoons are posted and tell the whole story.

The questions (Q) and audience members' answers (A) begin like this. Q: What is a child? A: Someone less than 18 years old. Q: What does a child represent? A: Our future. Q: What do you think of children working? A: They should not have to work too hard. Q: Why? A: Because they are not fully developed physically, intellectually or emotionally. They need time to play and to explore on their own. Q: What does a child need most? A: Protection, affection, nutrition, and education.

By this Q and A method, the lesson gets participants to describe what happens to many children. Their parents or guardians treat them like cheap labour, keeping them out of school, making them work hard all day, scolding them for their laziness but giving them little praise or other reward when they work hard. With such a terrible home life, children run away and come across people who promise to help them. These people sell them to others who may make them pick cotton all day from dawn to dusk, mine for gold, do hard domestic labour, or haul goods.



By the end of the Q and A method, all the cartoons are posted.

Before releasing trafficked children, their buyers may reward them with cash so they can purchase radios, watches, blue jeans and other prized possessions.¹³ Unwilling to admit they have been duped and abused, the released children return to their villages and boast of their adventures and rewards. This only encourages other children to run away, too, and to trust the people who tell the same old lie, that they only want to help. Q: What should be done about this? A: Both children and adults should be encouraged to report child trafficking to recognized authorities who can do something about it. If someone is found to be trafficking, they should be arrested, tried, convicted and jailed.

After the head of the company has taken participants through the whole Q and A, he asks for volunteers to come forward and, referring to the posted cartoons, to summarize what has been learned. When that is done, the company presents a short play illustrating the lesson. A boy is living with his relatives. His aunt dotes on her own son, buys him nice clothes and shoes and sends him to school but keeps this boy home, provides him with nothing but shorts and forces him to do household chores while offering him nothing but scolding and blame. Fed up with this treatment, he runs away but soon finds himself sleeping in the streets and starving. A young woman takes pity on him and offers to help but her boyfriend drags her away, saying the boy is none of their business and they should not get involved. As the story unfolds, we meet more run-away children and adults who interact with them and we are kept well entertained with expert acting, dancing and singing, accompanied by contemporary West African music on CD.

At the finale, the whole company marches forward from the back of the stage and swoops to pick up a sign lying face down and holds it high for the audience to see. The sign says “no” to child trafficking and the worst forms of child labour and “yes” to education for all children.

¹³ Hoping to protect themselves from prosecution, the buyers of trafficked children often get them to sign contracts binding them to work for little pay for a fixed period, at the end of which they are released—or sometimes not released, with buyers often failing to honour contracts.

A forum theatre presentation

Late in the afternoon, we go to the main market in Diébougou to watch UJFRAD, a local group of amateur actors, perform a play using forum theatre techniques (See box 3.). The play starts while there is

still daylight so we can take photos, but normally it would start after the sun goes down and the air cools because that is when the market is busiest.

Box 3. Forum theatre for development

Founded in 1978, **Atelier Théâtre Burkinabè (ATB)** is a professional theatre company at the core of the **Fédération Nationale Théâtre Forum (FNTF)**, an association consisting largely of local groups of amateur actors who use forum theatre to engage audiences interactively in performances that entertain but also educate about a wide range of development issues. In 2000, ATB launched a national theatre school to train Burkinabe people in this kind of theatre and eventually to become an international centre for training. Every two years, ATB hosts the International Festival of Theatre for Development. ATB also produces radio and television series, all designed to entertain and educate.

Since 2004, PROSAD has been supporting ATB and FNTF as they produce plays designed to address the issues covered by all three of PROSAD's components. These plays are refined through performances in Ouagadougou and then taken to the regions, where ATB's core group of actors work with local actors on translating them into local languages and adapting them to reflect local cultures and circumstances.

During performances, there may be opportunities for audience participation in determining turns of plot and alternative endings. Immediately after performances, there are always opportunities for lively discussion. Following these discussions, people often come forward to ask for advice or assistance with matters of personal concern, such as how they might be able to protect their own daughters from sexual exploitation and send them to school or how they might repatriate their own trafficked children. Some performances and discussions are recorded for broadcast on local radio or television so that more people may benefit.

The plays are often performed in schools, with school children playing some of the roles, and with issue-oriented games and group discussions held afterwards. In Sud-Ouest, PROSAD supports an annual cultural festival that provides opportunities for additional performances of the plays, as well as for other cultural events, and school children are among the enthusiastic organizers of and participants in these festivals.

The stage and set consist of a canvas backdrop marking off an area of ground and the props consist of two galvanized tin buckets and wooden bench. The play begins with a middle-aged woman using the buckets to wash clothes. Her adolescent daughter, Sophie, comes to say she is worried because there is something very wrong with her “down there” and her mother gives a less than fully satisfactory explanation that she is experiencing her first period and this is normal. Looking puzzled, Sophie leaves and her mother raises her eyes and arms to the sky and wails, “Oh, what will become of my daughter now?” When her husband comes home, she tells him what has happened. He berates her for telling Sophie anything at all, saying that the less she knows about such things the less likely she is to get into trouble.

Not satisfied with her mother’s explanation, Sophie goes to see her older friend, Lucille, who says that what she is going through is just part of becoming of a woman. Lucille says her boyfriend happens to have a really nice friend, Antoine, and he can teach her more about what becoming a woman means. Antoine turns out to be a charming and macho Lothario. He flatters Sophie and makes her blush while talking her into going to a place behind the canvas backdrop, where he has something he wants to show her. He soon emerges with a satisfied grin and a swagger, hitching up his jeans and re-buckling his belt. Later, he shows little interest in Sophie. Half-smitten and feeling hurt and confused, Sophie goes to Lucille for advice. After hearing her story, Lucille laughs and says now Sophie is learning what it means to become a woman.

In a side-plot, Lucille’s boyfriend is worried because he has symptoms that have him convinced he is dying of AIDS but he does not want to go to the doctor and find out for sure. Eventually, he gets so worried that he goes anyway and learns that he is HIV-negative but has another sexually transmitted infection that can be cured. The doctor explains why it is so important to take precautions and, also, to get tested. In this case, getting tested has relieved the worry that it might be HIV and has led to a cure for another infection that could have done a lot of harm.

In another case, getting tested could lead to effective treatment for HIV and also to learning how to continue having an active sexual life while doing no harm to others.



Lucille (left) says she knows a boy who can teach Sophie what it means to become a woman.

The play is hilarious and well performed. The actress playing Lucille is perfectly cast as a sassy girl who cares little about what effect her words and behaviour might be having on others. The actor playing Antoine is perfectly cast as a bad boy who thinks of women largely in terms of conquest. By the time it is over, the audience has grown from around 100 to around 200 people. The few seats are mostly occupied by older women, while children sit on the ground at the front and sides, and men and younger women stand towards the back.

The audience has laughed, gasped, hissed and cheered all along and now the master of ceremonies asks them to vote for the characters and then to debate with them about what they have done. The doctor turns out to be the only really good person, in the audience’s opinion, though they are very sympathetic with poor naïve Sophie and her mother. The father is roundly booed but it is almost a tie between Lucille and Antoine as to who is the worst of the lot. Antoine, hissed and booed and given the thumbs down by older women in the audience, wins and stands with a sheepish grin that says, “Who, me? What did I do wrong?”



The audience tries to decide whether Antoine or Lucille takes the prize for being the worst influence on Sophie.

It is Lucille, however, who gets into the most lively and heated debate with women in the audience. She stands her ground, playing the bad girl to the end, while other women berate her for her appalling behaviour. The master of ceremonies asks anyone who thinks they can do a better job of playing Lucille to step forward. A young woman volunteers but makes it clear that she would not be better at being bad. If she were Lucille she would not give such terrible advice to poor naïve Sophie and would warn her away from cads like Antoine.

A class on FGM at a secondary school

The next morning, before heading back to Ouagadougou, we attend a grade eleven class on FGM at a secondary school. There are 29 students in attendance, 22 boys and seven girls from 17 to 20 years old. It uses the same basic question, answer and debate techniques we saw demonstrated at the primary school but the debate takes place during the question and answer period, as students disagree with each other's answers. In addition, the teacher is more assertive in expressing his opinions, agreeing or disagreeing with students answers or asking others to comment on those answers immediately after they have been made, and he uses more explicit drawings to illustrate information.

These older students are well-behaved and, at first, seem overly polite and restrained but soon the boys become fully expressive and engaged. The girls sit at the periphery of the class, hold back and say very little until, at last, one takes strong exception to what one of the boys says and her entry into the discussion emboldens other girls to enter too.

The teacher enters answers to questions and points made in discussion and debate into four columns on the blackboard: immediate consequences of excision; long term consequences; social consequences; and advantages. This time, the advantages are all named by boys, a few of whom seem to vehemently believe in their answers. They include that excision diminishes the libido of women, so they are abstinent before marriage and faithful within marriage. An excised woman is less frivolous, purer and more aesthetically pleasing to men. Women must be excised so they can sew seeds in the fields, since sewing by an excised woman ensures good crops and the survival of those crops through periods of drought.



At first, the boys provide most of the answers to the teacher's questions about excision.

One boy says that excision reduces the spread of HIV but the teacher immediately dismisses that notion, saying there is no evidence for it. Another boy says that he, personally, finds un-excised women repulsive because they are too active during sex and it is only men who should be active. Un-excised women are like prostitutes and he would never have sex with a

prostitute. This is what finally provokes one of the girls to speak up and she is scathing in her put-down, asking, “How would you know? Have you ever been with a woman? I don’t think so! This must be some fantasy you have seen in your dreams.” This gets the other girls laughing and they begin to express their opinions too.

As for consequences of excision, in addition to the ones identified by the primary school students in Batié, these secondary school students in Diébougou say they include increased likelihood of getting infections of the urinary tract, Fallopian tubes and ovary and of developing fistulas; decreased elasticity of the vagina and other complications that can result in death of the mother or infant during birth. Excision can also lead to psychological and social problems that result from loss of sexual appetite. These problems include frigidity, depression and rejection by men and the latter may lead to infidelity by husbands and then to separation and divorce.

Towards the end of the session, the teacher asks who is still in favour of excision and there is a small group of three or four boys who are still in favour. However, they seem uncertain of their position except for the boy who has said he finds un-excised women repulsive. He says that again while also going over some of the other arguments for excision, including that only an excised woman should sew seeds.



Losing her patience with what she hears the boys saying, this girl draws the teacher’s attention.

A more comprehensive look at PROSAD

During our tour of the Sud-Ouest, we have seen demonstrations of some of PROSAD’s highly interactive BCC approaches and tools. In the following sections, we take a somewhat more comprehensive look at what PROSAD does in four of its five Action Areas.¹⁴ We are not including Action Area 2, Mainstreaming HIV; because another publication in the German HIV Practice Collection

describes GDC’s approach to mainstreaming HIV in all countries where it is active and GDC’s current (2008-2009) plan for mainstreaming in Burkina Faso is consistent with that approach.¹⁵ Anyway, PROSAD’s main contributions to the response to HIV are made within Action Area 1, Family planning and sexual health of youth.

¹⁴ Readers looking for more information of PROSAD’s strategic planning and monitoring and evaluation processes are advised to look at Heuler-Neuhaus W and Neuhaus E (2007) and Neuhaus E (2007).

¹⁵ BMZ (2008) and BMZ et al (2008).

Action Area 1: Family planning and sexual health of youth

Strategic information

A DHS in 1998/99¹⁶ and another DHS in 2003¹⁷ provide much basic information on knowledge, attitudes, practices and trends pertaining to family planning and the sexual and reproductive health of adults and young people. This information is supplemented by PROSAD-supported data collection and analysis done or commissioned by health authorities or health teams at the national, regional, provincial, municipal and village levels.

The 2003 DHS found that 48 percent of Burkinabe women had already become mothers by age 18. Early pregnancies were rarely planned and were often associated with child marriage, forced marriage or sexual violence. One consequence was a high incidence of clandestine abortion, which accounted for 28 percent of all deaths among women 15 to 24 years old.

Countrywide, 8.6 percent of all married women actually used modern family planning methods but only 5.1 percent of those in rural areas did so, and the least likely to have done so were those who were poorest, least educated or in polygamous unions. Of the poorest quintile of women, 36.7 percent said they wished to use modern family planning methods but only 1.7 percent actually did so.¹⁸

Targets

When it was launched in January 2004, PROSAD set these four Action Area 1 targets for 2015: in Sud-Ouest, 18 percent of all couples and, in Est, 10 percent of all couples will be using modern family planning methods; in Sud-Ouest, HIV prevalence among women 25 to 34 will be down to 2.0 percent and, in Est, it will be down to 1.0 percent.

Actions

PROSAD's contributions to family planning and the sexual and reproductive health of youth focus mainly on building the capacity of the existing health care system to deliver appropriate services to communities and increasing demand for these services. This involves:

- Providing support for research to assess needs and for planning to address needs;
- Providing training and support to the staff of health centres and the mobile teams through which they deliver services to rural villages;
- Providing training and support to peer educators who work in schools, youth centres and other locations and to staff and volunteers of NGOs so they can, for example, deliver forum theatre presentations and other highly interactive BCC;
- Supporting the development of IEC, including forum theatre presentations and other highly interactive BCC;
- Establishing a distribution system for modern family planning methods so they are readily available not just in cities and towns but in small villages.



In a Troupe No-biel animation, a concerned young woman listens as a boy explains that he ran away from his aunt's home because she treated him like a slave but now he sleeps in the street and has nothing to eat.

¹⁶ Institut National de la Statistique et Démographie et al (1999).

¹⁷ Institut National de la Statistique et Démographie et al (2004).

¹⁸ Gebreselassie T and Mishra V (2007).

In effect, PROSAD improves the quality and adds to the quantity of family planning and sexual and reproductive health services available in its two focus regions, Sud-Ouest and Est. It complements and sup-

plements the services provided by other programmes and those include the KfW-financed Social Marketing of Condoms Project (See box 4.).

Box 4. The Burkina Faso Social Marketing of Condoms Project (PROMACO)

Burkina Faso's Social Marketing of Condoms Project (PROMACO) was launched in 1991. Initiated by Population Services International, it is now managed by a Burkinabe NGO, and financed by KfW Entwicklungsbank and the Global Fund to Fight AIDS, Tuberculosis and Malaria. It pays particular attention to targeting people who engage in high risk sexual behaviour, including truck drivers, gold miners and commercial sex workers. By 2006, it was distributing Prudence Nouveau condoms and female condoms through more than 22,000 retail shops across the country.

Another publication in the German HIV Practice Collection describes a similar KfW-financed social marketing project in neighbouring Niger. Yet another publication in the Collection describes a KfW-financed project whereby PROMACO collaborated with the Côte d'Ivoire Social Marketing Programme on production of "SIDA dans la Cité," a soap opera series.¹⁹

The results so far

GDC-supported family planning in the Sud-Ouest region began in 1998 and a comparison of data from the 1998/99 DHS and 2003 DHS suggests that it has had a significant impact. From 1998 to 2003 the percentage of couples saying they used modern family planning methods rose from 2.6 to 5.3 percent in all rural areas countrywide but rose from 3.9 to 7.7 percent in the Sud-Ouest region. One result of the training and support given to health centres and their mobile teams in the Sud-Ouest has been better reporting to provide evidence of progress, and this evidence indicates that 12.6 percent of couples in the Sud-Ouest region were using modern family planning methods by 2007.

GDC-supported family planning did not begin in the Est region until 2004, when PROSAD was launched. Comparing data from the 2003 DHS to

more recent data collected by the health centres and their mobile teams indicates that the percentage of couples using modern family planning methods in the Est region rose from 2.3 percent in 2003 to 5.2 percent in 2007. There are now rapidly increasing percentages of couples using modern family planning methods in both Sud-Ouest and Est thanks in large part to PROSAD's emphasis on one method, contraceptive implants (See box 5.).

A careful look at the evidence suggests that interventions in Action Area 1 have also made significant contributions to stopping the spread of HIV. The 2003 DHS found that HIV prevalence among all adults 15 to 49 years old in the Sud-Ouest region was 3.7 percent, the highest rate found in any region except for the Centre (Ouagadougou) region. However, an examination of sentinel data going back

¹⁹ German HIV Practice Collection (2009a) and (2009b).

to 1999 indicates that in no other region in Burkina Faso has the rate of HIV prevalence among women 15 to 49 years old dropped nearly so much as it has in the Sud-Ouest, where it dropped from 7.7 percent in 1999 to 2.1 percent year in 2007 and was now

below the countrywide average of 2.3 percent. By 2007, it was down to 0.6 percent in the Est region but up to 5.2 percent in the Centre region, where it was continuing to increase year by year.²⁰

Box 5. Contraceptive implants prove successful

Implants have two major advantages: they are reliable as long as they are in place and they can be removed if women decide they want to have babies. Implants have been available through mobile health teams in Burkina Faso for many years but it was not until January 2004 that, in the Est and Sud-Ouest regions, nurses on these teams began to be provided with PROSAD-supported training to identify women who might be interested in implants and to help these women make informed decisions.

Over the five years from the beginning of 1999 to the end of 2003, fewer than 500 women took up health teams' offers of implants in the Est region. Over the five-year period from the beginning of 2004 to the end of 2008, more than 6800 women took up the offer of implants. By 2004, PROSAD-supported family planning was already well-established in the Sud-Ouest region and women there were already twice as likely as women in the Est region to have implants. Since then, the uptake of implants in the Sud-Ouest region has risen as sharply as it has in the Est region.

The challenges ahead

Progress so far suggests it may be possible to surpass the targets, so the challenge may be to surpass them by as much as possible. Incentives include fewer pregnancies, fewer clandestine abortions, lower rates of maternal and child mortality, lower rates of natural population increase, reduced pressure on natural resources, reduced poverty, and enhanced status and opportunities for women, children and youth.

Action Area 3: Promoting women's rights and girls education

Strategic information

With low levels of education, very few Burkinabe women know their rights as laid out in international agreements to which their country is party and in national legislation aimed at honouring their country's commitments to those agreements. They have neither the means nor opportunity to seek legal counsel and, even if they did, such is tradition and practice that, if they were to seek outside help to resolve family conflicts, they would risk being cast out by their families. Only those with nothing left to lose would be likely to take this risk.

Where traditional arbitration mechanisms are in place, they usually consist of male elders or blacksmiths. They may resolve minor complaints in women's favour but they never attempt to change women's traditional subservient positions within their families. When their decisions violate national legislation, officers with national, regional or local government authorities are not likely to intervene because they are ignorant of the law, knowingly violate it themselves or hesitate to disagree with village leaders.



Holding her granddaughter, this woman listens as her family talks about the rights of women and girls.

Decentralization has created new opportunities to educate women, empower them with knowledge about their rights and provide them with mechanisms to insist that their rights be recognized and enforced. Protecting women's rights was one of the

responsibilities transferred to Burkina Faso's 30 urban and 302 rural municipal councils when they were created in 2006.

In 2007, as part of its preparations to take advantage of these new opportunities, PROSAD commissioned a survey by the Ouagadougou-based Centre d'Etudes, de Recherche et de Formation pour le Développement Economique et Social (CERFODES) to establish baseline evidence on women's knowledge of their rights, experience of violence and access to services that could help them respond. Among the findings were that, in Sud-Ouest, 37 percent of women had experienced violence and, of those, 78 percent had experienced violence by their husbands and 28 percent had experienced violence by other male relatives. In Est, 30 percent of women had experienced violence and, of those, 62 percent had experienced violence by their husbands and 25 percent had experienced violence by other male relatives.

Targets

When it was launched in January 2004, PROSAD set these two Action Area 3 targets for 2015: in both Sud-Ouest and Est, to increase girls' school enrolment by 50 percent and to decrease the number of girls dropping out of school before they finish their sixth year by one-third. Its other targets were less specific, for reasons given later in this section.

Actions on women's rights

Approche Famille. Box 1 earlier in this publication describes the Approche Famille.

Community-based arbitration and, when necessary, resort to due process. PROSAD supports efforts to raise awareness among the village elders and blacksmiths who normally function as arbiters in family disputes and to get them working with the lay counsellors. If collaboration between the lay counsel-

lors and village arbiters does not produce satisfactory results, the lay counsellors can turn to the female social workers who, in turn, can facilitate interventions by the police or other authorities. Since the social workers usually do not live in the villages, however, there is need for strengthening of procedures. Currently, the emphasis is on continued training for the lay counsellors so they can become ever more effective at helping women resolve their complaints satisfactorily.

Raising community awareness. PROSAD supports training workshops for journalists, community leaders and women's organizations and provides them with IEC and other support for their efforts to raise awareness of women's issues in their communities.

Actions on girls' education

A transferable model for girls' education.

PROSAD was among the partners supporting the Ministry of Primary Education and Literacy as it launched a campaign to increase girls' enrolment and retention in schools. The campaign is now countrywide, with PROSAD focusing its support on 70 priority communities in Est and Sud-Ouest. Steps include: sensitizing teachers to the need to encourage girls already in school: advising school authorities on how to raise awareness of the need for girl's education and how to monitor enrolments and drop-outs; working with parents, parents' associations and other village groups and using local radio stations and "forum theatre" presentations to promote primary education for girls.

Monitoring school drop-outs. Many Burkinabe parents and their daughters adhere to the old belief that girls need no more than two or three years of schooling since they are destined for lives of domestic work, caring for their husbands, children and other relatives. Girls drop out of school mainly because neither they nor their parents think they are learning much that will be useful in such a life. Declines in



In primary schools in the Sud-Ouest, there are now almost as many girls as there are boys.

drop-out rates are the most reliable indication that applying the transferable model is achieving the desired results.

The results so far

PROSAD and its partners are well-aware that empowering women through their own and other people's awareness of their rights and through effective mechanisms for addressing violations of their rights is a massive long-term task. It is early days for assessing the impacts of PROSAD-supported initiatives but the anecdotal evidence is encouraging. In both Est and Sud-Ouest, there have been substantial increases in the numbers of couples establishing the legal status of themselves and their children through civil marriage and application for birth certificates. There also have been substantial increases in the number of reported cases of violence against women, forced marriages and conflicts within marriages. These are widely recognized as evidence not of increases in the incidence of these phenomena but of increases in reporting of incidents due to improved access to intervention mechanisms that women can trust. In addition, there are many indications that women are beginning to get together to discuss their situations and support each other on action, whereas up until recently most women

have been resigned to subservience to men within their families and reluctant to share their problems with anyone outside the family circle.²¹

School authorities report data on annual school enrolments and drop-outs and this makes it easier to monitor progress on girls' education. Over five years, from the 2002/03 school year to the 2007/08 school year, school enrolment countrywide rose by 64 percent but by 79 percent in Sud-Ouest and 123 percent in Est. This means that PROSAD has already surpassed its first target, to increase girls' enrolment by 50 percent. As a percent of boys' enrolment, girls' enrolment rose from 75 percent to 88 percent countrywide but from 73 percent to 92 percent in Sud-Ouest and from 70 percent to 91 percent in Est. This means there is good reason to hope that, by 2015, there may be gender parity in school enrolment.

Over four years, from 2002/03 to 2006/07, the percent of girls dropping out before they finished their sixth year of school declined from 59 percent to 44 percent in the Sud-Ouest and from 49 percent to 42 percent in the Est. The results were even better in those schools participating in application of the transferable model for girl's education. For example, in Sud-Ouest, 50 percent of all new entrants to those schools were girls in 2006/07 compared to 45 percent of all new entrants to non-participating schools.

The challenges ahead

PROSAD recognizes that widespread poverty means that the vast majority of Burkinabe people, no matter their gender or age, do not have access to many goods and services (e.g., medicines and health care services) to which citizens of most European Union countries feel they are entitled as basic human rights. It also recognizes that there are cultural traditions and social attitudes that deny basic human rights not just to women and girls but to young men and boys, too.

Addressing the issues surrounding women's rights requires addressing the issues surrounding poverty, the low status of young men and boys their impacts on women. This requires the kind of inter-generational dialogue that is built into the Approche Family, forum theatre presentations and other elements of PROSAD's highly interactive BCC. A challenge, then, will be to sustain efforts to reach all people of both genders and all generations with BCC that informs them about these issues and changes their attitudes and practices.

²¹ PROSAD (2008) and (2009).

Action Area 4: Eliminating female genital mutilation

Strategic information

The 2003 DHS found that 76.6 percent of Burkinabe women 15 to 49 years old had undergone FGM and a 2008 World Health Organization statement against FGM cited that finding when it placed Burkina Faso high in the ranks of 28 sub-Saharan and North African countries where FGM has been documented.²² There are various forms of FGM and the most common form in Burkina Faso is excision of the clitoris, usually during infancy or early childhood but sometimes in later childhood or early adolescence.

Excision was outlawed in Burkina Faso in 1996 and a National Committee against Excision (CNLPE) promotes and coordinates efforts to enforce the law and eliminate excision. The challenges include that excision is a private family matter involving people who may not be aware of the law or, if aware of it, disagree with it and find it easy to keep excision hidden from public scrutiny.

Because the 2003 DHS covered excision only among women born in 1988 or earlier, PROSAD commissioned a 2005 study in the Sud-Ouest region that looked into excision among girls born in 1991 (five years before the law came into effect) or later, that is girls from 0 to 14 years old.²³ The 2003 DHS found that 72 percent of women in the Sud-Ouest had been excised and that 67 percent of excised Lobi women had been excised during their first year of life. The 2005 study found that just over 50 percent of girls born in 1991 had been excised and that fewer than 10 percent of girls born in 2003 or later had been excised. Only 2.2 of female infants born in 2005 were being excised during their first year of life. Thus, excision had been on the decline even before it was outlawed and the decline had continued. Such is the harm done by excision, however, that no percentage above absolute zero is acceptable.

The study used both quantitative and qualitative methods and the latter included interviews with girls who had been excised, interviews with women who



Primary school students prepare their arguments against excision before a classroom debate.

had done excisions, focus group discussions with only boys and only girls and a mix of boys and girls, and discussions with community leaders. Among the findings were that children are often tricked into being excised (e.g., told they are going to visit a favourite aunt then getting there to find that old women are waiting to excise them) but also that, in some villages, the peer pressure is such that older girls save up money and arrange for their own excisions.

Though excision is often said to be “traditional,” evidence shows that within the same ethnic group it is practiced in one village but not in the next. The practice does not arise from any ancient and deeply held system of belief but, instead, is merely a local custom. Asked to justify excision, its defenders usually begin by saying it makes childbirth easier but, when challenged, often come up with spurious religious justifications and then end by saying it has always been practiced in their families.

Targets

When it was launched in January 2004, PROSAD set these two Action Area 4 targets for 2015: starting from assumed baselines of 30 percent in Sud-Ouest and 24 percent in Est, to reduce the percentage of 5 to 14 year old girls who have undergone FGM by one-third.

Actions

PROSAD's point of departure for addressing FGM has been a school-based approach launched with the support of another GTZ programme in 2000, the approach we saw demonstrated in primary and secondary schools during our tour of the Sud-Ouest region. Launching the approach involved working with the ministries of primary and secondary education and then with regional education authorities to develop, test and introduce FGM course material.

PROSAD also supports the mainstreaming of FGM into the actions on family planning, sexual and reproductive health of youth and women's rights described earlier. For example, FGM is often addressed in peer education on sexual and reproductive health, in Approche Famille sessions and in forum theatre presentations. In addition, PROSAD supports regional committees associated with the CNLPE and local women's organizations in their efforts to raise community awareness about FGM.

Since parents retain considerable control over their children and remove them from school if they disapprove of what the schools teach, it has been particularly important to stage events for parents that precede and coincide with the introduction of the FGM course material in local schools. While these events may not win all parents over to the anti-FGM side of the debate, they at least get them used to the idea that FGM is a legitimate subject for discussion and debate both outside and within schools. Also important have been events for teachers, usually at teachers' conferences, to ensure they are well-informed about FGM and remain enthusiastic about using the FGM course material in their classrooms.

The results so far

Data from the 2005 study on excision in the Sud-Ouest region indicate that the school-based approach was already making substantial contribu-

tions to the decline of excision in that region before PROSAD took over. Impacts include that most school students and adults in villages where the approach was applied now disapprove of excision, believe that those who practice it should be prosecuted, recognize the clues when others in their own families are preparing for excisions and either intervene themselves or arrange for interventions before the excisions take place. There are a growing number of documented cases where students and adults have reported preparations to teachers or women's groups and where subsequent interventions have prevented excision.

Now, the school based approach is integrated into the CNLPE's 2009-2013 Action Plan against Excision and is officially recognized and recommended for generalization by the country's two ministries of education. Meanwhile, a number of other countries (e.g., Benin, Guinea, Mali, Mauritania, and South Africa) have been learning from the PROSAD-supported Burkinabe approach to fight FGM.

The challenges ahead

The steady decrease in the percentage of girls being excised suggests that PROSAD's targets for 2015 may be surpassed. However, given recent concerns about the withdrawal of partners and decline of activities, a challenge will be to sustain efforts until FGM is a thing of the past. Recently in the Sud-Ouest province of Ioba, PROSAD collaborated with the Ministry of Social Action and National Solidarity and community leaders as they engaged villagers in identifying problems they wanted to see resolved. When FGM was introduced as one possibility, the villagers agreed that it was still a major problem. By such means, PROSAD will continue supporting all efforts to keep FGM high on national, regional and local agendas.

Action Area 5: Combating child trafficking and child labour

Strategic information

Burkina Faso is a source, transit route and destination for people trafficked for the purposes of forced labour and sexual exploitation. Some are women but most are children under the age of 18. Within the country, most child trafficking is from rural to urban areas, while most cross-border trafficking is to and from other countries in West Africa and especially Côte d'Ivoire. The most frequent forms of forced labour are domestic servitude and work in mines, stone quarries and agricultural operations including cacao and cotton plantations.

A 2003 Burkinabe law criminalized all forms of child trafficking and called for a maximum penalty of 10 years in prison. In 2008, it was replaced by a law setting a minimum penalty of 5 years and increasing the maximum to life. The Government of Burkina Faso is making solid efforts to improve enforcement but, in 2008, only 40 suspected traffickers were arrested. Sixteen were cleared of all charges and released; 11 were convicted and given sentences of one to 12 months in prison or on probation under the old 2003 law; the remaining 13 were still awaiting trial at the end of the year.²⁴

Burkinabe law is consistent with the country's ratification, in 2000, of the ILO *Convention concerning the Prohibition and Immediate Action for the Elimination of the Worst Forms of Child Labour*. It applies to all persons less than 18 and defines "worst forms of child labour" to include sale, trafficking, debt bondage, other forms of bondage, forced or compulsory labour, and use of children in armed conflict, prostitution, pornography, or the commission of crimes. The ILO makes distinctions between work that helps to socialize children and prepare them for normal adult life and work that forces children to live adult lives before they have grown up and that may endanger their health, well-being and cognitive development.

Making distinctions between work that socializes and work that endangers is not easy in a country where

life for many children is harsh and endangering. Whether or not Burkinabe children are sent to school often depends on their social status and that, in turn, depends on how closely related they are to the men who head their extended families. Children of low status are often required to begin working in their families' homes or fields at age six and are often never sent to school or sent for only two or three years. This accustoms them to long hours of hard work, makes it easy for them to market their own labour and makes them highly susceptible to trafficking. To them, "the worst forms of child labour" elsewhere may seem no worse than the forms they experience at home and, in fact, may seem to offer better opportunities in life, including opportunities to get out from under oppressive family controls and, for example, make their own decisions about whom to marry and when.

A 2004/05 study commissioned by PROSAD found that five percent of all Burkinabe children from 6 to 17 years old are labour migrants living away from their parents, while eight percent of all 6 to 17 year olds from the Sud-Ouest and Est regions are labour migrants living away from their parents. In the case of children in their mid to late teens, the reality is that in countries as poor as Burkina Faso they are often expected to function as adults and, for girls, that often means marrying and bearing children well before their 18th birthdays.

Targets

When it was launched in January 2004, PROSAD set one Action Area 5 target for 2015: in both Sud-Ouest and Est to reduce by at least one third the number of children aged 6 to 17 who emigrate without their parents for economic reasons. A repeat of the 2004-2005 study in 2015 should show that the percentage of such children has dropped from eight percent in 2004/05 to around five percent or less in 2015.

Actions

The single greatest “vaccination” against child trafficking and the worst forms of child labour is the enrolment of children in school. Thus PROSAD’s contributions to efforts to increase school enrolment and retention, especially among girls, are also contributions to efforts to reduce the incidence of child trafficking and the worst forms of child labour. More specifically within this Action Area, PROSAD collaborates with the KfW-financed Fonds Enfants in supporting the following initiatives.

Committees of Vigilance and Surveillance (CVSs).

In the four provinces of the Sud-Ouest region, PROSAD and Fonds Enfants have supported the formation of committees of representatives from government agencies and NGOs in a total of 14 provincial departments (a department being a provincial division equivalent to a county) and these committees spearhead efforts to identify and intervene in individual cases of child trafficking, to monitor the incidence of child trafficking and to raise public awareness about trafficking. An NGO, SOS Sahel International, performs similar functions in Sud-Ouest departments without CVSs. In the Est region, PROSAD and Fonds Enfants are supporting establishment of a similar system, where a combination of CVSs and NGOs covers all provincial departments.

Village Relay Nuclei. In 40 villages of the Sud-Ouest region, PROSAD has supported the formation of community-based committees that relay messages to and from the CVSs and to and from the police and that drive interventions and monitoring and awareness-raising at the community level. PROSAD is supporting the formation of similar Village Relay Nuclei in the Est region.

The Ministry of Social Action and Solidarity, the Ministry of Employment, Labour and Youth and their regional directorates spearhead action in this area and PROSAD provides them with technical advice and support. This includes support for



One of the last cartoons posted during a Troupe No-biel animation shows a Village Relay Nucleus meeting to consider a reported case of child trafficking.

training of the CVSs and Village Relay Nuclei and support for developing or adapting any tools they may need for raising community awareness. Providing them with these tools has included providing them with audio-visual equipment and support for Kit GRAAP-based animations and forum theatre presentations of the sort we saw demonstrated on our tour of the Sud-Ouest region.

Peer Education. In the Sud-Ouest region, PROSAD recently supported development of a code of conduct to protect children from the worst forms of child labour and also supported the training of peer educators to promote application of this code among gold miners, truck and bus drivers and cotton planters.

In 2006, the Sud-Ouest’s only transition centre for trafficked children was built in Ioba province. It provides trafficked children with temporary shelter and helps reintegrate them into their families and communities and get them enrolled in primary or secondary schools, vocational training or job apprenticeships. Recently, a day-centre was established in Gaoua that aims to do similar things. PROSAD and Fonds Enfants collaborate on supporting similar services beyond the two centres and, in Est region, they support an initiative that provides grants to help the families of older children

develop income-generating enterprises that can provide those children with gainful employment in their own communities.

The results so far

From 2004 to 2008, a total of 212 children (108 girls and 104 boys) were intercepted in the process of being trafficked in the Sud-Ouest region's Ioba province alone and those interceptions were attributed in large part to support from PROSAD and Fonds Enfants. The two partners began establishing the child trafficking component in the Est region in 2005. During the following year, there were a total of 555 children intercepted in the process of being trafficked throughout that region and 478 of those interventions were attributed to initiatives supported by PROSAD and Fonds Enfants.

Staff and volunteers from the ministries and NGOs involved in PROSAD-supported child trafficking initiatives are generally full of praise for the support they get from PROSAD and say that the effectiveness of these initiatives is so widely recognized that if, for some reason, PROSAD were to withdraw its support, they would carry on anyway, on way or another. If they have a complaint, it is that they do not get nearly enough technical and financial support from other partners and are not able to do more than they already do.²⁵



A boy boasts of the radio his brother brought back from Côte d'Ivoire and seems to be thinking he might go there too.

The challenges ahead

PROSAD recognizes that achieving a one-third reduction in the number of trafficked children will not be easy in some provinces. Noumbiel, for example, is the southernmost province of the Sud-Ouest region and resembles a narrow peninsula surrounded by Côte d'Ivoire and Ghana. It is an area of departure, destination and transit for thousands of trafficked children from Noumbiel, the rest of Burkina Faso, Côte d'Ivoire, Ghana and the rest of West Africa. The provincial director of the Ministry of Social Action and National Solidarity says that identifying these children and keeping track of their movements are beyond the capacity of existing structures in the province. In principle there is agreement among governments in the region to collaborate on the fight against traffic but, in practice, these governments all are faced with the same problem, an overwhelming number of trafficking children and insufficient resources to intervene. Currently, only a small percentage of all trafficked children are intercepted. The long-term solutions to child trafficking will include providing education for all children and reducing poverty, so children will not be tempted to put themselves in situations where they are likely to be trafficked.

Box 6. Getting trafficked children to tell the truth, so other children can learn

Trafficked children are often too ashamed to admit what really happened to them. They prefer, instead, to tell stories in which they were heroic adventurers and have now returned with rich rewards for all to see. These proud and boastful stories make other children vulnerable to trafficking, so PROSAD supports efforts to get trafficked children to tell the truth. Here is one true story told by Sanoté, a boy from a village in the Sud-Ouest region:

Sanoté is 14 and his friends Banyelé and Takité are 16 and 15. They are impressed when an older boy returns to their village from Côte d'Ivoire with a new bicycle and some beautiful shirts. Of the three, only Sanoté has ever gone to school and he has finished six years of primary school. His parents want him to continue through secondary school and on to college but, like his two friends, he does not listen to his parents and is bored by life in their village and keen for adventure and the rewards it might bring.

One night, the three boys sneak away. At the end of the next day they are exhausted after a long trek through forests and savannah, so they decide to walk beside a road and try their luck at hitch-hiking. A man picks them up and, after hearing their plans, tells them he owns a business in Abidjan that supplies goods to boutiques and offers them jobs. Sanoté and Banyelé agree to this offer but Takité is suspicious and decides to return home.

A week later, Sanoté and Banyelé are on a train with the man's agent, François, who tells them they are headed for Abidjan but need to stop along the way, where he wants their help with a chore. They get off the train and, after a long trip by bush taxi, they walk another ten kilometres to a small village. The next morning, François takes them to a meeting and afterwards tells them they must separate and go to work on two different plantations. He gets them to sign contracts and is rewarded with a fat roll of CFA francs. The contracts oblige each of them to work for a minimum of one year in return for annual pay of 60,000 CFA francs, the equivalent of 92 Euros.

Sanoté is taken far away to a plantation where the main crops are coffee and cocoa. His job is weeding and he is required to weed eleven hours every day of the week. After these long days, he is sometimes required to work nights, too, catching and killing rodents. There is a one hour break at midday, when he looks for his own food because his employer takes no responsibility for feeding him, but there are no breaks for illness and, if he needs medicine, his employer takes the cost out of his wages. Often ill, he lives in constant fear that he will die and no one back home will ever know what became of him.

At the end of one year, his employer tells Sanoté he has to work for three more weeks because his first three weeks were for training. At the end of those three additional weeks, the employer's son says he cannot pay Sanoté because the employer is away. Day after day, the son gives the same excuse until Sanoté goes to a priest who intervenes on his behalf. All the while, Banyelé has been having similar experiences and the priest intervenes to make sure Banyelé is paid, too. After deductions for all the expenses their employers claim, their pay does not amount to much, just enough to stop at a village market and buy shoes and supplies for their journey home. After more than a year away, they arrive back home empty-handed. Sanoté is luckier than most boys in Burkina Faso, because he returns to school, goes to college and is now a young man teaching school in his village.

Monitoring and evaluation

PROSAD has developed an ever-stronger monitoring and evaluation system over the years. Key outputs include annual statistical yearbooks and monthly and quarterly reports on data related to the programme's targets. Committed to the concept of "managing for results," the PROSAD team works with its many partners to ensure that they have a good understanding of the programme's general objectives and specific targets, that they provide their inputs of relevant data to the monitoring and evaluation system, and that they use the outputs to monitor their progress and make appropriate adjustments.²⁶

In February 2009, a team of independent consultants conducted an internal (unpublished) evaluation of PROSAD on behalf of GTZ. Applying the five criteria used by the OECD's Development Assistance

Committee (DAC)—relevance, effectiveness, impact, cost-efficiency, and sustainability—it gave PROSAD the highest possible score (1 on a scale of 1 to 6) for relevance and effectiveness. It gave it the second highest possible overall score (2 on the same scale) while noting needs to continue with efforts to engage all relevant partners, build their capacity and ensure long-term sustainability. It gave PROSAD a score of 2 on cost-efficiency.

PROSAD serves two regions with a combined 2009 population of 2 million people. It is scheduled to last for twelve years, from the beginning of 2004 to the end of 2015, and has a planned total budget of 11.5 billion CFA francs or the equivalent of 17.5 million Euros. This works out to an average of less than 1.5 million Euros per year.

Lessons learned

A sustained and comprehensive approach to family planning, sexual health and human rights makes for momentum and synergy. PROSAD's rapid progress towards its stated targets would seem to be due in no small part to two factors. First, it builds on predecessor programmes, beginning with one launched in 1995, and the accumulation of knowledge and experience has allowed it to achieve ever better results year after year. Second, its three components and five activity areas are close to being comprehensive in addressing the issues of family planning, sexual health and human rights among women, youth and children. The combined impact of all these elements is probably far greater than would be the sum of their individual impacts if they were isolated and did not overlap and interact with each other.

Government-NGO partnerships can make the best possible use of available resources and tap into the local knowledge, experience, commitment, and energy of volunteers. Often called public-private partnerships and much favoured in high-income countries, government-NGO partnerships make even greater sense in resource-limited countries like Burkina Faso. PROSAD's achievements are due in no small part to NGOs at all levels and to NGO staff and volunteers willing to work for low wages, small honoraria and expenses or nothing at all.

National organizations have advantages over international ones. When looking for contractors to do research or to develop BCC approaches and tools and provide training in their use, PROSAD favours national institutions and organizations over international ones. This helps build in-country capacity to do things and helps ensure that activities will be sustainable over the long term. A more immediate advantage is that the products are often better suited to Burkinabe circumstances.

Interactive behaviour change communications are highly effective at getting messages across. Forum theatre presentations, KIT-GRAAP animations, Approche Famille sessions and the other interactive BCC approaches favoured by PROSAD all serve to make people think for themselves, engage in discussion and debate with others and alter their own attitudes and behaviour far more effectively than do communications that require people to be little more than passive readers, viewers or listeners.

Flexible and adaptable approaches and tools work best. Being flexible and adaptable are ways of being interactive when it comes to approaches and tools that may be used by a range of government agencies and NGOs to deliver messages and services to a wide variety of groups and communities. Flexibility and adaptability are not only desirable but necessary in a country like Burkina Faso where the population is so diverse ethnically, linguistically and in other ways.

Qualitative is as important as quantitative when it comes to strategic information. Except for the numbers, a report on one DHS can look much like a report on another DHS. While statistics are important, they are not sufficient. The extensive documentation on PROSAD-supported research shows that it often employs methods commonly used by anthropologists and sociologists to gain in-depth understanding of communities and those methods include participant-observation, wide-ranging interviews, focus group sessions and meetings that allow people to express themselves freely without being guided by rigid sets of questions.

Peer Review

For a publication to be included in the German HIV Practice Collection, the programme or project it covers must first be approved as worthy of documentation by an editorial board of HIV experts from GDC's four development organizations (DED, GTZ, KfW, and InWEnt) and then found to be promising or good practice by two external reviewers. To be so found, the external reviewers must agree that it comes close to meeting most if not all of eight criteria. Their assessments are based on the information provided in the publication and, on that basis, their assessments of the German-Burkinabe Programme on Sexual Health and Human Rights (PROSAD) can be summarized as follows:

Effectiveness. Scheduled to last from 2004 to 2015, PROSAD is in mid-stream and has yet to undergo a comprehensive evaluation of its effectiveness. However, the OECD's Development Assistance Committee (DAC) uses the achievement of stated targets as the primary measure of a programme's effectiveness and, in those terms, PROSAD would appear to be highly effective. It is advancing towards most of its targets at a rapid pace and the evidence gives good reason to hope that it may even surpass some of its targets.

Transferability. PROSAD's methods and tools are already being used in two very different regions of Burkina Faso and there is no reason they could not be adapted for application in other Burkina regions and other countries. However, PROSAD's unusually comprehensive and sustained approach to family planning, sexual health and human rights requires strong and sustained commitment by its two main partners (German Development Cooperation and the Government of Burkina Faso) and a strong and sustained sense of ownership by many government ministries and NGOs at all levels, from the national to the local. Establishing a similarly comprehensive and sustained approach in other jurisdictions would require similarly strong and sustained commitment and ownership in those jurisdictions.

Participatory and empowering approach.

A participatory and empowering approach might be called the very backbone of PROSAD. This publication makes it clear that PROSAD gives high priority to participation and interaction in all of its components and action areas and places great emphasis on local knowledge, local needs and the involvement of local stakeholders.

Gender awareness. One of the external reviewers notes that two of PROSAD's action areas focus on women's and girls' issues and wonders if there might not be room for an additional action area focusing on men's and boys' issues. However, internal and external reviewers agree that PROSAD demonstrates a high degree of gender awareness. It addresses the issues of both genders in two of its five action areas. In the two action areas focussing on women's and girls issues, it recognizes and addresses the need to raise the awareness of men and boys and to change their attitudes and behaviour (e.g., in *Approche Famille* sessions, school courses on FGM and forum theatre presentations).

Quality of monitoring and evaluation. One of the external reviewers' notes that PROSAD's annual statistical reports are used not only by PROSAD but by other programmes in Burkina Faso and are much appreciated as tools for measuring progress towards a range of socio-economic development goals. This publication does not describe PROSAD's monitoring and evaluation methods and tools in any great detail but some members of the German HIV Practice Collection's board and one external reviewer are familiar with PROSAD and are impressed by its extraordinary efforts to gather and analyze all manner of strategic information, including information required for effective monitoring and evaluation.

Innovation. PROSAD's comprehensive and sustained approach to family planning, sexual health and human rights is highly innovative in the context of international development cooperation, where the norms tend towards narrow focus on particular issues and short-term commitments that are subject to change from one political or financial cycle to the next in donor and partner countries. Beyond that, PROSAD makes use of more or less well-known methods and tools but is innovative in the degree to which it adapts these to fit local circumstances.

Comparative cost-effectiveness. Lack of comparable data on which to base comparisons of cost-effectiveness is a chronic problem in international development cooperation. Given the complex and comprehensive nature of PROSAD, the costs this publication attributes to the programme itself appear reasonable. It seems likely that they cover most additional costs that may accrue to PROSAD's many government and non-governmental partners as a result of their agreement to add PROSAD-related activities to their other activities.

Sustainability. PROSAD's strategy of working with existing government ministries and NGOs at all levels, from the national to the local, and of integrating PROSAD-related activities into their existing programmes is essential to the sustainability of those PROSAD-related activities. While it is essential, it is not sufficient to ensuring long-term sustainability of those activities after 2015, when PROSAD is scheduled to come to an end. That will require continuing to build the capacity of the national partners to operate on their own, whether or not they have financial and technical support from Germany or other international partners. It will also require development of a coordinating mechanism to replace PROSAD and an exit strategy that provides a period of transition during which functions devolve from PROSAD to the new mechanism. It should be noted, too, that it is too early to say whether PROSAD is contributing to permanent socio-cultural change but it is making important contributions to the public dialogue needed to bring about such change.

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