



**HFFG**

# **HOPE FOR FUTURE GENERATIONS**



# **2017**

**ANNUAL REPORT**

*Informed Communities, Improved lifestyles.*

*"A nation free of discrimination and with equal opportunities for women, children and young people".*

## *Our Vision*

*To form partnerships that will facilitate and improve the health, education and socio-economic status of women, children and young people through empowerment, rights based approaches, innovative and acceptable participatory strategies.*

*HFFG envisions that through its interventions, members of its beneficiary communities will be adequately informed and empowered to enable them take critical decisions that will improve their quality of life.*

## *Core Values*

*"HFFG believes in the strong need for advocacy in human rights especially women children and young*

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## Board Chair's Message

On behalf of the Board of Directors of Hope for Future Generations, I would like to express our appreciation to all donors, staff, community volunteers (we shouldn't just limit it to community volunteers but all community members) and partners who have been with us throughout 2017. The year was successful but not without challenges and setbacks. We however continued to make the impact needed among our beneficiaries who would not have been reached without our interventions. Our life changing interventions continued to impact lives across the country.

This year, the board was hit with the unfortunate demise of two of its very instrumental and experienced members, Dr. Derek Aryee and Mad. Vera Quaye. May their souls rest in perfect peace.

The board was reconstituted with three new members joining and bringing on board varied experience and expertise. The board continues to provide technical assistance to the organisation whenever required to ensure efficient running of the organisation.

It is the board's conviction that with the systems and strategies put in place, this organisation is poised to achieve even greater things in the year 2018.

# Executive Director's Message

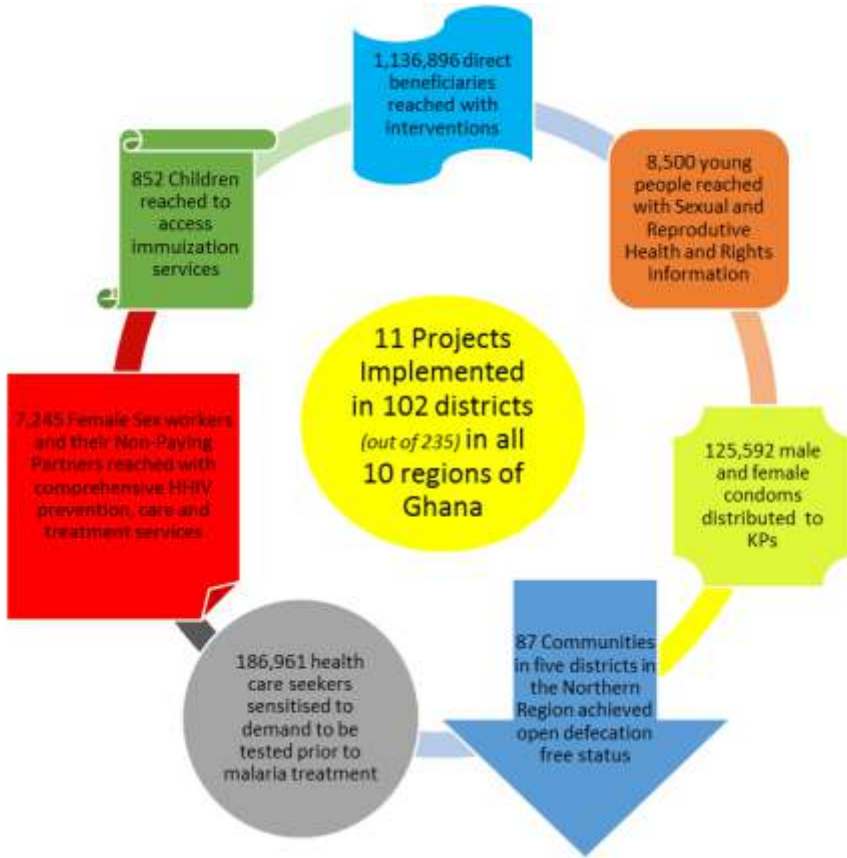
The year 2017 was no exception with regards to HFFG's continuous achievement of its vision and strategic objectives. The year was full of activities that saw many lives transformed and impacted. HFFG was once again at the forefront advocating for the voiceless women and children in Ghana and across the world.

In the year under review, we completed some of our projects and signed new project agreements. I am very grateful to all our partners, donors and staff for your continuous support to this organisation, and to the many community leaders and beneficiaries of our programmes. Together, we are striving to “bring equal opportunities to women and children”. We continue to make giant strides together.

Despite the great achievements, the organisation was unable to secure new projects that could help sustain our initiatives in deprived communities and also retain most of our well trained staff. The organisation is embarking on resource mobilisation to enable us continue our work in various communities.



# SNAPSHOT OF HFFG'S ACHIEVEMENTS IN 2017



improved health outcomes



improved preventive health education and information



improved sexual and reproductive health



Village Savings and Loans Associations established to build up social capital and expand mechanisms for women to access credit.



More young people empowered to demand services, transparency and accountability from duty bearers at the district level



increased awareness and advocacy on rights of children, adolescents and women

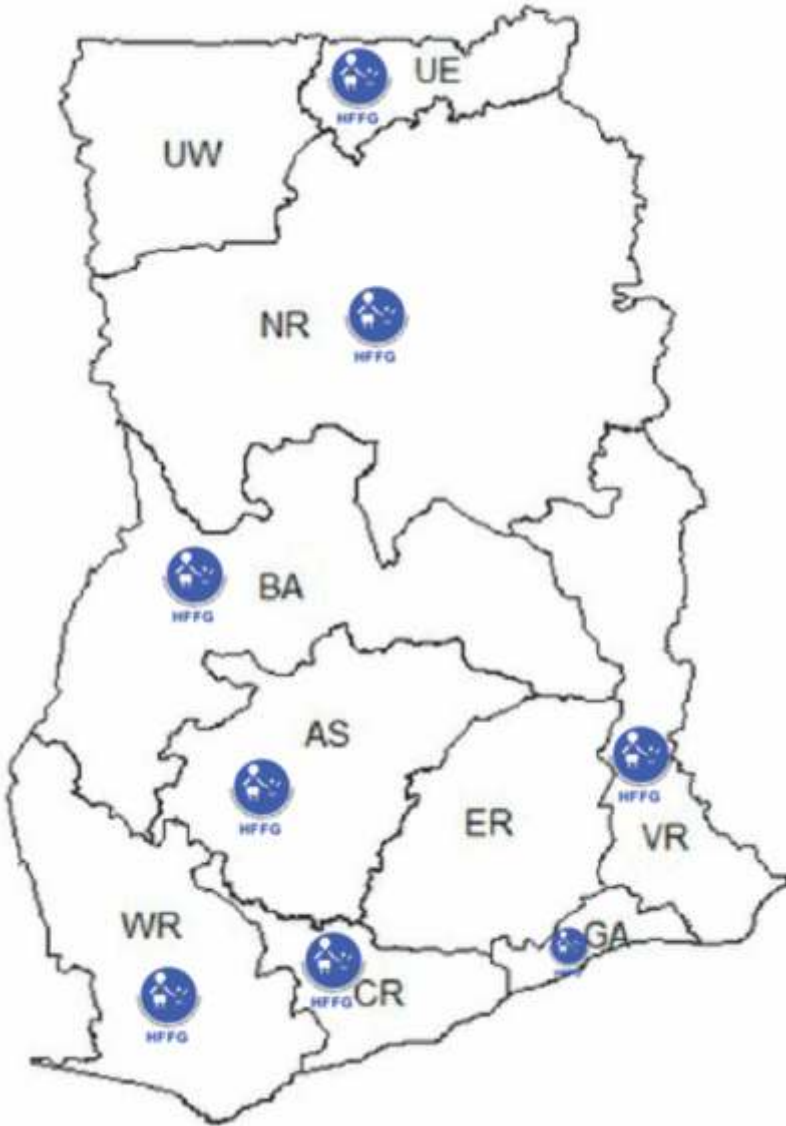
## NUMBER OF DIRECT PROJECT BENEFICIARIES REACHED

We reached a **total of 1,136,896 direct beneficiaries** with our life hanging interventions. This was achieved with the support of the **2,411 community volunteers** we train and work with to build their capacity for project sustainability in the communities.

Project Title	Direct Beneficiaries reached	No. of Community Volunteers	Operational Districts
Advocacy for Resources for Malaria Stoppage Initiatives (ARMS)	995,387	1526	70 including all the Consortium, HFFFG cover 4 regions
Ghana Adolescent Reproductive Health (GHARH)	7, 585	34	Kumasi Metro, Atwima Kwanwoma
Strengthening Care Continuum Project Phase 1	6,262	45	La Dadekotopon, AMA, Jaman North, Sunyani Municipal, Berekum
Golden Line Project	1,322	13	Tarkwa- Nsuaem, Wassa Amenfi, Prestea Huni-Valley, Ellembelle
Watershed Project	1,147	26	Tarkwa- Nsuaem
Get Up Speak up (GUSO)	4,734	30	Tamale Metro, Gushegu,
UNICEF WASH	110, 903	591	Mion , Kumbungu, West Mamprusi, Yendi, East Gonja
Strengthening Care Continuum Project Phase 2	1,050	15	Ga West, AMA
GAVI	6, 125	9	Kpando
HIV Advocacy	20	0	Obuasi, Kumasi Metro, Bekwai
GSAM	2, 361	122	Adjumako- Enyan -Essiam, Gomoa East, Awutu-Senya East, Agona East
<b>TOTAL</b>	<b>1,136,896</b>	<b>2,411</b>	<b>102 districts</b>



OUR NATIONAL COVERAGE - REGIONS OF OPERATION





# HIGHLIGHTS ON PROJECT INTERVENTIONS

## GHARH PROJECT

### Background

The GHARH project was implemented in the Ashanti Region between October 2016 and June 2017. It was conceptualised against a backdrop of high teenage pregnancies among ages 10-19 in the Ashanti Region. The project aimed at improving knowledge and behaviour in reproductive health to achieve fewer and safer pregnancies, fewer sexually transmitted infections and fewer girls dropping out of school due to pregnancy.

GHARH was designed to contribute towards the achievement of Millennium Development Goal 5 and initially implemented in the Brong Ahafo Region in 2013, with activities now contributing to Sustainable Development Goals 3 and 5.

Project activities were implemented in close collaboration with stakeholders such as the Ghana Health Service (GHS), Ghana Education Service (GES), National Population Council (NPC), Planned Parenthood Association of Ghana (PPAG), traditional authorities, parent-teacher associations, peer educators and advocates in the Kumasi Metropolis and the Atwima Kwanwoma district.

### Donor

The project was funded by UKaid through Palladium Group

### Project Objectives

The objective of the GHARH project was to improve adolescent reproductive health choices through:

- Appropriate health information
- Access to and use of health services
- Improved management of programmes for young people's health, and
- Improved participation of young people in implementation of SRHR programmes and services.

### Pictures of Project Activities Undertaken



A cross-section of trained peer educators and queen mothers who acted as support networks for adolescents in the communities



Training on rabbit rearing





*Training on beads décor  
on slippers,  
necklace and earrings  
production*

## Key Achievements

*Peer Led Referrals* - Trained peer educators referred a total of 633 of their peers for various services. The table below shows the number of peers referred for various services



## Adolescents reached in outreaches



## Life Changing Stories – GHARH Project

### *Creating Change in Trabuom through My Experience*



In 2016, 458 reported cases of teenage pregnancy were recorded in the Atwima Kwanwoma district alone. Inhabitants, however, mentioned that the situation was worse than what the statistics say. Peter Gyamfi is a 21-year-old who hails from Trabuom, a farming community in the Atwima

Kwanwoma district of the Ashanti Region.

Peter is a Senior High School leaver and depends on his parents for his livelihood. His dream is to become a soldier. Peter better describes his goal; “In the next five years, I wish to become a soldier. That is my goal but I have lost courage because I don't have any certificate to take me there so I need help please”. Peter was selected and trained as a Peer Educator on the UKaid supported GHARH project through a community health nurse. As part of the selection criteria, HFFG requested for adolescents who were respected within their community and among their peers. Unfortunately, Peter's girlfriend was pregnant and he had become the talk of the town. However, after the peer educators' training he resolved to use his experience to encourage his peers to learn from his predicament by abstaining from sex or engaging in safe sex.

Due to his commitment and passion to contribute to reducing teenage pregnancy in his community, he was also trained to be an advocate on the project. After the training, he became a member of the Atwima Kwanwoma District Project Management Committee. As an advocate, he engaged in decision making processes at this level and was an agent of change in his community.

According to Peter, given the opportunity to be a peer educator and an advocate has really impacted his life positively. It is an opportunity he never thought he could have due to his economic situation and his current state as a teenage father. He has promised to contribute his quota to his community's development through his continuous engagement with community leaders- a link that HFFG helped him establish- and by unremittingly empowering his peers with accurate sexual and reproductive health information even though the project has ended. Peter also received skills training in beads making and rabbit rearing through the 'Boys Time' activity under the project. He currently feels empowered economically to be able to cater for himself and his family.

## Life Changing Stories – GHARH Project

### *The Emergence of an “End Child Marriage” Ambassador*

Wasilatu Abdul Wahab was trained as a Peer Educator and a Youth Rights Advocate under the project. She shares her experience after both trainings and how her experiences have birthed a new Wasilatu who is passionate about ending child marriage in her community.

“I got to know about HFFG through a friend who alerted me about an upcoming training for young people to become peer educators. I had the privilege of being trained as a peer educator and eventually an advocate in February and May respectively through the GHARH project. Before I had the training, there were so many things I did not know about things concerning me as an adolescent. For instance, I did not know about the existence of adolescent health clubs, legal and policy frameworks such as the Children's Act and the Adolescent Health Policy, and the effects and implications of some of the things we do as adolescents, among others.



Being a peer educator has been a great experience for me. I wish every adolescent would have this privilege. I was taught about everything relating to adolescent health including self-esteem and self-motivation. I feel proud of myself when I talk with my fellow adolescents knowing I am impacting positively into someone's life. That is the satisfaction I get at the end of the day. When I look back at the girl I was before and who I have become, I see a positive difference. I feel more confident about myself and can express myself without feeling intimidated by anyone or anything. I am also able to interact well with other people. Through HFFG I was nominated to be part of the Youth Advisory Committee of the Adolescent Health Programme by GHS.

Also, I have committed to empowering girls in my community by letting them know their rights and helping them gain confidence in themselves. I am currently working with another advocate I met through HFFG's youth network online called the Future Generations Movement (FuGeM) to start a campaign to end child marriage as it is one of the major challenges in my community. When girls are empowered with information about their rights, they become fighters to end the menace. This exposure and new-found passion emerged when I came in contact with the GHARH project through HFFG.”



## Life Changing Stories – GHARH Project

*“Now, I am Able to Buy Things My Baby Girl and Her Brother Need with Proceeds from the Beads I Make” - The Story of an Economically Empowered Young Mother*



20-year old Beatrice Agyei resides in Nweneso No.1, a small community which is known to host many small-scale miners, typically known as 'galamsey operators'. At our outreaches held in Nweneso No.1, most inhabitants have blamed these galamsey operators for the increasing numbers of teenage pregnancy in the community. Beatrice is one of the girls who was impregnated by a galamsey operator. She is a mother of two – a 3-year old boy and his baby sister. Beatrice is a beneficiary of our integrated counselling session for teenage / young mothers and pregnant teenagers, and a skills building session dubbed 'Girls Time'. She shares her story of hope.

“I dropped out of school when I was in class 2 because I was constantly mocked by my peers due to my low intellectual ability. While home, I unfortunately got pregnant at age 16. After childbirth, the burden of parenting became the responsibility of my parents and myself, with little support from the father of the children.

Through a community health worker, who was also trained as a GHARH advocate, I became part of a counselling programme organised by HFFG. I was told that this programme was sponsored by UKaid. The programme inspired me and let me know that I could go back to school if I wanted to. After the counselling programme, I was enrolled into the Girls Time programme where I was taught how to use beads to make beautiful slippers, bracelets and necklaces. I feel very hopeful about my children's future; Now, I am able to buy things my baby girl and her brother need with proceeds from the beads I make.”

## THE GOLDEN LINE PROGRAMME

### Background

The Golden Line Programme (GLP) is a 5 year programme and is made up of a consortium of three International Non-Governmental Organizations (NGOs) namely Simavi, Healthy Entrepreneurs and Solidaridad and two local NGOs, Hope for Future Generations (HFFG) and Presbyterian Relief Services & Development (PRS&D).

The GLP seeks to work towards economic empowerment of women living in and around Artisanal and Small Scale Gold Mines (ASGM) in Ghana and Tanzania. Women working in mines have limited opportunities for economic and social development. They also have limited access to health care services and the prevailing socio-cultural norms prevent them from benefitting from mining and other economic activities.

### Project Goal

The Goal for the Golden Line Programme is to create an enabling or supportive environment to empower women in and around artisanal and small scale gold mining communities in Ghana to improve their opportunities to engage in economic activity, decision making and sexual reproductive health and rights.

### Specific Objectives

- To improve their opportunities to engage in economic activities.
- To involve in decision making processes.
- To be informed of their Sexual Reproductive Health Rights.

Donor: Simavi, Netherlands

### Project Location

The Programme is being implemented in some selected informal gold mining communities in the Western Region of Ghana to improve the working conditions for women within gold mines. The beneficiary districts and communities are outlined as follows:

- Ellembele District : Teleko Bokazo, Bomiakpole & Nvuma
- Tarkwa Nsuaem Municipal : Essaman, Kadadwen, Dompim Pepesa & Esuogya
- Wassa Amenfi East District : Bawdie, Abreshia, Adaamanso & Agyakuso
- Prestea Huni Valley District : Beppoh, Bondaye, Aboso & Huni Valley

## Key Programme Activities



Community interface meeting



Community sensitisation on Village Savings and Loans Association





**Community sensitisation on Village Savings and Loans Association**



Sensitisation of community members at ANC





SRH and VAW sensitisation



Training of VSLA facilitators



## KEY RESULTS ACHIEVED

- FORTY FIVE (45) SAVINGS GROUPS MAPPED OUT IN 15 COMMUNITIES IN 4 DISTRICTS.
- THIRTEEN (13) VSLA FACILITATORS IDENTIFIED AND TRAINED ON VSLA CONCEPT TO SUPPORT IN THE FORMATION OF VSLA GROUPS
- TWENTY TWO (22) VSLA GROUPS FORMED
- THREE (3) MOTHER SUPPORT GROUPS FORMED IN THE ELLEMBELE DISTRICT TO ENSURE THE SUSTAINABILITY OF THE VSLA GROUPS
- WOMEN AND MEN WATCHERS GROUP FORMED IN THE ELLEMBELE DISTRICT TO ENSURE THAT MARGINALIZED AND SOCIALLY EXCLUDED WOMEN AND GIRLS STAND OUT AND SPEAK AGAINST ANY FORM OF GENDER- BASED VIOLENCE.
- TWENTY SEVEN (27) WOMEN AMBASSADORS TRAINED IN COMMUNITY LEVEL ADVOCACY.

## V ADVOCACY PROJECT

### Background

Hope for Future Generations (HFFG) is implementing the USAID HIV Advocacy Project in three districts in Ashanti Region. The project aimed at advocating for the availability of HIV commodities and to monitor the quality of service being provided to PLHIVs at the various ART sites. The focus of the project is to monitor the availability of HIV and TB commodities in the Ashanti Region and to advocate on the quality of services provided to PLHIVs at the various ART sites.

Donor

US Ambassador's Advocacy Support Project (PEPFAR)

### Project Objectives

The objectives of the project were to;

- Strengthen CSOs capacity, coordination with partners and engagement with communities.
- Increase availability and access to comprehensive prevention, care and treatment services including reliable coverage across the continuum of care for MSMs, FSWs and PLHIV.
- Enhance and sustain demand for comprehensive Prevention, care and treatment services among Key populations PLHIV and the general population.
- Strengthen linkage and retention in care of KPs who test positive for HIV.
- Strengthen systems for planning, monitoring, evaluating and ensuring the quality of programs.

## Pictures of Some activities



**Staff engaged in High level Advocacy activities**

## ACHIEVEMENTS

- A FORMATIVE STUDY IS UNDERWAY TO ASCERTAIN THE ASHANTI REGION'S LEVEL ON THE 90-90-90 CASCADE
- HFFG IN COLLABORATION WITH LUV FM AND OTHER PARTNERS ARE CARRYING OUT A DOCUMENTARY TO SHOW THE CURRENT HIV SITUATION IN THE ASHANTI REGION AND ITS EFFECT ON PLHIVS
- THE ADVOCACY TEAM PARTICIPATED IN THE CSOS FORUM WHICH WAS ORGANISED BY GHANET IN ACCRA

## USAID STRENGTHENING THE CARE CONTINUUM PROJECT

### Background

Key Populations (KP), particularly Female Sex Workers (FSWs) and Men who have Sex with Men (MSM) continue to be disproportionately affected by HIV in Ghana. The HIV epidemic in Ghana is a low-level generalized epidemic with high prevalence rates among FSW and MSM. The 2011 Integrated bio-behavioral surveillance survey data recorded an HIV prevalence of 11.1% among FSWs. This is higher (about 9% more) than the prevalence among the general population which is currently measured at 1.8%.

Funder: USAID through JSI

Project Goal: The overall goal for this program is to reduce by 50% new HIV infections among FSWs and PLHIV by end of 2020.

### Project Objectives

HFFG's objectives under the USAID Strengthening the Care Continuum project were as follows:

- Increased availability and access to comprehensive prevention, care and treatment services, including reliable coverage across the continuum of care for FSWs and PLHIV in Accra Metro, La Dadekotopon, Sunyani Municipal, Berekum Municipal and Jaman North District.
- Enhanced and sustained demand for comprehensive prevention, care and treatment services among FSW and PLHIV in the five districts in Greater Accra and Brong Ahafo regions.

<sup>1</sup>2011 Integrated bio-behavioral surveillance survey report, HIV prevalence among sex workers is 11% and that of men having sex with men (MSM). [http://www.ghanaisds.gov.gh/gac1/pubs/GMSII\\_MPSE\\_IBBSS\\_TORx.pdf](http://www.ghanaisds.gov.gh/gac1/pubs/GMSII_MPSE_IBBSS_TORx.pdf)

- Strengthened linkage and retention in care of FSW who test positive for HIV in the five districts.
- Strengthened institutional capacity of HFFG for project implementation, planning, monitoring, data management, grant and project management, ensuring quality assurance and documentation

### **Target / Geographical Area**

HFFG worked in 5 districts in Ghana. The project targets for the 5 districts were to reach and test 3,153 FSWs in two districts (3,053 and 100 in Accra Metro and La Dadekotopon respectively in the Greater Accra Region and 3, 805 FSWs in 3 districts in Brong Ahafo; 997 in Sunyani Municipal, 1, 308 in Berekum and 1, 500 in the Jaman North districts).

### **Pictures of some Key Activities Carried Out**



**Project Staff and PEs in a bi-weekly meeting in Sunyani, Sampa and Berekum respectively**





**Project staff in a meeting with ART nurses**

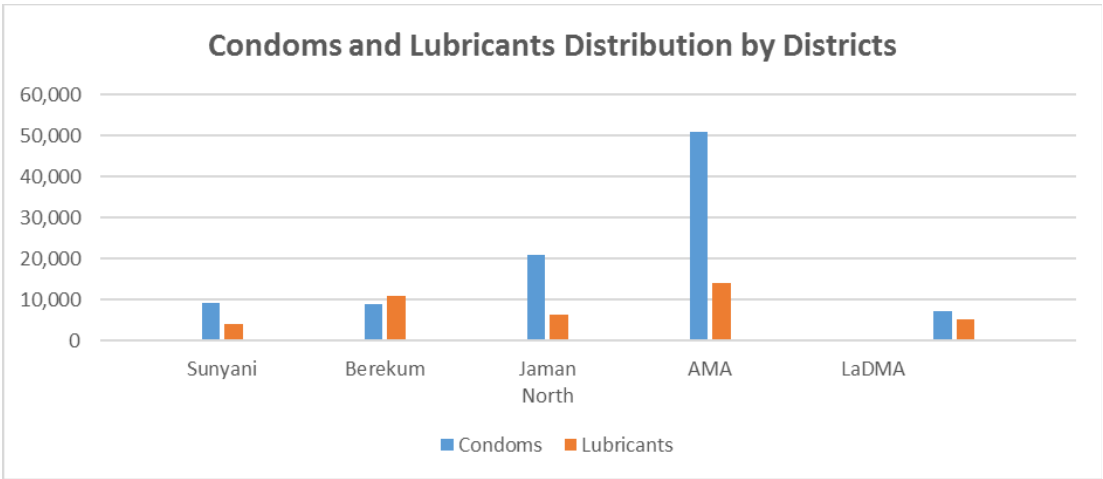
## KEY ACHIEVEMENTS

- 5,459 people accessed HTS via outreaches and at the DICs
- 499 HIV+ FSWs enrolled into care
- 60 non-traditional condom outlets revamped to increase access to condoms and lubricants
- Forty-five (45) FSW peer educators trained

### Key Project Indicators Achieved by district

Indicator	Sunyani	Berekum	Jaman North	Accra Metro	La Dadekotopon
Number of Active Peer Educators	5	8	10	8	2
Number of key populations reached with individual and/or small group level HIV preventive interventions that are based on evidence and/or meet the minimum standards required by KP type [PEPFAR KP_PREV]	1,160	1,082	1,132	532	2,889
Number of individuals who received HIV Testing Services (HTS) and received their test results by sex [PEPFAR HTS_TST]	1,554	1,155	1,148	266	1,336
Number. of male and female HIV+ KP identified, by sex	57	71	62	45	99
Number of HIV+ KP enrolled in Care	141	69	145	41	103
Number of HIV+ KP enrolled in ART	141	69	145	41	92
Number of referral chain managers currently serving HIV KP+ by sex	1	1	1	0	0

## A graph depicting the distribution of condoms and Lubricants by districts



### Life Impact Story on project intervention

#### DEFAULTED HIV+ FSW RE-INITIATED INTO CARE

A 31-year-old FSW single mum with two children Lucy Takyiwaa, was reached during an outreach carried out at Je t'aime, a hotspot in Berekum. Lucy was reactive to the 1<sup>st</sup> response test during the outreach. She was followed up for a confirmatory test which diagnosed her as HIV positive. She was taken through adherence counselling and enrolled into care.

Lucy's health deteriorated to the extent that she was immobile and very weak. This was because she had defaulted on treatment due to her inability to adhere to the dosage as a result of financial constraints that affected her dietary plan given to her during adherence counselling at the ART center.

Lucy's default was reported to the referral case manager of HFFG by the ART nurses at Berekum Holy family hospital where she was on treatment. Lucy was followed up by the case manager who again led her to the hospital and was re-initiated on ART after series of counselling. Due to her state in health, Lucy needed blood transfusion which was donated by staff of HFFG.

HFFG provided support to cater for her hospital bills whiles on admission. Lucy has regained her strength and is being monitored and supported by her case manager to adhere to treatment.



**WASH PROJECT -  
CSO PARTNERSHIP FOR SUSTAINABLE AND EQUITABLE ACCESS TO  
AND USE OF SANITATION AND HYGIENE SERVICES FOR FIVE  
DISTRICTS IN THE NORTHERN REGION OF GHANA**

**Background**

The CSO-DA/GoG partnership project is aimed at scaling-up Community-Led Total Sanitation (CLTS) activities to achieve Open Defecation Free (ODF) status for communities in the Northern Region. To this end, UNICEF engaged the services of Hope for Future Generations (HFFG) in 2016 as part of the GoG-UNICEF Water and Sanitation (WASH) programme (2012-2017). HFFG is to support the implementation of sanitation and hygiene interventions in five (5) districts of the Northern Region (Yendi, Mion, West Mamprusi, Kumbungu and East Gonja). The support is required to focus on implementing sanitation and hygiene interventions aimed at reducing open defecation in the target districts and selected communities.

Donor: UNICEF Ghana

**Objectives**

The project is aimed at scaling-up Community-Led Total Sanitation (CLTS) activities to achieve Open Defecation Free (ODF) status for communities in the Northern Region Support DA to achieve ODF in communities.

**Pictures of Key Project Activities and Achievements**



**Construction of local household toilet**



**Mion district receives certificate for achieving ODF status**



**Natural Leader educating households on use of locally manufactured handwashing facility**

## KEY RESULTS ACHIEVED

- 430 COMMUNITIES IN 80 ELECTORAL AREAS MOBILIZED AND SENSITIZED ON SANITATION AND HYGIENE EDUCATION
- 52 NATURAL LEADER'S NETWORKS FORMED TO SUPPORT THE IMPLEMENTATION OF CLTS IN 430 COMMUNITIES
- TRAINED AND SUPPORTED 591 NATURAL LEADERS IN THE NETWORKS
- 427 COMMUNITIES TRIGGERED ACROSS THE FIVE DISTRICTS
- 87 COMMUNITIES ACHIEVE OPEN DEFECATION FREE STATUS ACROSS THE FIVE DISTRICTS
- INCREASED DEMAND FOR HOUSEHOLD LATRINES

## **WATERSHED: *Empowering Citizen Project***

### **Background**

The Watershed programme is a 5-year strategic partnership between IRC, SIMAVI, Wetlands, Ministry of Foreign Affairs of the Netherlands and AKVO. The Watershed Ghana partners analysed the context of the Ghanaian WASH & IWRM sector, consulted with key stakeholders, developed a Theory of Change and identified priorities for the implementation phase. The programme was launched at the national level in June 2016 by the Director of the Water Resources Commission (WRC) in Ghana. It was launched at the Tarkwa Nsuaem Municipal Assembly July 2017.

Donor/Funder - Different international organisations are funding different aspects of the Ghana Work Package of the Watershed Programme. Hope for Future Generations is receiving funding from Simavi to implement the programme at the district/community level.

### **Objectives**

It is expected that over the next 5 years, the Watershed programme will empower citizens to deliver improvements in the governance and management of Water Access, Sanitation and Hygiene (WASH) as well as Integrated Water Resources Management (IWRM) services and Strengthen the capacity of CSOs to lobby and advocate (L&A) government and other WASH duty-bearers - towards measurable improvements in the quality and sustainability of WASH services.

### **Pictures of Project Activities undertaken**



**Participants after the programme launch**





**Community meeting at Nyame Bekyere**



**Source of Water at Nyame Bekyere**



**Broken down hand dug well at Kofikrom**



**Broken down borehole at Nyanso**



**Effect of iron content in water bodies in Dadwen**



**Source of water at Kofikrom (spring)**



**Community entry at Domeabra**

#### KEY ACHIEVEMENTS

- 1,147 community opinion leaders/members and stakeholders reached with wash and IWRM education
- Five (5) communities have initiated measures to restore broken down pumps
- All wash facilities per community have been mapped
- 26 community advocates trained on water access, sanitation and hygiene (WASH), wash advocacy and IWRM to form advocacy network in the municipality
- Review/round table discussion held with key municipal level stakeholders

### **ADVOCACY FOR RESOURCES FOR MALARIA STOPPAGE (ARMS) INITIATIVE**

#### Background

Malaria is one of the leading causes of death in sub-Saharan Africa. Although preventable and curable, the disease remains a major public health concern in Ghana. It affects all ages but children under 5 and pregnant women are most vulnerable. According to the WHO, although considerable progress has been made in the fight against malaria, the burden of the disease is still very high, especially in Africa, with the region accounting for 80% of the global malaria cases in 2015. The economic impact of the disease on Africa is estimated to cost \$12 billion



every year. This figure factors in costs of health care, absenteeism, days lost in education, decreased productivity due to brain damage from cerebral malaria, and loss of investment and tourism. The project implementation period was July 2016 to June 2017.

Funder/Donor: UKAID

### Implementing Partners

The project was implemented by a consortium of three local NGOs namely:

1. Hope for Future Generations (Lead organization)
2. Youth Development, Research and Innovation Centre (YOUDRIC)
3. Institute of Social Research and Development (ISRAD)

### Geographic Coverage

The project was implemented in all the 10 regions of Ghana with a direct target of seventy (70) districts for the project activities. Project activities were being implemented in 10 selected communities in each district, bringing the total number of communities directly covered by project activities to be 700 across the country.

### Project Goal

The overall goal of this project is to contribute to reduced incidence of malaria in Ghana.

### Objectives

Objectives of the project were as follows:

- Testing prior to malaria treatment and tracking increasing by 10% in all 10 regions where the project is implemented.
- Formation and operationalization of District Malaria Advocacy Groups in 25% of districts in Ghana

### Key Activities Implemented

Advocacy and behavior change communication activities were implemented with the aim of reaching policy makers, health seekers and health care service providers with advocacy and BCC messages on the need for increasing domestic resources for malaria control and testing prior to malaria treatment using RDTs/Microscopes.

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<sup>2</sup>Ghana Statistical Service (GSS), Ghana Health Service (GHS), and ICF International. 2015. Ghana Demographic and Health Survey 2014. Rockville, Maryland, USA: GSS, GHS, and ICF International. Pp 181

<sup>3</sup>Ibid

<sup>4</sup>WHO 2015 world Malaria Report

<sup>5</sup>Gallup JL, Sachs JD, 2001. The economic burden of malaria. AJTMH 64 (Suppl 1–2): 85–96.

## Pictures of Some Activities Implemented



**House to house interactions by Community ambassadors and staff**



**Pupils and students being sensitized on malaria prevention and treatment messages**



Pictures depicting group level activities





**Pictures depicting group level activities**



**DMAG training**



**M/DMAGs meetings**



**DMAG outreaches showing spraying by Zoomlion and a health outreach**





**Community and district level monitoring visits**





**Community and district level monitoring visits**

## KEY ACHIEVEMENTS

- 1,518,211 health care seekers were reached on issues relating to malaria, such as the need to demand to be tested for malaria before treatment and to always sleep under the LLINs.
- 10,259 health care providers were reached to adhere to the WHO protocol on malaria diagnosis and treatment and their support for the district malaria advocacy group.
- 70 municipal/district malaria advocacy groups (M/DMAG) were trained and action plans developed for implementation of advocacy activities
- DMAG has mobilized resources and have accounts for their activities

## Achievement of Key Project Indicators

INDICATOR	MALE	FEMALE	TOTAL
Number of health service providers reached	3865	6394	10259
Number of community members reached during House to House	82,869	104,092	186,961
Community members reached during dusk and dawn/CIC	376,179	546,544	908,475
Number of health seekers reached through Community durbar per region	105,418	161,396	266,814
Number of people sensitized through organized groups	171,713	229,460	401,173
Number of students sensitized per regions	17412	23,240	41,652
Number of Media personnel oriented	65	36	101
DMAG Orientation and Training	419	254	673
Number of community Malaria Ambassadors trained per district	890	636	1526

### Project Impact Stories

#### AJUMAKO ENYAN ESSIAM DMAG MAKES STRIDES TOWARDS FUND RAISING

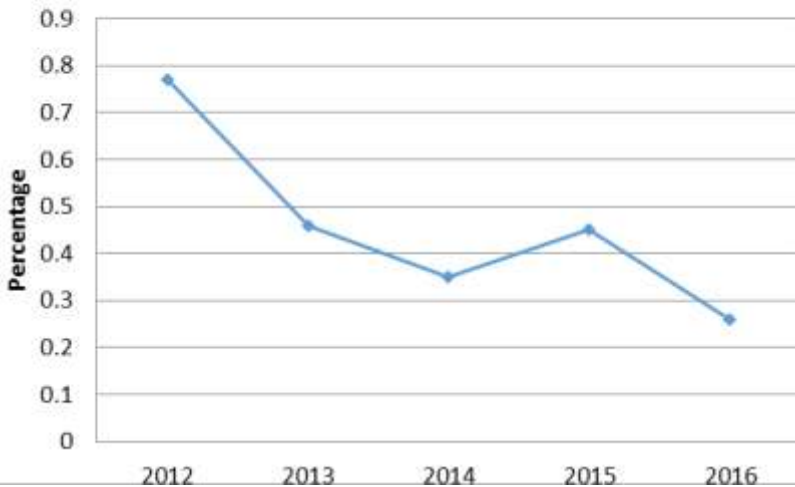
Three District Assemblies have made budgetary allocations for malaria activities for the first time. For example, Ajumako Enyan Essiam District Assembly has for the first time budgeted an amount of Ten thousand Ghana Cedis (GHS 10,000.00) for malaria activities for the first quarter of 2017 and has tasked the District Health Management Team to come up with a work plan to access the funds

**REDUCTION IN MALARIA CASES IN PROJECT DISTRICTS**

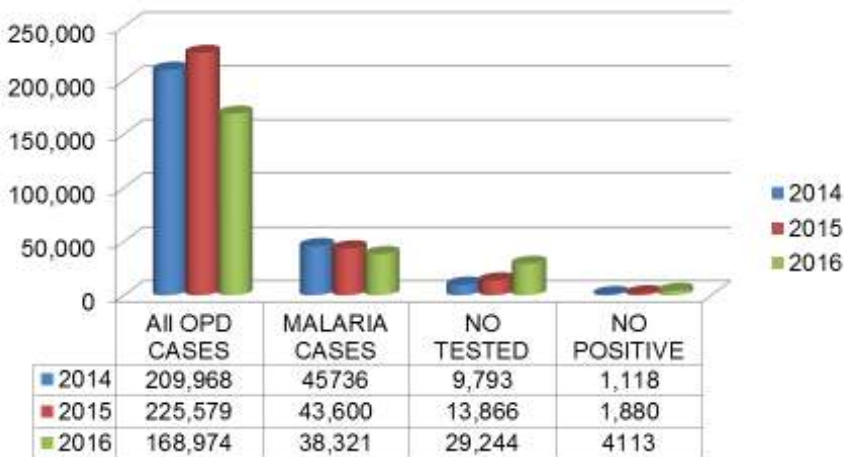
Data from most of the project districts show a reduction in malaria cases. The diagrams below is an example of the contribution this project has made to the reduction of malaria in the project districts.

Graph 6: Under 5 years Malaria Deaths in Brong Ahafo region

**Under 5 years Malaria Deaths**



**GENERAL OPD MALARIA CASES  
2014-2016**



**LaDadekopon district malaria data**

*Other success stories can be accessed from the under listed links:*

<http://www.hffg.org/1.10829267> (Traditional Leader Champions Malaria Advocacy Project)

<http://www.hffg.org/1.10765110> (EXECUTIVE MEMBER OF GA WEST MMAG - HONOURABLE MALIK ABASS - WORKS TO ENSURE SUSTAINABILITY OF ARMS PROJECT)

<http://www.hffg.org/1.10993967> (HFFG CELEBRATES THE 2017 WORLD MALARIA DAY IN THE DISTRICTS)

<http://www.hffg.org/1.10894319> (SUNYANI MUNICIPAL ASSEMBLY PROMISES TO RELEASE 0.5% BUDGET TO SUPPORT MALARIA ADVOCACY)

<http://www.hffg.org/1.10887532> (GA EAST MMAG MAKES A MOVE TO RAISING SUPPORT FOR MALARIA CONTROL)

<http://www.hffg.org/1.10885944> (GA WEST MMAG LUNCHES FUND RAISING FOR MALARIA ADVOCACY ACTIVITIES)

## **GHANA'S STRENGTHENING ACCOUNTABILITY MECHANISM (GSAM) PROJECT**

### **Background**

Ghana's Strengthening Accountability Mechanism (GSAM) project is a five (5) year USAID - funded project which focuses on strengthening citizens' oversight of capital development projects to improve local government transparency, accountability and performance in 100 districts of Ghana. GSAM is designed to strengthen social accountability by improving information to CSOs to enhance their capacity to demand accountability. The Hypothesis of GSAM is that availability and accessibility of detailed information on local capital projects will improve the capacity of citizens to hold governments accountable. In cases where capital project development is poor, citizens can use this information to ask relevant questions in their quest to demand improvements from local officials.

Donor/Funder - USAID

### **Project Objectives**

1. Increased availability of accessible information on MMDAs' capital development project performance in 100 districts,
2. Strengthened CSO and citizens' capacity to monitor MMDAs' capital development projects in 50 districts, and
3. Increased use of citizen-generated information on MMDA capital projects in 50 districts.



**Project Activities:**

- Town hall meetings
- Radio programmes
- Training of community organisers (lead citizens who can mobilise other citizens) in district planning and budgeting in the gas audit districts
- Performance audit disseminating meetings through alternative platforms (schools, churches, mosque, markets)
- Carrying out bi-weekly monitoring of capital development projects
- Training of network of Community Development Monitors (CDM)
- Develop bi-annual capital project performance updates using information from the e-platform, including commitments made at the interface meetings.
- Publish and distribute bi-annual project performance updates in at least 15 communities
- Liaise with citizens to employ information technology to monitor mmda capital projects
- Support the roll out of CSC and CRC processes
- Organisation of interface meetings

*The monitoring visits generally revealed that almost all contracts that have been monitored have not seen any significant changes in the reporting period. Responses from the DAs has been lack of funding.*

**Projects Status at inception of monitoring  
Projects Status as at end of August, 2017**



**A Female and children's' ward @ Nsaba Brofayedru**



**A Female and children's' ward @ Nsaba Brofoyedru**



**A 6-unit class room block with ancillary facilities @ Agona Jacob**



**A 6-unit class room block with ancillary facilities @ Agona Jacob**



**The Former ASEMA DPO addressing Opinion Leaders of Ofaakor**



**The Former ASEMA DPO addressing Opinion Leaders of Kasoa CP**



**Dissemination at Lamptey Mills (Awutu Senya East)**





**Dissemination of PPU at Kwesi Paintil in Agona East District**



**Interface meeting at Agona Nsaba**



**Interface meeting at Agona Kwesikum**



## Key Achievements

District	Activity	No of Communities	Male	Female	Total	% Achieved
Awutu Senya East	Scorecard Development	2	63	16	79	119.7
	Community Interface	2	51	14	65	98.5
	Town Hall meeting	1	42	14	56	93.3
	Dissemination of PPU	15	317	225	545	110.1
	Training of CDMs	1	18	12	30	100.0
Agona East	Scorecard Development	2	51	26	77	116.7
	Community Interface	2	31	21	52	78.9
	Town Hall	1	43	24	67	111.7
	Dissemination of PPU	15	314	148	498	100.6
	Training of CDMs	1	21	10	31	103.3



*The GSAM Project has influenced citizens to demand accountability, transparency and value for money from duty bearers. Community are now able to engage their DAs on their developmental needs with good response coming from the Assemblies. This is gradually eroding the perception of corruption by the people against Assemblies*



## Project Impact Story

### COMMUNITY COMMITTEE'S ENGAGEMENT WITH ASSEMBLY YIELDS POSITIVE RESULTS



*Before*  
Before community committee engagement with Municipal Assembly

*After*  
After community committee engagement with the Assembly

There has been a sustained advocacy for the recognition of People Living with Disability in national development. This has gotten to greater heights with the implementation of USAID funded Ghana's Strengthening Accountability Mechanisms (GSAM) Project.

As part of the GSAM Project, community fora are organized to allow the citizenry to rate the performance of District Assemblies in the implementation of Capital Development Projects within their jurisdictions. Such fora was organized in Amuzukope in the Awutu Senya East Municipal with a cross section of the community members as participants. A 5-member committee was set up to mediate between the community and the Municipal Assembly. The focal project is a construction of a CHPS compound in the community.

With periodic monitoring being part of the GSAM Project, participants at the forum undertook an inspection of the project to have a closer look at the building to rate the performance of the contractor. The inspection revealed that the disability ramp was narrow and steep, which could pose a danger to users when completed. Community members and the Zonal Project Officer from ISODEC expressed their dissatisfaction with the disability ramp and called for it to be reconstructed. This was assigned to the committee to liaise with the Municipal Assembly for the necessary correction to be made to the ramp.

The committee contacted the Assembly and it was found to be a good suggestion by the Municipal Coordinating Planning Unit. The necessary changes tabled by the committee to be made on the ramp has been successfully implemented with community members now satisfied.

The community members are very grateful to the USAID for the GSAM project which has enabled them to engage the Assembly on infrastructural developments in the community. It has also enabled community members to have an input in capital development projects in the community.

## **GAVI HEALTH SYSTEM STRENGTHENING PROJECT (HSS)**

### Background

Over the past years, there has been low patronage with respect to immunization of children under five years due to certain myths and misconceptions held in communities. There were also health system challenges that affected the community health officers from regular immunization visits to hard to reach communities. There was therefore the need to embark on the GAVI HSS project to expand immunization coverage to all children under five years in hard to reach communities and communities with low immunization coverage.

### Project Location - Kpando Municipality

### Project Objectives

- To increase DPT 3 to above 90% coverage in the district and also to increase EPI coverage which aims to achieve a two-thirds reduction in worldwide deaths among children under five years
- To increase the knowledge of communities on the importance of immunization and maternal and child health issues
- To obtain at least one thousand (1000) children under five in the first phase of the project access to immunization services in their communities

### DONOR - GAVI through Ghana Health Service

### Project Activities Implemented

- Pre Implementation meetings with Kpando Municipal health Directorate
- Community Entry
- Training of Nurses and volunteers
- Community durbars
- Child Welfare Clinics
- Church sensitizations
- Monitoring visit by Coalition
- House to house sensitizations
- Monitoring visits
- National Immunization Day celebration
- Procurement of items for satellite sites

Activities Implemented	Number of people reached		Total
	Males	Females	
House sensitization	641	1075	1716
Child Welfare Clinics	53	799	852
Group Sensitization	1460	2088	3548
Training of nurses and volunteers	5	4	9

## PROJECT MONITORING ACTIVITIES

The Monitoring and Evaluation Department coordinates monitoring of all projects. A number of field visits were conducted to strengthen the project communities and monitor the progress of the results of the projects. Monitoring, coordination and field supervision were conducted along the project results.

The monitoring visits were done in a hierarchical manner; where community Facilitators / Peer Educators/ Ambassadors follow-up daily, weekly and bi-weekly on their peers, to ensure progress. The Project Officers support Peer Educators, but since a project staff controls a number of such community volunteers weekly or monthly fields supervisions are conducted to collect, verify and support project data reporting.

Quarterly reviews with key stakeholders were conducted on each project with relevant stakeholders to ensure tracking of progress per the indicators and the deliverables. Management conducted a number of on-site monitoring to support planning and resolving implementation challenges. Some projects such as Care Continuum, ARMS and Golden line programme undertook peer reviews to strengthen project deliverables across districts.

Project Close-out sessions were held for GHARH in Ashanti Region, Care Continuum in both Brong Ahafo and Greater Accra Regions and ARMS at all the 70 districts and held a combined GA West Districts to the National Close-out session. The monitoring model of the Organisation is illustrated in the pyramid below;







**Staff monitoring of volunteer records**



**Executive director inspecting a locally made household latrine during monitoring**

## INSTITUTIONAL DEVELOPMENT

### STAFF STRENGTH AS AT DECEMBER, 31, 2017

As at the end of December 2017, the staff strength of HFFG stood at 52 plus 3 Interns. This represents a 40% year on year decrease in the staff strength as at December 2016 which stood at 91. This was mainly due to reduction in the number and scope of projects. Some staff whose projects had ended had to be laid off.

The table below shows the organisation's staff strength (including 3 interns) disaggregated by sex and region of operation.

Region	Female	Male	Strength
Accra	15	10	25
Ashanti	2	0	2
Brong Ahafo	1	0	1
Central	3	3	6
Northern	5	5	10
Volta	3	0	3
Western	5	3	8
Strength	34	21	55
	62%	38%	

### INTERNS (2017)

HFFG hosted a total of 22 interns comprising 9 International Interns and 13 local (Ghanaian) interns. These interns worked on various projects across the country and gained a wealth of exposure and experience in development work.

### SOME HUMAN RESOURCE DEVELOPMENT ACTIVITIES IN 2017

HFFG creates opportunities for staff capacity development that translates directly to the delivery of quality and efficient service.

Staff participated in Capacity programs such as trainings, workshops, conferences. Some of these trainings were sponsored by HFFG and others were sponsored by donors of our projects. The table below provides a list of the capacity building programs participated in by staff during the year.

No.	Name of Training/Conferences	Participants
1	RACI Matrix	All staff at Head Office staff
2	Change Management & Conflict Resolution	All staff at Head Office staff
3	Grant Writing	All staff at Head Office staff
4	Excel	All staff at Head Office staff
5	UG Department of Social Work Workshop	Milicent, Yaw
6	Review of Financial Manual	All Head Office staff
7	Financial Software Training	Finance staff
8	JSI OCA Workshop	Managers, Coordinators, M&E
9	National Philanthropy Forum	ED, HR Manager, Admin Sec, Collins
10	Professionalism Training for Drivers	Drivers, Salome, Milicent
11	French Tutorials	All Head Office Staff
12	GSAM Trainings	Mercy, Anthony, Finance
13	Hotspots Mapping	Daniel, BA JSI staff
14	True Love Waits Project – ASRHR	Martha
15	Watershed Advocacy	Mercy
16	Network Disruption in Africa Workshop	Isaac (IT Officer)
17	CDD Workshop on Data and SDGs	Patricia
18	Microsoft Workshop on Cloud for NGOs	Farouk, Yaw
19	French Lessons	Head Office Staff
20	Training on Going For Gold & Watershed	Western Region Staff
21	Finance and Compliance Orientation, Concept Of Gender, SDGs	All staff
22	Youth Conference in Senegal	Edith
23	Data & Information Systems Training	All staff
24	HFFG Appraisal Process and Time Management	All staff
25	Communication Strategy Development	All staff
26	Dance for Life Training	All staff
27	Data Management and Dashboards	All staff
28	Training on Success Stories and Social Media	All staff
29	AKVO Training	All staff
30	WHO Regional meeting on paediatrics and adolescents HIV	Director of Programmes

## HFFG'S PARTICIPATION IN STRATEGIC MEETINGS AND FORA

### **HFFG Participates in SDG Technical Working Group**

In August 2017 HFFG was invited to be part of Technical Working Group (TWG) set up by the National Development Planning Council to oversee the implementation of the SDG's in Ghana and advise government accordingly. This invitation was extended as a result of HFFG's active participation in CSO forums on the SDGs and subsequent chairing of the SDG Sub-Platform 5 for Gender Equality. The TWG has representation from Ministries, Departments and Agencies, Civil Society and Private Sector Organisations. These Agencies, together with Private Sector Organisation's and CSO's are invited based on the nature of their function and its bearing on the 17 SDGs. The TWG was officially launched on August 22<sup>nd</sup>,

### **Participation in other SDG Related Activities**

- High Level Dialogue on SDGs organised by the Ministry of Foreign Affairs
- Launch of the President's Gender and Development Initiative (GADIA)
- Multi-stakeholder engagement on how to leverage opportunities in the Private Sector (which led to the selection of some private sector actors as national gender advocates
- Africa Roundtable meeting on SDG's

### **Participation in WHO Regional meeting on Paediatrics and Adolescents HIV**

On December 3, 2017, HFFG joined paediatric and HIV experts in Abidjan, Côte d' Ivoire to take stock of progress and challenges in tackling HIV among children and young adults in the region. The meeting was jointly organised by the World Health Organization (WHO) and Elizabeth Glaser Paediatric AIDS Foundation (EGPAF) and focused on reviewing and accelerating efforts to scale-up timely diagnosis and treatment for children and adolescents living with HIV.

### **HFFG participates in the 61st Session on the Commission of the status of Women (CSW)**

This year's CSW theme was on “WOMEN'S ECONOMIC EMPOWERMENT IN THE CHANGING WORLD OF WORK, held in New York from the 13th-24th of March.





## FINANCES

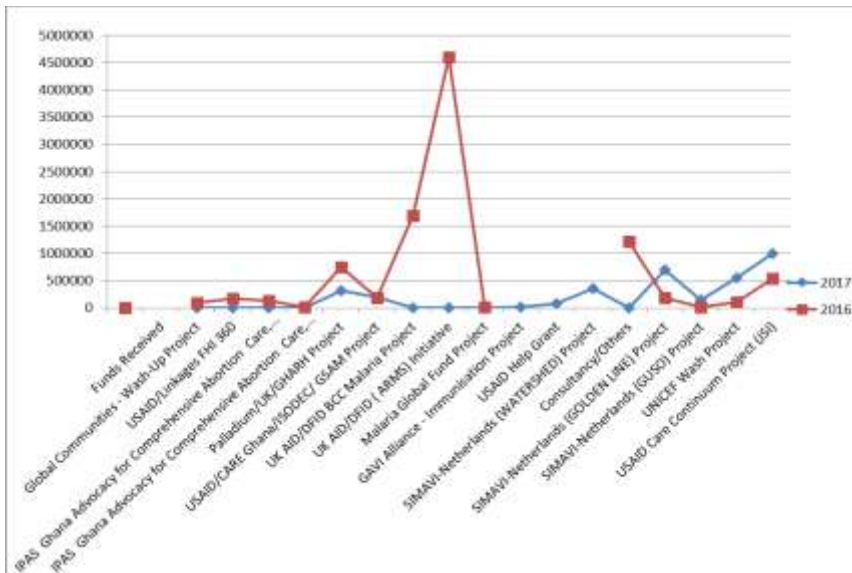
### HOPE FOR FUTURE GENERATIONS

#### NOTES TO THE FINANCIAL STATEMENTS

#### TOTAL INCOME RECEIVED FOR THE YEAR ENDED 31ST DECEMBER 2017

	2017 GH¢	2016 GH¢
<b>Funds Received</b>		
Global Communities - Wash-Up Project	-	99,020.40
USAID/Linkages FHI 360	-	168,258.75
IPAS Ghana Advocacy for Comprehensive Abortion Care, Accra	-	131,130.00
IPAS Ghana Advocacy for Comprehensive Abortion Care, B/A	-	12,271.00
Palladium/UK/GHARH Project	314,533.33	748,449.66
USAID/CARE Ghana/ISODEC/ GSAM Project	197,611.36	183,423.08
UK AID/DFID BCC Malaria Project	-	1,691,762.19
UK AID/DFID ( ARMS) Initiative	-	4,604,376.98
Malaria Global Fund Project	-	16,000.00
GAVI Alliance - Immunisation Project	18,000.00	
USAID Help Grant	84,000.00	
SIMAVI-Netherlands (WATERSHED) Project	360,053.32	
Consultancy/Others	-	1,215,001.40
SIMAVI-Netherlands (GOLDEN LINE) Project	702,714.34	180,374.87
SIMAVI-Netherlands (GUSO) Project	144,473.51	10,135.82
UNICEF Wash Project	552,494.80	108,954.00
USAID Care Continuum Project (JSI)	1,001,227.35	543,506.00
<b>TOTAL FUNDS RECEIVED</b>	<b>3,375,108.01</b>	<b>9,712,664.15</b>

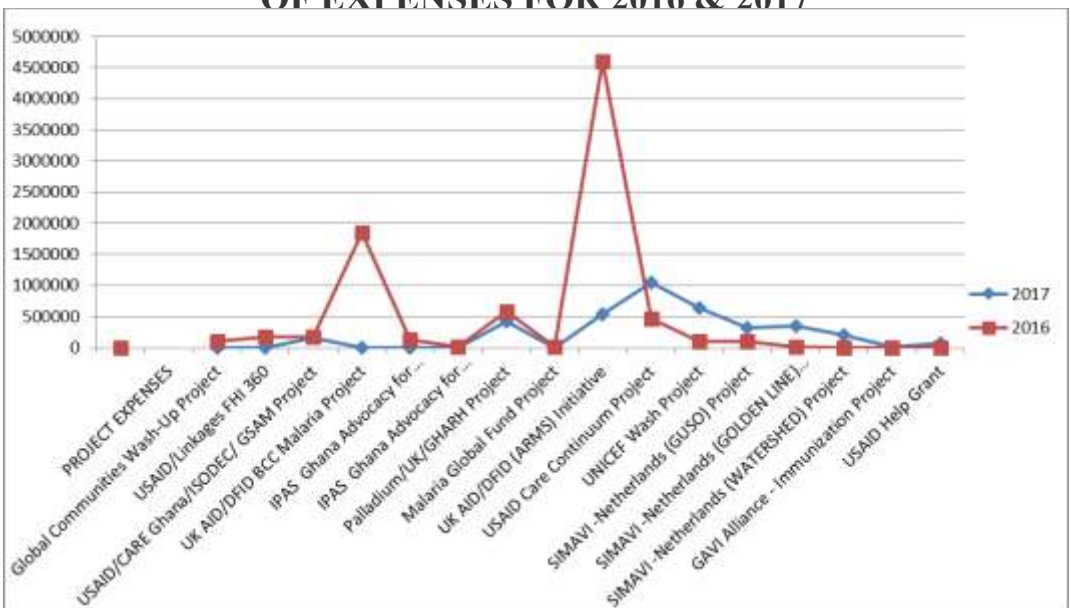
### LINE GRAPH SHOWING COMPARISON OF INCOMES FOR 2016 & 2017



HOPE FOR FUTURE GENERATIONS  
 NOTES TO THE FINANCIAL STATEMENTS  
 TOTAL EXPENSE REPORT FOR THE YEAR ENDED 31ST DECEMBER 2017

	2017 GH¢	2016 GH¢
<b>PROJECT EXPENSES</b>		
Global Communities Wash-Up Project	-	99,020.40
USAID/Linkages FHI 360	-	168,258.75
USAID/CARE Ghana/ISODEC/ GSAM Project	156,397.63	169,629.30
UK AID/DFID BCC Malaria Project	-	1,844,289.59
IPAS Ghana Advocacy for Comprehensive Abortion Care, Accra	-	131,130.00
IPAS Ghana Advocacy for Comprehensive Abortion Care, B/A	-	12,270.00
Palladium/UK/GHARH Project	421,780.76	576,659.60
Malaria Global Fund Project	-	15,999.00
UK AID/DFID (ARMS) Initiative	541,666.87	4,604,376.98
USAID Care Continuum Project	1,044,676.67	458,960.04
UNICEF Wash Project	645,406.54	96,421.17
SIMAVI -Netherlands (GUSO) Project	324,017.17	101,183.50
SIMAVI -Netherlands (GOLDEN LINE) Project	345,426.19	10,120.00
SIMAVI -Netherlands (WATERSHED) Project	198,030.98	-
GAVI Alliance - Immunization Project	15,860.40	-
USAID Help Grant	76,689.44	-
<b>TOTAL EXPENSE</b>	<b>3,769,952.65</b>	<b>8,288,318.33</b>

**LINE GRAPH SHOWING COMPARISON  
 OF EXPENSES FOR 2016 & 2017**





**We are making strides in giving equal opportunities to women and children**



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