



The importance of being in the field

Beja women are sitting outside the Health Unit of Tomsai, in Sinkat locality, which has been rehabilitated recently by Italian Development Cooperation, under the European Programme Promoting Qualitative Health Service in Eastern Sudan (PQHS). Some of them are young and have kids with them, some others are old, yet all of them wear beautiful and colorful Toob (the traditional costume for women in Sudan) and the gold ring at the nose capture your attention. They are many, they come from surrounding villages and they walk one hour to reach Tomsai.



Beja women waiting for a visit at Tomsai HU

They know that today Italian Development Cooperation staff is in the field together with their Health Assistant and they do not want to miss the chance to have a complete health visit.

As a positive result of such outreach activity a small and spontaneous mobilization of women came out. They went there to discover the services provided by Italian Cooperation in the locality. The importance of being in the field during an outreach is priceless for IC as well as beneficiaries. For IC it is a way of monitoring community status and needs while providing a constant support to health assistants who work there and understanding their needs

and those of the population. Such activities represent a way of collecting data and information that can drive activities planning.

Additionally, outreach is a way of building trust with the population. For local communities, active presence of IC is a way of not feeling forgotten by the system; this gives local people back the dignity of living in remote areas where delivery of the basic health services is challenging, rare and not constant.

Women speak just Beja language. Luckily, somebody from the village can help translating: we discover that in the group there is a traditional midwife.

Since there is a lack of trained midwives in the remote areas, this old woman can be a good connection with local communities to look for girls who want to become midwife and provide antenatal care services in the remote areas.

Traditions are well rooted here, it is not common for girls to leave their families to study outside the village for long time.



IC staff and Ibrahim, HA, visiting a beja woman in Tomsai

This is the reason why finding a traditional midwife can be a good support for local health assistants and for pregnant women.

Ibrahim is the Health Assistant in charge in Tomsai, he visits his patients with care and attention. He is 29 years old, he is married and his wife is pregnant of their sixth son. When the Health Unit in Tomsai was closed, he left the village and went working at the gold mines in the



Ibrahim Health Assistant in Tomsai HU

mountains. When he heard the news that the facility would have been rehabilitated, he came back and he started working in Tomsai. He is very respected and estimated in the locality. He takes care of the center and patients as if they were his family. "I do this job for my community, to provide them with the medical services without the need to pursue it outside the village. It is good to have Italian Cooperation working here in Sinkat locality, as a target area for Promoting Qualitative Health Service Programme" said Ibrahim. "Monthly we have 250 patients in Tomsai. They came here for a

visit or a diagnosis or a medical prescriptions. Now, in

Tomsai we have services which we did not have before. It is something new and for me it is an opportunity to be always in a continuous professional development, since working with the Health System, through Italian Cooperation, is a way to be always up to date. We follow training courses, we attend meetings with colleagues. The presence of IC in the field when they came for an outreach is vital for us. Through their experience, we learn constantly".

His words confirmed the importance of being in the field, beyond being in Sudan, which according the 2013 Human Development index ranked the 171st place in Human Development; this means that the country still has one of the lowest human development in the world. Under this perspective, the importance of being in the field appears like something that goes beyond fixed rules and goals of a traditional development programmes.

A big change

In Naset, a small village in Sinkat locality, IC rehabilitated another Health Unit. **Taha, the Health Assistant**, tells us that after the intervention of IC many things have improved. "Now our patient should not go to Sinkat Hospital (around 40 km far, a small distance by car only owned by the Commissioner). Since we attend training course we are able to treat minor diseases". His eyes shine while saying these words. "As health assistant I lacked some of the very basic tools, as a sphygmomanometer and stethoscope. Now we can work properly." But something has changed also inside the community and he explained us the "big change" that occurred in Naset. "Now I see the differences between before and after.

And we don't want to give up all what has been done until now. Maybe we are not so active and we might need more determination to push on our demands. So from now, even if the support of IC will finish, I will never surrender and with the community leaders we will find a way to continue work and improve the services. Here, it was not allowed for girls to go study far from the village. But now they realize the importance of having a midwife in Naset, and going beyond the tradition, they accept to send the wife of the Community Leader to Sinkat to study at the Midwifery School. This kind of change of behavior of the people, the change of their point of view means that they have a better understanding of the situation and above all of their rights. In this way they will continue improve themselves".



Taha, Health Assistant in Naset HU

Health Education. Which challenge for Kassala State?

Mrs. Nemat Abd Alsalam Alterefy is the Dean of the Academy of Health Science (AHS) in Kassala, since 2013. Before this position she was working in IMCI program (Integrated Management of Childhood Illness). She's 46 years old and she has a bachelor degree in nutrition and master degree in health science and human nutrition. IC works with the AHS in Kassala since 2008 through different activities, but in 2014 the collaboration through PQHS increased. AHS is contributing to improve the health system and the coverage of the health map in Kassala by delivering in the remote areas with the health cadres. The lack of qualified health staff is one of the element on which PQHS is working on.



Nemat Abd Alsalam Alterefy, Dean of the AHS in Kassala

What are the changes between before and now working with IC, after the PQHS was launched here?

There are many changes and improvement in the work environment of the AHS. The most important support was the one for the students by providing them with scholarships, that helped in the stability of the students and making them more focus on their study. In the past there were more drop out from the students because of financial issues. Through PQHS intervention with tuition fees, accommodations and registration fees, the majority of the students, can go on with their studies in a better condition.

The scholarships helped the students coming from remote areas, especially from Telkok and Hamashkoreib. Together with PQHS we are covering the SMOH health map, including the remotes area, through our graduated students. This is the main objective of the AHS work. PQHS also support the midwifery schools. By providing them with midwifery equipment and training courses, as well as the Community Health Workers (CHW).

When the first group of the students who got the scholarships are going to be graduated, they will start to work in the target localities? Are all those students going to be recruited by the SMOH?

The Community Health Workers (CHW) are going to be graduated in December but the other health cadres will graduate on April. We hope that at that time SMOH will be able to recruit them immediately because we are in need of nurses, medical assistants and CHWs especially in the remote areas.



Community Health Workers Students at the AHS in Kassala

We established a committee with the support of PQHS called “Student Committee” to follow up the employment of those students and we had a meeting with the Minister to discuss this issue and now we knew that there will be 200 jobs maybe available for nurses for the next year 2016.

Can you tell me a good story from your graduate students?

I have many. There were two students graduated from the public health department in AHS and both of them are now working in the IMCI therapy and health education in SMOH. Nurses graduated from the AHS and they are working now in Kassala hospital and they are one of the excellent nurses there. Another story that makes me proud is about a student who came the first on his batch in public health department and scaled up to study a bachelor at Gazira University, which is one of the best university in Sudan. From a different aspect, the example of Barkat makes me proud as well. He graduated as medical assistant and then he established a health center in remote area called Alrashayda. He is really helping his community, this center is not providing only laboratories services but also a program for consultancy visits (Antenatal care, nutrition and pediatric). I think Barkat experience is one of the best experiences of my students. I really wish that one day I can visit him with you.

Can you promise us that after the graduation all the students will be employed through government?

I cannot promise you because it is a governmental decision but I hope that all the students will be employed and I will do my best to achieve that. I’m really convinced that we will find way to recruit some of them. Maybe they could start working with the government in the framework of the national service. This could be a good opportunity for them to start to practice. Kassala State really needs qualified health cadres. We are doing the best we can at the AHS, and for sure we need a stronger support also from the Ministry of Finance. That’s why I really want to express my deep gratitude to Italian Cooperation and European Union for their work in supporting the Academy of Health Science in Kassala and so the next generation of health cadres in the State.

Academy of Health Science in Kassala	Scholarships by PQHS	Scholarship By IC	Graduated in 2016	Graduated in 2015
Medical Assistant (3 years course)	9		46	
Lab Technician (3 years course)	3		106	
Public Health (3 years course)	3		66	
Nurse (3 years course)	12		182	
Community Health Workers (9 months course)	60			55
Midwives (15 months course)		40		40

Planning and results of a good cooperation. Interview with Yasir Osman Mohammed , Deputy D.G. and Director of Planning at Gedaref State Ministry of Health

Planning is one of the key to contribute to the implementation of European Union programmes. Can you explain me in which form is it happening here in Gedaref?

First of all I would like to thank the Italian Cooperation and European Union. I'd like to send a greeting to Italian Government and European Union, for helping us to improve the health situation in the State. The main objective of IC is to support Gedaref Ministry of Health in strengthening the system and build its sustainability after IC program ending. But we strongly hope for a continuation phase. As a Director of Planning at MoH I'm in charge of this process. I may say that there is a quite good coordination among IC and my department. Together we have just drawn an integrated, Ministry of Health and Italian Cooperation, operational plan for 2016. We regularly meet every month to monitor progresses and planning new activities. For 2016 we have in Sudan a new important tool for better coordination and planning, named **One plan, One budget, One monitoring system**. Thus, soon in Gedaref a comprehensive plan is going to include in its budget all different funds: Local Government, Italian Cooperation, Communities and any other donor. We think that this will greatly improve the management of our sector.

Can you make me a very brief focus on the EU programmes that are running here in Gedaref?

With EU and IC support we are implementing many projects mainly in Primary Health Care sector at community level. For instance now we need to cover with midwives about 120 villages. In collaboration with IC we have facilitated midwives from near areas to cover not yet served villages, giving them incentives for transportations. So, we had successfully raised up the coverage with the midwives by around 10 percentage. In 2016 we would like to expand this strategy. Then we have a plan for the rehabilitation of some strategic Health Facilities: In Umm Sheghera area the IC has already rehabilitated the maternal department. Of course we know that infrastructure are not enough. We have to increase community awareness, because still the pregnant women don't easily move to facilities. This is because of traditions either lack of awareness. So in collaboration with IC staff we started initiatives to increase service demand. We went to the villages for small lectures with local people on **safe delivery in Hospital**. As result, at Umm Sheghera itself, from August to September 2015, we had 200 visits, which is a very good achievement. Now we can duplicate the program to the other communities.



Yasir Osman Mohammed Deputy D.G. at SMoH in Gedaref

This joint work is a real chance to improve the relation and the operating system between the central institutions and the localities, do you agree?

Definitely. If you have one hand you will not be able to clap and here is the same situation, we encourage the collaboration to achieve a good results. The IC has experience, knowledge and resources. You know that one of our gaps is the lack of funds. Adding other new skills and experiences, this will be a good thing for us. This will benefit also Localities. As I said now together we are planning in coordination for new results making the best use of the available funds.

General overview on GEDAREF activities in 2015

Before



After



**Rehabilitation of Mela Health Center
Wasat Locality**



**Rehabilitation of the Hospital of Umm Shegera
Wasat Locality**

Community Medicine in Wasat, Al Rahad and Al Mafaza localities





Health Awareness in Umm Shegera Village



Training courses in Gedaref City

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