



## **Walking Together in Partnership 2024**

### **All We Can / Y-Care International & OPM Support to Efficient Research and Development Institute (ERDI) In Liberia**

## **Final Report 2024**

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## Executive Summary

The Efficient Research and Development Institute (ERDI) signed a partnership grant with All We Can/Y-Care International under the Walking Together in Partnership Program in January of 2024. This partnership is intended to strengthen ERDI's institutional capacity as well as improved program implementation quality of the organization in Nimba and Bong Counties. This partnership was initiated through the development of the 5 year (2023 – 2027) strategic plan of ERDI which is intended to guide the organization's programmatic focus and effective service delivery over the next 5 years. The development of the 5-years strategic plan was fully sponsored by AWC/YCI which paved the way for the availability of the Education Pillar which was intended to set the stage for the implementation of the 5 years strategic plan.

The Education Pillar covered the following annual outcomes which were achieved during the period under review.

Key Annual Outputs of 2024 are as follows:

- Annual Output - 1: Mentored PTAs Leadership on Home-Grown School Feeding.
- Annual Output - 2: Trained PTAs Classroom Monitoring / Roles and Responsibilities.
- Annual Output – 3: In-kind Supported towards Home-Grown School Feeding Program.
- Annual Output - 4: Supported Selected Vulnerable Students.
- Annual Output – 5: Established / Reactivated School Health Clubs.
- Annual Output – 6: Mentored and Technically Supported the School Health Clubs.
- Annual Output – 7: Produced and Aired Behavior Change Communication (BCC) Materials.
- Annual Output – 8: Advanced Data Collection and Analysis Training for ERDI Team.
- Annual Output – 9: Baseline Survey Conducted on the Strategic Plan four pillars.
- Annual Output – 10: Trained needy Small Holder Farmers.
- Annual Output – 11: Printing and Distribution of Information Education Communication (IEC) Materials

All these annual outputs were concluded in all aspects of the implementations. All the project activities this year, 2024 were implemented in Nimba and Bong Counties. ERDI remains very grateful to All We Can / Y-Care International and OPM for affording us funding, which has helped to take the Strategy Plan (SP) of the organization to another level. We remain very grateful.

## Key Accomplishment/Achievement

The unfinished implementation of the Education Pillar enabled ERDI to accomplish critical programmatic challenges which have improved our organization educational interventions beginning this year, 2024. Key factors amongst these achievements are the initiation of ERDI's establishment of Vulnerable Students Selection Committees at the community level as an advocacy arm for the identified vulnerable kids; presented criteria/guide for the selection to each community; used of "Random Number Generator" to select the neediest vulnerable students among the list of vulnerable students presented by the committees thereby avoiding bias in the selection process; etc. Below are the detailed achievements of the annual output during the period under review.

## **Annual Output - 1: Mentored PTAs Leadership on Home-Grown School Feeding.**

ERDI successfully provided mentorship for PTAs to generate cash and in-kind support for their first selected 7 Schools (Busie, Dingamon, Nengbein, Kpein, Tomato Camp, SKT and Raymond's Town) in Nimba and Bong Counties. September 2024. The mentorship was provided for 35 PTAs members, 5 each per school from Nimba and Bong Counties. The PTAs mentored on how to generate cash through works and in-kind activities to support their various schools mainly with food which is said to keep school going children active on campus and involve many extracurricular activities. The PTAs were established by those communities that consist of prominent community members, local authorities, citizens with interest in school matters. The functional PTA is headed by the chairperson, Co-chairperson and the secretary. The secretary to the PTA is the School Principal. He/she is the custodian of all PTA's records, he/she writes the meeting agenda and always takes meeting minutes. The secretary usually briefs the PTA's members on what happens at the school and seeks mitigation suggestions to address challenges and share with the PTA's members what's improving and what's not working based on the previous plans.

## **Annual Output - 2: Trained PTAs Classroom Monitoring / Roles and Responsibilities.**

ERDI conducted training for PTAs on monitoring classroom and their roles and responsibilities which was intended to establish defined ways in engaging teachers and giving feedback to school administration during PTA's regular meetings. Due to the training provided by ERDI, PTAs in the 7 selected schools from both counties have been recognized as critical actors in the provision of quality education by the Counties Education departments, as noted in its implementation contract with EDC for this development assistance activity, and by the MoE as reflected in the recently revised draft National PTA Policy and the "One School Approach" which seeks to integrate all MoE programs at the school level. The PTA training provided was the first series of training that strengthened PTA structure, leadership and engagement generally, and promoted specific PTA led activities in support of ERDI, All We Can and Y-Care International and OPM Education Project in Bong and Nimba Counties. The training major innovation is the intentional preparation and implementation of PTA led outreach to Traditional Leaders, a kind of "action learning" through which PTAs and Traditional Leaders engage in a dialogue that deepens their understanding and begins the process of working together for a common good of all. The targeted audience trained is PTA leadership. Although there are seven designated leadership positions in the PTA structure, the recommended number of participants per PTA is five: chairs, co-chairs, secretaries, treasurers and advisors who successfully received the training. PTA members were trained to promote PTA meetings and action plans at least 3 examples from good teaching practices, including classroom management, teacher effectiveness, school management and appropriate relationships among parents, teachers and students. PTAs developed a 3-month list of possible activities that PTAs might undertake in alignment with ERDI sponsorship to students and support to PTAs' works; they Planned least 3 activities that will help parents understand eligibility for ERDI sponsorship and how children are placed and promoted on the program. They were able to prepare presentation and discussion plans to engage Traditional Leaders in promoting ERDI sponsorship and how to engage other partners. PTA understood themselves during the training as an **autonomous body**, mostly controlled by parents, that does not form part of the school administration but collaborate with the school leadership, community members and other stakeholders to address school-related bottlenecks and to improve school conditions that ensures a conducive, safe, student-friendly, and gender-sensitive teaching/learning environment.

- **Annual Output - 3: In-kind Supported towards Home-Grown School Feeding Program.**

ERDI provided in-kind support towards Home-Grown School Feeding program in all 7 selected schools in Bong and Nimba Counties. The in-kind support, which includes food, cutlasses, hokes, files etc., was distributed on all 7 PTAs from those selected 7 schools in Bong and Nimba Counties.

The planned activities in support towards Home-Grown School Feeding program in all 7 selected schools in Bong and Nimba Counties, looking at some of the report from those PTAs works, ERDI chip in based on budget specific to support their various approaches designed to develop workable interventions in terms of keeping school going children in schools in the communities as another means of addressing food insecurity. Research have proven since during and after the Civil War in Liberia that, school going children are likely to remain in school food are provided regularly to kids.

- **Annual Output - 4: Supported Selected Neediest Vulnerable Students.**

Again, we want to be very grateful to AWC/YCI/OPM for their magnificent support in helping us to provide support for selected neediest 25 vulnerable students in Bong and Nimba Counties. Those neediest vulnerable and marginalized students have sustainable access to tuition fees and academic materials to stay in school. The Program and MEL teams designed Vulnerable Students Selection criteria to fairly identify the neediest vulnerable students from the already selected communities in both counties that were duly approved by the ERDI management team, the Board and the AWC/YCI/OPM Country Representative, Mr. Benedict Seekey. To smoothly implement the designed vulnerable student's selection criteria, the Program and MEL teams of ERDI engaged in each selected community and set up the Vulnerable Students Selection Committee with the involvement of all sectors at the community level. To show the inclusively of all sectors on the committee, the community leader, women's leader, youth leader, quarter chiefs, disable representative, chief elder, PTA chairperson, School's Principal and minority tribe representative. The 9 men committee members were drawn to create fair play in the identification and listing of the neediest vulnerable students in the community while ERDI selected the needed numbers of students from the identified lists by using the "Random Number Generator" which processes was explained and share with AWC/YCI and the Country Representative. Based on the baseline conducted by ERDI report, vulnerability is defined as; children who parents are not alive/orphan and lacking support, children who are living with disabilities without support, children who parents are not economically potent to support them in school, children who are struggling to support themselves etc. were those listed from the community and presented to ERDI for final random number generator selection and to launch advocacy campaign for those not selected by ERDI which part of the committees' mandates when established. The committees were asked to at the community level engage with selected students' parents/guardians and the school administration to make sure the selected students are regularly attending classes and improving in their learnings.

**In the student selection processes the following were defined as follows:**

Registration for child sponsorship: Aligns with the programming priorities and target groups. This will help to ensure that the neediest children are participating and benefitting from the project activities. The geographic areas are defined: Children must only be selected for sponsorship in areas where there are project activities that they can point to and say, this has helped me.' The primary focus areas

for the program activities, considering the high saturation of vulnerabilities of children in these areas. Considering timing: It is also important for ERDI to consider the timing of project activities. For instance, if a certain group of children will not benefit from any of the activities in the first Academic Year, then they should not be added for benefit. Only select vulnerable children from areas where activities are going to take place in the immediate future. When the program expands to begin activity in other areas, then children may be selected from other areas if need be.

### **Vulnerable Child Selection as ERDI's Community Process:**

Research has shown that high levels of community ownership of child sponsorship led to better integration of sponsorship and long-term development, and therefore better development outcomes.

**Strengthen community ownership:** When community members own the child selection process, it is their program. It will empower the community in their relationship with ERDI and Donor (AWC/YCI/OPM). It will help protect children and families from feelings of unfairness, jealousy, and promote transparency. Community members will begin to get to know the children and their families very well. It will build the foundation for future community involvement in sponsorship activities.

**It will be used as a community tool to focus on vulnerable children:** Discussions about child selection create opportunities to reflect on vulnerability and inclusion in their society (especially including the most vulnerable). Selection and monitoring will be used as a community tool to bring focus on the most vulnerable children, to continually learn about gaps in reaching all the vulnerable children in the community. ERDI and community groups select children to monitor so they can track their own progress in improving the lives of the vulnerable and neediest children.

### **Annual Output – 5: Established / Reactivated School Health Clubs.**

ERDI is grateful to Mrs. Jocee M. Tuazama, a health practitioner and ERDI program Manager who facilitated the School Health Clubs training in both Nimba and Bong Counties. The entire selected schools never had School Health Clubs established. It was the first time they had undergone such training, admitted by their mentors, health teachers, who attended the training along with the selected club members in both counties. School Health Club was presented as a voluntary club formed and managed by students and teachers to promote good health practices and behavior change in the school and the surrounding communities. It typically comprises 20-35 students and 1-2 teachers. The structure is headed by the school health committee, which is a working committee of the School Management Committee (SMC). The aim of the training was to form and strengthen School Health Clubs to promote and maintain behavioral change towards good hygiene practices and proper use and maintenance of hygiene and sanitation facilities in schools. As children are more receptive to new ideas and practices, introducing health knowledge and habits at a young age will help to enable good reduction of water and sanitation related diseases. In addition, children can be catalysts for positive change in their household and community. School children tend to be practically involved and not only be taught about water, sanitation and hygiene issues but can be powerful advocates for change within their peers and their surroundings. These interventions are not limited to schools but can also target the surrounding community.

### **Annual Output – 6: Mentored and Technically Supported the School Health Clubs.**

In October 2024, ERDI provided mentorship for 7 teachers that participated in the training with the School Health Club members on their roles and responsibilities as mentors. Teachers/Mentors play a supporting role in mentoring children to always put WASH interests first. Teachers were trained, as they were trained along with the club members have effectively guided the club members in the development of their school health club work plans and action initiatives, both within the school and outside the school.

The mentors were trained to mentor school health club members in best WASH practices and engage in advocacy for improve services and WASH facilities at their schools and campuses. To motivate the students to avoid bad WASH hygiene behavior and adopt those good ones. To influence WASH behavior of surrounding communities through outreach activities.

**The training provided helps them to conduct the following activities as a starting procedure:**

**Baseline:** This includes an assessment of how the school's water supply, sanitation and hygiene activities are organized.

**Formation:** In several schools where a type of basic School Health Club is present already, however many SHC's will be assessed as not very active or effective in improving the WASH situation at the school and surrounding communities.

**Capacitating Teachers:** Members of school management, club patrons, and senior women and men teachers were trained to effectively guide the members in the SHC on best hygiene practices.

**Planning:** The leaders then set the activity agenda for the SHC with guidance from the club patrons (mostly a male and female teacher) and consultation of the club members.

**Activities:** School Health Clubs members will undertake the following actions to achieve sustainable WASH activities in school. Regular WASH-related meetings to discuss WASH needs in the school.

**Engage in the sustainability discussion, WASH and Innovating:** Sustainable WASH services in schools and surrounding communities. Be involved in cost recovery planning together with teachers, parents and the community to preserve the WASH investments made in school and set up and grow the WASH fund.

**Evaluating / assessing progress:** Identify a set time and date for School Health Clubs to have meetings to review their activities and plan for the next course of action. In these meetings updates are shared per class, and the general club leadership which brings all members together to reflect on their performance and ongoing activities as well as new ones.

**Lessons:** Active School Health Clubs are good at mobilizing children and communities into adopting good WASH practices including anal cleansing, handwashing, Menstrual Health and managing the safe water chain for safe water consumption.

**Conclusion:** School Health Club initiatives provide continue support to children and prove that they are agents of change and have the capacity to transform their school and communities by advocating for good WASH practices as they also practice them.

## **Annual Output – 7: Produced and Aired Behavior Change Communication (BCC) Materials.**

ERDI also worked towards the development, production and airing of Behavior Change Communication materials. Behavior Change Communication (BCC) materials were produced and aired on teenage pregnancy, reproductive health, birth control, reproductive health rights, infant mortality, menstrual cycle, prevention and care of menstruation, WASH for menstruation, early child marriage, family planning, drugs and youth, youth and violence.

ERDI contracted four radio stations, two in each county for airing Behavior Change Communication (BCC) jingles as mentioned above 4 times a week in Bong and Nimba Counties.

- Annual Output – 8: Advanced Data Collection and Analysis Training for ERDI Team.**

ERDI hired Mr. Newton U.Toe who conducted data collection and analysis using mainly excel and somewhat STATA training for ERDI's program and MEL teams. Based on the training provided by Mr. Newton U. Toe, our MEL team fully collaborated with him to conduct the four pillars baseline survey in Bong and Nimba Counties and drafted the final report using our data collection platform (SurveyCTO). The conduct of the enumerators training for the survey was led by Mr. Aaron S. Garziah (our employed MEL Focal Person) along with 9 ERDI's staff who served as Enumerators/data collectors. The baseline survey was conducted through an online platform known as SurveyCTO set up by a consultant known as Mr. Newton U. Toe and our MEL Focal Person. SurveyCTO is an online research platform used for research purposes by the World Bank, UN organizations, and others for developing countries. Mr. Newton Toe is an experienced researcher who has over 16 years of work expertise in the sector working with the World Bank, FAO, Khana Group, Innovative Poverty Action, etc along with our MEL Focal Person with huge expertise in data collection with the World Bank, FAO, Khana Group, Innovative Poverty Action, University of Michigan, Chicago University, Princeton University, Yale and Columbia Universities etc. The survey was conducted with 200 respondents from rural communities in Bong and Nimba counties. The survey questionnaire was administered through smart phones including 2 tablets provided with funding from AWC/YCI's seed grant to ERDI. The research platform was set up for ERDI with the MEL Focal Person, Daniel Nya Gboe, Benedict Seekie, Maela Durrien, and Veronica Fletcher all added to witness the input of data to server in real time. The conduct of the survey exposed several challenges faced by our citizens and communities in various sectors of Liberia that need interventions.

This baseline data collection with the full involvement of our MEL team assessed community dwellers from 4 districts, 7 clans and 18 communities in Nimba and Bong Counties. The study explores stakeholders and community dwellers in identifying some key roots causes of problems at community level. To understand and identify problems for finding solutions, the study used quantitative research methods to capture their current knowledge, experience (based on self-assessment) and the importance they place on different thematic program areas, and to understand what the best and most efficient programs are for interventions. A total of 200 respondents were selected in 4 districts in the two counties, reflecting the geographical locations of the groups across the two counties. A total of 200 respondents were interviewed (in Nimba and Bong in those selected communities).

The findings revealed the total of 68% respondents described vulnerability for the neediest children as "children who parents are not alive/orphans" while 56% and 26% described vulnerabilities as "children who parents don't have money to send them to school and children living with disabilities" respectively are the neediest in the communities. Children who are said to be supporting themselves stand out at 28%.

97.8% of respondents said malaria is their major health problem in their communities. While 80.4%, 32.6% and 30.4% of respondents said running stomach/diarrhea, fever and typhoid respectively are their health problems. Teenage pregnancy in the two counties is 28% while reasons given for the high levels of teenage pregnancy were 47.6% no parental support, 26.2% lack of information on sexual and reproductive health messages and 14.3% parents not alive/orphans, 42.9% social pressure from community, 47.6% children don't listen to their parents. About 98% of respondents reported having community Health Volunteers, 90% with established Community Health Committees with 80% established Health Facility Development Committees.

Results showed that only 20% of respondents are on land committees in their communities. 80% of respondents reported not servicing on land committees out of a total of 49 respondents interviewed. 35% of respondents shared land with documents while 61.2% of respondents, youth and women are involved into land matters. 41.2% have a tribal certificate for land, 35.3 with land deeds while land purchased receipts and other documents showed at 23.5%. Out of the 15 respondents, 66.7% didn't show documents because it was not around, 26.7% documents were with their partners while only 6.7% showed documents to our enumerator during data collections.

There were 51 respondents talking to regarding Rule of law and Access to Justice as one of the pillars for interventions. A total of 56 cases of sexual gender-based violence (SGBV) were reported in the last three months. Rape, Gender-Based Violence (GBV) and Sexual Gender-Based Violence (SGBV) cases witnessed or heard about in those selected communities responded 51% Yes and 49% responded No. Bong responded 41.2% while Nimba responded 58.8% of total 51 respondents from both counties. The result for the outcome of SGBV based on steps taken have been 65% victims taken for treatment, 12% perpetrators sent to jail, 23% nothing were done and other reasons. Opinions on actions taken were reported 96% correct and 4% not correct. Results shows that 8% drugs reason for rape/GBV/SGBV, 32% drugs-alcohol, 24% poverty, 68% breakdown of rule of laws while they have reported 64% of the cases to the Town Chief/community Leader, 36% reported to Liberia National Police and only 4% of those cases was reported to the Magisterial court, while 4% was also reported to the District Commissioner and 40% of those cases were reported to family members for home settlement.

The detailed baseline survey on these program pillars provided a comprehensive understanding of the current situation, challenges, and opportunities within each area, serving as a foundation for program design, monitoring, and evaluation. By gathering data on key indicators, stakeholders' perspectives, and local contexts, the survey informed evidence-based strategies to address the root causes of issues and promote sustainable development outcomes. ***See attached baseline survey final report.***

- **Annual Output – 9: Baseline Survey Conducted on the Strategic Plan four pillars.**

Again, with support from All We Can/Y-Care International/OPM, ERDI successfully conducted baseline survey on her designed four pillars which includes Education, Health Education, Land Rights and Rule

of law and Access to Justices are key sectors in Liberia's growth and provides an important source of poverty reduction to around 2.5 million rural dwellers, most of which are in rural parts of Liberia.

This study assesses community dwellers, which aims to address many challenges at community levels to serve as empowerment of poor people in targeted areas in Bong and Nimba Counties. The study explored interventions strategies in all thematic program areas. The report contains recommendations on the topics in which respondents expressed the need for interventions and improvements. The findings which are used by ERDI and its partners have developed effective interventions programs and an associated Quality Indicator System.

**Location, Survey instrument and data collection:** The research/study was conducted in two counties in Liberia where the four pillars project is operating, namely Bong and Nimba, in collaboration with town authorities. The study population comprised respondents from 18 selected communities in four districts in the counties, those who were in the pipeline to receive the program/intervention. The research used a quantitative method, with males, females, youth, and key informants at community level.

For the survey, data was collected through in person interviews with respondents, at selected communities/towns in the two counties (e.g. Baila, Naii or Zuluyee, Tuudin etc.), based on a structured questionnaire. The questionnaire was implemented with 12/10 respondents from a selected community in Nimba and Bong respectfully, with one or more assigned enumerators. All participants were community dwellers facing those challenges at the community level. Respondents gave oral consent to participate in the study after they heard a brief explanation of the study's objectives. The Survey respondents were assured of confidentiality of their identities and responses, as well as the voluntary nature of the interviews.

A total of 200 respondents were selected from over 10,000 community dwellers in 4 districts in the two counties, reflecting the geographical distribution of the groups across the two counties. From each community, a sampling technique was used to select 12/10 respondents from each community to participate in the survey, giving a total of 200 respondents. A cross-sectional sample of this size was representative of the total population of all the selected communities and allows conclusions to be drawn about the entire population.

The findings reveal that the interventions designed by ERDI for the four pillars in the two counties under study are generally high, suggesting a need for robust approaches in addressing the needs for most vulnerable and neediest populations. The study also found that respondents lack many basic needed services and appreciate approaches in addressing their needs at community level. Meanwhile, they self-assess their knowledge and experience in most of the thematic project areas as low and the importance in addressing those challenges. There may be several reasons for these patterns of responses. Firstly, many respondents had received little awareness in those thematic program areas or the awareness they received was of very low quality (as expressed during data collections), hence the strong belief in the need for more advocacy and awareness. Secondly, respondents may have scored their own knowledge and experience in most areas as low and the importance as high under the assumption that this will lead to more benefits. In probing for details, most respondents stated they were not receiving those services needed or accepting them because of cultural belief in communities. As a result, some of those believe that they tend to endanger their health, and some points marginalize them from actively participating in handling their rights.

The study also showed that respondents are unaware of several issues that can have positive contribution on their lives (they do not know what they do not know), such as the national health policy, education acts, land rights policy, and an established criminal court E for adjudication of rape and other domestic

violence cases in all counties in Liberia. Behavior change communication (BCC) are also processes, although respondents are sometimes reluctant to adopt successful practices when they have been done with significant support from a project.

**Based on the findings of the study, the following recommendations are suggested:** Providing Education to the neediest groups should be prioritized across all sectors, particularly with marginalized groups to enhance learning opportunities and outcomes for underserved communities. The baseline survey assessed current levels of access to quality education, resources, enrollment, and completion rates. It also explored challenges faced by communities in accessing quality education and potential areas of improvement, such as infrastructure development and schools' management system levels with the involvement of parents/guardians.

Respondents would benefit from exposure to new technologies and practices that are being tested/used by other respondents with similar health literacy and preventive healthcare practices among communities. The baseline survey investigated existing knowledge about common health issues, access to healthcare services, prevalence of diseases, and health-seeking behaviors. It identified gaps in health education and potential strategies to address them, including awareness campaigns, training programs, and community health initiatives.

Land Rights as a thematic program area aims to promote customary land rights for marginalized populations, the baseline survey assessed land ownership patterns, and legal awareness regarding land rights for youth and women. It identified opportunities for legal support, advocacy, and policy reform.

Access to Justice pillar strives to ensure equal access to legal services and fair treatment under the law. The baseline survey evaluated awareness of legal rights, availability of legal aid, trust in the justice system and barriers to accessing justice, experiences with dispute resolution mechanisms, needs for legal empowerment programs, advocacy efforts, and institutional reforms.

In conclusion from the findings, the baseline survey emphasizes the critical need for interventions in Education, Health Education, Land Rights, and Access to Justice programs in Liberia to address existing challenges and improve the well-being of the targeted communities. Monitoring and evaluation of key performance indicators are essential in tracking progress and ensuring the effectiveness of the programs over time.

- Annual Output – 10: Trained needy Small Holder Farmers.**

ERDI's Agriculture consultant, Mr. Emmanuel Titaye conducted training for needy Small Holder Farmers in Nimba. Those farmers were trained in various agricultural extensions methodologies. The training provided by the hired consultant focused on pest and disease management which were prioritized across all sectors, particularly considering changes in climate, which may contribute to different manifestations of pests and diseases. Training in the use of fertilizer for rice cultivation. In the area of livestock, he trained both women and men in small livestock rearing.

Farmers benefited from exposure to new technologies and practices that are being tested/used by other farmers with similar physical conditions from other districts or counties.

Agricultural extension services sub-topic used to train farmers emphasized practical training and observation rather than theoretical training. He used graphical material with limited text to lecture. He later organized a reflection session in follow-up to initial practical training which helped to ensure that new learning was properly absorbed by farmers.

Farmers were keen to learn from each other's workable experiences but required tools to do so. Farmer to farmer training was encouraged among them during the training to be facilitated to ensure there is a proper exchange of accurate information among them.

Training was more appropriate because it was delivered to farmers early in the rainy season, they immediately put their new knowledge into practice on ERDI's farm. Training times and frequency were announced also be adjusted so that farmers receive training for an average of one or two hours once a week, immediately before lunch.

Agricultural extension services were strengthened by the trainer from obtaining feedback from farmers using different methods and responding to that feedback to ensure that the services were tailored to the needs of farmers and that farmers are comfortable and satisfied with the type and quality of training they received from him.

Regular field surveys to assess and monitor changes in the agricultural training needs of farmers were recommended to ERDI by the trainer.

Making sure childcare facilities are available during trainings would help to ensure higher participation from women but were not the case during the training. Lessons were learned from experiences in other agricultural training sites attended by some participants and the trainer where village elder women were said to provide care for children whilst women attended training.

- Annual Output – 11: Printing and Distribution of Information Education Communication (IEC) Materials.**

ERDI printed and Distributed Information Education Communication (IEC) Materials in the selected project communities and other urban cities like, Ganta, Sanniquellie, Saclepea, Tappita, Gbarnga etc. the IEC materials printed were stickers, flyers, billboards etc.

Those Information Education Communication (IEC) Materials carried messages on teenage pregnancy, family planning, HIV/AIDs, communicable diseases, Gender Based Violence (GBV), Sexual Gender Based Violence (SGBV), infant Mortality, reproductive health rights and control, early marriage, youth violence and drugs etc. Those stickers and flyers are placed in public places in cities, towns and villages in Bong and Nimba counties.

#### **Lessons Learnt:**

During the period under review, we learned the following lessons.

- During the planning for baseline survey, ERDI overloaded some activities for the conduct of the baseline survey. We further negotiated with our consultants and other services providers to work within what was approved by AWCYCI which caused weeks or so delayed commencing data collection.
- Active School Health Clubs are good at mobilizing children and communities into adopting good WASH practices including anal cleansing, handwashing, Menstrual Health and managing the safe water chain for safe water consumption.
- School Health Clubs activities that engaged other students and teachers are allowed for the continuity of the clubs even when teachers are transferred.
- Active School Health Clubs ensure proper maintenance of WASH facilities and participate in cost recovery to ensure the operation and maintenance costs are covered.

- Schools with active School Health Clubs observe a routine schedule of good WASH practices not just by club members but all Students and communities.
- Active School Health Clubs are health resource units that can be utilized by local government to undertake campaigns for good WASH practices.
- Active and involved PTA could timely improve learning quality on campus if involved with regular monitoring of classes weekly with different days schedules weekly.
- We also learned that some of the small holder farmers that participated in the small holder farmers training expressed their interest in working on ERDI's farms on a contractual basis.

### **Challenges / Mitigation:**

During the period under review, there were not numerous challenges observed while implementing planned activities. A few of the challenges observed and their mitigations are as follows:

- Most of the costs mentioned in the budget for goods and services were based on market value but at the time of implementation, some of the consultants and other service providers became hesitant to accept the amount. We had to engage them into further negotiations and even tapped up some of the amount before we had some of the activities done.
- The number of data collectors recruited was not budgeted for in our 2024 budget. Based on the expertise of both the consultant and the MEL team leader, we negotiated with enumerators at various points during data collection to complete the baseline survey data collection.

### **Recommendation:**

Based on our experience over the last 12 months of the project's implementation, these are forwarded recommendations which will be considered by ERDI during the 2025 program period.

- That ERDI should consider creating a budget line for hiring consultants from the Ministry of Health for the timely production of IEC materials.
- That ERDI should conduct refresher training and mentorship for both PTAs and the established School Health Clubs.
- That ERDI should continue with the recruitment process of additional 25 students next academic year, 2025-2026 in both Nimba and Bong counties as the means of gradually meeting its target of 100 vulnerable students by 2027-2028 academic.
- That ERDI to fully transition from paper to digital data collection by interchangeably using SurveyCTO larger data collection and Kobo Collect for all projects events, monthly or quarterly data reporting platforms and should be costed M&E activities.
- Proper planning will be done to ensure that activities budgeted are cost effective based on the package received from AWC/YCI/OPM for 2025 and adjust appropriately when necessary.

## Photo Gallery:



**Figure 1: Setting up the neediest vulnerable students' selection committee in Buise & Dingamon Towns involving all sectors as identified by the recruitment criteria.**



**Figure 2: During mentoring leadership of PTAs on Home-Grown School Feeding and training of PTAs on Classroom monitoring, roles and responsibilities at Passion Guest House Conference in Ganta City, Nimba County.**



**Figure 3: During tuition payment and distribution of selected vulnerable students school materials by Mr. Gary K. Dolosie, ERDI Finance Manager.**



**Figure 4: During the establishment, training and mentoring of School Health Clubs and teachers in Nimba and Bong Counties respectively.**



**Figure 5: Field data collection during the Baseline Survey on the four ERDI's pillars for an informed interventions program design.**



**Figure 6: During the practical sections of the Small Holder Farmers training by ERDI's Agriculture consultant, Mr. Emmanuel Titaye on ERDI's Farm in Kpein Town, Nimba County-Liberia.**

#### **List of Attachments:**

**The following documents are attached to this annual report.**

- **Annual Financial Report**
- **Baseline Survey Final Report**
- **Closing Bank Statement**