

1. Brief overview of the project

1.1 Project title

Digitally supported community engagement for gender equality and social development

1.2 Partner organisation in Germany

Health Information Technology for Africa e.V. (HITA)

1.3 Project location: country, place

Ghana, Volta Region, Adaklu District

1.4 Target group(s)

- Adolescents - girls of childbearing age;
- Adolescents – boys;
- Mothers in households with underage children;
- Fathers in households with underage children

1.5 Durchführungszeitraum / Implementation period (from to)

from: 01.02.2021

until: 31.12.2021

1.6 Short description of the project

Adaklu District, the location of the proposed project, is one of the most deprived parts of Ghana. Poverty is endemic as a result of economic hardship with many people relying on subsistence agriculture to sustain livelihood. Rates of maternal and newborn mortality are significantly above the national average, as are numbers of teenage pregnancies. Against this background, HITAs on-site partner organisation, Grow Your Dream Foundation (GYDF), focuses on gender equality and its role for social development. It operates so-called Fathers, Mothers and Adolescent Clubs in several Adaklu villages in which any interested community member is invited to join in a discussion of gender roles, the distribution of responsibilities between men and women, and how to overcome traditional constraints keeping women from fully participating in social development. Other topics include sexual and reproductive health; novel ways of income generation; women's access to micro-credits; and lately also COVID-19. The proposed project is for an enhancement of these activities using a train-the-trainer programme and exploiting the potential of digital tools for improving effectiveness and cost-efficiency. Within one year, the project will engage with at least 5 further villages to set up Clubs. Club Leaders from all 10 communities will be provided with well-targeted training, with a view to empowering participants to take a pro-active role in boosting gender equality and social development within their community. The monthly Club meetings will be made more effective by use of print-outs and other printed materials and of materials in digital format stored on a tablet. Groups will be set up on online social networks (e.g. Whatsapp) to allow Club Leaders to use their own smartphones to connect with each other. An impact assessment will be carried out using focus group discussions, complemented where appropriate by questionnaire interviews. The project will

provide the ground for the subsequent roll-out of Mothers, Fathers and Adolescent Clubs across the entire Adaklu District.

1.7 Contact persons in Germany

- Karsten Gareis, Board member, HITA e.V.,
- Thomas Erkert, Founder and Head of Board, HITA e.V.

2. Brief information on the implementing organisation

2.1 Name, address, country, website address, contact person

Grow Your Dream Foundation (GYDF), c/o Helekpe Junior Highschool, Adaklu-Helekpe, Volta Region, Ghana, www.growyourdreamghana.org, Mr. Jacob Ahiave

2.2 Focus of work and organisational goals

GYDF's work focuses on addressing challenges related to gender equality, health education and rural social development. It operates in Adaklu District, a part of rural Ghana that is particularly affected by poverty and below-average performance on health outcomes indicators, such as maternal and newborn mortality rates. The GYDF team firmly believes, based on international best practice in rural development, that empowerment especially of women and girls can open up promising new opportunities for backward communities to fully participate in social and economic development. This often requires overcoming traditional gender norms and tackling the roots of endemic problems such as adolescent pregnancies and violence against women.

GYDF approaches the challenge by using community engagement techniques which have proven to work well in the Ghanaian rural context. Communities are approached by GYDF team members with the invitation to share their concerns, problems and difficulties, for which "safe environments" are set up to allow for a high level of trust and some degree of freedom from social constraints. The latter may require splitting groups according to gender and/or age/seniority.

The overall goals of GYDF are to contribute substantially to rural social development in Adaklu District, and possibly also in other deprived parts of Ghana, by engaging communities in an ongoing process of:

- questioning traditional gender roles;
- identifying novel ways for letting all members of society fully contribute to development;
- enabling all, including the poorest members of the population, to gain full access to health and education.

The GYDF website (in English language) is at <http://growyourdreamghana.org/>.

2.3 Organisationsform / Rechtsform / Form of organisation / legal form

Registered Foundation (Reg No CG050092020, TIN C0047432918)

2.4 Date of foundation

24 July, 2020

2.5 Previous experience in project work

GYDF has been operating across the Adaklu District since early 2017 (then still working under the name “DreamsAlive” – during the process of incorporation, it turned out that this name had already been taken by another organisation, hence the change to GYDF). Activities have consisted mainly of setting up and operating Fathers Clubs, Mothers Clubs and Adolescent Clubs (sometimes split by gender) in five Adaklu communities: Ahunda Kpodzi, Waya, Torda, Kpodzi and Gbagbadeve. Each such group consists of about 15 members and meets once a month, with at least one GYDF team member being present to guide proceedings.

After the onset of the COVID-19 pandemic in Ghana (including the Volta Region) in April 2020, GYDF conducted awareness raising sessions in several communities across Adaklu. They consisted of informing residents about adequate behaviour to fight spread of the disease, based on the protocols issued by the Ghana government and the Ghana Health Service (GHS). Special attention was paid to counteract the spread of misinformation about COVID-19 (such as the myth that black people are immune to the disease), about which there has been substantial anecdotal evidence both in Ghana in general and in Adaklu District in particular. Practical advice given has included the need to frequently wash hands with running water and soap. Since only small parts of Adaklu District are connected to a piped water network, however, hand washing poses a challenge. Commercial suppliers offer so-called Veronica Buckets, which consist of a stand which holds a plastic bucket, towel and soap, and a washbasin placed below the tap to collect the used water. Where purchasing a readymade Veronica Bucket is out of question because of its price, GYDF has recommended to fix a tap to a used canister and placing it on a fence or branch fork. Such practical advice is much welcomed by the rural population.

2.6 Relationship to the target group

Through its visits in villages across Adaklu and the pilot-establishment of Mothers, Fathers and Girls’ Clubs in five villages and its visits to many other communities across the territory, GYDF has developed close relationships with a large number of communities, including the village elders (Chiefs and Chief Wives). All GYDF team members are themselves residents of the region and as such interact with community members on day-to-day basis. For example, GYDF co-founder Agamah Johnson Kofi is Junior Highschool Teacher and as such discusses frequently with parents of children growing up under difficult conditions.

2.7 Child protection policy

GYDF’s children protection policy is available at http://growyourdreamghana.org/wp-content/uploads/2020/12/GYDF_Child-Protection-Policy_final.pdf

2.8 Common experiences of German organisation and GYDF

HITA first came in contact with the team behind GYDF in the context of the enstoolment of HITA Director Thomas Erkert as Development Chief of Adaklu-Hasu in mid-2018. At this opportunity first plans were discussed to collaborate on activities, in particular, for using mobile telephony (smartphone features, social networking) to support awareness-raising and community engagement around health-related topics.

GYDF and HITA joined forces with Togbe Lablulu, traditional Chief of Adaklu-Waya and one of the most respected elders in the whole of Adaklu, to distribute 80 school bags and tools to girls from particularly vulnerable backgrounds. The work consisted of: selection of girls at school age who would need material support to benefit fully from school education; organisation of the hand-over in

collaboration with Togbe Lablulu, media representatives, local stakeholders (school principals, church leaders, hospitals); documentation of the ceremony in a range of formats. The handover ceremony took place in January 2020. For more information see the HITA website¹ and the GYDF website².

In early summer 2020, HITA and GYDF cooperated in sourcing and distributing face masks to school children at several public schools across Adaklu. Masks were manufactured locally. The hand-over was used as an opportunity to discuss with children about adequate behaviour to fight the disease, and to counteract the spread of myths and misinformation about COVID-19.³

HITA and GYDF also collaborated in 2020 (together with Ghana Universities UHAS and UDS and University Edinburgh in the UK) in the context of an application to an UK funding programme for projects dealing with the COVID-19 pandemic in low and middle income countries (LMICs) – evaluation results are expected late in 2020.

3. Project description

3.1 Description of the initial situation on site, problem analysis

ADAKLU District is one of the 18 Districts making up the Volta Region at the eastern border of Ghana. Its capital village (Waya) is located a 4-5 hour drive away from Accra, Ghana's capital. Adaklu District has a population of 44,300 (latest Ghana Statistical Service estimate), nearly all of whom are of Christian religion. The large majority (~90%) of the workforce in the District are engaged in the agricultural sector. Adaklu District is one of the most deprived in the country. The 2015 Ghana Poverty Mapping Project⁴ published by the Ghana Statistical Service found the incidence of poverty, i.e. the proportion of the District's population living below the national poverty line, to be by far the highest (89.7%) in the Volta Region (average: 33.3%) and the second highest in the whole country. Poverty in Adaklu is not only widespread but also severe: According to the indicator "depth of poverty", which measures how much below the poverty line the poor's standard of living is on average, Adaklu shows the 3rd worst performance of Ghana's 216 Districts. As opposed to some of the other poor parts of Ghana, however, inequality in Adaklu District is very low – lower than in any other District of the Volta Region.

From the perspective of gender equality, the level of poverty experienced in Adaklu has several implications. Women across Adaklu face severe challenges to cope with everyday demands. On top of their role within the household, they often help their husbands in petty trading, farming and handicraft to help make ends meet. However, they are constrained in this role because of inadequate financial, managerial and marketing skills as well as limited power to take decisions vis-à-vis the head of the household (husband or father) and community.

¹ <https://www.hita-ev.org/wp-content/uploads/2019/12/TRIP-REPORT-Draft2.2-mit-Fotos.pdf>

² <http://growyourdreamghana.org/empowering-adaklus-girls>

³ See <http://growyourdreamghana.org/helping-adaklu-schoolkids-protect-against-covid-19> for a report.

⁴ <http://www2.statsghana.gov.gh/docfiles/publications/POVERTY%20MAP%20FOR%20GHANA-05102015.pdf>

Ghana and Volta Region



Volta Region and Adaklu District



An issue of particular concern in Adaklu is the high incidence of teenage pregnancies – not only because of health-related complications of teen motherhood, but also because of the associated educational loss: “The concern about pregnancy, motherhood and schooling, as we have noted earlier is the impact on female life chances. Literature contends that lower levels of educational attainment are strongly associated with a higher teen parenthood as well as poorer long-term life outcomes. The state of pregnancy makes school attendance a challenge and further dampens educational aspiration.” (Britwum et al, 2017)⁵. According to the 2014 Ghana Demographic Health Survey, the Volta Region has the highest rate of teenage pregnancy⁶ of all Regions of Ghana (18.0%, against a national average of 11.3%). Within the Volta Region, Adaklu District has the fourth highest rate of teen pregnancy, estimated at 18.6% (2017) according to the Volta Region Annual Report 2017. These figures clearly show the size of the challenge; they also suggest that innovative approaches to tackle the problem are much in need.

Challenges have been exacerbated by the COVID-19 pandemic, which in spite of low numbers of confirmed infections in the Adaklu Region has had far-reaching implications even in rural Ghana. Especially during the first lockdown declared in some regions in April 2020, experts frequently warned about expected increases in domestic violence due to families spending more time at home, although most incidences would usually go unreported⁷. Furthermore, the COVID-19 pandemic has brought a disruption to economic activities, especially affecting the self-employed who have often been forced to temporarily shut down. The interruption of sources of income has placed both

⁵ Britwum, A. O., Akorsu, A. D., Agbesinyale. P.K., Aikins, K.S. (2017) ‘Case Study on Girls Who Have Dropped out of School Due to Pregnancy and Factors Facilitating and/or Preventing Their Re-entry into School After Delivery – a Research Report’, Institute for Development Studies, University of Cape Coast, Ghana, URL: <https://www.unicef.org/ghana/media/1361/file/UN263291.pdf>

⁶ Defined as percentage of women age 15-19 who have had a live birth. Note that terminated pregnancies and miscarriages are not included in the figure.

⁷ https://ghana.un.org/sites/default/files/2020-04/COVID-19_UN%20Ghana%20Briefing%20Notes_No.2_2020_04_14.pdf

financial and psychological burden on breadwinners, who are mostly men. This may also translate to heightened tension leading to violence.

Against this background, GYDF has embarked on a range of activities with the objective to contribute to social development across Adaklu by means of community engagement, training, awareness-raising and material support for the most vulnerable subgroups of the population. Notably, three types of Clubs have been set up in five Adaklu communities (Ahunda Kpodzi, Waya, Torda, Kpodzi and Gbagbadeve):

- **Fathers Clubs** – Topics include: Gender equality as reflected in distribution of household responsibilities, sexual harassment and violence against women; critical reflection about rigid norms related to manhood; improvements in couple communication and attitudes around caregiving and parenting; fathers' responsibility in antenatal and postnatal care; why overcoming stereotypical roles associated with gender has been found to benefit not only women but also men and the community at large.
- **Mothers Clubs** – Topics include: Issues of gender equality as perceived by women; improvements in couple communication and attitudes around caregiving and parenting; health education and guidance, e.g. concerning maternal and newborn health as well as sexual and reproductive health; family planning; alternative routes to income generation depending on women taking a stronger role in household decision-making (rural entrepreneurship); community service & loans associations as a means to give women access to microcredit.
- **Adolescent Clubs** (also sometimes split by gender, depending on issues to be discussed). Topics include: Sexual and reproductive health including HIV / Aids; teenage pregnancies and why they need to be avoided; family planning; gender roles and gender equality; access to education and options available.

Each such group consists of about 15-25 members and meets once a month, with at least one GYDF team member being present to guide proceedings. Depending on the issues to be discussed, specialist staff are brought in to participate in Club meetings to give specialist advice. For example, community health nurses (CHNs) – who are employed by the Ghana Health Service and operate from a regional health centre or a CHPS compound, Ghana's community level health posts providing basic services for people in remote rural areas – are invited to participate in Club meetings on topics such as family planning, sexual and reproductive health, maternal and newborn health.

Meetings have been documented using photographs and video, where permitted by participants. Since the onset of the pandemic in March/April 2020, several Club meetings have been devoted to issues concerning COVID-19 and how to deal in practice with the measures taken by governments and the national health system.

The experience so far with Mothers, Fathers and Adolescent Clubs suggests the feasibility of and the added value provided by the approach, while also indicating some ways in which the initiative could be made more effective and self-sustainable. The latter include:

- While each Club has a Club Leader (selected by the group or elders during the set-up process), their role could be enhanced by providing them with well-targeted training, thus empowering them to take a stronger role in promoting desirable practices among Club members and others within their communities, and in alerting the GYDF team of any incidences requiring immediate intervention. Moreover, Club Leaders should be enabled to discuss and share experiences with Club Leaders in other communities, for which social networks through smartphones would be the most effective solution.

- Due to lack of access to a computer and printer, GYDF could so far not make use of hand-outs and other printed materials, which could help make training more efficient and increase the reach of the activity beyond the immediate group attending Club meetings. Materials to be used need to take into account of the fact that many rural citizens have limited literacy and English language skills. Pictorial representations and use of the local language (Ewe) rather than English are therefore required.
- The activity would also benefit from being able to use smartphones for interacting with Club members through social media (Facebook and Whatsapp are both very popular in Ghana) and – importantly – for enabling Club members to engage in discussions which each other privately. Smartphone ownership rates are very high in Ghana even amongst poorer parts of the population, and tariffs for use of Whatsapp and Facebook messaging are very low. Most of the Adaklu District territory is covered by the mobile phone network, and much of it also allows mobile Internet access.⁸
- With a view to upscaling, i.e. making Mothers, Fathers and Adolescent Clubs available in more if not all communities in Adaklu District and possibly beyond, it would help to create or, where possible, compile and adapt from existing sources, materials in digital format for easy re-use and distribution through a range of channels (Whatsapp groups, Facebook, Memory cards / SD cards, YouTube, etc.).
- Finally, it would be of great benefit if Club Leaders and other stakeholders could be offered an incentive to strengthen their commitment to the initiative, e.g. a T-shirt through which they could signal their involvement in the project to other members of the community.

In the 11-month project GYDF will implement and gather experience with these suggested enhancements of the current practice. The experience from the up-and-running Clubs in five Adaklu villages shows that all preconditions for executing the proposed project are in place.

3.2 Direct / indirect target group(s)

The main direct, short-term target group is citizens who volunteer to become Club members in 10 Adaklu communities, including the ones already featuring Mothers and Fathers Clubs (Ahunda Kpodzi, Waya, Torda, Kpodzi, Gbagbadeve) as well as five additional villages. The total number of Club members will roughly be as follows:

- Mothers in households with underage children: 75-100
- Fathers in households with underage children: 150-200
- Female adolescents (girls of childbearing age): 75-100
- Male adolescents: 40-50

Priority will be given to include two types of persons: 1) individuals who are known to take the role of an “opinion-leader” within the community; 2) persons from subgroups who are considered particularly vulnerable.

In addition, the project will directly address:

- 2-3 village elders in each of the 10 communities to be covered.

⁸ Ghana has seen rapid extension of the mobile ICT infrastructure in recent years. Ghana the majority of persons at working age already own a smartphone and a mobile subscription including a (low-volume) data plan. This offers huge opportunities for achieving sustained improvements in delivering development related information and guidance to end users in a very resource-efficient way. HITA staff have made excellent experience with mobile telephony as well as mobile Internet connectivity even in remote areas of Adaklu during field trips in spring 2019 and January 2020: multi-party video conferences via Skype presented no problem. HITA and GYDF have also been using Whatsapp extensively for staying in touch since the onset of the COVID-19 pandemic.

Indirectly the project seeks to reach the entire population of the 10 communities, which is estimated at 4,000-5,000. Moreover, the project seeks to develop practices and materials and to establish communication channels which, after the end of the project lifespan, can be used to scale-up and replicate Mothers, Fathers and Adolescent Clubs across the entire territory of Adaklu District (current population: 44,300) and possible beyond. This is the medium-term goal of GYDF and the reasoning behind the present proposal. To this end the project will produce within the project lifespan digital content including manuals, training material, video clips showing examples of best practice, interviews and testimonies, etc.

3.3 Measures and planned activities

Based on the experience from the existing Mothers, Fathers and Adolescents Clubs in 5 communities and the COVID-19 awareness raising work during spring and summer 2020, the project will engage with at least 5 further villages across Adaklu District in order to set up at least one Mothers, Fathers and/or Adolescent Group in each of them. For each Club a Club Leader will be recruited from the local target group. Club Leaders from all 10 communities will be provided with training at two dates during the project lifespan, to take place at a central location and lasting for a full day. Training will be specific to the type of Club (Mothers, Fathers or Adolescent Club) and aimed at empowering participants to take a pro-active role in boosting gender equality and social development within their community. The monthly Club meetings, chaired by the GYDF team, will be made more effective by use of print-outs and other printed materials and of materials in digital format (video clips, audio files, animated infocharts), stored on a tablet. Groups will be set up on online social networks (e.g. Whatsapp, Facebook) to allow Club Leaders to use their own smartphones to connect with each other and share information, views and experiences on topics discussed at Club meetings; discussions will be initiated and moderated by the GYDF team where needed. An impact assessment will be carried out using focus group discussions, complemented where appropriate by questionnaire interviews. The one-year project will provide the ground for the subsequent effective, cost-efficient roll-out of Mothers, Fathers and Adolescent Clubs across the entire Adaklu District.

Activities will be executed according to a workplan as briefly outlined below.

I. Set up of project management infrastructure

See 3.4

II. Community entry, engagement of target groups, set-up of Clubs in 5 new villages

Steps in each of the 5 newly added communities will consist of:

- Community entry through engagement with village elders / Chiefs: Following traditional protocol for interventions at community level, the project team will first engage with the traditional village authorities in order to obtain their buy-in and go-ahead for the activities planned. The GYDF team has extensive experience in this area.
- Engagement of target groups: Community gatherings will be used for assessing whether target groups have sufficient interest in the activities foreseen. Examples of existing Clubs from the pilot phase will be used extensively. Based on the experience from the 5 communities already covered, we expect significant interest in participating in the monthly Club workshops.
- Depending on the community's interest in specific Clubs, the project will suggest set-up of a Fathers, Mothers and/or Adolescents Club and ask for volunteers to become Club Leaders. The latter should be sufficiently literate and, wherever possible, smartphone users in order to be able to participate in social media communication.

- Set-up of a management structure involving village elders and senior members of the local target groups (i.e. members of Community Planning Committee).

III. Preparation of digital content and social media channels

Training materials will be prepared – based on the previous experience of the GYDF team with community engagement on gender equality and social development – in a way which allows easy re-use, adaptation for specific engagement purposes and distribution/sharing via a range of channels, including social media networks. Steps include:

- Compilation of material from freely available content published by acknowledged international stakeholders such as the WHO, WorldBank, Unicef, Promundo, etc.;
- Adaptation to use in the form of print-outs, posters etc.: Preferred use of pictorial representations and local language (Ewe) rather than English; use of examples from the local environment to increase perceived relevance;
- Adaptation to use in the form of info-bites to be shared via social media (Whatsapp, Facebook): Info-graphics in Ewe language, short video clips from videos recorded locally by the GYDF team, etc.
- Set up of groups in Whatsapp, Facebook and/or other suitable social media networks and initiation of discussions around topics of current interest (e.g. second wave of COVID-19).

The work will be carried out in close collaboration between GYDF and HITA.

IV. Training of Club Leaders

Club Leaders will be provided with training at two points during the project with the goal to empower them to take a stronger role in promoting desirable practices among Club members and others within their communities, and in alerting the GYDF team of any incidences requiring immediate intervention. The training will include guidance on:

- Group dynamics, group work facilitation, moderation of discussions, gender responsiveness;
- Creating a safe space to discuss sensitive issues concerning gender equality;
- How gender equality relates to social development under conditions such as prevalent in rural Ghana / Adaklu District;
- Communication, advocacy and lobbying skills;
- How to partner with health extension agents for covering topics of sexual and reproductive health, basic hygiene, sanitation and preventive health.

Worksteps include:

- Preparation of the training based on the GYDF staff experience in running Fathers, Mothers and Adolescent Clubs in 5 communities, plus international best practice compiled by HITA;
- Rent of the venue at a central location in Adaklu District (attention to be paid to a venue that allow adherence to COVID-10 protocols, especially social distancing);
- Rent of equipment (PA, projector, moderation material) and preparation of hand-outs;
- Arrangement of refreshments and transport of attendees to the venue;
- Organisation of three 1-day workshops (à 10-15 attendees) in Month 3;
- Organisation of three 1-day workshops (à 10-15 attendees) in Month 11;
- Follow-up communication to all attendees: workshop documentation and complementary information material shared via WhatsApp group and possibly on SIM Card, plus on GYDF website and Facebook presence.

Moreover, Club Leaders shall be enabled to discuss and share experiences with Club Leaders in other communities, for which social networks through smartphones would be the most effective solution.

V. Digitally supported operation of Fathers, Mothers, Adolescent Clubs

Fathers, Mothers, Adolescent Club meetings will take place once a month at a suitable location on the territory of the community. Open air, wide space meeting places will be the preferred option to allow for adherence to COVID-19 protocols such as social distancing. 1-2 GYDF team members will participate and guide proceedings in close coordination with Club Leaders. Between meetings, interaction will continue through social media wherever possible, i.e. by WhatsApp group chats chaired by Club Leaders. A separate WhatsApp group will be set up for each Club. GYDF will seek to trigger discussion on WhatsApp by contributing info-bites around topics of current interest.

VI. Impact analysis, reporting

The second workshop with Club Leaders as well as the later monthly Club meetings will be used to obtain feedback from participants about the perceived value of the activity and any perceived changes to attitudes and behaviours among themselves and within their community. A brief report will be drafted for distribution summarising the findings and drawing conclusions for future practice.

VII. Dissemination

For dissemination in Ghana, GYDF will make use of its links to local media including radio stations and online media agencies. Frequent updates will be posted on GYDF’s website and on social networks (e.g. Facebook) including links to training material in Ewe (for free use by third parties). For dissemination in Germany, see 3.7.

3.4 Project support measures, coordination and monitoring

GYDF will have overall project management responsibilities and will update HITA on its progress using weekly jour-fixe audio/video conferences using Zoom or Whatsapp. HITA’s project management solution (Atlassian Confluence + Jira) will be used to keep track of the progress in putting the workplan into action.

3.5 Interaction with other actors

The project will seek close cooperation with the Ghana Health Service (GHS), mainly the District Health Director Charles Azagba. The main purpose is to be able to draw on Community Health Nurses (who are employed by the GHS) for workshops and engagement activities dealing with health related issues such as sexual and reproductive health (SRH) and maternal and newborn health (MNH).

It will also be vital to ensure the support from the village elders (Chiefs) in each community to be included in the project. For this purpose, tried-and-tested procedures for community entry will be used.

3.6 Time-activity plan

Activities	Months 1-3			Months 4-6			Months 7-9			Months 10-11	
I. Set up of project management infrastructure											
II. Community entry, engagement of target groups, set-up of additional Clubs											
III. Preparation of digital content and social media channels											
IV. Training of Club Leaders											

Activities	Months 1-3			Months 4-6			Months 7-9			Months 10-11	
V. Digitally supported operation of Fathers, Mothers, Adolescents Clubs											
VI. Impact analysis, reporting											
VII. Dissemination											

3.7 Risk factors and risk-reducing measures

The main risk to the success of the project is related to the COVID-19 pandemic, the future development of which is very hard to predict at the time of writing. After a period of very low numbers of documented infections, figures have started to increase sharply again in early November 2020⁹. Since the planned activities depend heavily on hands-on engagement with groups of individuals at community level, a lockdown of the type imposed in parts of Ghana earlier in 2020 (and/or self-imposed rules of conduct to responsibly manage the risk of contagion) would require changes to the workplan.

Due to their experience in community engagement activities during the first wave of the pandemic in the Adaklu District (~April to July 2020), however, the GYDF team has a robust understanding of how to interact safely with the target audiences in case of a second wave. Examples include:

- Strict application of social distancing rules during community gatherings;
- All GYDF team to wear PPE during any face-to-face interaction with members of the target groups and other local stakeholders;
- Swift introduction of phone-based modes of interaction (WhatsApp group) wherever possible.

In the run-up to Ghana's general elections, which were held in December 2020, there was a conflict of manageable proportions in the Volta Region over the proclamation of an independent republic of Western Togoland by a group of secessionists (Western Togoland Restoration Front), but no people were harmed. Most experts believe that the Ghanaian government remains in full control of the Volta Region and that no serious unrest is to be expected. No secessionist-related activities have been reported in Adaklu District. HITA and GYDF will closely monitor further developments on the ground and, if necessary, make changes to the work plan (e.g. change the selection of communities participating in the project) in order to exclude any risk of endangering GYDF staff and members of the target group.

3.8 Sustainability

The project approach and activities are designed to be scaled-up to all communities in Adaklu and to be replicated in any other rural Districts across Ghana. The materials to be produced by the project will be openly published and made available for re-use by any stakeholders operating in similar environments.

The project is also planned to prepare the ground for follow-up activities in Adaklu that will extend the use of increasingly ubiquitous mobile phones / smartphones for experience- and knowledge-sharing, etc.

⁹ https://en.wikipedia.org/wiki/COVID-19_pandemic_in_Ghana#November_2020

HITA will engage the GYDF team in training sessions on project management (including use of project management software, e.g. Confluence) and use of digital tools for community engagement. The skills imparted will help develop the capacity of GYDF to carry out development projects for other international and national donor organisations.

3.9 Public relations in Germany

HITA will use its website, social media presences and other established PR channels to spread information about the project (in German and English) to a broad range of target audiences. In addition, HITA will offer its partners

HITA also plans to use examples from the project in HITA's cooperation with a secondary school in Frankfurt/M. and the University of Applied Sciences Mannheim; options include using information on the Mothers/Fathers Clubs in group and project work with secondary and university students and offering young Germans the opportunity to discuss with Ghanaians via video conferences.

Moreover, HITA will inform the interested public in Germany about the project via presentations at public workshops, conferences, etc. and in closed-audience events.