

**AN EXTERNAL REVIEW OF THE UNICEF-ANAMA MINE
RISKE EDUCATION PROJECT
IN AZERBAIJAN**

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**Christina Nelke
External Evaluator**

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Background

More than 20 % of Azerbaijan's territories are still occupied by Armenia after the declared cease-fire in 1994. Around 10-15 percent of Azerbaijan's population are displaced persons, temporarily located in camps and nearby villages.

According to the General Survey carried out in 11 districts by International Eurasia Press Fund (a national NGO) there are around 60 million square metres of land contaminated with landmines and UXOs in 64 villages.

A number of casualties have been reported and large areas of agricultural land and grazing fields cannot be used until clearance of landmines/UXOs has taken place.

From 1991 to May 2002 there were 1042 landmine/UXO adult casualties and 350 children casualties registered. Of the 350 children casualties 294 were injured and 56 killed. A majority of the casualties were men between 18 and 44 years old.

ANAMA is the national Mine Action Centre and responsible for all integrated mine action in Azerbaijan. ANAMA cooperates with UN agencies, International NGOs and private demining companies as well as with Azeri Ministries and NGOs regarding impact surveys, mines clearance and Mine Risk Education.

UNICEF started in January 2000 a two years Mine Risk Education (MRE) Project together with ANAMA after a needs assessment had been carried out. UNICEF finances the MRE project in respect of salaries for two staff members, MRE workshops, monitoring and evaluation and MRE materials. ANAMA provides office space, some staff salaries and, when there is a need, a vehicle for transport. The Mine Risk Education is part of the ANAMA Information Department.

The needs assessment strongly indicated a need for MRE to be disseminated to the mine/UXO-affected communities at large and especially to young men between 18 and 44 years of age, where most casualties were registered.

The only previous MRE project in Azerbaijan was carried out by the ICRC a few years earlier in 957 schools in the mine affected areas and ID camps. It was mainly MRE presentations of 1½ to 2 hours per session for teachers, who in turn were asked to disseminate the MRE messages to the school children. MRE materials were also distributed to the school staff and children.

A decision was made that the UNICEF-ANAMA MRE programme should in its first phase target the school teachers (to disseminate MRE among the school children) in the IDP camps and in the border villages with in-depth MRE training, and thereafter health staff and last community volunteers (to disseminate MRE among the community members at large) from the most mine/UXO contaminated areas. All in all 12 landmine/UXO contaminated districts and IDP camps: Fizuly, Beylagan, Agdjabedi, Aghdam, Gedabey, Tovuz, Agstafa, Gazakh, Dashkesan, Khanla, Goranboy, Terter, and Barda (the latter not mine/UXO affected but having large IDP camps), were targeted.

2 UNICEF MRE project staff working from the ANAMA office and 15 MRE instructors, the majority of them with education sector background, others with a military or psychologist's background, were trained in one initial TOT MRE workshop in February 2001 and a year after in an Advanced Training with psycho-social components added. A UNICEF international MRE consultant facilitated both workshops.

Evaluation Method

The external evaluation consultant was tasked to do a 22 days assignment including a one-week on-the-job-training for the MRE programme staff based on the results of the evaluation. With this time limit there was not adequate time allocated for a special training with assistants to carry out individual interviews based on questionnaires in all the targeted districts. Therefore, villages to be visited were chosen so that a minimum of time should be spent on the road. Group discussions were the main evaluation method for the interviews.

The following activities were carried out:

Reading of all relevant documents (Project Proposal, MRE Needs Assessment reports, Training reports, Monthly and Annual reports, Monitoring reports, Mid Term Review Report, Victim Assistant Needs Assessment report etc) regarding the MRE project, handed out by ANAMA and UNICEF.

Individual Interviews with the MRE project staff at ANAMA, the UNICEF programme officer in charge of the MRE project, the Chief of the Education Department in the Ministry of Education and the Deputy Minister of Education, the Inspector of the Second Office in the Ministry of Health, the Director of ANAMA, UNDP's Chief Technical advisor to ANAMA, ANAMA's Operations Officer, The Head of ANAMA's Information Department, ANAMA's Regional Mine Clearance Trainer, the Director of Relief Azerbaijan, Staff from the International Eurasia Press Fund and RONCO (An American organisation, assisting the Dog Training Teams), and the United States Forces MRE training staff to the ANAMA programme.

Group discussions with the MRE instructors (two meetings), the MRE Technical Working Group, the Children's Organisations (The Republic Children Organisation, NUR ("Child-to-Child), Shafa and "Reliable Future"). In the field discussions were held with teachers and other school staff, school children, Health staff, Community leaders, IDP's and refugees,

From September 6 to 10 a **field trip** together with the UNICEF-ANAMA MRE consultant was undertaken to mine affected communities along the border and to IDP camps, where MRE training for school staff, health staff and "volunteers" have taken place. Group

discussions were here carried out in schools, hospitals and among community members for approximately 1 ½ to 2 hrs.

The districts and towns visited:

- Horadice (ANAMA's Regional Training Centre), Ahmadbeyli (Internet Secondary School) and Balabehmenli (The hospital) in Fizuly district.

- Guzanli (The Secondary school and the State Hospital) in Ahgdam district.

- Agdjakend (the ANAMA-Relief Azerbaijan camp, Chief of the Education Department and ARRA (Agency for Reconstruction and Rehabilitation of Areas) staff, the elders, men, women and children in the community) in Goranboy district.

- The mines clearance site outside Gushgara and Servingo (The International Eurasia Press Fund demining team and Ronco staff) in Ganja district.

- Saloglu (The Executive Power Office and the Secondary school) in Agstafa district.

- Gazakh (the District hospital) in Gazakh district.

- Barda (Aghdam District School nr 14 and Kelbajar nr 41 IDP schools)

The MRE Project

The Original Project Proposal states:

Goal of the MRE programme:

To sensitise the IDPs of the danger of mines and reduce/eliminate the potential incidence of mine fatalities among children in Azerbaijan.

Objectives:

- To enhance the education system and incorporate mine awareness (the internationally recognised terminology has since become Mine Risk Education rather than mine awareness) methods/messages into school curriculum with proper teaching materials.
- To strengthen the mine awareness activities in close cooperation with IFRC
- To raise mine awareness among parents

Questions and findings regarding the goal and objectives:

- On the question why the project was so strongly designed to target children when the needs assessment pointed out a greater need for a community based approach especially targeting men between 18 and 44, the answers from UNICEF was that since UNICEF is a UN agency, that especially caters for children's needs they preferred to start with the school children and would in that way also reach other parts of the community like the parents.

- The IFRC said that they had stopped to directly implement MRE, but asked ANAMA for assistance in their construction and rehabilitation projects for refugees and IDPs to give MRE to the construction workers and IDPs moving into the renovated buildings.

- The Cabinet of Ministers requested the Ministry of Education to issue a decree on inclusion of MRE into the school curriculum in 12 front line districts. However when the evaluator asked the Ministry of Education why it was still not included, the answer was that they are still contemplating where to include MRE. They think the best option would be to include it in the Civil Defence part and use the out- of- school classes for the MRE sessions. However it would require extra funds, since the teachers were paid extra for these classes.

The Mid Term Review Report from May 2000

In this report **the role of the NGOs** is emphasised; that it is necessary to involve them in the MRE project.

On the question on why not more has been done here, the argument is that some NGOs would have liked to not only get the training but also funds to implement MRE. However no serious attempt seems to have been made in explaining how MRE could be easily added as just another component to their normal working programme in the mine/UXO affected communities and therefore would not necessarily require any special extra funds.

There is good cooperation though with ARRA and IFRC in the villages where they are reconstructing buildings for the refugees and IDPs. They have had MRE safety messages for their staff, and the communities in the newly constructed villages have received MRE sessions from the UNICEF-ANAMA MRE project staff and MRE material has been distributed.

The programme has also worked to at a certain extent with Relief Azerbaijan and International Eurasia Press Fund. However there is room for even closer co-operation. These two agencies could just add a more comprehensive MRE component to their demining and survey operations after being given 4 days MRE training for some of their staff members. The interest is there.

It could also be recommended that other Humanitarian Aid organisations running community based programmes and the Children's Organisations could be more actively involved in MRE.

In the Mid Term Review report there is a suggestion to train village volunteers since MRE cannot become successful without strong support from the local authorities. The ordinary community members are not mentioned though; only special community MRE centres are mentioned.

Another recommendation from the report, that has been adhered to is the erection of Billboards in the mine/UXO-affected villages. They are being developed and some are already in place.

It is also recommended to strengthen the cooperation with the partner Ministries.

Achievements from January 2000 to September 2002

1. MRE Trainings:

- 2 UNICEF MRE project staff (previously trained and employed in ICRC's earlier MRE project) and 15 Master Trainers, or Instructors as they also are called, were initially trained in a Training of Trainers MRE workshop from 3-6 February 2002. The facilitator was an International UNICEF Consultant, who also carried out Needs Assessment on Victim Assistance.

- The same International consultant facilitated a second workshop 9-16 March for the 15 MRE Instructors. It was an Advanced MRE TOT workshop with psycho-social elements added to it.

- During the summer of 2002, a 6 weeks long MRE training course for the MRE Project staff at ANAMA and the Instructors was carried out by the American State forces MRE training team with emphasis on MRE concepts and ideas. How to produce MRE material on the computer was one of the practical components.

- 30 three-days MRE workshops for 525 health staff in the 12 mine/UXO affected districts conducted by the MRE Instructors, working in pairs. The trainings were held between 17 September and 15 October 2001.

- 59 four-days MRE workshops for 1043 school staff in the 12 districts and IDP camps. These trainings were held between 17 October and 24 December 2001.

- 26 four-days MRE workshops for 400 volunteers from the 12 districts with mine/UXO affected communities. These trainings were held between 1 August and 25 August 2002.

- Around 20 one-day MRE trainings for ANAMA staff and NGO partners. On request from the partners the MRE programme staff have carried out these trainings.

2. MRE materials produced and distributed:

- Brochures for children - 120 000 produced and 120 000 distributed
- Brochures for adults - 100 000 produced and 55 000 distributed
- Teachers' MRE training manuals - 10 000 produced and 10 000 distributed
- Posters - 30 000 produced and 27 000 distributed
- Exercise books for school children - 150 000 produced and 150 000 distributed
- T-shirts - 7000 produced and 1000 distributed

- 10 sets of Plastic **Landmines and UXO Models** have been produced and exhibited in the workshops.

- **TV MRE spots** (still pictures with voice) produced by the MRE project staff, but not broadcast yet.

- **Billboard pictures** in production for mine/UXO affected areas, defined by the Operations department on the basis of the results of the General Survey. Some "trial" boards are already up in the newly reconstructed village of Agdjakend in Goranboy district.

- A 45 minutes long **MRE play**, written by a children's writer with MRE instructions from the MRE programme staff. The play was performed by children from the Republic Children's Organisation at schools in 17 different IDP camps and mine/UXO affected villages.

3. A Technical Working Group consisting of ANAMA-UNICEF partners was established at the end of 2000 to strengthen the inter-agency collaboration regarding the MRE project. 4-5 meetings have taken place over the years.

The following Ministries and NGOs are represented:

- Ministry of Labour and Social Protection of the Population
- Ministry of Health
- The Engineering Department of Ministry of Defence
- The Office for Physical and Primary Military Service Training of Ministry of Education
- Ministry of Youth, Sport and Tourism
- The Red Crescent Society
- Republic Children's Organisation
- IFRC
- Save the Children
- Azerbaijan Campaign to Ban Landmines (ACBL)
- UNICEF
- ANAMA (MRE and Victim Assistance staff)

4. Contacts with Mass Media:

The ANAMA Information Department, of which the MRE programme is part, has had press **releases** in the national newspapers to advocate for the Integrated Mine Action work of ANAMA.

Findings and Analyses of the Workshops for School Staff, Health Staff, Village Volunteers, ANAMA Staff and NGO partners

The evaluator has unfortunately not had the opportunity to follow any training, since they were already completed when the evaluation started. However through interviews and reports a general idea has been possible to obtain.

A good monitoring tool is the pre- and post tests, that have been used throughout the workshops.

The 15 MRE instructors, based on their own thorough training, seem generally to have carried out satisfactory trainings to their participants, especially regarding the MRE messages.

Few active learning methods though have been practised in the schools; mainly lectures and discussions have taken place.

1. School staff and Health Staff workshop participants' views

All participants the evaluator has been in contact with, seem to have found the trainings valuable and useful and on specific questions they could give the right answers regarding

“dangerous” and “safe” places, warning signs, marked areas, what a landmine or UXO could look like, their impact, what actions to take if encountering a suspicious object, marking in a safe place, if in a mine field to call for help or as a last resort retracing the footsteps, reporting, and the health staff how to give first aid but not to rush into a mine field if there is an accident.

They appreciated the distributed MRE materials and there were still quite a few posters up on the walls both in schools and hospitals. The training manuals and the children’s exercise books were favourites.

In one school they had organised a special MRE exhibition corner with the MRE printed materials and mines and UXO models made of wood by some of the school children. In this school they had had the luck to view the Plastic Models from the workshops for two full months and that had inspired the children to make their own models.

All participants found MRE an important subject. Some would have liked more community members to have a chance to get the same training. It seemed that for instance some of the hospital staff saw the training more as just an asset for themselves than actually as a tool for making them the resource persons to inform others. On the questions on when, where and whom to pass on MRE messages to, the answers were vague. They mentioned in all the visited hospitals that the patients were persons to pass on the MRE messages to when they asked about the posters on the walls. But no set plans or ideas on how to best disseminate MRE in their community were mentioned.

They felt that they would not be confident enough to give a workshop themselves to e.g. their colleagues but would rather have liked to have the MRE Instructors to do it.

However in one hospital they had helped to distribute the materials outside the hospital as well and also asked those receiving them to show them to their neighbours.

Most of the trained teachers had had MRE information meetings for their colleagues so that they could pass on MRE to the school children. It seemed that the hospital staff had had less MRE information meetings for their colleagues. This was clarified by one nurse saying when I tried to ask a woman in one of the hospitals about what she knew about Mines and UXOs “Don’t ask her she is just a cleaner!”

Recommendations

-All teachers recommended MRE to be on the **curriculum**. It would be a great help, since now they see it as difficult to find the time and therefore in most cases MRE was something only talked about if there was 5 to 10 minutes left of another lesson.

Since there already is a decree urging the Ministry of Education to include the MRE in the school curriculum for the mine/UXO affected areas it should be given priority to be followed up, not only by the MRE project staff but also at a higher level with input maybe from the ANAMA Director and the UNICEF Representative.

The Deputy Minister was shown a sample of the MRE school curriculum from Kosovo and though it a good idea to translate to Azeri and thereafter it would be easier for the Ministry to take action when they had learnt how it is implemented in other countries.

-**Active learning methods**, which have been proved to be the most efficient, such as role-plays, drama, drawing, songs, essay-writing and story-telling should be encouraged and included in the curriculum.

- Both the School staff and the Health staff recommended to regularly broadcast **MRE information on the State TV channels**, since most people watch TV albeit electricity cuts are common in the villages. This would be a re-enforcing means to strengthen the direct MRE information through the teachers, health staff and volunteers in the villages.

- Several teachers and health staff recommended to get similar **mines and UXO plastic models** that were shown to them in their trainings to exhibit in their schools and Hospitals.

- The teachers recommended in general having more **visual MRE aids** produced.

- Some of the Health staff thought it necessary to have **refresher courses** since they lived in a highly contaminated area and no demining was going on. The mine/UXO problem is there to stay for a long time.

- To include in the Instructors' workshops more emphasis on how to guide the participants for ideas on how to better structure and formalise their expected future MRE work in the communities. To e.g. help **set up MRE annual work plans** would also be an improved monitoring tool.

- To reach the parents not only indirectly through the MRE material the children received in the schools but also to target them directly in the **parents meetings at school**.

- **To collect all the recommendations from the workshops** (read through all reports from the instructors thoroughly and list the recommendations) and discuss them with the partners in the MRE Technical Working Group and with the instructors afterwards in order to improve the future workshops and the implementation of the MRE in the schools, hospitals and the communities at large.

2.School Children's views

The interviewed school children all answered the question on what to do if encountering a "suspicious object", with "Don't touch, Mark and Report!" But no further explanation was given on where to mark and how to mark. In most cases they could give a good description of what a landmine or an UXO might look like, but not always where most likely to find them.

However several of the children said that both the teachers and the parents had told them where the unsafe places were and warned them not to enter these areas. In one school for instance the children were well aware of not to enter the vine- yards, which were mined, and dangerous areas. Therefore also watched by the military.

They had obtained the MRE material, except for two of the visited schools, which had not got the exercise books.

When questions were put to them regarding the posters there was a bit of confusion with one of the posters, since in the background it shows a boy in the process of almost touching an UXO. It looks like he puts it away on a high shelf for others not to touch...?

On the question which material the children liked best it was hard to choose but the exercise book seemed to be the real favourite. On the question "why?" the answers in several of the schools were that the pictures are very clear and colourful and the book stays with them for a long period of time and thus they are constantly reminded of the dangers of mines and UXOs.

On the question from where the children had got most of their information, it varied. In one school they all referred to their teachers and in other schools they referred to the MRE material that had been distributed, or their parents.

In most schools the teachers had had some kind of MRE lesson(s). It varied a lot regarding time allocated for it, both how often and in length. Nowhere had they had a special "time-table" time for MRE. Although in the Aghdam school in Barda the teachers said that they had regularly once a week MRE for their classes.

In one school it was pointed out by the director that the military teacher was responsible for teaching the other teachers, who in their turn were responsible for their own classes. Every time they heard about an incident in their own or neighbouring villages it was highlighted how important it is to practise the MRE messages they had been taught.

Reporting by school children:

In one school a child had reported to the police that she had found an UXO in a birds' nest. The police came and took care of it.

In the same school an UXO had been found in a bush at the schoolyard. The child reported to the school staff that in turn reported to the Military, who came and took care of it.

Another child reported on bullets he had found and reported to an older boy, who had buried all of them so nobody could reach these dangerous objects. The child was well aware of that this was not a recommendable action. The authorities should have been notified and taken care of them instead, he said.

One girl had a friend, who had seen a fragmentation mine and knew it was dangerous when she discovered the trip wire. She reported to the police who took care of it.

Recommendations

- The school children recommended **broadcasting oft MRE on the State TV Channels**. They said that it could be shown specifically for children on the programmes "News for Children", "The Globe", "Brain" and other popular children's programmes.

- The children recommended printing **new exercise books**. They said that they had shown the MRE materials to the parents, who had praised and approved of it.

- Children could produce their own MRE material and exhibit in a corner.

- Children could **produce their own MRE play and perform to other children**.

- Print **new posters** but more eye-catching with strong colours and clear messages with corresponding pictures and text.

- **MRE pictures and messages** not only on exercise books but also **on the textbooks** because they last longer.

- Children's **MRE games**, an encouraging method to learn MRE, should be developed and produced and distributed in all the schools.

3. Volunteers' and community members' views

Since the volunteers' workshops were held in August 2002 and the MRE materials have still not been delivered to all the villages, the MRE dissemination had not taken root yet. Therefore there was not much to evaluate.

The only meeting with a volunteer workshop participant was in Saloghu in Agstafa district. The Deputy Head of the Executive Authority who took part in one of the workshops was interviewed together with the Head of the Executive Authority.

The big problem with UXOs that remained at the old barracks after the Soviet army had left had caused many deaths and injuries. Since many saw the ammunition, from which they might be able to extract metal, as a source of income several people had even come from as far as Agstafa City Centre to collect the metal.

After the General Survey was carried out by the International Eurasia Press Fund, an NGO trained by ANAMA, the dangerous areas have been marked with about 50 warning signs. This had helped a great deal but it would be good also to raise Billboards to explain the danger, especially to those who only come as visitors.

On the question on how he as one of the workshop participants would organise MRE in his village, he explained that they have monthly meetings with some of the responsible people in the village and in these meetings he would bring up MRE and distribute MRE materials.

Already before he took part of the MRE training one of the teachers at the secondary school had been invited but unfortunately he was ill and could therefore not participate. In this school the children had got the brochures and posters but no exercise books.

In a meeting at the demining site outside the villages of Gushgara and Sevinga with the International Press Fund the staff explained that they had had several meetings with the community members with sometimes up to 50 participants where they had been informed about the dangers of mines/UXOs and what the work of the deminers meant and why all the demarcation poles were there and that it was of vital importance not to remove them, since the ground was not declared safe yet, it would bring disorder and delay their work. That it was for the villagers best, who in fact had asked for demining at this previous military camp in the first place. Apparently the cooperation between the villagers and the demining team was working very well.

Another positive experience was the village of Agdjakend where Relief Azerbaijan, trained by ANAMA, has a camp and has cleared the village of UXOs before the reconstruction of the

houses planned for 134 refugee families and 100 IDPs. We got the opportunity to closely follow the good cooperation between the actors involved. In our meeting with Relief Azerbaijan the ARRA construction managers came to ask for assistance since a “strange object” had been found. The demining team immediately responded and went out with their detector. This time it was a false alarm, but it showed the immediate readiness of the demining team and the good collaboration between the two agencies.

We also talked to some of the elders, women, children and a school staff member (it was a Sunday and the school was closed but we met them in the street). They were all well informed about the dangers of mines/UXOs. They described the MRE material they had been given both in the IDP camp where they had been before their arrival in the village and after the arrival when they had had booster MRE sessions.

Whenever there was going to be an explosion executed by the demining team, the villagers were warned well in advance.

Billboards were put up in 4 different places. The villagers had read them and also asked several questions to the demining team. Since the village is famous for its scenery and a natural well, many people do an outing to the beautiful spots with picnics over the weekends. Behind the village is a valley called “the Mine Valley”, which has not yet been cleared.

Recommendations:

- A recommendation from the demining team in the Ganja district was that **Billboards** should be put up behind the cleared area, where there was another still not cleared area, so that nobody would try to take a shortcut or be tempted to graze their animals there. It might take long before this area will be scheduled for clearance. In the meantime the Billboards would be helpful.
- The demining team in Adjakend recommended that **Billboards** should be put up at a good distance **before entering the village** and around the unsafe valley. One of the elders recommended it to be made in fluorescent colours to make it better visible in darkness.
- The demining team had not only had meetings with the villagers explaining their demining work and the dangers of mines/UXOs but also distributed MRE material. They would also like to get **MRE material to distribute to nearby villages.**
- To include in the MRE Instructors’ workshops for the village volunteers **more emphasis on how to guide the participants for ideas on how to better structure and formalise their expected future MRE work in the communities.** To e.g. help set up **MRE annual work plans** would also be an improved monitoring tool and the importance of **building MRE teams** in their villages with the help of the already MRE trained health staff and teachers.
- **To strengthen the community participation** it is important to make the communities feel responsible for the MRE in their area. For instance when raising new **Billboards** in the villages, let the community members help, not only in cooperation with ANAMA, to decide where to best erect the boards. There could also be a **special village ceremony** where the villagers themselves in cooperation with ANAMA staff mark the importance of the safety of the villagers in physically erecting the boards themselves.

4. Selection of participants from villages in the 12 most landmine/UXO affected villages and IDP camps in cooperation with the Ministries of Education and Health

a. The selection of school staff participants

The results of the General Survey indicated which districts and villages to target. The Ministry of Education provided the names of the schools and were responsible through their District Education Departments to notify school staff from each of these villages and the IDP camps. The teachers that took part were a mixture of School Directors, Military teachers and other teachers.

Unfortunately some of the village school staff did not attend due to not having been notified, or given the reason that they were too far away from the workshop venue to be able to pay for the transport or because of temporary illness.

The MRE programme staff delivered the MRE material to the District Education Department, which delivered the materials to the head masters, when they came for their monthly meeting. In most cases the materials seem to have reached the chosen schools even if the teacher never came to the training. Sometimes only parts of the materials were delivered. A few schools for instance never got the exercise books.

Recommendations:

- It is recommended to **make an inventory of those schools excluded from the workshops** to check how many they are, and if they still not got the MRE material, to have it delivered afterwards.

- It is also recommended that those left-out schools should somehow be compensated with **new training opportunities**. Some of the already trained workshop participants close to these villages could gather nearby school staff for workshops, a kind of village cluster training, to avoid the transport problems.

b. The selection of health staff participants

The selection was made by the Ministry of Health on the recommendation of the MRE programme staff to make sure that not only staff from the hospitals in the districts was chosen but also the staff from the Medical Points in the most mine/UXO affected villages along the cease-fire line.

However in several districts only hospital staff came, while staff from the Medical Point did not attend. Several reasons were given; that it was too far away for them being able to pay for their own transport, not being notified and in one district only doctors were allowed to attend the training.

The MRE materials were distributed by the MRE programme staff to the District Hospitals, which in turn were responsible for handing it over to all other hospitals and Medical Points in the border villages of their district.

It was difficult to find out if all Medical Points had been reached, since it was not known whether they actually are functioning or not. A list with all the Medical Points has not been

submitted to the ANAMA office from the Ministry of Health. It was therefore very difficult to get an exact count of how many Medical Points there are.

Recommendations:

- To **strengthen the co-operation with the Ministry of Health on the above-mentioned issue** to get a better picture of potential Medical Points to work with.

- Try to **gather the left out staff in nearby villages** so that there will not be any transport problem for new MRE workshops. The already trained workshop participants from the nearby villages in the districts should execute the trainings.

- To make sure that there is **a good spread of Health staff**, not only doctors but most important those **who show communication aptitude** and enjoy sharing newly gained knowledge with other colleagues.

-To work out together with the Ministry **a monitoring tool** that will prevent future shortcomings regarding workshop participation, implementation etc.

c. Selection of participants for the Volunteers MRE workshops

In all the 12 districts the Heads of the Red Crescent Society, Department of Youth, Sport and Tourism and Civil Defence were invited as participants at the district level. Then from each targeted village either the Head or his Deputy from either the Municipality or the Executive Authority was invited. In a few cases both were represented. However no Red Crescent members from the villages attended.

On the question why it was these “official government connected staff” contacted for the trainings, the answer was that they are the persons used to dealing with all important issues in the villages and therefore it was natural to involve them.

In the planning of the workshops one saw this attempt to a community-based approach as more of a one-person-responsible-MRE focal point instead of trying to involve several persons in a local Mine Risk Education committee. Most of the participants were males.

Recommendations

- Since there are no special plans for how the volunteers will carry out their responsibilities it would be a good idea to discuss the issues very soon with the volunteers when they receive their MRE material. To try to help them draw up annual work plans and to convince them about **sharing the responsibilities with other community members**, especially to involve youths and also women to get a better gender and age balance.

- Since there might be both teachers and health staff in the villages, who have also got MRE training it would be natural to first of all contact them and together form **a little MRE committee**.

- It will be important also to **contact the trained district level representatives** and inform and involve them in the work plans so that they can help monitoring the MRE work out in their villages.

5. One-day MRE workshops with ANAMA staff and NGO partners.

The one-day MRE workshops for ANAMA staff and their demining NGO partners are specifically designed to make sure that the safety procedures, prescribed in UNMAS Landmine and UXO Safety Handbook are adhered to when the staff is out in the field.

The different target groups should also get the specific MRE information they need for their special work tasks. In an interview with the UN Chief Technical Adviser a concern was expressed that there was not made enough distinction between the different target groups regarding the content of the workshops. They contained more and less the same MRE information.

The workshops are planned and executed when the Operations Department or their NGO partners request them.

Some Humanitarian Development Aid NGOs like Oxfam requested a one-day MRE workshop with emphasis on safety procedures for their staff working in contaminated areas. The workshop took place last year.

Other one-day MRE workshops have e.g. targeted Children's Organisations like NUR, Child-to-child, Shafa and Reliable Future. These workshops have been more of general information on MRE. However when talking to the young people in a special meeting they seemed to have the opinion that they are already experts on MRE and can therefore disseminate MRE messages to other children in TV programmes and MRE sessions.

Recommendations:

- Important components in the MRE training for ANAMA and its NGO partners are how to **co-operate with the communities** in the areas where the operations staff or demining teams are surveying or demining. A **good information flow** between the technical staff and the communities will always improve the survey and demining operations. To establish trust between the parties is of vital importance. It seems therefore that when community participation is involved a one-day workshop might be too short. **Another day could easily be added**, especially if you involve the participants in group work and role-plays.
- The Relief Azerbaijan Director requested to have some of his staff on the **demining teams fully trained in a 4-days MRE training** to be able to give proper MRE sessions to the community members where they demine. No additional funds for their implementation should be required, only the training.
- If the **Children's Organisations** are willing to take active part in MRE among other children and youths one should capitalise on their interest and give them **a full 4- days workshop** not only to act in a play! If they had had a comprehensive training in MRE the children could have created the play themselves and not necessarily have had the need for a professional scriptwriter. Children's participation, not as a token but through genuine involvement is recommended. Since some of them already are familiar with the Child-to-Child approach a workshop on **MRE with the C-t-C approach** could be valuable for all the children's organisations.
- Since there are so **many local and International NGOs working in the field of Community Based Humanitarian Aid projects in the IDP camps and mine/UXO**

contaminated areas, it would seem natural to check their interest in adding a component of MRE to e.g. their health projects and we would reach many more of the originally defined target groups.

- It could be worthwhile for ANAMA's MRE department to **make an inventory of which NGOs are working in the 12 districts and IDP camps** and then check with them if they would be interested to send some of their staff to take part of a 4- days volunteer training and hence add the component of MRE to their already established Community Based Projects. Along the new oil pipeline, that will be constructed several community projects will be set up. Some of these areas or adjacent ones might have mine/UXO problems and it would in that case be important for not only the NGO staff having MRE one-day safety workshops but maybe also for some of the NGO staff to get comprehensive MRE training so that they can disseminate the safe messages in the communities.

Follow-up on the Workshops and Monitoring of the Project

Follow-up, monitoring and evaluation are included and budgeted for in the UNICEF-ANAMA Annual Work Plan.

Monthly reports are submitted to UNICEF and the ANAMA Director by the MRE project staff.

The ANAMA-UNICEF MRE National Consultant and a staff member from the Ministry of Education also produced a special Monitoring Report for the period April 16 to May 11, 2002 when 3 monitoring field trips to different schools in the project areas were carried out. This was the first monitoring trip since the programme started. The previous year there was no monitoring field trip accounted for due to budget constraints.

The findings in the monitoring report were generally positive. 64 schools were visited. All schools had obtained MRE material, and only a few had not got the exercise books, which in some districts had been sold instead of being distributed for free.

The children could in most cases give correct answers on the MRE messages and safe behaviour. Posters were up on the walls.

All the teachers, Headmasters and District School Heads agreed to that the best solution would be to get MRE as a compulsory subject into the school curriculum. In this way it would be easier to monitor the MRE lessons. The situation now shows that it all depends on the good will and commitment by interested teachers and Head Masters.

There have not been any monitoring visits to the Medical Points or the hospitals except for the recent field trip together with the evaluator.

The reporting of new mine/UXO victims is still not functioning satisfactorily.

There is no structured monitoring mechanism built into the project. So far the project has been entirely dependent on "remote control" monitoring from the MRE programme in the ANAMA Baku office. This is of course in itself an impossible task.

On the question whether the MRE project staff had followed some of the trainings out in the districts, the answer was that they had unannounced visited short sessions and were pleased with what they had taken part of. They had not been able to see all instructors in action. The instructors were however evaluated in the latest training, the Advanced MRE workshop in March 2002.

There is no special evaluation form for the workshop participants to fill in. Only informal evaluations at the end of the workshops had been made. Mainly positive comments had reached the Baku office.

The workshop reports, written by the instructors, varied in quality and did not give a full picture of all the 3 or 4 days the workshop lasted. However some had filled in useful recommendations from the participants.

No detailed agendas with information on what facilitation methods that had been used or the length in time for each subject etc. were handed in. The only guidance was the paper with headings of the subjects that had to be covered, which was put together by the MRE project staff.

The partner Ministries of Education and Health have not taken on their full-intended responsibilities. It was specifically noted in the meeting with the contact officer in the Ministry of Health, that he himself was not very confident in what the project was about and that he needed a much clearer picture of the subject of MRE, ANAMA's and his Ministry's shared responsibilities. He admitted that he had not been representing the Ministry of Health on the MRE Technical Working Group from the start and was maybe therefore not sufficiently briefed.

Only 4-5 meetings for the MRE Technical working Group in two years is too little for the partners to feel fully involved. The meetings also seem to have been organised more ad hoc than on a regular basis.

The budget for the monitoring task was felt to be inadequate if the monitoring is going to be carried out regularly with field trips covering all the districts.

It was also felt that since ANAMA has so few cars, it was quite difficult to get transport.

Only one computer for the MRE programme is not enough, since this is the project staffs' main working tool. As it is now, only one staff member at a time can use this facility.

Recommendations:

- **To strengthen the role of the partners in the MRE Technical Working Group** it might be good to organise **a one-day MRE training**. To let them meet not only the staff in the ANAMA office and have them explain their work, but also organise **a field trip** to an area where demining is going on. To meet with community members and the people who have been trained in the district workshops and have discussions on how they best can support their work.
- The MRE Technical Working Group could also be strengthened with participation of some of **the MRE Instructors**, who have after all their training not only gained good knowledge about the MRE subject but also got good experience from what they have

met in the field. Other potential partners that could be added to the MRE Technical Working Group are **representatives from the Media: TV, Press and Radio**.

- **A special MRE Media Workshop** for different media people would help to boost the interest in ANAMA's work and make the public at large more aware of the dangers of mines.
- The MRE Technical Working Group should **meet regularly** monthly or at least every second month to not only get news from the MRE project team in the ANAMA office but equally important to bring forward current information on the MRE they are responsible for in their schools, hospitals and communities, where their staff have received training.
- **Develop good monitoring tools** (e.g. forms, logbooks, annual work plans, and appointment of contact people in the field) **together with the partners**, so that they will better understand their responsibilities. For instance this might help to get a more reliable data collection on mine/UXO accidents. Certain people in the hospitals and among the volunteer focal points in each village could be appointed to record all accidents in a special logbook. Based on this information special forms could be filled in every month to be sent to ANAMA. Note: the forms should be sent in even if there are no accidents!
- ANAMA has developed a **Quality and Monitoring Team** for their operations section; there should be **a similar mechanism within the MRE project**.

Cooperation between UNICEF and ANAMA

In general the cooperation between the two agencies gives the impression of working well.

However there still seems to be some confusion about some responsibilities, which have to be clarified.

For instance where does the MRE project team stand? It is confusing for people in the field when they sometimes refer to UNICEF (all the T-shirts e.g. refer only to UNICEF) and sometimes to ANAMA.

The financial systems seem to differ between the two agencies and this appears to cause unnecessary irritation.

Transport seems to be a problem since there is a shortage of vehicles within ANAMA.

Recommendations:

- It cannot be emphasised enough how important it is that **the MRE component is here to stay** even if it will not in the future always be financially supported by UNICEF. It should have the same status as mines clearance, surveys and victim assistance and therefore be seen as a necessary and important tool within Mine Action; be it in areas which have not started to be demined yet, or in areas where demining is ongoing.

- It is also recommended that the MRE programme staff in the future should all be designated as ANAMA staff to pave the way for **a strong future Integrated Mine Action Centre**.

- It is recommended **to see a continuation of UNICEF's commendable support**, especially since a lot of resources already have been invested in all the trainings. The project will now have to go into **a consolidation phase** with emphasis on **building a strong partner team**, especially with the Ministries of Education, Health, Civil Defence and Youth, Sport and Tourism, who are all responsible for that their staff, who have taken part of the trainings in the 12 districts and IDP camps, will implement the MRE so that the information will reach out to all community members and school children in the mine/UXO affected areas. ANAMA's NGO partners are equally important to help implementing the MRE in the demining areas.

- The different **financial routines** between ANAMA and UNICEF are recommended to be reviewed in order to look for a jointly worked out and agreed solution.

- **The transport problem** hopefully will be solved so that future ANAMA funds will meet the expenses for allocating a special car to the MRE programme in order to make follow-up and monitoring of the programme function better.

- It is also recommended **to keep an MRE project officer at the Regional ANAMA Centre** in Fizuly to liaise closely in the field with the ANAMA operations staff and its NGO partners on a daily basis. The officer should also be prepared to carry out requested MRE trainings in the field and follow up together with the line ministries' district administration on the MRE with the schools, hospitals, medical points and community volunteers.

Conclusion

It is commendable that the UNICEF-ANAMA Mine Risk Education Project during less than two years has built a good national capacity in their trainings and production of MRE materials as the basis for a strong MRE programme, which always has to be a vital part of an Integrated Mine Action Programme.

The landmine/UXO problem is there to stay for a number of years and that is why it is so important to now consolidate these trainings with good implementation in the mine/UXO-affected communities through the schools, Medical Points, Hospitals and community volunteers to make it sustainable. Mechanisms have to be built for how to best reach out to the communities at large. An active sustainable community based MRE programme has to function well until the mines and UXOs are cleared.

A good indicator for the success of the programme is several cases of reporting by children to the authorities when they have found a "suspicious object".

Other good indicators are the positive attitudes to MRE, that everybody interviewed felt it important; that those who took part of the training workshops had learnt many things they did not know before the workshop. That they now think more actively on how to behave in case they would encounter a dangerous mine/UXO situation. They feel more confident.

However to measure the numbers of victims during the period is a less reliable indicator. We don't have a valid baseline to measure against and the reporting procedure for the victims is still not reliable.

The sooner the MRE programme starts working on building a stronger relationship with its partners, the better chance for good implementation on the ground. This is where we have the community members at risk and their safety is the ultimate goal for the programme. All people living in these areas, be they children or adults should be entitled to an adequate education on how to avoid the dangers of mines/UXOs, in order to decrease the number of casualties.

There have been reports that the soldiers often become mine/UXO victims and therefore it is important to also improve the contact with the army, even if they might be more difficult to reach. MRE should be compulsory in the soldiers' military training.

There are several recommendations in this report on how to consolidate the programme and it is therefore suggested that these recommendations be discussed between UNICEF and ANAMA and a priority list of measures to take be drawn up.

Major Recommendations Summarised:

- A continuation of UNICEF's support to the MRE project in order to anchor and solidly consolidate MRE in the communities in a strengthened partnership with the line ministries and the NGOs.
- To urge the Ministry of Education to get MRE into the school curriculum. Involvement of the decision-makers at the highest level both within UNICEF and ANAMA will be necessary.
- To strengthen the follow-up of the workshops and monitoring of the MRE in the 12 districts, border villages and IDP camps. To encourage the volunteers to form MRE committees. To work out reliable and functional monitoring tools in co-operation with the partners.
- To strengthen the MRE Technical Working Group with participation also by some of the MRE Instructors and media staff.
- To strengthen the work within the MRE Technical Working Group by offering its members a special MRE workshop including a field trip to a demining area.
- The MRE Technical Working Group should meet regularly either monthly or every second month with a prepared agenda sent out in advance. The partners are also supposed to report back on the MRE work based on information from their schools, hospitals and community volunteers.
- To organise a special media MRE workshop.
- To produce in partnership with the State TV channels MRE sessions built into already existing popular children's and youth programmes.
- To involve more NGO partners in MRE. Check the interest among the humanitarian development aid organisations, which are already involved in community based projects in the mine/UXO affected areas and IDP camps

- To gather the remaining school and health staff in “village cluster” workshops, facilitated by already trained MRE workshop participants in the districts.
- To strengthen the Children’s Organisations’ participation in MRE with a Child-to-Child MRE workshop.
- To strengthen the co-operation with the demining organisations and involve them in more comprehensive community based MRE training so that MRE becomes a natural component of their Mine Action Work.
- To make sure that the content of the MRE workshops for the different staff within ANAMA and its partners is relevant and tailor-made for their special needs.
- To finalise the billboards and make it the villagers’ business to have them raised at a special ceremony in order for the community to claim a sort of ownership and thus feel responsibility to secure them for the future!
- To produce MRE games for school children, a new exercise book or just reprint the old one.
- Continue to distribute MRE material on request. Make the partner ministries responsible for checking on needs for more MRE material.
- If funds are available to provide a car for the MRE programme team.
- To purchase another computer for the MRE programme team
- To appoint an MRE staff member for the ANAMA Regional Training Centre