



# 2018 ANNUAL REPORT



**THE FUTURE IS YOUNG, EDUCATED  
& HEALTHY**



**The Future is Young, Educated and Healthy**

# Content

Introduction.....	01
Foreword.....	02
Chapter One: Our Story.....	03
Mission & Vision Statements.....	05
Programme.....	06
Chapter Two: STAR School.....	07
Chapter Three: Get Up, Speak Out.....	09
Chapter Four: Ready Steady Ghana.....	17
Chapter Five: Social and Emotional Learning.....	20
Chapter Six: Technology for Maternal and Child Health Project (T4MCH).....	22
Chapter Seven: World Teacher Programme.....	32
Chapter Eight: Partnerships.....	35
Chapter Nine: Events Gallery.....	37
Chapter Ten: Financial Summary.....	44

## INTRODUCTION

The 2018 Annual Report is a forty-four page document stipulating the journey of Savana Signatures in delivering hope and development, leveraging innovation and technology, to communities while specifically targeting vulnerable groups, especially children, young people and women across Ghana.

The document titled “The Future is Young, Educated and Healthy” embodies the ideals of the organization's vision for its mostly youthful beneficiaries. It looks at the organization's efforts in the year under review to bring respite to the thousands of young people and other groups, contributing to SDGs three, four and five. Some essential underlying themes such as Gender Equality, Sexual and Gender Based Violence (SGBV) and Comprehensive Sexuality Education (CSE) are deeply embedded in the interventions implemented in the year under review. Also prominent in the report is a focus on expectant and new mothers and their spouses or partners, under the Maternal and Child Health aspect of the Sexual and Reproductive Health and Rights programme..



## FOREWORD

Dear Partners and Friends of Savana Signatures,

The year 2018 has been a great year for Savana Signatures, not only in the area of our work on Quality Education, Skills Development, Maternal and Child Health and Sexual and Reproductive Health and Rights, but also in the impact on both direct and indirect beneficiaries and their communities.

Many very important projects were commenced, and others brought to a fruitful end. Through this report, we have selected some highlights from our work across the thematic programmes that frame our social interventions.

Even as we mark our 10th Anniversary in 2019, Savana Signatures remains deeply rooted in ensuring that we have a society where all have access to tools that improve their livelihoods as well as the quality of life through initiating a positive change among youth, women and vulnerable populations of Ghana using ICT solutions to facilitate access to Sexual and Reproductive Health and Rights (SRHR), including Maternal and Child Health (MCH), Quality Education and Skills Development.

I am immensely grateful to the staff of Savana Signatures for their hard work; members of Savana Signatures' governing board for their strategic direction; our donors, partners, media and other stakeholders for their unflinching support.

**John Stephen Agbenyo**

Executive Director - Savana Signatures

# CHAPTER ONE

## OUR STORY





Savana Signatures is a non-profit organisation registered and operating in Ghana. The organization works in the Northern, Savanna, North-East, Upper East, Upper West, Volta and Oti regions of Ghana.

Savana Signatures has carved a niche in the innovative use of ICTs to design and implement inclusive and scalable development interventions to help improve and transform the lives and livelihoods of beneficiaries and their communities.

**Our vision:**

We envision; a society where all have access to tools that improve their livelihoods and quality of life.

**Our mission:**

We are on a mission; to initiate positive change among youth, women and vulnerable populations of Ghana using innovative solutions to facilitate access to Sexual and Reproductive Health and Rights (SRHR) - including Maternal and Child Health (MCH), Quality Education and Skills Development.





## Programme Areas:

Savana Signatures is contributing to bringing improvement in the following areas: Quality of Education; Sexual and Reproductive Health and Rights (including Maternal and Child Health); Skills Development.



# CHAPTER TWO

## STAR SCHOOLS



STAR Schools is an education strategy implemented by Savana Signatures to contribute to the improvement of quality education delivery in schools in the Northern and Volta regions of Ghana.

STAR Schools hinges on the understanding that transparent and accountable management of education; engaging School Management Committees (SMC)/ Parent Teacher Associations (PTA) and parents in dialogue with the Ghana Education Service (GES) for improved education resource allocation to schools; improving teaching and learning through effective and regular supervision will improve learning outcomes in schools. Comprehensive Sexuality Education (CSE) was also deployed to meet the SRHR needs of young people in the beneficiary schools.

These methodologies create opportunities for the learner to be at the centre of the teaching and learning process while teachers play a facilitatory role to guide the process.

## KEY RESULTS

**2,330**  
Young People

Young People aged between 10-19 empowered to make healthy & informed decisions regarding their Sexual Reproductive Health & Rights.

**100**  
Teachers

80 Teachers received Basic Education Quality Improvement Programme (BEQUIP) training on Active Teaching & Learning methodologies to promote the use of child focused pedagogy in project schools.

20 Teachers trained in an effort to improve teaching & learning outcomes in schools.

**140**  
Teachers

Underwent In-service training organized by Teachers from project schools, in an effort to improve teaching and learning outcomes in schools.

Increased supervision on teaching & learning methods adopted by teachers in project schools by training & providing financial support to

**20** Circuit Supervisors

**10** Teachers & Peer Educators

10 Teachers & 10 Peer Educators trained & equipped with facilitation skills on two CSE curricula, MWML & MSWM for Primary & Junior High Schools respectively to reach other young people with SRHR information.

# CHAPTER THREE

**GET UP  
SPEAK  
OUT**  
for youth rights

**GET  
UP  
SPEAK  
OUT**

**#GUSO**

Get Up, Speak Out (GUSO) has the goal of ensuring that all young people, especially girls and women, fully enjoy their Sexual and Reproductive Health and Rights (SRHR) in a productive, equal and healthy society. The project targets young people in and out of school between the ages of 10-24 years in the North-East and Northern regions of Ghana.

GUSO has empowered young people with SRHR information and services, through education and health services, to increasingly voice their opinions and claim their rights while supporting others to do same.

Savana Signatures provides Comprehensive Sexuality Education in the project using the “My World My Life (MWML)” manual for in



school young people and the Sexual Health Education Plus (SHE +) call centre for both in and out-of-school young people.

SHE Plus provides platforms such as a Call Centre (0544711799/0502863699), WhatsApp group, Facebook page (@sheplusghana) and an android mobile Application to give young people easy and real-time access to information and be linked to confidential Adolescent Sexual and Reproductive Health Services.

## KEY RESULTS

**103**  
CSE  
Facilitators

103 Teachers & Students empowered with knowledge on SRHR to act as CSE facilitators in project schools, providing a constant & sustainable source of information within the schools.

**5,799**  
Young  
People

Reached with comprehensive SRHR information. These young people received face-to-face information on Adolescent Reproductive Health topics.

**9,791**  
People

Reached through media campaigns with information on ending Child Early & Forced Marriage, Substance Abuse, Sexuality, Gender Equality, Menstrual Hygiene, Teenage Pregnancy, SGBV & Contraception.

873  
Students

Reached with comprehensive SRHR education. This has increased their knowledge on sexual and reproductive health, sexual and reproductive rights, how to claim these rights & where to access health care & justice services.

161 Young People Reached With Indirect SRHR Services

Through



Sexual  
Health  
Education  
Plus

providing #Referrals & #Linkage Services to:

Health Facilities and Social Justice Institutions

804 Young People Reached With Direct SRHR Services

Through



Sexual  
Health  
Education  
Plus

providing #Information & #Counselling Services on:

Relationships, Abortion, Sexuality, Contraception, Sexual Abuse, HIV/AIDS, etc.



## #GUSO CHANGE STORY

Susana participated in an SRHR sensitization for out of school youth in her local Dressmakers Association. She was selected to participate in more CSE trainings to help share SRHR information with her colleagues due to her active participation.

She initially planned to get married and have children while still in apprenticeship. A decision which would have increased her vulnerability to poverty both for her and her family and would have had adverse effects on her livelihood, safety and health.

“Through the GUSO trainings and group discussion sessions for out of school young people, I was exposed to SRHR issues such as Contraceptive use, effects of Early and Forced Child Marriage and effects of Teenage Pregnancy. I gained knowledge and control over my life and speak to issue's surrounding the subject”, She said.





#GUSO

According to Susana, the training and workshops provided her an opportunity to discuss SRHR issues and share her experiences with other young people. Being a Peer educator, she is most proud of her new confidence and effective communication skills in expressing her thoughts on SRHR issues with her colleagues.

“I have decided to graduate from my apprenticeship and start my own sewing business before getting married and having children. I am happy with my life because I have more control over my sexuality now and express it as best I can in whatever situation I find myself”, She reiterated.

**Susana**  
GUSO Beneficiary

## CHANGE STORY

#GUSO



Ayisha, an apprentice dressmaker and beneficiary of the GUSO project participated in the SRHR workshops which has immensely impacted her life. Before this, it was difficult for her to take decisions regarding her sexuality.

“I would allow my boyfriend to have sex with me without condom, even though I knew he had multiple sex partners. I cared about him and thought that it would increase his love and trust for me. I didn't know I was increasing my risk of acquiring STIs or HIV”, She said.

According to her, Savana Signatures has organized several SRHR workshops for young people in her community to empower them with knowledge to identify their SRHR needs on topics such as Contraceptive use, Safe Abortion practices, SGBV, etc.

“I am now able to make the right



#GUSO



decisions regarding how I express my sexuality and with whom, at my own pace without any pressure. I use a condom during sexual intercourse with my partner to protect myself from STIs and prevent unplanned pregnancies”, Ayisha intimated.

She added that, “as a young person, the SHE+ platform provides me with the opportunity to learn and share my worries with someone who understands my issues and advices me accordingly as to what I can do about them.”

Ayisha is now more confident and assertive and insists she can now negotiate for safe sex and live a healthy and happy life.

She states that her participation in these discussions empowered her to confidently discuss SRHR issues among her peers without the fear of being judged as a “bad girl”.

**Ayisha**

**GUSO Beneficiary**



# CHAPTER FOUR



**READY  
STEADY  
GHANA**

Ready Steady Ghana is strengthening TVET providers' knowledge, attitude and skills in the area of SRHR education to increase effectiveness of their vocational training courses, especially for girls and women. The programme is implemented in partnership with Edukans, with Rutgers as the technical partner.

A SRHR needs Assessment conducted revealed that TVET trainees suffer high cases of SRHR related issues such as teenage pregnancy, STIs and Sexual and Gender Based Violence (SGBV).

Ready Steady Ghana therefore adopted a two-pronged approach to tackle the underlying causes of these issues; Capacity building for TVET providers to introduce them to the theory and concepts of Health Needs Assessments, SRHR, Comprehensive Sexuality Education (CSE) and Youth Friendly Health Services (YFHS).

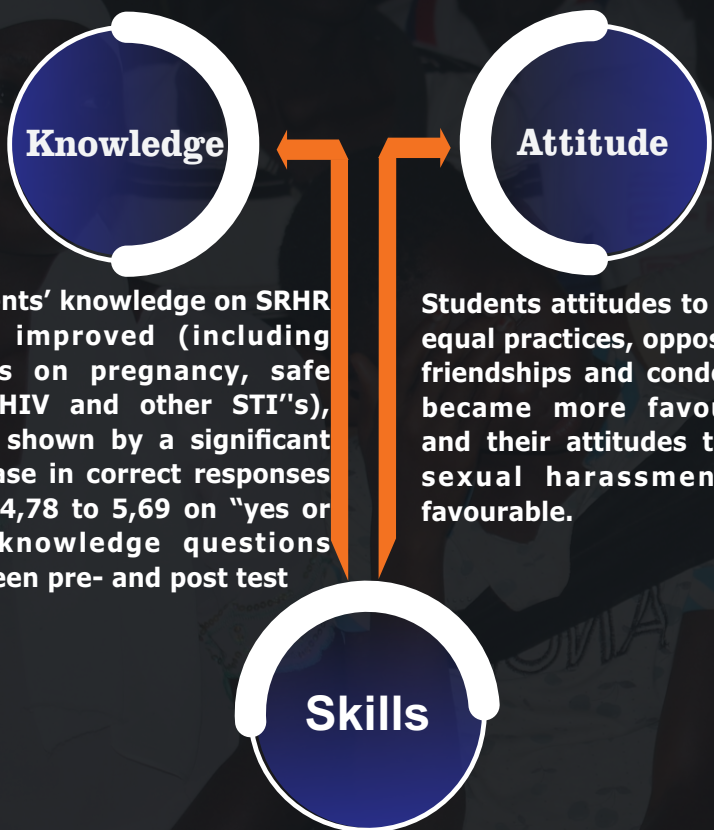


# KEY RESULTS

300

Students

Received comprehensive sexuality education, which led to improvements in knowledge, attitudes and practices concerning their sexual and reproductive health



Students' knowledge on SRHR have improved (including issues on pregnancy, safe sex, HIV and other STI's), as is shown by a significant increase in correct responses from 4,78 to 5,69 on "yes or no" knowledge questions between pre- and post test

Students attitudes to gender equal practices, opposite sex friendships and condom use became more favourable, and their attitudes towards sexual harassment less favourable.

Students identified more strategies to negotiate safe sex with a partner. They feel comfortable talking about sex with others and are now able to advice friends who are ready to engage in sex on preventing STIs and unintended pregnancies.





## CHAPTER FIVE

# SOCIAL & EMOTIONAL LEARNING

#SEL

Social and Emotional Learning (SEL) uses the “Curriculum of All Times” (COAT) manual, to connect children's social and emotional development to academic learning.

Social and emotional skills are essential to holistically excel at every stage of the social structure.

SEL focusses on teaching the “whole child” and is connected to the '*whole school approach*'. it seeks to enable children develop cognitive skills and competencies to appreciate love, forgiveness, integrity, joy, kindness, perseverance, reliability, responsibility, self-regulation, selflessness and social responsibility. Thus, preventing bullying, aggression and even radicalisation among young people in schools.

## KEY RESULTS

6

Head Teachers

2

Guidance & Counseling Officers of the Ghana Education Service

Trained, with the purpose of monitoring whether the trained teachers were able to apply the active learning skills, to deal with sensitive topics and to create a conducive atmosphere in which students feel comfortable sharing their experiences.

302

Students

Benefited in 6 Upper primary schools in the Sagnarigu District and Tamale Metropolitan Assemblies. Children were trained on effective emotion regulation strategies, positive social behavior and self-awareness. Children mentioned in Focus Group Discussions that the training helped them to recognize and deal with their emotions and how to relate better to others.

12

Teachers

Trained to facilitate weekly lessons using the COAT manual and video animations to generate discussions among pupils. Next to that, they were trained on active learning skills and to apply them not only in SEL lessons but to their teaching in general. This is expected to promote better learning outcomes among the pupils.





# CHAPTER SIX



## TECHNOLOGY FOR MATERNAL & CHILD HEALTH

#T4MCH

The Technology for Maternal and Child Health (T4MCH) project in 9 districts of the Northern, North-East, Savanna, Upper West, Oti Regions of Ghana is contributing to a reduction in maternal and child mortality through an improved delivery and utilization of essential health services by pregnant women and new mothers. The project developed the capacity of health staff in the use of ICT equipment to design, package and deliver MCH education to pregnant women, new mothers, men and their relatives at the health facility and community levels. The project, through Mobile Messaging delivers MCH information in 11 local languages, Ewe, Likpakpa, Gonja, Brifo, Twi, Kotokoli, Tampilma, Sisaale, Dagaare, Dagbani and Hausa to pregnant women, new mothers, their partners and relatives.



**Strategy:**  
T4MCH uses three main strategies; Mobile Messaging, Knowledge Sharing Sessions (KSS) and community Electronic Medical Records (cEMR) as well as two supporting gender mainstreaming strategies; the Mothers' Story and Father-To-Father groups.



## KEY RESULTS



Women and their partners reached through Knowledge Sharing Sessions (KSS).

**Impact:** 99% of women interviewed on KSS found the service to be useful and had or would recommend other mothers to join. Mothers repeatedly mentioned that children that were often sick before, did not fall sick again after adopting the advice given at the sessions. In addition, between 2015 and 2018 we have recorded an increase in ANC attendance in project facilities by 5.8% and of skilled deliveries by 11.1%, while home delivery was reduced by 25.1%.



## 11,157 Beneficiaries

(women and their partners) were reached through weekly mobile messages on Maternal and Child Health.

**Impact:** Women interviewed on the mobile messages considered the information in the messages to be very useful (100%), it had led to changes in their activities and belief systems (99%), and they said they would recommend the service to others (96%). 74% of the women also felt that the messages had encouraged their partners and families to support them throughout their pregnancy – assisting in household chores, providing nutritious food for the family and providing financial assistance.



658

## Beneficiaries

62 Father-to-Father groups have been established with over 658 men actively meeting every month in 9 districts across the country.

**Impact:** Participants who were interviewed on what they learned, indicated better communication with their wives, more involvement in their wives' health, sharing domestic chores with their wives, increased involvement in maternal health, increased involvement in child raising, and awareness and consideration of family planning and ANC attendance. These changed attitudes and behaviour of men, who are the financial gatekeepers in these families, will go a long way to improve maternal and child health outcomes.

Fathers were not only targeted through father-to-father groups, but were also involved through KSS and mobile messaging. In project facilities, male involvement is measured by the number of men attending ANC with pregnant mothers, increased with 8.5% between 2015-2018.



# 13

## Adolescent Mothers

Have been enrolled into livelihood empowerment and education programmes across five regions of the country. Mothers opting for vocational careers were provided with apprenticeship positions and some equipment to make a start for themselves. Mothers who wanted to further their education, were enrolled in high school or university and their fees were paid by the project.

## Davidson's Change Story

"I was invited by the Physician Assistant, who happened to be the facilitator of the Father-to-Father Group. I am a member now and see myself as an agent of change in my community", said Davidson, a father of three.

According to him, his relationship as a father with the first two children wasn't strong in the past. This was so because society made him feel men or husbands are only responsible for working hard to fend for the family. This he did very well according to his own judgement.

"When my wife was pregnant with the first two children, there was no way I would have been seen going to the clinic with her. Although I never neglected her, I wasn't involved in so many aspects of her life during that period", he said.



"We often argued because she seemed to be worried a lot. I left her to herself especially on domestic issues or visiting the clinic", he added.

Becoming a member of the Father-to-Father group in this community to discuss the role of men in maternal health and how the decisions men make impact women, was the turning point for Davidson.

Sessions were facilitated by trained health staff using the Fathers' Journey facilitation manual, in an effort to foster behaviour change among this very key group.

Davidson's family is closer now, he escorts his wife to Clinic and takes up some household chores to

relieve her of stress. He is proud to be playing a more responsible role both as a husband and father. He was excited that his wife seems more relaxed these days. He explained, "I now feel that stress might have been a reason why she sometimes behaved the way she did in the past."

Davidson is a transformed man. He adds that he sees a lot of changes in the lives of community members, especially those who are also members of the group. He expressed great pride in the bond that now exists in the family.

"I wish the formation of the groups is extended to other communities so they can also benefit", he appealed.

## Davidson Vukor

Amanfrom (Kadjebi District)





## Iddrisu's Change Story

Iddrisu's wife and two-month-old baby were frequently sick and resorted to traditional medicine, since the health center is far from where they live, but paying the herbalist cost him more.

After visiting a friend in Salifukrom and chanced upon a community Knowledge Sharing Sessions (KSS) organized by health staff, Iddrisu learned a lot about the importance of exclusive breastfeeding. He realized his baby was constantly falling sick because of the food, water and medicine given to her at that tender age.

He also heard for the first time that a National Health Insurance Scheme (NHIS) card can help his family access healthcare for free at the health centre.

“When I returned home, I arranged for my wife and baby to visit the health center to get our baby registered for the NHIS card”, he said.

“My wife now exclusively breastfeeds our baby and both haven't been sick



for sometime now. I now help at home by bathing our children and cleaning the compound, for my wife to make time to cook for us to eat or relax from the day's activity”, he stated.

For Iddrisu, the educational videos he watched was his moment of awakening as he could readily relate and understand the issues. He has also stopped providing his family with un-prescribed medicines because he is now aware of the risks and consequences of its use.

“It is very important for more rural communities to have access to this information the health staff shared with us to enable them adopt best practices to ensure mothers and their babies are safe”, he added.

**Iddrisu**

**Pusupu (Nkwanta South District)**

## A Change Story

The midwife registered her contact details into the list of expectant and new mothers to receive mobile messages. She was told she would receive voice messages in a local language of her choice on MCH and she opted for Dagbani.

The mother of four enumerated her challenges prior to signing up for the messages, stressing on her irregularity at ANC because she usually forgot the dates.

She indicated that she had inadequate knowledge about the nutritional requirements for a pregnant woman as well as bed preparedness. Her three older children fell sick a lot during their infancy, this put a strain on the family's finances. She explained "Anytime I asked my husband for money for drugs or to go to the hospital, it often led to quarrels, because he felt I wasn't taking enough care of the children and was wasting his money".

"When I started receiving the messages, I got to know the kinds of food to eat to remain healthy and keep my children healthy as well.



My husband also registered to receive the messages, so he no longer waits for me to request for anything that has to do with the welfare and nutritional needs of the children because he also listens to the midwife through the voice messages", she said.

She was delighted that her youngest child is, very healthy now and doesn't fall sick. She added that, her family no longer spends money on drugs, which is a relief to them.

"The voice messages helped me a lot. I got useful information that was not given by my midwife, probably because of the large number of clients she had to attend to. I sit in my house and receive voice calls at no cost. I have a good relationship with my husband now, thanks to the voice messages", she intimated.

**Anonymous:**  
**Kalpohin (Sagnarigu District)**

# CHAPTER SEVEN

## WORLD TEACHER PROGRAMME

#WTP



The World Teacher Programme is a long-term exchange programme for professionals in education; teachers, school leaders and others employed in the Dutch educational system.

The project is a collaborative work of Edukans International, a Dutch NGO and Savana Signatures, the Ghanaian partner. The 2018 programme brought together 38 Dutch participants to the Ho and Hohoe Municipalities of Ghana.

The World Teacher programme seeks to improve on the quality of education by creating a platform for both Ghanaian and Dutch participants to learn and share experiences while adopting best practices in each other's educational systems.

The focus of the programme is to capacitate Ghanaian teachers with skills in active teaching and learning and strengthen the management

## KEY RESULTS

capabilities of school managers. The Dutch team works collaboratively with their local colleagues and Edukans' partners on ideas for short-term and long-term changes and improvements of the educational system.



# KEY RESULTS

2 feet, 1 knee



**PROJECT SCHOOLS**  
(Upper Primary 4-6)



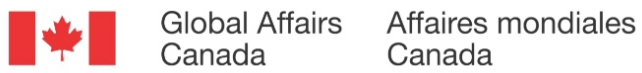
Are indirect beneficiaries  
of The World  
Teacher Programme



# CHAPTER EIGHT

## PARTNERSHIPS





# CHAPTER NINE



## EVENTS GALLERY





# Africa Youth SDG's Summit 2018



# Ready Steady Ghana Stakeholder Meeting



# Ready Steady Ghana Stakeholder Meeting



# Canadian High Commissioner's Visit



# Gender Inequality Conference in South Africa



# Gender Equality Conference in South Africa





CANADA  
GHANA

GT4MCH

# CHAPTER TEN

## FINANCIAL SUMMARY

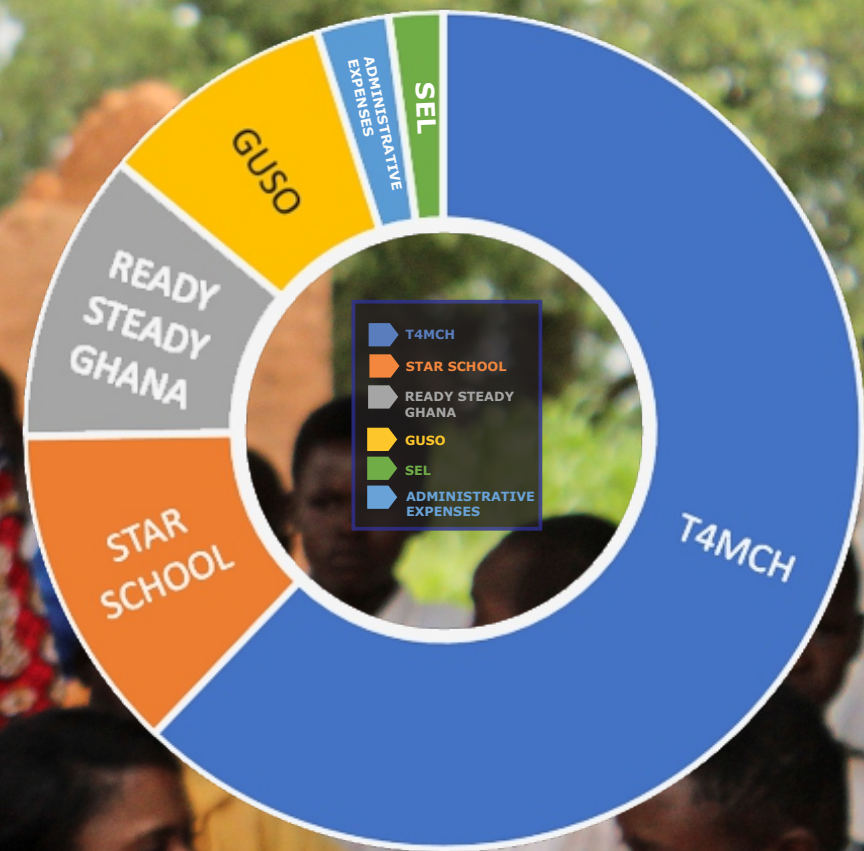
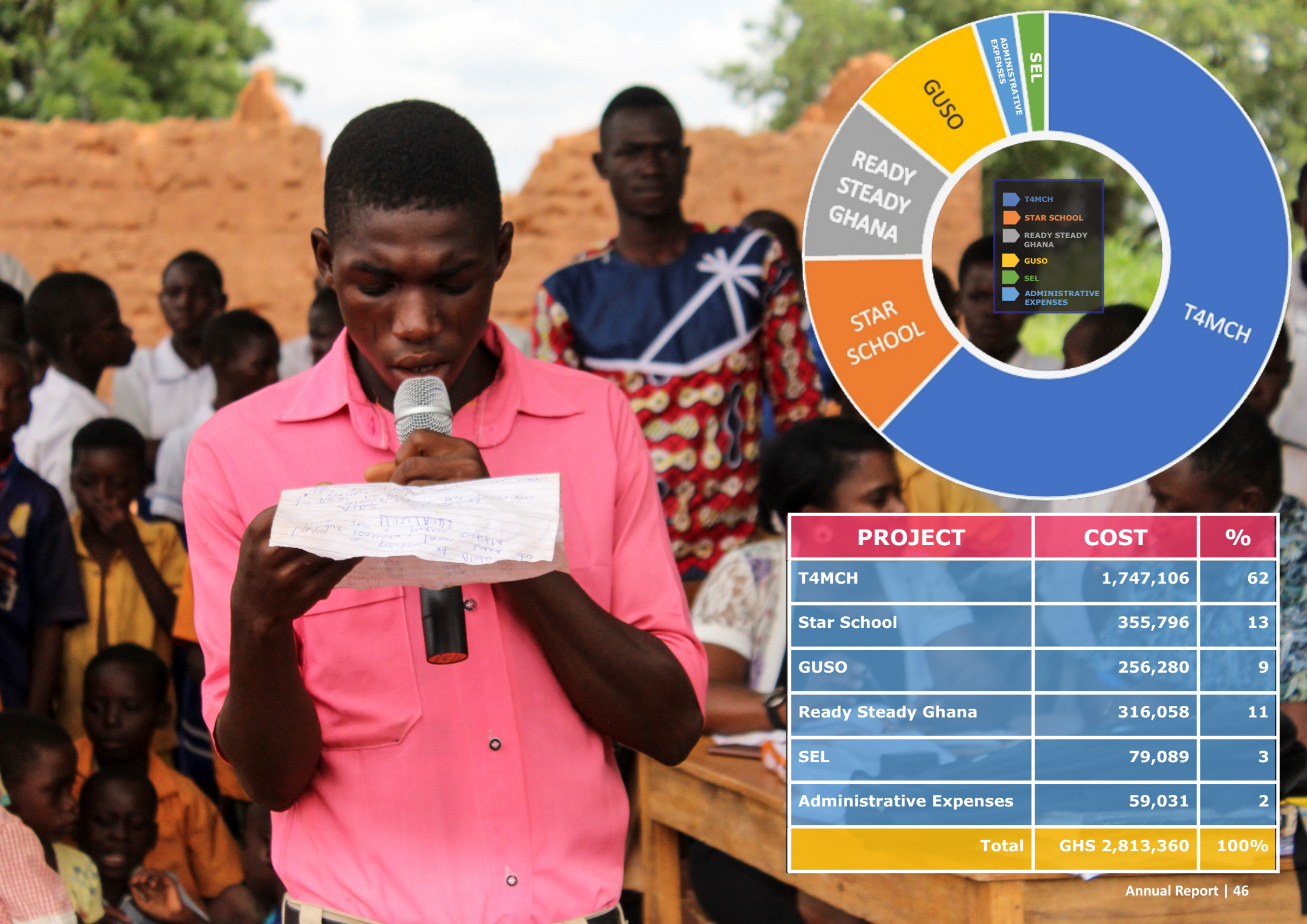
In 2018 Savana Signatures spent **GHS2,813,360** on its objectives focusing on five main projects.

These projects include Technology for Maternal and Child Health (T4MCH), Get Up Speak Out (GUSO), Star School, Social and Emotional Learning (SEL) and Ready Steady Ghana. The areas of focus with these projects are Health, Education, Skills development and SRHR.

Out of the total funds received from donors and partners to support the organization's objectives, T4MCH had the biggest expenditure portion representing 64 percent, Star Schools with 13 percent, Ready Steady Ghana with 11 percent, SEL with 3 percent and GUSO with 9 percent of the total projects cost for 2018.







PROJECT	COST	%
T4MCH	1,747,106	62
Star School	355,796	13
GUSO	256,280	9
Ready Steady Ghana	316,058	11
SEL	79,089	3
Administrative Expenses	59,031	2
<b>Total</b>	<b>GHS 2,813,360</b>	<b>100%</b>



SAVANA SIGNATURES 2018 ANNUAL REPORT



Contact Us:  
info@savsign.org  
0372028099

TAMALE OFFICE  
Plt No. 164, Naa Luro Estate  
Post Office Box TL 332  
Tamale, Ghana.

