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HEALTHPRO PROJECT YEAR 3

First Quarterly Report

October 2009 – December 2009

**Prepared for USAID/Philippines by the
Health Promotion and Communication Project
under University Research Co. LLC's Contract No.
GHS-I-00-07-00010**

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EXECUTIVE SUMMARY

HealthPRO, as the lead USAID health promotion and communication vehicle, is working closely with the Philippine Department of Health (DOH) and Local Government Units (LGUs) in their efforts to improve health outcomes through behavioural changes primarily among patients or clients as well as their communities, including families, community members, care givers, health providers, program managers, local chief executives, policy makers, and the private sector. University Research Co., LLC (URC) is the primary organization responsible for implementing the program in close partnership with governmental and non-governmental organizations in the country. The HealthPRO team, comprising of communications experts and health professionals, is working in close collaboration and coordination with the DOH, LGUs and other stakeholders to provide the needed technical assistance to:

1. Increase the impact of strategic behavioural change communication interventions;
2. Strengthen the national institutional capacity of government and non-government agencies in designing, implementing and assessing the impact of different health promotion and communication interventions; and
3. Assist USAID's CAs and other organizations to support the communication element of their programs.

HealthPRO communication activities are addressing the following health services: Maternal, Neonatal, Child Health and Nutrition (MNCHN), Family Planning (FP), Tuberculosis (TB) and HIV-AIDS, as well as other infectious diseases like Avian Influenza (AI).

The expected outcomes of the HealthPRO Project are:

1. Positive behavioral results among individuals and care givers, including adoption of behaviors that prevent disease and reduce risks of morbidity and mortality;
2. Increased capacity of national and local institutions in carrying out effective health promotion activities; and
3. Improved coordination of governmental and non-governmental health promotion activities funded by USAID and other donors.

Geographical locations in which the program is currently working on are in 28 provinces in Luzon, Visayas and Mindanao (including the Autonomous Region in Muslim Mindanao [ARMM]) and 11 cities for HIV/AIDS.

The accomplishments of HealthPRO in the first quarter of Year 3 can be clustered under the following six components: behavior change communication planning, community mobilization and local advocacy, mass media, organizing and supporting health events, training and capacity building, and interagency technical activities.

Monitoring and evaluation is a cross cutting theme in all activities conducted by HealthPRO, as different tools and approaches are planned and integrated in the action plan of each component to

ensure that all activities are properly monitored and evaluated. Also, HealthPRO has provided technical support to different LGUs to enhance their capabilities in the area of M&E.

Project staff capability in BCC, fast tracking selection of LRAs and coordination with health offices are among the major challenges during this quarter and certain actions will be planned and considered to address them.

On administrative and management sides: the new Chief of Party (COP) for HealthPRO was approved by USAID and recruited, two ARMM field staff were selected and recruited, and candidates for the community mobilization and capacity building specialists' posts are being interviewed.

I. Introduction and Background

The Health Promotion and Communication Project or HealthPRO is the lead health promotion and communication project supporting USAID Strategic Objective 3. Its primary area of focus is the third intermediate result (IR3), “appropriate healthy behaviors and practices increased”. Although HealthPRO will contribute in some ways to the other three intermediate results, the overall objective of HealthPRO is to assist local government units (LGUs) in improving, expanding, and strengthening the quality and sustainability of health promotion and communication efforts. Three sub-results will support the achievement of the overall objective. These are: (1) to increase the reach and impact of Behavior Change Communication (BCC) interventions, (2) to develop institutional capacity and sustainability of those efforts and (3) to assist USAID’s health partners and other relevant organizations in maximizing the effectiveness of their own efforts in health promotion and LGU development.

The expected outcomes of the HealthPRO Project are substantial behavioral results among individuals and care givers. In brief, the results will be seen in improved awareness and changed behavior related to the specific results targeted in USAID’s strategy of support to the country in Maternal and Child Health (MCH), Family Planning (FP), Tuberculosis - Directly Observed Treatment Short Course (TB-DOTS), and Human Immuno Deficiency Virus-Acquired Immune Deficiency Syndrome (HIV-AIDS) as well as other infectious diseases like Avian Influenza (AI). Local institutions, supported by USAID’s partners, will know how to conduct high quality, cost-effective health promotion interventions using multiple approaches in interpersonal communications/counseling (IPC/C) supplemented with mass media and other promotional materials and tools. The capacity of the local institutions to carry on this work will be demonstrated by their ability to either budget for or mobilize the requisite resources to carry out the health promotion activities.

The main strategy of HealthPRO is to work closely with the Department of Health (DOH) and LGU staff to review the lessons learned and best practices from previous investments in health promotion, and expand and improve upon them. The emphasis is on mobilizing existing community organizations, volunteers and NGOs to support the health promotion work of the LGUs and their health staff. This includes improving skills and strategic coordination of programs. The project will continue collaborating with partners that are already engaged in innovative and successful health promotion strategies to assess and expand such strategies. New partnering arrangements will allow the LGUs to make the most of the resources and creative talents in media to support and reinforce the critical IPC/C work at the local level. At the forefront of all activity will be the effort to develop institutional capacity to sustain such programs beyond the period of support from USAID. The DOH, particularly the National Center for Health Promotion (NCHP), is the project’s main partner at the national level and will coordinate closely with this office as early as the pre-implementation phase to ensure a smooth implementation of activities from the national, regional and LGU levels.

II. Accomplishments

1. Component One: BEHAVIOR CHANGE COMMUNICATION PLANNING

1.1 Developed Behavior Change Communication (BCC) plans for 13 Wave 2 provinces

- The revised BCC/SCP workshop curriculum/module has been developed and is being pretested in one Wave 2 province. LRAs - with HealthPRO supervision and support- will be involved to transfer the technology to local partners.
- Selection of LRAs for Wave 2 LGUs is an ongoing process. It commenced with the advertisements for the Annual Program Statement (APS) for LRAs which was placed in major newspapers in December 2009. Four potential offerors have signified their interest although they have yet to submit their proposals. The APS intends to engage LRAs for the provinces of Isabela, Tarlac, Cagayan, Nueva Ecija, Bohol, Aklan, Davao del Sur, Agusan del Norte, Bukidnon, Misamis Occidental, Misamis Oriental, Zamboanga del Norte, and Zamboanga Sibugay.
- In Mindanao, HealthPRO, together with the LRA Davao Medical School Foundation- Institute for Primary Health Care (DMSF-IPHC), conducted an Orientation Workshop on Barrier Analysis to Plan for Behavior Change for the Province of Davao del Sur with 11 participants.
- LRAs involvement will be completed before provincial profiles for BCC planning are developed.

1.2 Finalized BCC plans for Autonomous Region in Muslim Mindanao (ARMM)

- HealthPRO finalized the ARMM BCC Plan and circulated the final draft to SHIELD for their review and comments. This document will be the ARMM Regional Communication Plan which will inform and guide the process of planning and implementation of different health promotion activities in the ARMM.
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- 5 LRAs in ARMM are indentified to implement the activities listed in the BCC plans. These are the Maguindanao Foundation for Good Governance and Development, Inc (MFGGDI) for Maguindanao, Al-Mujadilah Development Foundation (AMDF) for Lanao del Sur, Human Development and Empowerment Services (HDES) for Basilan, ALERT for Health for Sulu and Magbassa Kita Foundation, Inc. (MKFI) for Tawi-Tawi. Proposals were shared with the DOH ARMM Regional Office for their evaluation. However, due to security concerns and changes in the leadership, activities were temporarily on hold.

1.3 Finalized BCC plans for Wave 1 cities (HIV/AIDS):

- While there were no BCC Plans finalized during the quarter for HIV/AIDS, technical assistance to organize health events such as the World AIDS Day (WAD) was

provided. Eight of the 11 sites (Angeles City, Pasay City, Quezon City, Cebu City, Iloilo City, Bacolod City, Davao City and Zamboanga City) actively promoted WAD in their sites. Preparatory activities are ongoing to finalize the BCC Plan in consultation with the Social Hygiene Clinic/City Health Office staff. The finalization of the BCC plan will also provide the opportunity to update the SCP plans developed in 2008.

1.4 Assisted in preparing the national Family Planning (FP) and Maternal Neonatal and Child Health and Nutrition (MNCHN) BCC plan:

- In November 2009, the integrated MNCHN/FP BCC Plan was developed with the technical assistance from HealthPRO and submitted to USAID for review and DOH-NCHP for review and approval. It identified the different factors that contributed to low MNCHN/FP-related health outcomes; the national government and NGO reactions and responses to these different factors; the existing communication activities; and proposed BCC strategies. The HealthPRO-assisted MNCHN/FP This BCC plan was used in preparing the unified MNCHN BCC plan through 2-day consultative meeting with various representatives from funding agencies, and national, regional and provincial health offices.

1.5 Provided Inputs to national HIV/AIDS and tuberculosis (TB) plans:

HIV/AIDS

The HIV/AIDS Operation Research (OR) protocol has been circulated to the HIV TWG for their comments and/or revisions. HealthPRO has not received technical reviews to date. However, the TWG agreed to conduct the OR to guide and plan effective health promotion activities in HIV/AIDS among MARPs. HealthPRO will identify an OR expert to conduct the study and consult various HIV/AIDS sites for their active participation.

TB

A matrix of provinces' priorities TB BCC implementation has been developed. This matrix shows the case detection rate (CDR) and completion rate (CR), and its activities including IPC/C, social mobilization, mass media, strategic communication planning, and program implementation review. HealthPRO, together with TB LINC as the lead agency, has assisted the DOH-NTP in implementing the Philippine Strategy to Control TB 2010-2015 (Phil_Pact) utilizing the Cough to Cure approach.

1.6 BCC techniques for health communication specialists:

HealthPRO assisted in the KAISA (Kalusugan Alay sa mga Ina at Sanggol) sa Bulacan program conceptualization and launching. HealthPRO, together with the LRA Davao Medical School Foundation- Institute for Primary Health Care (DMSF-IPHC), also conducted an Orientation Workshop on Conducting Barrier Analysis to Plan for Behavior Change for the Province of Davao del Sur.

1.7 Other BCC activities:

- *Luzon*
 - Provided technical assistance to the Panagasinan and Albay provinces to finalize their BCC workplans in October and November 2009 respectively.
 - HealthPRO conducted several health promotion activities in the evacuation centers in Psig and Marikina after the typhoon of Ondoy in October 2009. Those activities were in form of distribution of IEC materials and IPC/C sessions to the young mothers evacuees on breast-feeding and child nutrition.

- *Visayas*
 - The BCC plans for the provinces of Negros Oriental, Negros Occidental and Capiz were validated with the Provincial Health Office staff. Subsequently, the Provincial Health Offices were consulted for their recommendation on the BCC campaign activities to be undertaken in each of their ten (10) priority municipalities.

- *Mindanao*
 - The BCC plan for Zamboanga del Sur was finalized. The plan validation was conducted with HPC monitoring team with the participation of CAs of the USAID-Office of Health such as HealthGov and TB LINC.
 - RIMCU-Xavier University was contracted to conduct the Rapid Appraisal Study on the health beliefs and practices of the Indigenous Communities in Bukidnon. the original selection of the target indigenous communities was changed due to the advice to the RIMCU team by the Mayor not to push through with the original sites because of the peace and order situation in most of the communities. The analysis of the results of the study is expected to be completed in the early part of January. A dissemination forum will be conducted before the end of January.

- *ARMM*
 - The identification and selection of LRAs were completed in ARMM and awaiting the final endorsement of DOH ARMM. The planned activities of the LRAs were discussed during workshops with other CAs (i.e. SHIELD, TBLINC) and regional and provincial health staff.

2. **Component Two: COMMUNITY MOBILIZATION AND LOCAL ADVOCACY**

2.1 Support for community mobilization initiatives:

- In preparation for community mobilization activities, LRAs in Luzon have started to conduct an inventory of local community groups who may be potential partners for health activities. The LRAs in the Visayas, together with the PHOs, developed a short list of local community groups in the 10 priority municipalities that could be tapped to assist in health promotion and communication activities.

- Although the Community Mobilization Trainer's guide was developed during this quarter, revisions were suggested prior to the engagement of the national LRA on

community mobilization. A draft Community Mobilization strategy was also developed.

- In Mindanao, HealthPRO continues to provide IEC materials to the Drivers Advocates for Health of Koronadal City, South Cotabato for the IEC packets in their tricycles. The provincial HEPO regularly meets with the drivers for updating and follow-up.
- In the ARMM, HealthPRO started strengthening transport groups as health advocates, specifically the Microscopy on Wheels (MOWs) of North Kabuntalan, Maguindanao. This group was previously tapped by the USAID-assisted Maguindanao TB Control Project of the Catholic Relief Services as community advocates for TB control. The tricycle drivers helped in securing sputum for laboratory analysis as well as referral of TB symptomatics. HealthPRO's assistance through the Health Education and Promotion Officer of IPHO Maguindanao is meant to extend the group's role in transporting pregnant women to health facilities during the term for pre-natal services as well as for delivery and post-partum services. Member drivers also performed peer counselling on family planning.

2.2 Technical assistance to Community Health Teams (CHTs)/Women Health Teams (WHTs)/Community Health Action Teams (CHATs) on Community Mobilization skills:

- HealthPRO, in collaboration with HealthGov, provided technical assistance to Bulacan in designing their KAISA or Kalusugan para sa Ina at Sanggol program.
- HealthPRO provided technical assistance to Albay in designing roll out of MNCHN Buntis Congress and Buntis Pageants for replication by municipalities based on their BCC plan. Albay continued to conduct WHT Orientations and organized WHTs in all its municipalities and cities using the materials developed with HealthPRO technical assistance.

2.3 Mobilizing resources to support BCC activities:

- HealthPRO project staff in Luzon, Visayas, Mindanao and the ARMM participated in consultations with regional, provincial and municipal partners to leverage funds for IPC/C roll-out trainings for health service providers and community health volunteers, and special health events through its inclusion in the LGUs' Annual Operation Plan (AOP).
- In the Visayas, advocacy for HPC was conducted during the initial round of field visits by HealthPRO and the LRAs. The LGU partners, through their representatives, pledged to provide counterpart funds for the following:
 - a. IPC/C roll-out training for remaining health service providers in the rural health units who will not be covered by the project. The remaining HSPs ranged from 8 to 25 per LGU.

- b. IPC/C roll-out training for 25 community volunteer workers, in addition to the initial set of 25 to be covered by the project
 - c. Transportation cost for IPC/C training of 2 to 3 health service providers, which will be conducted in the capital town of the province
 - d. Conduct of special health events
- In Mindanao, meetings with the Regional Directors of the Centers for Health Development in Regions IX, X and XI were also conducted to explore other possible sources of funds for the roll-out trainings.

3. Component Three: MASS MEDIA

- The task order for mass media LRA has been submitted to USAID for review. HealthPRO has modified the task order based on USAID comments and resubmitted it for approval. National and local mass media partners were engaged to help disseminate information on specific health events such as Global Hand washing Day and Population and Development Week. These helped mobilize target groups' awareness and promote appropriate behaviour. For example, in the Visayas, media partners from local radio stations were tapped by the Provincial Health Office of Negros Occidental and Bohol to promote health messages related to Population and Development Week and Food Fortification Day.

3.1 Media outreach and dissemination:

- HealthPRO carried out media mapping activities as a preliminary activity for the mass media intervention. The inclusion of media advocates in the directory and the branding and printing of the directory will be carried out by the Mass Media local replicating agency.
- In the ten priority municipalities of Negros Oriental, Negros Occidental and Capiz, a list of local radio stations, which are the LGUs' media partners, was generated. Some LGUs are paying for weekly radio block time, while other LGUs could tap their networks in radio stations in their locality. The LGUs expressed willingness to facilitate the airing of health messages on family planning, maternal and child health, and TB DOTS through these local radio networks.
- HealthPRO provided technical assistance to LGUs and partner health offices in drafting press releases for health events including press releases for the Food Fortification Day, Population and Development Week, Buntis Pageant and World AIDS Day.

3.2 Developing personal stories related to health issues:

- HealthPRO identified possible practices for documentation in Essential Newborn Care and breastfeeding. As a starting point, data were gathered from the participants of the message development training.

3.3 Media tracking and monitoring:

- Daily reports on reproductive health/family planning-related news, maternal and child health-related news, HIV/AIDS-related news, tuberculosis-related news, DOH-related news, bird flu-related news, and A(H1N1)-related news captured on TV, radio and print media were disseminated to USAID and other CAs.
- A summary of the TV, radio and print news clips from June to December yielded interesting results. For all health themes, the highest number of hits was in national broadsheets. If all print channels are considered, these would account for more than 80% of the media hits across the health themes.
- Different health topics illustrated different trends. The number of hits for family planning increased from June to December with the highest number in November. Magazine share in hits were highest next to broadsheets in August and November. TV share in hits was second to broadsheets in September. For maternal health, clips were mostly in broadsheets and magazines, except in December when tabloids had the next highest share in hits. Clips across all channels peaked in August. Child health-related clips were highest in magazines and peaked towards the latter part of the year. Tabloid hits were highest in December while broadsheet share was highest in August. Then it is replaced by magazines and then again replaced by tabloids at the end of the year.
- Tuberculosis-related clips were highest in broadsheets. Broadsheet and TV share in media hits were highest in the 3rd quarter of the year and shifted to broadsheet and tabloid in the last part of 2009. Majority of the STI/HIV/AIDS clips were in broadsheets followed by tabloids. Online share was also high in the 3rd quarter but waned in the last part of the year.
- The highest hits at the end of six months was for STI/HIV/AIDS at 709 clips, followed by FP, MH, CH, and TB the least at 81 clips.

4. Component Four: ORGANIZING AND SUPPORTING HEALTH EVENTS

- HealthPRO provided technical assistance to local government units at various levels in planning significant provincial, city and municipal health events. The project's technical assistance ranged from designing and conceptualizing the event, providing additional resource materials and job aids, documenting the events for local dissemination (PR), drafting press releases to leveraging free airtime on national TV.
- HealthPRO was able to leverage an accumulated 7 minutes free airtime on a primetime newscast, 24-Oras, in GMA 7 for Global Handwashing Day and World AIDS Day with a value of more than six million pesos.
- HealthPRO provided technical assistance to four provinces-Albay, Bulacan, Pangasinan, and Tarlac, and three cities- Angeles, Pasay, Quezon, in conducting local

health events. More than 4,400 were reached through the various health events, including Global Handwashing Day, Buntis Congress, World Population Day, Family Health Fair, FP Couples' Classes, Buntis Pageant and World AIDS Day.

- In the Visayas, HealthPRO provided technical assistance to three provinces- Capiz, Bohol and Negros Occidental, and two cities- Iloilo and Bacolod, in their local events. The health events conducted were Garantisadong Pambata, Global Handwashing Day, Food Fortification Day, Population and Development Week, and World AIDS Day. As a result of HealthPRO's technical assistance in the conduct of Capiz' Garantisadong Pambata (GP) provincial launch in October 2008, the province was awarded as the regional winner of the first GP Champ competition held in November 2009. The province cited HealthPRO's *Workshop on Strategies for Engaging Media*, conducted in 2008, as one of the innovative inputs that strengthened their GP program implementation and helped them win as a regional GP Champ. The health events reached more than 26,000 people (partial) through the actual event and radio plugs.
- In Mindanao, HealthPRO provided technical assistance to all 11 provinces and three cities- Zamboanga, Davao, and General Santos, in conducting health events such as Population and Development Week, Garantisadong Pambata, Global Handwashing, and World AIDS Day. The events and the radio plugs in support of these events reached more than 56,000 people. In addition, 185 local government units were provided with IEC materials for Global Handwashing Day.
- A matrix on the details of these health events is attached as Annex 1.

5. Component Five: TRAINING AND CAPACITY BUILDING

5.1 Interpersonal Communication and Counseling Training of Trainers (IPC/C TOT)

- HealthPRO has submitted to USAID the list of IEC materials for FP, MNCHN, TB, and HIV/AIDS that are available for the project, which may be requested and photocopied by local government units and other partners for their health-related activities. These are in the form of brochures, flyers, desk charts, wall charts, and radio/TV plugs.
- HealthPRO has secured the clearance from USAID for the printing of the FP wall chart. The FP wall chart will be used as job aid for community health education on FP and as an IEC material in health facilities such as rural health units and barangay health stations.
- With the series of IPC/C TOT for LGU health service providers and partners, HealthPRO finalized the IPC/C Training of Trainers manual, and printed IPC/C job aids. HealthPRO also revised the concept for SM Bulletin into a Midwife's Toolkit. In cooperation with A2Z and NCDPC, HealthPRO provided technical assistance in revising the Garantisadong Pambata 2009 Primer. HealthPRO, together with A2Z,

circulated the draft of the nine messages for GP to NCDPC. However, this was not finalized in time for the October round of GP due to DOH focus on post-typhoon Ondoy relief efforts.

- From November to December 2009, HealthPRO conducted the TOT on IPC/C in the provinces of Bulacan, Albay and Pangasinan in Luzon; Negros Oriental and Negros Occidental in the Visayas; and, Sarangani, South Cotabato, Zamboanga del Sur and Compostela Valley in Mindanao, with 91 participants. The succeeding IPC/C TOT tables provide information on the participants.
- **Luzon**

Training of Trainers – IPC/C

Trained on IPC/C and organized trainers in three Wave 1 provinces and three CHDs (1, 3 and 5).

DOH Region/Province	No. of Trainers
Pangasinan (IPHO)	7
(CHD 1)	3
(LRA)	2
Bulacan (IPHO)	8
(CHD 3)	1
(LRA)	4
Albay (IPHO)	6
(CHD 5)	2
(LRA)	2
TOTAL	35

- **Visayas**

Training of Trainers – IPC/C

Trained on IPC/C and organized trainers in two Wave 1 provinces and two CHDs (6 and 7).

DOH Region/Province	No. of Trainers
Negros Occidental (PHO)	6
(LRA)	2
Negros Oriental (PHO)	4
(DOH rep)	2
(LRA)	2
TOTAL	16

- *Mindanao*

Training of Trainers – IPC/C

Trained on IPC/C and organized trainers in four Wave 1 provinces.

DOH Region/Province	No. of Trainers
Sarangani (IPHO)	5
(CHD)	1
(LRA)	2
South Cotabato (IPHO)	7
(CHD)	2
(LRA)	2
Compostela Valley (IPHO)	7
(CHD)	2
(LRA)	2
Zamboanga del Sur (IPHO)	6
(CHD)	2
(LRA)	2
TOTAL	40

5.2 NCHP and other DOH staff on BCC interventions:

- Under the Technical Advisory Group mandate, HealthPRO and USAID met NCHP, NCDPC and the MNCHN Task Force representative to determine health promotion and communication priorities for FP and MNCHN. Specific DOH technical assistance needs were identified and responded to including the provision of technical inputs for the revision of Administrative Order 58 (National Policy for Health Promotion) and the development of a sample health promotion package for health events (creative briefs, press briefing, list of recommended materials) for MCH and FP.
- HealthPRO participated in the National GP Summit by providing technical assistance to the organization of the Summit and a presentation on BCC Best practices in GP which was held in Palawan on November 2009. Some of the technical assistance provided was the support provided to NCHP in formulating and formalizing [write up] the process for validating regional GP CHAMPS winners.
- HealthPRO participated in the Technical Forum for Nurses which is one of the launch activities of the DOH's Essential Newborn Care Protocol with the signing of Administrative Order 25 s 2009. HealthPRO shared field experiences in promoting the “new” protocol and the possibilities of health service providers adopting the practice in their work. The Project also provided ideas on faster dissemination of information on the protocol at the LGU level. Moreover, HealthPRO acquired DOH materials (posters) and disseminated them to local government units in the IPC/C TOT trainings.

6. Component Six: INTERAGENCY TECHNICAL ACTIVITIES

6.1 Other USAID CAs on BCC techniques

HealthPRO conducted 3 BCC TWG meetings during the quarter and disseminated the minutes of the meeting to all members of the TWG.

- HealthPRO attended regionalization workshops and participated in inter-CA events such as the display booth during the League of Municipalities of the Philippines (LMP) Convention on October 26-27, 2009 at the Manila Hotel. HealthPRO also provided inputs on the training module and helped facilitate the Supportive Supervision Training of Trainers for Rural Health Nurses in Luzon region.
- In Mindanao, HealthPRO participated in the Informed Choice and Volunteerism (ICV) Training Workshop and the Training of Technical Assistance Providers (TAPs) on CSR.

6.2 Coordination with Technical Working Groups (TWGs)/ Task Force (TF):

- HealthPRO participated in and inter-agency TWGs and TF meetings such as the Family Planning (FP) TWG, Regional Capacity Building Initiative (RCBI) TWG, Informed Choice and Volunteerism (ICV) TWG, Contraceptive Self Reliance (CSR) TWG, Maternal Neonatal and Child Health and Nutrition (MNCHN) TWG, HIV/AIDS TWG, TB TWG, Monitoring and Evaluation (M&E) TWG, Behavior Change Communication (BCC) TWG, and Gender Task Force.

6.3 Workplace/private sector network communications support:

- HealthPRO finalized the “Social Marketing Blueprint for PhilHealth: The Promotion Component” as part of the joint CA execution of the PhilHealth Benefits Delivery Review. Moreover, HealthPRO reviewed current communication/marketing practices and other social marketing activities in the areas of membership and payments, accessing benefits and claiming/reimbursement. This plan has been submitted to HPDP for incorporation in the overall Benefits Delivery Review.

III. MONITORING AND EVALUATION

1. Annual reporting:

- Data for OP indicator reporting for FP, MNCHN, TB and HIV were collected and collated for the annual report. Data included number of people trained; number of LGUs covered; health events assisted; number of people reached through the health events, community outreach and mass media. These were also submitted to the concerned lead agencies for each health theme for consolidation and reporting to the M&E TWG and for the USAID PIR.
- HealthPRO, as M&E lead agency for reporting on family planning, collected the annual OP indicator data on FP from all the other cooperating agencies. Training databases were gathered and checked for double counting across agencies. Health event and media tracking forms were collated. FHSIS data was consolidated for ARMM and non-ARMM areas. Based on the collected data, FP reports and presentation materials were prepared for the M&E TWG and the program implementation review.

2. LGU capacity building for collection of HPC data:

- To assist the LGU in tracking their HPC efforts as a result of the technical assistance from HealthPRO, and to facilitate the collection of output indicator data from the provinces, HPC tracking tools were designed in Year 2 of the project. For this first quarter, Wave 1 provinces were oriented on the tools. Provincial HEPOs, designated municipal HEPOs, nurses, BHW presidents were provided orientation skills to allow for the tools to be integrated in their reporting systems. Orientation sessions were conducted for Albay, Bulacan, Pangasinan, Negros Oriental, Negros Occidental, Compostela Valley, and South Cotabato. The participants have scheduled roll-out of the orientation during their regular monthly meetings from November to January. Capiz, Sarangani and Zamboanga del Sur are scheduled to have the orientation in January 2010. Coordination with the ARMM regional office has resulted in their decision to hold the orientation after their communication strategy plan has been finalized.

HEPO Training on HPC Recording/Reporting Form (Tracking)

Province	No. of Trainers
Pangasinan	136
Bulacan	23
Albay	50
Angeles City	19
Negros Occidental	43
Negros Oriental	37
Compostela Valley and South Cotabato	90

3. Coordinative and support activities:

M&E technical support was provided to ongoing program activities such as the development of the IPC/C training modules and conduct of some training activities including the orientation of local replicating agencies.

Aside from the Luzon Team, the M&E staff also attended the regional program implementation review for CHD I and III. This was to allow observation and understanding of the PIR reporting processes and the data management needs of the provincial and city health offices.

The M&E staff also represented HealthPRO in the dissemination forum for the results of the Integrated HIV Behavioral and Serological Surveillance (IHBSS) survey and drafted a write-up for the activity with HPDP that was included in the USAID weekly highlight.

IV. MANAGEMENT AND ADMINISTRATION

1. Staffing plans:

HealthPRO proposed Chief of Party (COP), Dr. Soliman Guirgis, was accepted by USAID/Philippines. He is a health communication expert who has extensively designed, managed and evaluated various national strategic communication and advocacy for behavior change in health fields particularly; communicable diseases, non-communicable diseases, populations, reproductive health, family planning programs and MCH programs.

Two ARMM field staff (Ms. Almira Makapangcat/Provincial Coordinator and Ms. Joyce Marquez/Fin/Admin Assistant) were hired to provide full staff complement for the ARMM HealthPRO office in Cotabato City. However, Mr. Mateo de Guzman, Grants Manager, tendered his resignation last December 15, 2009. A replacement is being considered.

HealthPRO has also proposed new positions to assist the communications team in the delivery of timely outputs. Posts for the Community Mobilization Advisor, , Training/Capacity Building Advisor, Field Communications Assistants and Graphics Artist were advertised in the local newspapers and in URC's website. Applications were received and interviews were scheduled to select the qualified candidates.

2. Workplans and reports:

During the quarter, HealthPRO submitted its Annual Report on October 16, 2009 and its Year 3 Workplan on November 25, 2009.

3. Project support activities:

HealthPRO held its second general staff meeting in December 2009 to review accomplishments and the work plan. This allowed the staff to develop an accelerated workplan for January to March 2010 to identify crucial priority tasks.

4. Financial and administrative issues

On November 30, 2009, URC HQ submitted a budget realignment request for the GHS-I-00-07-00010-00 Delivery Order No. 2 Philippine Health Promotion and Communication Project (HealthPRO). Overall, the realignment reflected an increase in the travel, allowance and consultant lines, which has been offset by a reduction in allocated funds for the subcontract, other direct cost, and salaries and wages lines. The total contract amount remained unchanged.

There was an increase in line item Salaries and Wages which has been under spent from project inception to date. Changes in the projections over the next three years include: hire of an expat Chief of Party, consequently removing the Cooperating Country National (CCN) Chief of Party (COP) position. Short term technical assistance (STTA) line item increased due to an increase in our estimate for the average TA rate, to reflect an overall

rise in TA rates since the beginning of the project. Even though URC initially planned to procure significant technical assistance services from local NGOs, it was realized that most local NGOs do not have the capacity to provide these services. As a result, based on recommendations from Consultant Peter Connell and in consultation with the COTR, URC will recruit additional long-term local staff that will be tasked with providing direct Technical Assistance to Local Government Units (LGUs) and other local partners in better designing and targeting BCC messages.

4.1 Financial management:

Philippines - HealthPRO

Contract No. GHS-I-00-07-00010 Order No. 02

Line Item Costs Expenditure as of 12/31/09

	Total Cost	Estimated	1st Quarter FY10 Expenditures	Total Contract-To-Date Expenditures	Remaining Funds
Salaries and Wages	\$ 3,772,529.00		\$ 211,542.82	\$ 1,359,142.26	\$ 2,413,386.74
Allowances	\$ 257,448.00		\$ 1,136.91	\$ 3,476.55	\$ 253,971.45
Consultants	\$ 387,026.00		\$ 20,434.93	\$ 144,434.04	\$ 242,591.96
Travel and Per Diem	\$ 1,504,398.00		\$ 42,710.90	\$ 600,718.78	\$ 903,679.22
Equipment	\$ 164,672.00		\$ 582.06	\$ 139,258.32	\$ 25,413.68
Other Direct Costs	\$ 2,190,467.00		\$ 83,578.81	\$ 762,515.11	\$ 1,427,951.89
Subcontracts	\$ 3,150,287.00		\$ 23,664.90	\$ 65,055.78	\$ 3,085,231.22
Indirect Costs	\$ 2,563,721.00		\$ 117,410.60	\$ 858,855.08	\$ 1,704,865.92
Fixed Fee at 7%	\$ 979,338.00		\$ 35,074.33	\$ 275,341.92	\$ 703,996.08
Total Estimated Cost	\$ 14,969,886.00		\$ 536,136.26	\$ 4,208,797.84	\$ 10,761,088.16

Total Estimated Contract Amount	\$ 14,969,886.00
Total Obligated Amount	\$ 6,750,740.00
Total Expenditure as of 12/31/09	\$ 4,208,797.84
Total Remaining Estimated Contract	\$ 10,761,088.16
Total Remaining Obligated Amount	\$ 2,541,942.16

4.2 Grant management

In October 2009, HealthPRO conducted the General Orientation of LRAS in Manila. This was attended by the following LRAs: Philippine Rural Reconstruction Movement (PRRM), Field Epidemiology Training Program Alumni Foundation, Inc. (FETPAFI), Philippine Business for Social Progress (PBSP), Gerry Roxas Foundation (GRF), Family Planning Reproductive Health Advocacy Network, Nutrition Center of the Philippines (NCP), Davao Medical School Foundation (DMSF), Mahintana Foundation Inc.(Mahintana), and Misamis University Community Extension. In addition, HealthPRO facilitated the introduction and initial meeting of the LRAs and the PHO technical staff and courtesy calls to local government units.

The LRAs have signed the contracts. Most of the LRAs have already submitted their inception reports and work plans and HealthPRO released the first tranche to these LRAs, namely: FETPAFI, NeOFPRHAN, PRRM, DMSF-IPHC, PBSP, MUCEP, and NCP.

The finalization of the national LRA for community mobilization is ongoing.

V. CHALLENGES AND NEXT STEPS

1. Challenges and solutions

HealthPRO experienced challenges in implementing its activities during the quarter. At the same time the project proactively addressed these challenges.

1.1 Project staff capacity:

With the scaling-up of activities in the field, the project needs to add at least one additional staff either with expertise on communications or health services to support the Luzon team in providing assistance to LGUs, participating in regional and provincial level activities. Hiring of additional staff is expected to materialize in the next quarter

1.2 Fast tracking selection of LRAs:

Noting the delays in the initial selection of LRAs, HealthPRO issued an Annual Program Statement (APS) under the USAID approved Grants under Contract Manual, for Wave 2 provinces. It is expected that the APS will fast track the engagement of LRAs compared to the previous process.

1.3 Standardizing modules among CAs:

Considering that in some LGUs different CAs are present, agreements among CAs should be reached regarding capability building activities that overlap e.g. IPC/C between HealthPRO and TB LINC to ensure that the LGUs will not get confused with the assistance they receive from USAID.

1.4 Coordination with the health offices:

The change in ARMM DOH' administration presents new opportunities for HealthPRO. In Zamboanga del Sur, political dynamics in the Provincial offices affected the mobility of participants to attend IPC/C trainings. In Compostela Valley, attendance of participants to trainings was also compromised with travel restrictions issued by the Office of the Governor. Constant and proactive coordination with appropriate authorities positively addressed these concerns. The security concerns in ARMM affected the activities in the region.

2. Next steps

HealthPRO continues to carry out steps to address identified gaps and challenges in the implementation of its activities. Next steps identified by HealthPRO include the

following: hasten LRA engagement process; completion/validation of BCC Plans; (for ARMM) completion of one-year provincial consolidated TA Plans validated with SHIELD and IPHOs; and fast tracking of annual operational plan covering activities for January to March 2010.

HealthPRO is also finalizing an Accelerated Operation Plan for the period January to March 2010. This outlines priority tasks to guide the implementation of activities at the central and field levels. This will be submitted to USAID by January 31, 2010.

A detailed regional planned activities for January 1 to March 31, 2010 is attached as Annex 2. Activities are classified as planning, BCC implementation, capacity building, and interagency activities. Cross-cutting activities are outlined in the M&E and program management sections.

ANNEXES

Annex 1: Health Events

The subsequent tables contain information on the health events conducted during the quarter, with HealthPRO's technical assistance.

Free airtime leveraged on National TV

Channel/Program	Event	Date	Estimated Value Leveraged
GMA 7 /24-Oras	Global Handwashing Day	Oct. 15, 2009	PhP 3,456,000
GMA 7 /24-Oras	World AIDS Day	Dec. 1, 2009	PhP 2,592,000

Luzon

October

LGU	Event	Date	No. of people reached
Pangasinan <i>Lingayen Day Care Center</i>	Global Handwashing Day Celebration	Oct. 15, 2009	70
Albay <i>PHO, Legazpi City</i>	Global Handwashing Day Celebration <i>Orientation of Food handlers on Food Safety and Handwashing</i>	Oct. 20, 2009	100
<i>Guinobatan</i>	Buntis Congress	Oct. 29, 2009	81
Bulacan <i>Plaridel Central School</i>	Global Handwashing Day Celebration	Oct. 20, 2009	300

November

LGU	Event	Date	No. of people reached
Tarlac <i>Majarica Hotel, Tarlac City</i>	World Population Day <i>1st Provincial Multi-Sectoral Forum: Empowering Women for Family Health and Development.</i>	Nov. 24, 2009	76

December

LGU	Event	Date	No. of people reached
Bulacan <i>Malolos</i>	Bulacan Family Health Fair <i>KAISA – Kalusugan Alay sa mga Ina at Sanggol</i>	Dec.16, 2009	250
<i>Meycauayan</i>	FP Couples Classes	Dec.11, 2009	35
Albay <i>Guinobatan</i>	Buntis Pageant	Dec.18, 2009	500
Angeles City <i>Market Area</i>	World AIDS Day	Dec. 6, 2009	2500
Pasay City	World AIDS Day	Dec. 7, 2009	200
Quezon City <i>QC Hall and Lower Atrium</i>	World AIDS Day	Dec. 7, 2009	300

Visayas

October

LGU	Event	Date	Reach
Capiz	Garantisadong Pambata	Oct. 2009	

<i>(Regional winner of the first GP Champ)</i>			
Bohol <i>Duero Barangay Elementary School</i>	Global Handwashing Day	Oct. 2009	500

November

LGU	Event	Date	Reach
Bohol <i>Tagbilaran City</i>	Food fortification Day	Nov. 2009	67
Bohol	Food Fortification Day (radio broadcast - DYTR)	Nov. 2009	To follow
Negros Occidental	Population & Development Week (radio broadcast- DYEZ)	Nov. 2009	To follow
Negros Occidental	Food Fortification Day (radio broadcast – DYEZ)		To follow
Negros Occidental <i>Provincial Capitol</i>	Population & Development Week	November 2009	20,000

December

LGU	Event	Date	Reach
Iloilo City <i>Central Philippine University</i>	World AIDS Day	Dec. 2009	488
Bacolod City <i>SM Events Center</i>	World AIDS Day	Dec. 2009	200
Bacolod City <i>Major thoroughfares</i>	World AIDS Day	Dec. 2009	5,000

Mindanao

October - December

LGU	Event	Date	Reach
Bukidnon <i>Lantapan</i>	Population Development Week	cancelled	
Bukidnon <i>Malaybalay and Quezon</i>	Garantisadong Pambata		800
11 provinces of Mindanao	Global Handwashing Day <i>Clean Hands Save Lives</i>	Oct. 15, 2009	185 LGUs (for IECs)
Zamboanga del Sur <i>Pagadian City Day Care Center</i>	Global Handwashing Day		60
Pagadian City	Global Handwashing Day (Scrub video on cable TV)		53,600
Zamboanga del Sur 11 public schools	Global Handwashing Day		
Zamboanga City	World AIDS Day <i>Kaisa Ako Laban sa HIV/AIDS</i>	Dec. 12, 2009	800
General Santos City	World AIDS Day		
Davao City	World AIDS Day	Dec. 1, 2009	800

Annex 2: Planned Activities for the Next Quarter

Planned Activities for the Next Quarter		January				February				March			
		W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4
PLANNING													
	Luzon												
1	BCC plans: meetings/FGDs, WS, finalization												
	Isabela												
	Tarlac												
	Nueva Ecija												
	Cagayan												
	Visayas												
2	BCC plans: Aklan and Bohol												
3	BCC plans: Cebu, Mandaue, LapuLapu, Iloilo, Bacolod												
4	LRA orientation on health events planning/plan for WTD: Capiz, NegOr, NegOcc												
	Mindanao												
5	Planning Meeting with IPHO Sarangani												
6	Planning Meeting with MUCEP												
7	Results dissemination: IP health practices- Bukidnon												
	ARMM												
8	Consultation meetings: DOH ARMM network												
9	Harmonization and planning with SHIELD												
10	Orientation and detailed work planning by LRAs												
	Specialists												
11	TA to DOH/NCDPC: update FP Desk Chart												
12	Materials and concept paper preparation for the "Wait and Educate" for FP												
13	Finalize HIV/AIDS BCC Plan for Wave 1 cities												
14	OR expert to conduct the study and consult various sites												
15	Respond to TA needs identified by DOH in the MNCHN BCC Plan												
16	Social prep for WTD, determining activities												
17	LGU sites/target groups identification, for WTD												
18	Coordination with LGUs for WTD celebration												
BCC IMPLEMENTATION													
	Luzon												
19	TA provision based on BCC plan: Bulacan, Albay, Pangasinan												

Planned Activities for the Next Quarter		January				February				March			
		W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4
20	TA on IEC Materials Development : Quezon City, Pasay City, Angeles City												
21	Assistance to LGUs on Health Events World TB Day (March) GP (April)												
	Bulacan, Albay, Pangasinan												
	Isabela, Tarlac												
	Cagayan												
	Nueva Ecija												
	Visayas												
22	IPC/C counseling: FP, MNCHN, TB- NegOr, NegOcc, Capiz												
23	Masterlist local groups for CM partners (Wave 1)												
24	Identification of community influentials												
25	Orientation of community influentials and local groups (Wave 1)												
26	Training: master trainers (Wave 1 provinces)												
27	World TB Day												
28	Sabay-sabay pasuso												
29	Development and dissemination of press releases and radio PSAs to promote TB/FP												
30	Directory of local radio station programs in priority LGUs (LGU paid/PHO staff has regular guesting)												
	Mindanao												
31	Pre-testing: Behavior Questionnaire, Orientation & Simulation- Davao del Sur												
32	Conduct of FGD in 6 municipalities- Davao del Sur												
33	BCC Planning Workshop for Davao del Sur												
34	Workshop on Barrier Analysis- Misamis Occidental												
	ARMM												
35	Community assemblies for HPC (low performing areas, 5 provinces)												
36	Orientation & training: community support groups												
36	Orientation/message dev't WS: radio hosts/program coordinators- Maguindanao/Lanao												
38	"Burus" sessions in Pangutaran, Sulu												
39	Dissemination of FP wall chart/FP brochures to PHOs and RHUs												
	Specialists												
40	TB health information activities for WTD sites												

Planned Activities for the Next Quarter		January				February				March			
		W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4
41	FGD on basic TB info and addressing stigma for selected target groups												
42	PSA/radio plugs on TB												
43	Distribution of TB information materials in communities												
CAPACITY BUILDING													
	Luzon												
44	IPC/C Roll-Out Training by Wave 1 LGUs (temp)												
	Bulacan												
	Albay												
	Pangasinan												
45	Conduct SCP workshops for Wave 2 (TBD)												
	Visayas												
46	IPC/C Training of Trainers: Capiz												
47	IPC/C Training-HSPs: NegOr, NegOcc, Capiz												
48	IPC/C Training-BHWs: NegOr, NegOcc, Capiz												
49	ToT on IPC/C												
	Mindanao												
50	IPC/C for HSPs (Roll-out)-South Cotabato												
51	IPC/C: Volunteer HW (Roll-out)- South Cotabato												
52	TOT on Community Mobilization- South Cotabato												
53	ToT on IPC/C for Davao del Sur												
54	IPC/C for HSPs (roll-out)- Compostela Valley												
55	IPC/C: Volunteer HW(roll-out)- Compostela Valley												
56	IPC/C for HSPs (roll-out)- Zamboanga del Sur												
57	IPC/C: Volunteer HW (roll-out)- Zamboanga Sur												
	ARMM												
58	IPC/C TOT: DOH, Maguindanao, Lanao Sur												
	Sulu, Basilan, Tawi-Tawi												
59	Rollout of IPC/C training in the provinces												
60	TOT CM: DOH, Maguindanao, Lanao Sur												
61	Sulu, Basilan, Tawi-Tawi												
	Specialists												
62	Communication Product Approval from USAID for the printing of FP brochures												

Planned Activities for the Next Quarter		January				February				March			
		W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4
63	TB health information activities in identified sites (BHWs, CHVs) for WTD celebration												
64	TOT on Counseling TB patients (w/ TB LINC)												
INTERAGENCY ACTIVITIES													
Luzon													
65	Monthly/Regular Regional Inter CA meetings												
66	Participation RCBI activities												
67	Regional F1 Implementation review (as scheduled by HPDP and HealthGov)												
68	F1 Regionalization Workshops (as scheduled by HPDP and HealthGov)												
Visayas													
69	Visayas inter-CA meeting												
70	Visayas Program Implementation Review												
ARMM													
71	Engaging MRLs in HPC activities (Inter-CA)												
Specialists													
72	2-day Inter-CA training on ICV (HealthPRO staff)												
73	Field monitoring for ICV compliance (with AMs)												
74	Health events (provincial/municipal)												
75	Experiences and agreements on guidelines in the conduct of health events reviewed												
76	TA to SHIELD's launching of Project 100 RUBIES												
77	WTD preparatory meetings with TBLinc and other CAs; PhilCAT and DOH												
78	WTD celebration												
MONITORING AND EVALUATION													
79	Regular Meetings with LRAs												
80	Monitor LRA field activities												
81	Inter CA Program Implementation Reviews (as scheduled by HPDP and HealthGov)												
82	Review of HPC tracking tool during IPC/C training of HSPs & BHWs: NegOcc and NegOr												
83	Provision of HPC collation tool to all PHNs and RHMs of NegOcc and NegOr												
84	Collection of accomplished HPC tracking tool from PHO HEPO: NegOcc, NegOr and Capiz												
85	ICV monitoring												
86	PMEP update for Y3												

Planned Activities for the Next Quarter		January				February				March			
		W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4	W 1	W 2	W 3	W 4
87	HPC Tool Orientation for Capiz, Sarangani and Zamboanga Del Sur												
88	HPC Tool Orientation for ARMM												
89	Consolidation of submitted Q1 indicator data												
90	Contacting Survey Agency												
PROGRAM MANAGEMENT													
91	Engagement and orientation of Wave 2 LRAs (Luzon)												
92	Selection of LRAs for Wave 2 provinces (Visayas)												
93	Orientation of LRAs: Wave 2 provinces (Visayas)												
94	Attend inter-agency TWG meetings												
95	Courtesy calls to new Regional Health Secretary and PHO of Maguindanao												