



**Advancing Social Marketing for Health in the Democratic Republic of Congo
Task Order # GHH-I-05-07-00062-00**

**Programmatic Quarterly Report
January – March 2010**

**Submitted by:
Population Services International (PSI) / Association de Sante Familiale (ASF)**

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I. Executive Summary

Organization: Population Services International (PSI)/Association de Santé Familiale (ASF)

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Program Title: Advancing Social Marketing for Health in the Democratic Republic of Congo

Agreement number: GHH-I-05-07-00062-00

Country: Democratic Republic of Congo

Time period: January – March 2010 (Q2 FY10)

Program Goal: To improve the health status of the people of the Democratic Republic of the Congo.

Program Purpose: To expand and build upon the achievements of USAID's previous social marketing programs in DRC by increasing the use of effective health products, services, and behaviors in the areas of HIV/AIDS/STI, family planning and reproductive health (FP/RH), maternal and child health (MCH) and water and sanitation.

Program Objectives: The proposed program has four main objectives:

1. Increase the supply and diversity of health products and services that are to be distributed and delivered through the private sector, in conjunction with the public sector, for disease prevention and control as well as integrated health service delivery.
2. Increase awareness of and demand for health products and services to emphasize prevention of childhood illnesses, unintended and unsafe pregnancies, HIV infection and STIs, and malaria and to build an informed, sustainable consumer base.
3. Develop and/or enhance the ability of commercial/private sector entities to socially market health products and services including behavior change communication activities.
4. Integrate service delivery and other activities, emphasizing prevention, at national, provincial, district, facility, and community levels through joint planning with the GDRC, other United States Government (USG), and non-USG partners.

Key success:

1. 1,085,400 male and 77,854 female condoms have been distributed in project targeted health zones.
2. 124,567 COC, 6,585 POP, 12,920 injectables, 406 IUD and 333 cycle beads have been distributed to women of reproductive age in project targeted health zones.
3. 3,028 Clean Delivery Kits have been distributed.
4. 342,784 sachets of PUR and 405,976 Aquatabs have been distributed, to treat 11,547,360 liters of water.

II. Description of activities performed

TASK 1: Increase the supply and diversity of health products and services that are to be distributed and delivered through the private sector, in conjunction with the public sector, for disease prevention and control as well as integrated health service delivery.

Cross-cutting

1. PSI/ASF used the available list of wholesalers (existing or potential) in all provinces to send them validated criteria (such as conformity to laws, frequency of products purchase, and quantities of purchases) to respect for those who want to sign contract as wholesalers for socially marketed products. A 3-month testing period has been established to evaluate wholesalers, and memorandum of understanding will be signed at the end of FY10 Q3 with those who will respect criteria.
2. Based on lessons learned during distribution of all its products and MIS assessment in all provinces and at the national level, PSI/ASF put in place a triangulation system to reconcile products stock, sales and income. To avoid loses or thefts, reality and veracity of documents and products stock are monthly checked. This control allows also to evaluating distribution channels and pricing structure. The restructuring of product supply system to provinces started with the revision of human resources charts in provinces to reinforce and integrate promotion, communication and distribution activities for all socially marketed health areas and products. As existing contracts with air and road transporters are going to their end, a new tender has been elaborated and will be advertised in FY10 Q3 to update the list of service providers.
3. The second planning workshop for provincial leaders has been held in February 15th to 19th, 2010 in Kinshasa, with the participation of all provincial leaders from USAID health zones and the backstopping teams of the national headquarters (Chief Of Party, programmatic, administrative and finance departments). Main topics discussed during this capacity building activity included sharing experiences, challenges and lessons learned during implementation among provinces, updating charts, reviewing achievements and indicators, planning next quarters.

HIV/AIDS/STI

1. Among the total of 3 million male condoms received from USAID in October 2009, 13,743 of them have been identified as missing during the opening of boxes and condoms packaging. Thus, only 2,986,257 condoms have been packaged during February – March 2010 period, after receiving purchased packaging at the beginning of FY10 Q2. On this quantity: (i) 900 male condoms have been used during quality control testing, (ii) 750,000 male condoms have been given to the DOD project, following USAID/DRC's request, (iii) 1,085,400 male condoms have been distributed in the province of Kinshasa, and (iv) 1,149,957 male condoms are in stock at the end of March 2010 in PSI/ASF warehouse.
2. A total of 500,000 female condoms have been received from USAID under previous USAID-funded cooperative agreement # 623-A-00-05-00341-00. After quality controls testing on 100 pieces and packaging, (i) 77,854 female condoms have been distributed in three provinces (Kinshasa, Equateur and Kasai Oriental) and (ii) 425,157 pieces remain in stock at the end of

March 2010. Small stocks existing in PSI/ASF provincial offices' warehouse at the end of previous cooperative agreement have been distributed during this period.

3. The following tables highlight the distribution of male and female condoms by province during Q2 FY10, and the inventory on hand at the end of March 2010:

PRUDENCE HOMME	<i>Distribution</i>	<i>Stock available, end of March 2010.</i>
Kinshasa	1,085,400	1,149,957
Katanga	0	0
Bas Congo	0	0
Sud Kivu	0	0
Nord Kivu	0	0
Province Orientale	0	0
Equateur	0	0
Kasai Occidental	0	0
Kasai Oriental	0	0
TOTAL	1,085,400	1,149,957

PRUDENCE FEMME	<i>Distribution</i>	<i>Stock available, end of March 2010.</i>
Kinshasa	75,760	424,609
Katanga	0	0
Bas Congo	0	0
Sud Kivu	0	0
Nord Kivu	0	0
Province Orientale	0	0
Equateur	214	488
Kasai Occidental	0	0
Kasai Oriental	1,880	60
TOTAL	77,854	425,157

4. The following table presents the number of people reached during communication for behavior change activities by province and by sex during Q2 FY10:

Number of people reached through AB and OP promotion activities, by sex in South Kivu
(Jan-Feb-Mar 2010 – Q2 FY10)

	AB		OP	
	Male	Female	Male	Female
Inter Personnel Communication	0	0	0	0
Mass Animation	0	0	666	0

5. A concept paper and a budget have been prepared during FY10 Q2 and will be submitted in FY10 Q3 to USAID to requesting revenues generated during previous cooperative agreement #623-A-00-05-00341-00 by condoms sales for a total amount of \$375,765.

Family Planning

1. In Q1 FY10, the *Confiance* network continued its FP IEC, service delivery and product distribution activities started under the 5-year CA GHS-A-00-04-00009-00, implemented in 8 provinces (Kinshasa, Katanga, Bas Congo, South Kivu, North Kivu, Province Oriental, Equateur and Kasai Occidental). Under this CA, *Confiance* network is a network of 78 private clinics and 277 pharmacies that provide quality FP services and information and distribute *Confiance* branded contraceptives. Providers at partner sites receive comprehensive FP training, on-going supportive supervision, and a guaranteed supply of *Confiance* branded contraceptives. Five contraceptive products (two oral pills, injectable, IUD and CycleBeads) are socially marketed through the network partners.

In Q2 FY 2010, the *Confiance* network was expanded in Kinshasa with complementary Dutch government funds. Twenty new partner clinics and 39 new partner pharmacies were added to the network, in addition to the 15 clinics and 45 pharmacies added in Mbuji-Mayi and Kindu using Dutch funds (see point 6 below). Partners were pre-selected using minimum standard criteria, and two clinicians and one pharmacy worker were trained for each selected site. Training was done using the PNSR National FP Training Module for clinicians and a PNSR-approved pharmacy training module designed by ASF/PSI. Partners were given theory and practical training in FP counseling, products, secondary effects and communication. The training covered short-term methods, as the equipment for long-term methods (IUDs and implants) has not yet been cleared by customs. All activities at the expansion sites will be covered under Dutch funding until December 2010. The expansion of the *Confiance* network will increase coverage and visibility of FP activities throughout the DRC's capital.

2. During Q2 FY10, PSI/ASF sold 131,152 cycles of pills (COC and POP), 12,920 injectables, 406 IUDs, and 333 CycleBeads through its USAID-funded 78 clinic, 277 pharmacy and 103 mobile educator *Confiance* partners. The following table highlights the distribution of products by province:

Province	COC	POP	Injectable	IUD	CycleBeads
Kinshasa	86,400	1,125	910	218	203
Katanga	10,170	2,130	5,740	48	0
Bas Congo	8,175	0	2,690	24	0
Sud Kivu	9,180	420	630	39	0
Nord Kivu	1,410	525	860	15	0
Province Orientale	1,530	495	590	18	30
Equateur	3,045	720	690	8	67
Kasai Occidental	2,407	600	810	36	33
Kasai Oriental	2,250	570	0	0	0
TOTAL	124,567	6,585	12,920	406	333

Confiance Products – Q2 FY10
(Jan-Feb-Mar 2010)

Product	Objective	Sales	Achievement in %
Duofem	150,000	124,567	83%
Ovrette	25,000	6,585	26%
Depo-Provera	25,000	12,920	52%
IUD	500	406	81%
CycleBeads	1,000	333	33%

3. Over 126,320 people were reached with FP IEC messages, through group information sessions, household visits, sensitizations at health centers and churches and FP ‘open houses.’

Number of people reached through FP interpersonal communication, by province
(Jan-Feb-March 2010 – Q2 FY10)

Province	Men	Women	Total
Kinshasa	13,979	30,473	44,452
Katanga	3,186	18,428	21,614
Bas Congo	2,841	5,763	8,604
Sud Kivu	328	13,608	13,936
Nord Kivu	3,188	12,319	15,507
Province Orientale	813	3,026	3,839
Equateur	672	2,982	3,654
Kasai Occidental	3,894	10,820	14,714
Total	28,901	97,419	126,320

Number of people reached through FP counseling visits, by province
(Jan-Feb-Mar 2010 – Q2 FY10)

Province	Men	Women	Total
Kinshasa	2,152	7,426	9,578
Katanga	140	2,413	2,553
Bas Congo	131	1,765	1,896
Sud Kivu	38	1,282	1,320
Nord Kivu	-	3,134	3,134
Province Orientale	111	392	503
Equateur	454	1,096	1,550
Kasai Occidental	489	2,510	2,999
Total	3,515	20,018	23,533

4. Development of updated provider materials is underway and new materials will be distributed to all partner sites in Q3 FY10.
5. The *Confiance* FP hotline continued to prove highly popular. During Q2 FY10, the hotline received 2,886 calls. Men, as is always the case, accounted for the majority of these calls (82%).

Number of calls received by FP hotline, by province
(Jan-Feb-Mar – Q FY10)

Province	Calls		Total
	Men	Women	
Kinshasa	300	177	477
Katanga	981	80	1,061
Bas Congo	112	43	155
Sud Kivu	48	14	62
Nord Kivu	39	10	49
Province Oriental	161	41	202
Equateur	201	60	261
Kasai Occidental	199	19	218
Kasai Oriental	68	12	80
Autres	251	70	321
Total	2,360	526	2,886

6. In 2009, PSI/ASF leveraged USAID support to secure complementary funding to obtain funding from the Dutch government for FP activities. This new Dutch funding enabled ASF to launch an extension of the *Confiance* network and distribution of *Confiance* products in Mbuji-Mayi and Kindu, and expand the network within Kinshasa in late 2009. The Dutch project, which runs through December 2010, will also fund implant training for all *Confiance* sites in Q3 FY10, allowing USAID's implants to be introduced into the *Confiance* network in FY10 at no additional cost beyond product provisions. The Dutch-funded project also includes the purchase of 200,000 *Petogen* injectables, 7,000 Jadelle implants and 8,000 CycleBeads, which will be distributed in the extension sites and also used to complement sales at all *Confiance* partner sites where current product availability is insufficient.
7. Quarterly meetings were held in each of the eight FP provinces (Kinshasa, Katanga, Bas Congo, Sud Kivu, Nord Kivu, Province Orientale, Equateur, Kasai Occidental) with partner clinicians and mobile educators and bi-annual meetings with pharmacists were held for a total of 24 meetings with network partners. These meetings provide an opportunity for PSI/ASF-trained clinicians and mobile educators to meet together to discuss lessons learned, present successes and difficulties, share ideas and receive technical updates from PSI/ASF staff. These meetings ensure that previously trained partners have up-to-date information on FP products and services and that information given to clients is standardized throughout the *Confiance* network.

8. During Q2 FY10, regular supervisions were carried out by PSI/ASF staff in partner clinics and pharmacies. At least once a month each *Confiance* partner clinic and pharmacy was visited by PSI/ASF FP support staff. In clinics, these visits focus on quality assurance of counseling and information given to clients and reinforcing the capacity of PSI/ASF-trained clinicians. In partner pharmacies these visits focus on evaluating staff FP knowledge and reinforcing the capacity of PSI/ASF-trained pharmacists, with particular emphasis on micro-formations given to all pharmacy staff by PSI/ASF FP agents.
9. PSI/ASF has been actively engaged with Bayer-Schering to facilitate the registration of the implant Jadelle in DRC. Although Bayer will be responsible for the actual registration of Jadelle, PSI/ASF is providing guidance on necessary documents and points of contact in DRC. PSI/ASF is also reviewing and renewing autorisation de mise sur le marché (AMM) documents for all its current and future (e.g. Microlut, Jadelle) products.
10. In Q2 2010, PSI/ASF began the registration process for *Petogen*, a different brand name of the 3-month injectable, which has the same formula as Depo-Provera. PSI/ASF had originally ordered 200,000 Depo-Provera with Dutch funds for distribution in *Confiance* partner sites. However, a global recall of Depo-Provera in January included PSI/ASF's order, and future orders of Depo-Provera cannot be guaranteed for at least 8 months. As a result, PSI/ASF decided to order the injectable *Petogen* and is working with its manufacturer, Helm, to register the product in DRC. It is anticipated that distribution of *Petogen* will begin in Q3 2010 and will be distributed, using Dutch funds, in all *Confiance* clinics and pharmacies in order to complement the limited amounts of Depo-Provera and to prevent product stock-outs.
11. In March 2010, PSI/ASF was invited to participate in a regional USAID FP meeting in Kigali, Rwanda, which included USAID and partner representatives from 12 sub-Saharan African countries. Gaby Kasongo, the FP National Manager, represented the PSI/ASF program and gave a presentation to all conference participants titled: "The *Confiance* Family Planning Network: leveraging the private sector to re-establish FP post-conflict in the Democratic Republic of Congo".

The conference was designed to offer a forum for sharing experiences and lessons learned among different USAID-funded FP programs. Many of the different approaches and strategies discussed at the conference will be included in PSI/ASF's FP programming and Gaby Kasongo will play an active role in the elaboration of the DRC national FP strategy began at the conference.

12. In Q2 2010, the George Washington University's peer-reviewed, on-line journal on public health communication and marketing, *Cases Proceedings*, published an article on PSI/ASF's toll-free family planning hotline. The article, "*Ligne Verte* Toll-Free Hotline: Using Cell Phones to Increase Access to Family Planning Information in the Democratic Republic of Congo." The article explains that the FP project and hotline are funded by USAID and can be accessed at:

http://www.gwumc.edu/sphhs/departments/pch/phcm/casesjournal/volume4/cases_4_03.pdf

Maternal & Child Health

1. A total of 3,028 CDKs have been distributed during Q2 FY10.
2. The following table highlights the distribution of the CDK *Delivrans* by province during Q2 FY10, and the inventory on hand at the end of March 2010:

DELIVRANS	<i>Distribution</i>	<i>Stock available, end of March 2010.</i>
Kinshasa	2,653	4,201
Katanga	285	189
Bas Congo	0	1
Sud Kivu	0	0
Nord Kivu	0	0
Province Orientale	55	701
Equateur	0	0
Kasaï Occidental	35	0
TOTAL	3,028	5,092

Water and Sanitation

1. One million and one thousand sachets of PUR purchased with MCHIP (Mother and Child Health Integrated Program - USAID) and Procter and Gamble funding, were received, sampled and tested during FY10 Q2. One million and one thousand additional sachets are still in clearing process.
2. From January to March 2010, 342,784 sachets of PUR and 405,976 Aquatabs have been distributed in USAID targeted provinces (Kinshasa, Katanga, Sud Kivu, Bas Congo, Kasai Occidental, Kasai Oriental). PUR and Aquatabs have been distributed to health centers, pharmacies, retailers, wholesalers, NGOs and households. For household distribution, PSI sales agents created demand and direct populations to existing points of sale to get supplied. 48.000 sachets of PUR were distributed in emergency situations (cholera outbreak) in Bukavu/Sud Kivu by CRS (Catholic Relief Services) and 12.000 sachets were distributed in Kinshasa to the PLWH (Persons living with AIDS) by UNC (University of North Caroline based locally).

3. The following tables highlight the distribution of products by province during Q2 FY10, and the inventory on hand at the end of March 2010:

PUR	<i>Distribution</i>	<i>Stock available, end of March 2010.</i>
Kinshasa	178,620	1,628,587
Katanga	45,576	1,075,799
Bas Congo	18,768	61,140
Sud Kivu	55,360	249,521
Nord Kivu	0	0
Province Orientale	0	0
Equateur	0	0
Kasaï Occidental	22,380	158,610
Kasai Oriental	22,080	98,640
TOTAL	342,784	3,272,297

AQUATABS	<i>Distribution</i>	<i>Stock available, end of March 2010.</i>
Kinshasa	89,496	7,542,976
Katanga	64,336	939,488
Bas Congo	16,040	261,120
Sud Kivu	173,600	392,240
Nord Kivu	0	0
Province Orientale	0	0
Equateur	0	0
Kasaï Occidental	49,384	708,272
Kasai Oriental	13,120	67,520
TOTAL	405,976	9,911,616

4. 88 new points of sales for PUR and Aquatabs have been created in the 6 targeted USAID provinces.

Task 1 indicators: Situation as of end Q2FY10

	INDICATORS	Year 1 Targets	Achievement Project Q2 (cumulative numbers)	Achievement Project Q2 (cumulative %)	Comments
1	Number of male condoms distributed through the USG funded social marketing programs	20,000,000	1, 085,400	5.42%	Only 3,000,000 out of 20 million male condoms have been received from USAID for distribution. Remaining 17 million are still awaited.
2	Number of female condoms distributed through the USG funded social marketing programs	500,000	77,854	15.57%	Distribution is progressively growing, through negotiation activities with special point of sales for women (hair dressing/ beauty shop for becoming female distribution outlets).
3	Liters of water disinfected with point of use home water treatment solution to the USG funded social marketing programs	33,000,000	27,766,450	84.14%	Existing zones of emergency due to cholera outbreak increased consistently product distribution.
4	Number of Diarrhea Treatment Kits containing 2 low-osmolarity flavored ORS sachets plus a 10-blister pack of zinc distributed through the USG funded social marketing programs	0	0	NA	Activities are planned to start in project year 2.
5	Number of clean delivery kits distributed through the USG funded social marketing programs	20,000	3,940	19,70%	
6	Number of cycles of oral contraceptives distributed through the USG funded social marketing programs	700,000	201,687	28.81%	
7	Number of injectable contraceptives distributed through the USG funded social marketing programs	100,000	35,120	35.12%	
8	Number of IUDs distributed through the USG funded social marketing programs	2,000	779	38.95%	
9	Number of cyclebeads distributed through the USG funded social marketing programs	4,000	1,297	32.42%	
10	Number of implants distributed through the USG funded social marketing programs	500	0	0.00%	No quantity has been received yet. Service providers will be trained with complementary Dutch FP funds. Exoneration for products and training materials are still awaited from government.

Task 2: Increase awareness of and demand for health products and services to emphasize prevention of childhood illnesses, unintended and unsafe pregnancies, HIV infection and STIs, and malaria and to build an informed, sustainable consumer base.

Cross-cutting

1. A meeting has been held with USAID-funded project, PROVIC (HIV Integrated Program in Congo), which composed by 5 USAID-funded partners: Chemonix, EGPAF, CRS, IHAA and PATH. In order to avoid efforts duplication and maximize resources use among USAID-funded partners, mechanisms of collaboration and coordination have been discussed relatively to selection and adaptation of communication materials, audio and visual production through the use of PSI/ASF production studio and comprehensive communication campaign's development.

Family Planning

1. Messaging regarding HIV/STI prevention has always been a core part of PSI/ASF's FP messaging and training. The dual protection of condoms (against unwanted pregnancies and HIV) is promoted by both the FP and HIV programs. Additionally, FP messaging (on product packaging, in provider trainings and IEC messages) clearly states that all non-condom contraceptives do not protect against HIV/STIs.
2. Given the increasing popularity of the Zain carrier across DRC, PSI/ASF has identified a second carrier and second line to the FP hotline. The contract with Zain will be signed in FY10 Q3. This will increase access to the toll-free hotline to callers beyond the Vodacom network, to which it is currently limited.

Maternal & Child Health

1. 119 interpersonal communications sessions were performed in the schools, churches, markets, health centers, and 137,501 participants including mothers with children under five during ante and post-natal sessions, assisted.
2. The World Water Day was celebrated in Kinshasa, Katanga, Bas Congo, Sud Kivu, Kasai Oriental and Kasai Occidental, on March 22nd in partnership with the Ministry of Health and Unicef. Sensitizations and speeches focused on the safe drinking water to avoid waterborne disease. PUR and Aquatabs were proposed as the affordable short and midterm solution while infrastructures were considered long-term one.

Task 2 indicators: Situation as of end Q2FY10

	INDICATORS	Year 1 Targets	Achievement Project Q2 (cumulative numbers)	Achievement Project Q2 (cumulative %)	Comments
11	Number of people reached during HIV/AIDS activities who are oriented to a VCT site	4,364	312	7.14%	Voluntary activities have been realized by peer educators. Sensitization sessions will be reinforced with income use generated during previous cooperative agreement, once the request which will be submitted in FY10 Q3 is approved by USAID.
12	Number of individuals reached with individuals/small group preventive interventions primarily focused on abstinence and/or being faithful that are based on evidence and/or meet the minimum standards	16,106	0	0.00%	Sensitization sessions will start with income use generated during previous cooperative agreement, once the request which will be submitted in FY10 Q3 is approved by USAID.
13	Number of MARP reached with individual and/or small group level interventions that are based on evidence and/or meet the minimum standards	12,987	0	0.00%	Sensitization sessions will start with income use generated during previous cooperative agreement, once the request which will be submitted in FY10 Q3 is approved by USAID.
14	Number of targeted condom service outlets	1,800	1,500	83.33%	
15	Number of individuals participated in community-wide event focused on HIV/AIDS	166,667	666	0.39%	Voluntary activities have been realized by peer educators. Sensitization sessions will be reinforced with income use generated during previous cooperative agreement, if the request which will be submitted in FY10 Q3 is approved.
16	Number of media outlets including HIV/AIDS messages in their programs	0	0	NA	Activities are planned to start in project year 2.
17	Number of media broadcasts that promote responsible sexual behavior	0	0	NA	Activities are planned to start in project year 2.
18	Number of peer educators who successfully completed an in-service training program	100	0	0.00%	Training sessions will start with income use generated during previous cooperative agreement, once the request which will be submitted in FY10 Q3 is approved by USAID.
19	Number FP service delivery points (pharmacies and clinics) integrated with USG assistance	0	0	NA	Activities are planned to start in project year 2.
20	Percentage of service delivery points (pharmacies, clinics and wholesalers) reporting stock out of any contraceptive commodities offered by the facility at any time	50%	50%		
21	Number of people reached during outreach activities promoting the use of water purifier products	50,000	137,501	275%	
22	Number of people reached during outreach activities promoting the use of ORS sachets to treat diarrhea	0	0	NA	Activities are planned to start in project year 2.
23	Number of service delivery points social marketing delivery kits	200	345	172.50%	All partners (clinics, pharmacies) in <i>Confiance</i> network sell CDK.
24	Percentage of wholesaler service delivery points reporting no stock out of water purifier at any time	60%	0%		No stock out has been reported to the project.
25	Percentage of wholesaler service delivery points reporting no stockouts of ORS/zinc tablets at any time	0	0	NA	Product distribution is planned to start in project year 2.

TASK 3: Develop and/or enhance the ability of commercial/private sector entities to socially market health products and services including behavior change communication activities.

Cross-cutting

1. Four external financial audits have been realized during FY10 Q2 for specific projects, with other donor funds, to look at financial and administrative systems. External inventory audit has been completed during the same period, and the external global financial audit will take place in FY10 Q3.

Maternal & Child Health

1. We continue to maintain the new distribution approach, taking into account wholesalers, semi wholesalers and detailers, following the fast consuming goods channel, with targeted promotion and advertising.

Task 3 indicators: Situation as of end Q2FY10

	INDICATORS	Year 1 Targets	Achievement Project Q2 (cumulative numbers)	Achievement Project Q2 (cumulative %)	Comments
26	Number of socially marketed health products or services transitioned to the private sector	0	0	NA	
27	Number of trained/refreshed private sector distributors, NGOs, associations and community health workers trained in social marketing and/or BCC techniques	0	0	NA	

TASK 4: Integrate service delivery and other activities, emphasizing prevention, at national, provincial, district, facility, and community levels through joint planning with the GDRC, other United States Government (USG), and non-USG partners.

Cross-Cutting

1. Regular meetings and phone calls with the COTR are conducted to discuss project achievements and specific challenges encountered during FY10 Q2 and solutions.
2. Email exchanges and conference calls have been performed with team partners (Hope Consultancy, Social Impact and QED) to finalize sub contracts signature, validate scope of work, budgets and work plans, provide technical assistance. Agendas have been validated and short term technical assistance trips to DRC will begin in FY10 Q3.
3. During the provincial leaders workshop held in February 2010, an emphasis has been made on strategies to reinforce integration activities at the provincial level started in FY10 Q1. Lessons learned related to FP previous cooperative agreement implementation have been collected, selected and harmonized by provincial leaders, FP technical teams at both provincial and national level. These lessons will be presented to USAID/DRC team next quarter.
4. Meetings at provincial level have been held with partners such as PROVIC to discuss mechanisms of coordination with governmental and other non governmental partners. The project has been presented to key partners such as PNMLS, PNLS and PNSR in the different project's provinces.

Task 4 indicators: Situation as of end Q2FY10

	INDICATORS	Year 1 Targets	Achievement Project Q1 (cumulative numbers)	Achievement Project Q1 (cumulative %)	Comments
28	Number of external technical/coordination meetings attended at national/provincial/district levels with stakeholders	60	40	66.67%	

Research, Monitoring and Evaluation

HIV/AIDS/ST

1. Study protocols for TRaC survey, including questionnaires, have been discussed with PSI/ASF Research technical team and will be submitted in FY10 Q3 to the Ethic Committee which is the National Public Health School. Data collection will start immediately after reception of approval to carry out the study.
2. The protocol, with the questionnaire, for the MAP coverage survey (Condom coverage including in hot spot areas) developed under PNMLS/World Bank funding, has been submitted to the Ethic Committee for approval. When approved, data collection should take place in FY10 Q3.

Family Planning

1. Under the cooperative agreement # GHS-A-00-04-00009-00, a TRaC survey (second round) has been orchestrated in Kinshasa, Nord Kivu (Goma), Equateur (Mbandaka) and Katanga (Lubumbahsi, Kolwezi and Kasumbalesa). This EOP TRaC Survey was carried out in the final quarter of the program’s activities in August and September 2009. Kinshasa was chosen because of its large population, Katanga sites in order to study smaller project sites in a province with several implementation zones, and Equateur and North Kivu because they represent two different regions and where there has been relatively less research than in similar Oriental and South Kivu provinces. The final report is being reviewed by PSI’s regional research office and will be available in Q3 2010.
2. In Q3 2010, PSI/ASF will carry out a baseline TRaC survey in two Dutch-funded sites, Mbuji-Mayi and Kindu. Although not USAID-funded FP activity sites, these results will still prove useful to FP activities throughout the country.

III. Project Management

1. PSI has signed a sub-contract with Social Impact, one of the two US small businesses planned to be subcontractors to PSI/ASF, for a total of \$47,974. Social Impact is in charge of identifying with PSI/ASF and building operational capacities of 20 local organizations over the life of the project in areas such as strategy and planning, finance and administration and key skills. The second small business, Hope Consulting, will conduct a situation analysis and ensure a successful spin-off of clean delivery kits (CDKs) to a private sector entity. His contract will be signed in FY10 Q3.

2. Branding and marking plan has been submitted to the Contracting Officer on November 30th, 2009, and approval is awaited for implementation.
3. The Director of Administration and Finance (Mr. Hery Ramangalahy, Key personnel), participated into induction training in PSI Washington March 29th to April 1st, 2010. During this trip, specificities of financial reports, security, general information regarding the management (such as human resources, metrics) and basic technical knowledge related to PSI activities have been discussed.
4. After the 2009 annual audit of all PSI equipment in its national office in Kinshasa and all its provincial offices, completed in February 2010 with other donor funding, assets list has been updated and needs have been identified for purchase which will take place in FY11. As planned, procurement process will start in June 2010, with new terms of reference.
5. PSI/DRC received on March 11th, 2010, the visit of Mrs. Lauralea Gilpin, Task Order Contracting Officer. During this meeting held with the participation of USAID/DRC Head Of Mission, Mrs. Michele Russell and Task Order Contracting Officer Technical Representative, Mr. Thibaut Mukaba, and PSI/DRC Task Order key personnel, key achievements to date have been presented and major challenges concerning requests approval, program income generated during previous cooperative agreement use and project launch have been discussed.
6. TCN salary and allowances approval reconsideration request for three task order's key personnel (Dr Didier Adjoua, Chief Of Party, Mr. Hery Ramangalahy, Administrative and Finance Specialist, and Mr. Degrande Dipoko, Social Marketing & Logistics Technical Advisor) have been submitted to the CO. Approval has not been received as of march 2010.
7. PSI/ASF seeks to submit during FY10 Q3 to USAID a request for approval of indirect cost rates for its sub contractor HOPE Consulting.

IV. Problems /Challenges faced during the reporting period

During the reporting period, several challenges have been faced by the project:

1. Delays in products arrival in DRC (as male condoms and FP products) create delays in project objectives' achievement.
2. FP and Water & Sanitation: The exoneration issue and how this impacts our Dutch funded project, which in turn impacts the USAID project. For example, we cannot clear our Petogen, Jadelle or CycleBeads bought with USAID funds. Furthermore, we have not been able to import our medical equipment (already in Kinshasa since January), which includes all equipment for Jadelle implant trainings and insertions, as well as additional IUD equipment for some USAID sites (but with Dutch funds). This exoneration issue impacts also the clearing process of the point-of-use water treatment product PUR (for 1.1 million sachets).
3. The planning for Lawson roll out in all PSI countries has been updated and DRC platform turn has thus been postponed to FY11.

V. Environmental Mitigation (IEE)

1. Needles from injectables: Part of the pre-selection criteria for partner clinics was that they had, at the time of selection, a place established where hazardous waste, including needles, was burned and safely disposed of. This is also a requirement of the MOH requires for all clinics/health centers. Verification of proper procedures for disposing of hazardous waste at clinics was not done in Q2 2010 and will be added to all clinic supervisions in Q3 FY10.
2. Condoms: Proper disposal of condoms, in a designated garbage can or latrine, is included in all community-based actors' trainings and condom messaging, including IEC and condom packaging.
3. Packaging and materials: PSI/ASF does all it can to ensure that product packaging and IEC materials are properly disposed of. This is particularly true following events where samples, brochures, stickers or other promotional and IEC, where materials are often discarded or left lying around.

VI. FP and HIV policy compliance

As for HIV, to ensure that all FP program activities adhere to the Tiahrt Amendment requirements, all FP staff are briefed on the Tiahrt requirements and given examples of hypothetical situations to determine whether they are in compliance with Tiahrt. Provincial Leaders (LPs) are also briefed on Tiahrt at the bi-annual LP retreats, to ensure that understanding of the Tiahrt Amendment is at all levels and not restricted only to FP staff, as LPs and other staff often work with FP activities.

Activity	2009																2010												Comments
	OCT				NOV				DEC				JAN				FEB				MAR								
	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4					
Product: PUR and Aquatabs, HWTS																													
Product																													
Procure PUR and Aquatabs including shipping, handling and sampling (Co-funded by																												On going.	
Receive PUR			X																									Reception started, and will be achieved in FY10 Q3.	
Shipping PUR to provinces	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On time	
Socially market 1 million PUR sachets Y1 (P&G purchased commodities)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On time	
Socially market 1.15 million Aquatabs Y1 (UNICEF & UNDP/Pooled Funds)	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On time	
Price																													
Willingness to pay surveys to assess affordability																									X	X	X	X	Reported to FY10 Q4.
Placement/Distribution																													
Create new points of sales for PUR and Aquatabs	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.	
Distribute PUR and Aquatabs to commercial wholesalers, health zones and	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.	
Product: Diarrhea Treatment Kits (DTK)																													
Product																													
Prepare focus-group protocol for DTK product development and messaging																												On time. Planned in FY10 Q3.	
Translate focus-group questionnaire																												On time. Planned in FY10 Q4.	
Task 2: Increase awareness of and demand for health products and services to emphasize prevention of childhood illnesses, unintended and unsafe pregnancies, HIV infection and STIs, and malaria and to build an informed, sustainable consumer base.																													
Cross-Cutting Activities																													
Collaborate with USAID-funded communications efforts				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	Meetings with partners have been initiated as with PROVIC.	
Engage with community influencers and leaders (e.g. schools and churches chiefs, local leaders, etc.) to generate community-level acceptance as well as correct and consistent use of HWT products.				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.	
Family Planning / Reproductive Health																													
Promotion/Communication																													
Promote real-life stories from satisfied FP users to tackle rumors													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.	
Develop/distribute provider materials						X	X	X	X	X	X																	Existing materials have been distributed to service providers. Additional material have been purchased in Q2 and will be produced and disseminate during FY10 Q3.	
Incorporate HIV/STI messages into FP communications and training				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On time	
Ensure complementary messaging with other USAID programs				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On time	
Expand FP Hotline (Ligne Verte) to a second line or second provider				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	A new hotline number under Zain service provider is identified for targeted population. Contract with Zain will be signed next quarter to make this line functioning.	
Training/Capacity Building																													
Hold provincial technical meetings with FP partners and gov't agencies				X	X	X	X										X	X	X	X								A meeting with national office of PNSR will be held in FY10 Q3 to facilitate and reinforce meet technical and coordinatio meetings at provincial levels.	
Regular technical workshops for pharmacy and clinic partners								X	X	X	X										X	X	X	X				On going.	
Maternal & Child Health Activities																													
PUR and Aquatabs, HWTS																													
Promotion/Communication																													
Raise additional funds to expand HWT activities	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On time, with UNICEF.	
Placement PUR and Aquatabs radio spot													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	Placement will start in FY10 Q3.	
ORS/Zinc Activities																													
Promotion/Communication																													
Raise additional funds to expand HWT activities	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	Proposals have been submitted to Pooled Fund, UNICEF and Procter & Gamble. Results are awaited.	

Activity	2009												2010												Comments			
	OCT				NOV				DEC				JAN				FEB				MAR							
	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4	W1	W2	W3	W4				
TASK 3: Develop and/or enhance the ability of commercial/private sector entities to socially market health products and services including behavior change communication activities.																												
Cross-Cutting Activities																												
<i>ASF Institutional Capacity Building</i>																												
Annual External Audit																								X	X	X	Several external audits (financial and inventory) have been conducted for specific projects. Annual external audit will take place in FY10 Q3.	
Provincial systems assessment visits					X								X			X											Realized.	
HIV/AIDS/STI Activities																												
Trained master trainers of partners train P.E and NGO'S on Social Marketing activities									X	X	X	X												X	X	X	X	Training sessions will start with income use generated during previous cooperative agreement, once the request which will be submitted in FY10 Q3 is approved by USAID.
NGOs/Associations/ community workers with reinforced capacities carryout communication activities including MVU towards target populations													X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	Process to identify and validate the list of NGOs as partners started. Activities will be conducted in FY10 Q3.
Trained Private Sector distributors of Condoms and other social marketing products					X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.
Maternal & Child Health Activities																												
Establish sustainable distribution system through wholesalers; continue with targeted promotion and advertising				X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.
Research market opportunities for transfer of clean delivery kit to commercial sector																	X	X	X	X	X	X	X	X	X	X	X	Process will start in FY10 Q3, after subcontract signature with Hope Consulting.
Launch call for offers to potential enterprises to take over CDK production																	X	X	X	X								Process will start in FY10 Q3, after subcontract signature with Hope Consulting.
Develop business plan																										X		Process will start in FY10 Q3, after subcontract signature with Hope Consulting.
TASK 4: Integrate service delivery and other activities, emphasizing prevention, at national, provincial, district, facility, and community levels through joint planning with the GDRC, other United States Government (USG), and non-USG partners.																												
Cross-Cutting Activities																												
Coordination meetings with team partners				X	X	X	X	X	X	X	X	X																On going.
Integration/harmonization across PSI/ASF health areas	X	X	X	X	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.
Review lessons learned from ASF/PSI's previous USAID HIV/AIDS & FP programs	X	X	X	X	X	X	X	X	X	X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	Lessons learned in FP have been collected and will be presented next quarter to USAID.
Discussions with stakeholders - GDRC, civil society, academia, & community									X	X	X		X	X	X													On going.
Develop strong linkages and coordination with other USG-funded projects				X	X	X	X	X	X	X	X																	On going.
Plan field roll out				X	X	X	X	X	X	X	X																	Completed.
Disseminate findings of project research and reports					X	X	X	X																				Will be disseminate with lessons learned.
Provincial coordination meetings with gov't partners, NGOs and associations (qtlly)												X																Meeting with key partners such as PNLS, PNMLS, PNSR, PROVIC have been held at provincial level.
Participate in strategic planning and policy exercises with MOH as invited								X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.
Harmonization of commodity security for FP and HIV								X																	X			Participated in commodity security meeting with USAID.
Participate in Technical Working Groups								X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	On going.
Capacity Building & Assessments																												
Select 6 local associations for capacity building								X	X	X	X	X	X	X	X													Process started.
Conduct Capacity Assessments with local NGOs																	X	X	X	X	X	X	X	X	X	X	X	Will take place in FY10 Q3.

VIII. Key activities and challenges for the next quarter

HIV

Key activities

- Reach 8,053 people through IPC interventions promoting abstinence and being faithful adoption;
- Reach 6,494 people through IPC interventions promoting other means of prevention;
- Reach 83,334 people during mass events;
- Train 100 peer educators among militaries, police officers, truckers, CSW, PLWHA, members of NGOs targeting youth;
- Create 150 new condom points of sale and maintain 1,500 existing without stock out;
- Distribute 9,457,300 male and 211,073 female condoms in USAID targeted health zones;
- Start TRaC study data collection.

Challenges

- Obtain remaining 17 millions of male condom with USAID for distribution;
- Obtain approval for PI (collected under Co Ag # (# 623-A-00-05-00341-00) use, for a total of \$375,765, to reach target populations with IPC and mass animation;
- Create/Increase informed demand for condoms in new rural zones;
- Link new points of sale to be created for female condoms in hair dressing/ beauty shop, to existing wholesalers;
- Obtain approval for TRaC study protocol from Ethic Committee.

Family Planning

Key activities

- In Q3 FY10, PSI/ASF will continue with its standard FP service, product delivery, IEC and quality assurance activities. In addition, the program will begin nation-wide trainings in Jadelle insertions and removals, accompanied by a refresher training in IUD insertion/removal, IF products and equipment can be cleared from customs. Training assistance will be provided by PSI/Togo, who has offered to send a staff member experienced in implant trainings to assist with the first training.

Challenges

- Registration of Jadelle, necessary to begin trainings and product distribution, remains a challenge, given the administrative and government processes required. PSI/ASF will continue to actively assist Bayer in all registration-related activities.
- PSI/ASF's current order of 7,000 Jadelle, 200,000 does of Petogen and 8,000 CycleBeads, as well as clinic and training equipment, is stuck in customs due to issues surrounding exoneration. Clearing these products and goods is key to all Q3 activities but remains a serious challenge.

Maternal & Child Health

Key activities

- Distribute 250 000 sachets of PUR to commercial wholesalers, health zones and workplaces, NGOs and other institutions;
- Distribute 280 000 Aquatabs tablets to commercial wholesalers, health zones and workplaces, NGOs and other institutions;
- Distribute 8 100 000 liters of treated water to Congolese;
- Receive 1.1 million of sachet de PUR and order 2.2 million under with P&G funding;
- Receive 6 millions tablets of Aquatabs ordered with Pooled Fund funding;

- Create 40 new points of sales for PUR and Aquatabs;
- Diffuse a PUR and Aquatabs radio spot through a nationwide channel.

Challenges

- The long international shipping and clearing process for goods is susceptible to delay availability of PUR sachets, which could result in product stock out;
- The long distance between interventions sites result in logistical difficulties to access sites;
- Existing free chlorination in epidemic and endemic cholera zones reduces sales of socially marketed POU water products;
- Maintenance of sufficient stock of point of use water treatment products in health zones is critical so as to address quickly water borne diseases outbreaks.

IX. Annexes

IX.1- Project indicators

Annex A: Product Distribution Targets

Annex A: Product Distribution Targets						
	PRODUCTS	YEARS				TOTAL
		1	2	3	4	
HIV	Male Condoms	20,000,000	25,000,000	30,000,000	32,000,000	107,000,000
	Female Condoms	500,000	700,000	1,000,000	1,200,000	3,400,000
FP	Oral Contraceptives	700,000	1,000,000	1,200,000	1,500,000	4,400,000
	Depo-Provera (3-month)	100,000	150,000	200,000	250,000	700,000
	IUD	2,000	2,500	2,750	3,000	10,250
	Cycle Beads	4,000	5,000	5,700	6,200	20,900
	Implants	500	800	1,200	1,500	4,000
MCH / WS	Clean Delivery Kits	20,000	30,000	0	0	50,000
	ORS+Zinc Diarrhea Treatment Kit	0	500,000	1,000,000	1,250,000	2,750,000
	PUR	1,000,000	1,320,000	1,650,000	1,800,000	5,770,000
	Aquatabs	1,150,000	1,540,000	1,925,000	2,100,000	6,715,000

Annex B: Annual Performance Milestones

Annex B: Annual Performance Milestones							
INDICATORS	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL		
<i>Task 1: Increase supply and diversity of health services and products</i>							
1	Number of male condoms distributed through the USG funded social marketing programs	20,000,000	25,000,000	30,000,000	32,000,000	107,000,000	
2	Number of female condoms distributed through the USG funded social marketing programs	500,000	700,000	1,000,000	1,200,000	3,400,000	
3	Liters of water disinfected with point of use home water treatment solution to the USG funded social marketing programs	33,000,000	44,000,000	55,000,000	60,000,000	192,000,000	
4	Number of Diarrhea Treatment Kits containing 2 low-osmolarity flavored ORS sachets plus a 10-blister pack of zinc distributed through the USG funded social marketing programs	0	500,000	1,000,000	1,250,000	2,750,000	
5	Number of clean delivery kits distributed through the USG funded social marketing programs	20,000	30,000	0	0	50,000	
6	Number of cycles of oral contraceptives distributed through the USG funded social marketing programs	700,000	1,000,000	1,200,000	1,500,000	4,400,000	
7	Number of injectable contraceptives distributed through the USG funded social marketing programs	100,000	150,000	200,000	250,000	700,000	
8	Number of IUDs distributed through the USG funded social marketing programs	2,000	2,500	2,750	3,000	10,250	
9	Number of cyclebeads distributed through the USG funded social marketing programs	4,000	5,000	5,700	6,200	20,900	
10	Number of implants distributed through the USG funded social marketing programs	500	800	1,200	1,500	4,000	

Annex B: Annual Performance Milestones						
INDICATORS	YEAR 1	YEAR 2	YEAR 3	YEAR 4	TOTAL	
Task 2: Increase the awareness of and demand for health products and services						
11	Number of people reached during HIV/AIDS activities who are oriented to a VCT site	4,364	4,800	5,280	5,808	20,253
12	Number of individuals reached with individuals/small group preventive interventions primarily focused on abstinence and/or being faithful that are based on evidence and/or meet the minimum standards	16,106	17,717	19,488	21,437	74,748
13	Number of MARP reached with individual and/or small group level interventions that are based on evidence and/or meet the minimum standards	12,987	14,286	15,714	17,286	60,273
14	Number of targeted condom service outlets	1,800	2,500	4,000	5,500	5,500
15	Number of individuals participated in community-wide event focused on HIV/AIDS	166,667	200,000	300,000	400,000	1,066,667
16	Number of media outlets including HIV/AIDS messages in their programs	0	15	20	25	25
17	Number of media broadcasts that promote responsible sexual behavior	0	1,800	1,800	1,350	4,950
18	Number of peer educators who successfully completed an in-service training program	100	300	300	0	700
19	Number FP service delivery points (pharmacies and clinics) integrated with USG assistance	0	103	0	0	103
20	Percentage of service delivery points (pharmacies, clinics and wholesalers) reporting stock out of any contraceptive commodities offered by the facility at any time	50	40	30	15	15
21	Number of people reached during outreach activities promoting the use of water purifier products	50,000	100,000	150,000	180,000	480,000
22	Number of people reached during outreach activities promoting the use of ORS sachets to treat diarrhea	0	0	75,000	150,000	225,000
23	Number of service delivery points social marketing delivery kits	200	250	0	0	0
24	Percentage of wholesaler service delivery points reporting no stock out of water purifier at any time	60%	70%	80%	80%	80%
25	Percentage of wholesaler service delivery points reporting no stockouts of ORS/zinc tablets at any time	-	-	70%	80%	80%
Task 3: Develop and/or enhance the ability of commercial/private sector entities to social market health products and services including behavior change communication activities						
26	Number of socially marketed health products or services transitioned to the private sector	0	0	1	0	1
27	Number of trained/refreshed private sector distributors, NGOs, associations and community health workers trained in social marketing and/or BCC techniques	0	6	0	0	6
Task 4: Integrate service delivery and other activities, emphasizing prevention, at national, provincial, district, facility, and community level through joint planning with GDRC, other USG and non-USG partners						
28	Number of external technical/coordination meetings attended at national/provincial/district levels with stakeholders	60	93	110	110	373

IX.2- Program income report

At the end of March 2010, a total of \$22,413 has been collected with HIV prevention and FP products' sales in targeted provinces.

IX.3- Travel plan for the next quarter

Several trips have been planned for next quarter (Q3 FY10):

Trip subject	Person	Place	Anticipated period
DELTA Marketing Training	PSI Technical Advisor – Frederick Persoons	DRC	June 2010
Rural Strategy Assessment	2 persons – Carol Squire and Sali Adamou	DRC	May - June 2010
Willingness to pay and CDK's Spin off evaluation	Hope Consulting – 1 person	DRC	June 2010
Baseline Data Collection Technical Assistance	QED – 1 person	DRC	June 2010
Local NGOs assessment and capacity building	Social Impact – 1 person	DRC	June 2010