

HIV/AIDS Prevention in the Philippines:
**Reaching Out to Most-at-Risk
Populations (ROMP)**

Quarterly Report FY13 (Q1)

October 1 to December 31, 2012



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fhi360
THE SECRET OF AMONGUS LIVES

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Acronyms

AIP	Annual Implementation Plan
AOR	Agreement Officer's Representative
ASP	AIDS Society of the Philippines
BHW	Barangay Health Worker
BIR	Bureau of Internal Revenue
BIHC	Bureau of International Health Cooperation
CHD	Center for Health Development
CHO	City Health Officer
COP	Chief of Party
CPAI	Cebu Plus Association, Inc.
CPS	Comprehensive Package of Services
CYCI	Cebu Youth Center, Inc.
DDB	Dangerous Drugs Board
DOH	Department of Health
END	End Neglected Tropical Diseases
FY	Fiscal Year
FORGE	Fellowship for Organizing Endeavors
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
HAIN	Health Action Information Network
IDO	Infectious Disease Office
IMPACT	Innovations and Multisectoral Partnerships to Achieve Control of Tuberculosis
IR	Intermediate Result
KPHR	Key Populations at Higher Risk
LGU	Local Government Unit
M&E	Monitoring and Evaluation
MARP	Most-At-Risk Population
MSM	Males having Sex With Males
NASPCP	National AIDS/STI Prevention and Control Program
NCDPC	National Center for Disease Prevention and Control
NCR	National Capital Region
NEC	National Epidemiology Center
OH	Office of Health
Pag-Ibig	Home Mutual Development Fund
PBSP	Philippine Business for Social Progress
PhilHealth	Philippine Health Insurance Corporation
PIR	Portfolio Implementation Review
PMP	Performance Management Plan
PNAC	Philippine National AIDS Council
PNGOC	Philippine NGO Council on Population, Health and Welfare
PPR	Performance Plan Report
PWID	People Who Inject Drugs
QCHD	Quezon City Health Department
QCSAC	Quezon City STD/AIDS Council
ROMP	Reaching Out to Most-at-Risk Populations
SAS	SmartAccountSolution.Ltd.Co.,
SIO	Site Implementation Officer

Acronyms

SMS4MSM	Short Message Service for Males having Sex with Males
SSS	Social Security System
TA	Technical Assistance
TCC	Tri-City Collaboration
TFM	Transitional Funding Mechanism
TOR	Terms of Reference
TWG	Technical Working Group
USAID	United States Agency for International Development
USPF	University of Southern Philippines Foundation
WHO/WPRO	World Health Organization / Western Pacific Regional Office

A. Introduction

Family Health International 360 (FHI 360) and its sub-awardee, Philippine NGO Council on Population, Health and Welfare (PNGOC) respectfully submit to the United States Agency for International Development (USAID) the first quarterly report for the “*HIV/AIDS Prevention in the Philippines: Reaching Out to Most-at-Risk Populations (ROMP)*” Project, in compliance to Cooperative Agreement No. AID-492-A-12-00008. This report covers the period October 1 to December 31, 2012.

The ROMP Project aims to contribute to improved service delivery of a comprehensive package of services (CPS) that includes STI/HIV prevention, treatment, care, support, and referral services for most-at-risk populations (MARPs). These include males having sex with males (MSM) in Quezon City and people who inject drugs (PWID) in the cities of Cebu, Lapu-Lapu and Mandaue (herein, collectively referred to as the “Tri-City” of Cebu Province). The project includes targeted technical assistance (TA) and other activities designed to meet the following objectives:

- Objective 1 (IR 1.4.1): Supply of HIV/AIDS services improved, including the availability and quality of public sector services and selective expansion of the private sector as primary care supplier
- Objective 2 (IR 1.4.2): Demand for HIV/AIDS services increased through encouraging adoption of appropriate health behaviours within families
- Objective 3 (IR 1.4.3): HIV/AIDS policy and systems barriers removed to improve supply and demand for services

B. Summary of Major Activities and Accomplishments during Fiscal Year 2013 – Quarter 1 (October 1 to December 31, 2012)

Table 1 lists Fiscal Year (FY) 2013 Annual Implementation Plan (AIP) activities that were to be accomplished or started during this reporting period and summarizes their status as of December 31, 2012. The ROMP Project was able to accomplish all start-up activities related to program development and program reporting. Start-up activities for monitoring and evaluation (M&E) were not completed because field level activities have not yet been initiated. However, preparatory activities such as the development of concept design, identification of TA providers, and coordination with relevant partners are ongoing. Except for the rapid assessment for MSM and PWID, no activities have been started to address the three ROMP Project objectives.

Table 1. FY 2013-Quarter 1 ROMP Project Activities and Status of Implementation.

Activity	Implementation Period (2012)			Status of Implementation as of December 31, 2012
	Oct	Nov	Dec	
I. Project Preparation for Rapid Start-Up				
A. Program Development				
1. Establish FHI 360 office in the Department of Health and recruit administrative support staff	x	x		Accomplished. Details in D.1.1-3.

Activity	Implementation Period (2012)			Status of Implementation as of December 31, 2012
	Oct	Nov	Dec	
2. Conduct orientation, consultation and work planning meetings with DOH, Implementing Agencies (IA), LGU and other partners	x	x		Accomplished. Details in D.2.
3. Develop and finalize Year One work plan and submit to USAID	x	x		Accomplished. Details in D.3.
4. Conduct pre-award assessments and issue sub-award to IA	x	x		Accomplished. Details in D.2.1.
5. Prepare contracts for local STTA	x	x	x	Accomplished.
6. Provide project management and financial management support to IAs		x	x	Accomplished.
B. Program Reporting				
1. Conduct monthly meetings with USAID	x	x	x	Accomplished. Details in D.2.3.
2. Submit project performance management plan (PMP) to USAID	x	x		Accomplished. Details in D.3.
C. Monitoring and Evaluation				
1. Conduct IA meetings to revisit existing tools and indicators to: (1) align reporting with project activities including integration of gender sensitive indicators, (2) ensure systems contribute to management and reporting requirements at local and national levels, (3) review/train partner management and data collection staff, (4) develop standardized tools across partners and data collection staff and (5) appoint M&E focal points with each IA		x	x	Will begin in Q2. Pending initiation of field-level activities.
2. Conduct monthly meetings of IAs project staff		x	x	Accomplished.
3. Conduct monthly cluster meetings of PEs and supervisors			x	Will begin in Q2. Peer outreach activities not yet initiated.
4. Meet with project TWG/Project Steering Committees (PSC)		x	x	Partially accomplished. TWG/PSC already convened in Quezon City but not yet in the Cebu tri-city.
5. Conduct quarterly project monitoring and mentoring visits			x	Will begin in Q2. No project-related field implementation initiated yet except for the rapid assessments.
II. Objective 1 (IR 1.4.1): Supply of HIV/AIDS services improved, including the availability and quality of public sector services and selective expansion of the private sector as primary care supplier				

Activity	Implementation Period (2012)			Status of Implementation as of December 31, 2012
	Oct	Nov	Dec	
A. Activity 1.1: Conduct a rapid assessment of the MSM and PWID situation, existing programs and services	x	x	x	Partially accomplished. Details in D.4.
B. Activity 1.2: Monitor implementation of ROMP MSM and PWID interventions		x	x	Will begin in Q2.
C. Activity 1.3: Develop and enhance interventions in MSM cruising sites or locations			x	Will begin in Q2.
D. Activity 1.4: Develop and enhance MSM interventions in selected barangays or communities			x	Will begin in Q2.
E. Activity 1.5: Develop and enhance interventions in MSM oriented establishments			x	Will begin in Q2.
F. Activity 1.6: Develop and enhance interventions in MSM social networking sites			x	Will begin in Q2.
G. Activity 1.7: Develop and enhance interventions in MSM “friendly” low cost motels or lodging houses			x	Will begin in Q2.
H. Activity 1.8: Development of Klinika Bernardo as the MSM Friendly/Male Wellness Referral Center			x	Will begin in Q2.
I. Activity 1.9: Gain access to PWID and establish rapport and intervention legitimacy			x	Will begin in Q2.
III. Objective 2 (IR 1.4.2): Demand for HIV/AIDS services increased through encouraging adoption of appropriate health behaviours within families				
A. Activity 2.1 Conduct peer outreach and education among MARPs (PWID)			x	Will begin in Q2.
B. Activity 2.2 Development and operationalization of the ROMP MSM Text Messaging Service (TextBro)			x	Will begin in Q2.
C. Activity 2.3 Development and operationalization of the ROMP MSM Privilege Card (BroCard)			x	Will begin in Q2.
D. Activity 2.5: Assess opportunities in the existing pre-employment HIV seminars and integrate promotion/marketing of male sexual health services to help reach discrete MSM		x	x	Will begin in Q2.
IV. Objective 3 (IR 1.4.3): HIV/AIDS policy and systems barriers to improve supply and demand for services removed				

Activity	Implementation Period (2012)			Status of Implementation as of December 31, 2012
	Oct	Nov	Dec	
A. Activity 3.1: Strengthen tri-city collaboration for PWID interventions		x	x	Will begin in Q2.
B. Activity 3.2: Advocacy with PhilHealth			x	Will begin in Q2.
C. Activity 3.3: Strengthen TB-HIV referral systems.			x	Will begin in Q2.

The ROMP Project postponed a number of planned activities to Q2 due to:

- Revisions/enhancement of activities based on additional consultations with central and regional Department of Health (DOH), the Philippine National AIDS Council (PNAC), other government agency stakeholders such as the Dangerous Drugs Board (DDB), local partners and MARPs to assure the AIP is responsive to current field realities and it be aligned to DOH and local government unit (LGU) programs and needs.
- Delays in finalizing sub-award for the Philippine NGO Council on Population, Health and Welfare (PNGOC) to implement MSM-specific activities in Quezon City. This was partially addressed when FHI 360 issued a letter of authorization allowing PNGOC to charge against the project, pre-award expenses not to exceed US\$15,000.00, beginning November 15, 2012.¹
- The withdrawal of the University of Southern Philippines Foundation (USPF) as sub-awardee to implement PWID-specific activities in the Tri-City area. Although a pre-award assessment was already conducted by FHI 360 for USFP (October 11-12, 2012), the processing of the sub-award was held in abeyance because of the newly installed Board's decision in November 2012 not to involve the Foundation in PWID programming. This unforeseen event was a major delaying factor for initiating implementation in the Tri-City area.²

It is envisaged that the above issues will be addressed in January 2013 and unimplemented/unfinished activities will be started or completed in the second quarter (Q2).

¹ The PNGOC award document for the MSM component was signed on January 18, 2013.

² FHI 360 will seek approval from USAID for PNGOC to lead implementation of PWID activities in the Tri-City. This would entail an amendment to the PNGOC sub-award.

C. Major Project Activities Planned for Fiscal Year 2013 – Quarter 2 (January 1 to March 31, 2013)

All field-level activities will commence during this quarter, that is, activities falling under all the ROMP Project Objectives. More detailed implementation steps with timeline per activity will be generated by the ROMP Project through a “Validation and Operational Planning Workshop”, one for PWID (February 7, 2013) and another for MSM (February 15, 2013). In these workshops, the rapid assessment results and the planned activities will be presented, and validated and/or fine-tuned. The project’s performance management plan (PMP) will also be discussed and a detailed FY 2013 operational plan will be drafted. The draft activity designs are in Annexes A and B.

Other salient activities in Q2 include:

- Finalization of amendment to PNGOC sub-award incorporating the implementation of PWID activities in the Tri-City area
- Establishment of a Tri-City ROMP Project Steering Committee with the lead of DOH-Center for Health Development (CHD) 7
- Completion and submission to USAID of the rapid assessment reports for MSM and PWID
- Development and submission of the ROMP Project logical framework
- Updating and submission to USAID of ROMP Project FY 2013 AIP and PMP
- Collection, collation, analysis and submission to USAID of accomplishments per ROMP Project indicator, when applicable
- Finalization of training needs assessment, preparation of training design and training of peer educators and their supervisors
- Identification and engagement of short term TA to prepare detailed concept papers for the operationalization of TXTBro and BroCARD SMS intervention, and to conduct a facility assessment for *Klinika Bernardo*

D. Detailed Description of Activities Conducted During the Report Period

D.1. Project Management

D.1.1. Project Office Set-Up

FHI 360 negotiated with Dr. Irma Asuncion, Director of the National Center for Disease Prevention and Control (NCDPC)-DOH for an office space. Available office space was identified, renovated and outfitted. The FHI 360 Office, which houses the ROMP and the End Neglected Tropical Diseases (END) in Asia Projects, is located at the third floor, Building 14, Infectious Disease Office (IDO) – NCDPC-DOH. It has two telephone lines (+632.296.6913, 485.4228) and an internet connection. All office equipment and supplies have been procured.

D.1.2. Philippines Registration Requirements and Payroll Services

FHI 360 Philippines has complied with all required legal registration and documentation (Securities and Exchange Commission No. 8200104128) to conduct business in the Philippines. All financial and management systems are fully functional. Payroll is being managed by SmartAccountSolution (SAS).Ltd.Co., who also do the withholding and tax remittance to the Bureau of Internal Revenue (BIR) and remittances of contributions to the Philippine Health Insurance Corporation (PhilHealth), Social Security System (SSS), and Home Mutual Development Fund (Pag-Ibig). The annual audit of financial statements is done by Punongbayan & Araullo Auditing Firm which is a partner of Grant & Thornton. The audit of the 2012 financial statements will commence on February 4, 2013.

D.1.3. Organizational Structure and Staffing

The ROMP Project Chief of Party (COP), Dr. Loreto Roquero Jr. and M&E Specialist, Dr. Ricardo Mateo Jr., were engaged and on board upon project initiation on October 1, 2012. They are being supported by the FHI 360 service center³, Senior Finance Officer, Mr. Lemuel Mendoza and Administrative Assistant, Ms. Joy Caber. Additional service center staff were recruited and hired (Ms. Arlene Escobido, Administrative Assistant and Ms. Juliet Caro, Finance Officer) and by the end of the quarter the staffing of the FHI 360 Philippine Office was complete.

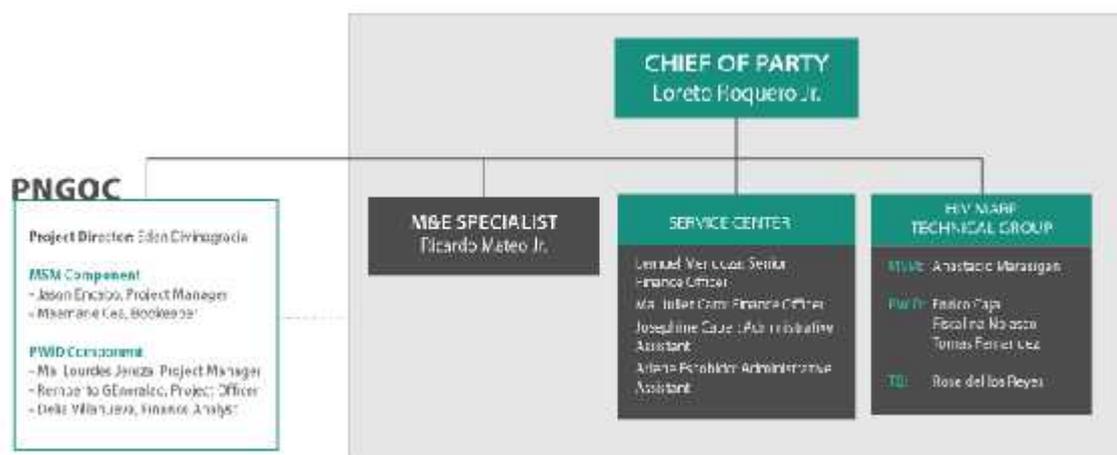
Beginning in October 2012, the process of engaging sub-awardees and project consultants commenced. A series of meetings firmed up the award for PNGOC to implement ROMP Project activities for MSM in Quezon City.

Meetings were also conducted with USPF Executive Director, Ms. Lourdes Jereza, for the sub-award to implement ROMP Project activities for PWID in the Tri-City. Because of USPF's withdrawal from the project, FHI 360, in consultation with DOH, the ROMP Project Agreement Officer's Representative (AOR), Ms. Judy Chen and local stakeholders decided to engage PNGOC to take charge of implementation in the Tri-City of Cebu-Province. By the end of the quarter, FHI30 had formally informed USAID of the change in implementation arrangements and is awaiting approval of its contracting office.

Figure 1 depicts the interim ROMP Project organizational chart. The final structure will be completed by the second quarter when all sub-awards are finalized and consultants are engaged.

³ Service Centers (SC) are country office costs that are shared amongst all projects in that country. The costs are necessary for program implementation, but are not utilized solely for one specific program.

Figure 1. The ROMP Project Organization Structure as of December 31, 2012.



Dr. Roquero, as COP, is responsible for providing over-all technical leadership and management direction to the ROMP Project. Likewise, he is to represent the project and coordinate with USAID, DOH, other USAID cooperating agencies and partners/stakeholders. Under the FHI 360 Philippine Office, he supervises:

- Dr. Mateo, the Monitoring Specialist, who is responsible for the development of the project’s monitoring system and tracking project progress through the regular collection, analysis, interpretation, documentation and dissemination of project data and accomplishments.
- HIV MARP Technical Group, which is composed of technical experts in the field of HIV/AIDS programming for MSM and PWID. The group ensures that planned activities are technically sound, evidence-based, gender-sensitive, rights-based and culturally/socially acceptable. Included in the team is a TB expert who will provide technical guidance on TB/HIV co-infection.
- The Service Center Team, headed by Mr. Mendoza, the FHI 360 Senior Finance Officer and which provides administrative and financial support to the ROMP Project .

Dr. Roquero, together with the FHI 360 Team, supervises and monitors PNGOC, the sub-awardee to implement field-level activities. The PNGOC Team is headed by Ms. Eden Divinagracia and is supported by an MSM and PWID Team working in Quezon City and the Tri-City in Cebu Province, respectively.

D.2. Orientation, Consultation, Coordination and Work Planning Meetings

D.2.1. With Implementing Agencies

FHI 360 held monthly meetings and as needed with PNGOC and USPF. These meetings dealt with project and financial management and technical assistance for implementation of planned activities. Other than face-to-face meetings, FHI 360 coordinated, mentored and supervised PNGOC and USPF through telephone and email communications.

With PNGOC:

Oct 8-9, 2012: Engagement meeting for the MSM component of ROMP Project where the pre-award assessment was conducted; the project design, deliverables and budget were presented; rapid assessment design and timeline discussed; and, staff and short-term consultants were identified.

Nov 5, 2012: Meeting with PNGOC Program Manager and consultant to observe *Klinika Bernardo* operations and to identify and design ROMP Project support for the 2012 World AIDS Day commemoration.

Dec 5, 2012: Meeting with PNGOC Program Manager and consultant to discuss and fine-tune the MSM component of the FY2013 ROMP Project AIP and update on status of the PNGOC sub-award.

Dec 27, 2012: Presentation and discussion of the draft rapid assessment for MSM, including timeline for completion.

With USPF:

Oct 11-12, 2012: Pre-award assessment conducted.

Oct 15-16, 2012: Orientation of key USPF staff on ROMP Project implementation and clarified the roles between DOH central and regional offices, USPF and FHI 360 and identified strategic directions for project implementation. Current situation in the project sites were provided by Dr. Tomas Fernandez and Ms. Odette Jereza of USPF and augmented by Dr. Ilya Tac-An of the Cebu City Health Department. Also discussed were the objectives, targets and support that will be provided by the Transitional Funding Mechanism (TFM) of Global Fund to Cebu City; the complementarity between the TFM and the ROMP Project; activities, support and timeline of the ROMP Project; and initial inputs into the Year 1 ROMP Project AIP for PWID in the Tri-City. Also discussed was the PWID rapid assessment objectives and design. FHI 360 provided a partial list of documents for review and a guide that will be used during the assessment to be conducted by Dr. Fiscalina Nolasco, FHI 360 consultant.

Nov 14-15, 2012: FHI 360 met with Ms. Jereza regarding the withdrawal of USPF as sub-awardee for the implementation of PWID activities in the Tri-City. The search for a potential replacement resulted in four organizations being interviewed by FHI 360: Bidlisiw, Cebu Plus Association, Inc. (CPAI), Cebu Youth Center, Inc. (CYCI), and, Fellowship for Organizing Endeavors (FORGE). Bidlisiw declined a potential sub-award because of its perceived lack of capacity at this time.

D.2.2. With Central and Regional DOH and the LGUs**With Central and Regional DOH:**

Oct 4-5, 2012: FHI 360 participated in the DOH-led TFM Operational Planning. The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) had recently approved the proposal entitled "Sustaining the Gains of Essential Program Services of the Round 6 HIV Grant in the Philippines" under the TFM. The proposal covers six (6) sites that included two (2) ROMP project sites: Quezon City for MSM and Cebu City for PWID. FHI 360 was able to identify synergies between the TFM and ROMP activities in Quezon City for MSM and Cebu City for PWID which are reflected in the ROMP AIP. Likewise, side meetings with Dr. Gerard Belimac of the National AIDS/STI Prevention and Control Program (NASPCP), Dr. Genesis Samonte of the National Epidemiology Center (NEC) and Ms. Judy Chen of the USAID-Office of Health (OH) on ROMP objectives and project implementation timeline were undertaken.

Oct 12, 2012: USAID-OH Chief Ms. Ann Hirschey, together with Dr. Yolanda Oliveros (USAID-OH) and FHI 360 made a courtesy call to Ms. Maylene Beltran, Director of the Bureau of International Health Cooperation (BIHC) to introduce the ROMP Project.

Oct 16, 2012: FHI 360 presented the ROMP Project to DOH-CHD 7 Regional Director Asuncion Anden. Also present were Dr. Jonathan Neil Erasmo, DOH-CHD 7 STI Coordinator and Dr. Judith Tawatao, Health Operations Chief. It was emphasized that DOH, particularly CHD 7, will take the lead in all ROMP Project activities. Likewise, the Tri-City Collaboration (TCC) initiative was discussed. The pivotal role of DOH-CHD 7 in the TCC was reiterated. Dir. Anden was informed that FHI 360 will visit the Tri-City health offices to introduce the ROMP Project. To demonstrate the CHD 7's commitment to lead in ROMP implementation, she instructed Dr. Erasmo to accompany the FHI 360 team on these visits.

Dec 3, 2012: FHI 360 presented the ROMP Project to the members of the HIV/AIDS Technical Working Group (TWG) presided over by Dr. Mario Baquilod, Officer-in-Charge of the IDO-NCDPC. Project sustainability was discussed and other issues raised including the feasibility of implementing a needle-syringe exchange program in the Tri-City and the inclusion of hepatitis screening for PWID. ROMP staff will discuss implementation arrangements for a needle-syringe exchange program under the TCC for HIV PWID interventions and hepatitis screening could be included as part of laboratory work-up for PWID depending on the availability of testing reagents/kits in the city health offices.

Dec 13, 2012: ROMP Project staff participated in the annual work planning meeting convened for all health programs of the IDO of NCDPC. In this workshop, the staff provided an overview of its planned MSM and PWID interventions. The workshop provided the opportunity for ROMP to learn more about 2013 planned activities of NASPCP and the National TB Program, synchronize activities, as well as identify synergies and possible support for ROMP interventions.

With LGUs:

In Quezon City -

Oct 11, 2012: FHI 360 met with Dr. Antonietta Inumerable, Quezon City Health Officer, to formally introduce the ROMP Project and to secure support for implementation. She welcomed the project and reiterated the need for technical assistance in the setting-up and operations of *Klinika Bernardo*, the male wellness clinic that the city government will put up to address the concerns of men, particularly MSM. FHI 360 committed to provide the needed TA to the clinic. Other points discussed were the upgrading of the skills of the locally-hired peer educators, the institutionalization and expansion of the Short Message Service (SMS) for MSM (SMS4MSM) and the evaluation of the city-led HIV/AIDS awareness seminar for all health certificate applicants in Quezon City.

Nov 29, 2012: FHI 360 presented the ROMP Project to the multi-sectoral Quezon City STD/AIDS Council (QCSAC) meeting presided by Dr. Judy Martinez, Field Operations Division Chief of the Quezon City Health Department (QCHD). Also discussed was the ROMP Project's support to the upcoming World AIDS Day commemoration in December 2012. FHI 360 supported activities with the formal launching of *Klinika Bernardo* on December 4, 2012; the highlights of which are in Annex B. Beyond the clinic launching, FHI 360 committed to draft a development plan for the clinic based on QCHD's vision and monitor the implementation of the development plan.

Dec 14, 2012: FHI 360 participated in a meeting chaired by Dr. Inumerable. Also present were other staff of QCHD and representatives from PNGOC, TFM-GFATM and AIDS Society of the Philippines (ASP). Dr. Inumerable said that the groups present will now constitute the steering committee for HIV/AIDS projects operating in Quezon City and had set the third (3rd) Friday of every month as the regular meeting schedule.

FHI 360 updated the group on the ROMP Project planned activities for MSM in the city, including the interface with the TFM-GFATM. Given the five (5) MSM sites identified in the ROMP Project workplan, Dr. Inumerable will meet with her HIV/AIDS team to formulate a mechanism for reassignment of the locally-hired peer educators as they will be tasked to supervise the TFM-hired peer educators. In this regard, Dr. Inumerable requested assistance from the ROMP Project in preparing the terms of reference (TOR) for the TFM-hired peer educators who will be assigned in the five (5) MSM sites.

FHI 360 also participated in the TFM M&E training for 20 locally-hired peer educators and six (6) TFM-hired site implementation officers (SIO). The TFM field-level master list tool was discussed by representatives from the NEC and several issues were raised that NEC will address. An M&E training of the 115 TFM-hired peer educators will be done in Q2. Twenty-eight of the recruited TFM peer educators are females and it was decided that they will have to be replaced in order to better assure peer educators can better interact with MSM. However, more funding will be needed to train the new TFM-hired peer educators as TFM does not have budget for training. The ROMP Project is looking for ways to mobilize resources.

In the Tri-City -

Oct 16, 2012: The ROMP Project was presented to the city health officers (CHO) of the Tri-City. From the ensuing discussions, FHI 360 got a sense of the current political landscape and the political configuration after the May 2013 election. These meetings helped in overcoming concerns among officials that ROMP would overburden the health workforce and further stretch a limited budget.

Dec 17, 2012: FHI 360 participated in the orientation of peer educators and SIOs on the M&E for the TFM-GFATM Project for PWID in Cebu City. The orientation was headed by Dr. Genesis May Samonte of NEC-DOH. Salient points discussed were:

- There were several questions on, and suggestions to, simplify M&E instruments. It was agreed that tools will be piloted for an initial period of three months and modified if needed.
- Instructions on how questions will be asked will be attached to the masterlist form.
- The 12 PWID peer educators are not adequately trained. The possibility of including them in the peer educators' training of the ROMP Project for those coming from the cities of Lapu-Lapu and Mandaue will be explored.

D.2.3. With USAID, other Cooperating Agencies and Technical Working Groups

With USAID:

Oct 2, 2012: A courtesy visit to USAID office was made to formally introduce the FHI 360 team and meet the concerned USAID-OH staff (Ms. Hirschey, Ms. Chen, and Dr. Oliveros). The schedule for the post award meeting was explored.

Oct 5, 2012: FHI 360 met with USAID to discuss focus and directions for planned ROMP activities. In this meeting, USAID made the following clarifications and/or instructions:

ROMP is a service delivery project and activities should be geared toward responding to gaps in PWID and MSM services.

1. ROMP should collaborate closely with the GFATM project in overlapping sites.
2. ROMP should review available assessment studies and consider forgoing the planned rapid assessments if available information would already suffice.

Oct 19, 2012: Post award conference. FHI360 country office staff along with FHI360 APRO staff (who joined through teleconferencing facilities) met with USAID technical and contracting staff (Gracelda Laspinas, Acquisition Specialist, Office of Regional Procurement; Fatima Almeida, Chief Financial Management Service Division, Regional Financial Services Center; Renato Tumaneng, Financial Analyst, Regional Finance Center; Jorge Dulanto-Hassenstein, Contracting/Agreement Officer) to review the grant agreement award documents. USAID provided an overview of the award and gave FHI360 the opportunity to raise specific questions or clarifications which included, among others, preparation of workplan and performance management plan, budget, financial and technical

reporting requirements, substantial involvement and branding.

Nov 13, 2012: In this meeting, FHI360 informed USAID that the NGO implementing partner for the PWID component of ROMP had backed out of the project. The meeting discussed potential alternatives for implementation arrangements. USAID emphasized the following:

- A local NGO should be selected as an implementing partner for ROMP because of the experience and expertise that it brings into the project.
- It is not ROMPs priority to build capacity of a new NGO that is identified to be the new implementing partner for the PWID component
- If an alternative NGO cannot be identified, ROMP should consider doing direct implementation of project activities with the cities of Cebu, Mandau and Lapu-lapu.
- USAID needs to be formally notified with the proposed changes in implementation arrangements

Oct 30, 2012: A COP meeting was called by USAID for the Philippines Portfolio Implementation Review. In this meeting, illustrative performance indicators of the Office of Health including the Master List of Indicators for Health were introduced. ROMP was asked to identify relevant indicators for the project and to include these in its PMP.

With other Cooperating Agencies:

Oct 23, 2012: A meeting of TB partners was called by Philippine Business for Social Progress (PBSP) to introduce the USAID funded *Innovations and Multisectoral Partnerships to Achieve Control of Tuberculosis* (IMPACT) Project. In this meeting it was clarified that ROMP project sites (Quezon City and the Cebu tri-cities) are overlapping sites with this new TB project. Initial ideas for collaboration were explored.

With Technical Working Groups:

Nov 28, 2012: The M&E TWG Meeting was held at the University of the Philippines School of Economics. Nothing specific pertaining to the ROMP Project was discussed. For all cooperating agencies, it was noted during the USAID Portfolio Implementation Review (PIR) that there are indicators being collected that are not linked to interventions. Likewise, projects tended to identify many indicators and implement piecemeal interventions that do not really translate to better health outcomes. It was the consensus of the TWG that projects should focus on fewer but more strategic interventions and scale these up.

D.2.4. With Other Partners

Joint UN Program on HIV Prevention for Key Populations at Higher Risk

ROMP had contacted the UNAIDS Secretariat had had secured a copy of the workplan on Joint UN Programme on HIV Prevention for Key Populations at Higher Risk (KPHR) in the Philippines. Activities Identified in the JUNPMARP workplan were reviewed for possible synergies and coordination with planned ROMP interventions.

World Health Organization (WHO)

On November 16, 2012, the COP met with Dr. Ying-ru Lo (Team Leader, HIV&STI) and Dr. Zao Pengfei, (Technical Officer, HIV Prevention) of the World Health Organization /Western Pacific Regional Office (WHO/WPRO) and provided them with an overview of ROMP and planned MSM and PWID interventions. Given ROMP's planned activities, WHO is directing its activities towards generating or estimating population sizes of MARPs, especially PWID and MSM. WHO also plans to support policy advocacy activities towards the development of an enabling environment for

interventions to happen in the Cebu Tri-City.

The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM)

On November 26, 2012, the COP met with the Dr. Shukat Aripov (Program Officer for High Impact Asia Department, Grant Management Division of the Global Fund) and briefed him of planned ROMP MSM and PWID interventions including areas of collaboration with GFATM TFM HIV activities in Quezon City and the Cebu Tri-City. In this meeting, the COP highlighted that GFATM-TFM will be the main source of commodities to be distributed in ROMP project sites which includes condoms and lubes, syringes and needles as well as HIV testing kits and anti-retroviral drugs to be accessed from government facilities.

Philippine National AIDS Council

On December 7, 2012, ROMP Project staff participated in the workshop convened by Health Action Information Network (HAIN) to finalize the *Philippine HIV and AIDS Strategic Plan for the MSM and Transgender Population 2012-2016* developed under the auspices of PNAC. The meeting provided the opportunity to introduce ROMP to MSM organizations in the country. ROMPs planned MSM interventions were validated and shown to directly support priority activities identified in the Strategic Plan. The meeting also provided the opportunity for ROMP to learn more about MSM interventions implemented by ASP in Quezon City under the GFATM.

The COP also met later with the Director of the PNAC Secretariat to explore an earlier request to USAID regarding possible provision of short-term technical assistance (STTA) to the PNAC Secretariat. The PNAC Secretariat is looking for a paralegal to support policy development work. Given the limited resources of ROMP, the project will not engage an STTA for the Secretariat but will actively participate in policy meetings that the Council plans to convene.

ISEAN-Hivos Project

On December 18, 2012, the ROMP Project attended a meeting called by the ISEAN Hivos Project with the focus of arriving at a common definition of transgenders in the Philippines. In this meeting, the draft Training Manual on community mobilization including IEC materials developed for MSM and transgender people were also presented for comments and suggestions of participants before finalization. The meeting provided the opportunity for ROMP to learn more of ISEAN Hivos work including materials which could help support ROMP MSM activities in Quezon City.

World Bank

On December 20, 2012, the COP met with Dr. Sutayot Osornprasop (Human Development Specialist) and Dr. Roberto Antonio Rosadia (Health Specialist) of the WorldBank and provided them an overview of the ROMP project and planned MSM and PWID interventions.

D.3. Development of FY 2013 Annual Implementation Plan and Project Management Plan

Upon project start, FHI 360 discussed the development of the FY 2013 ROMP Project AIP and the PMP. To harmonize its activities to other ongoing initiatives, the project staff participated in the GFATM operational planning from October 4-5, 2012. As previously mentioned, this project will cover six (6) sites that included two (2) ROMP project sites: Quezon City for MSM and Cebu City for PWID.

FHI 360 participated in the discussions and workshops where the Global Fund performance framework was reviewed; the LGU support, targets and implementation and reporting arrangements for

prevention and treatment, care, and support activities were identified; and, operational plans relative to the approved TFM activities were developed.

After a series of meetings with DOH and LGU partners, USAID and other development agencies, the FY 2013 ROMP Project AIP was submitted to the USAID-AOR on November 15, 2012 and the PMP on November 29, 2012 for review and comments. Based on the AOR's comments, the AIP was revised and resubmitted on November 29, 2012. The AOR gave conditional approval to both on December 21, 2012. A revised AIP and PMP will be re-submitted in the second quarter. Annex C contains the most current versions of the AIP and PMP.

D.4. Rapid Assessment for MSM and PWID

The rapid assessments were intended to aid in the identification and operationalization of elements that would comprise the CPS models for MSM in Quezon City and the PWID in the Tri-City in Cebu Province. data collection started in November 2012. By the end of Q1 FY 2013, only the complete write-up for the PWID rapid assessment was completed. Refinement of the write-up of the MSM rapid assessment is ongoing. Both assessments will be submitted to USAID in January 2013 for comments. The assessment findings and recommendations will be used to validate and fine-tune the MARP interventions planned in FY13 as well as assist in developing a more detailed operational plan.

D.5. Other Activities

Other activities completed in FY2013-Q1 are:

- Provided input to a presentation for the Performance Plan Report (PPR) and Portfolio Implementation Review (PIR).

Although the ROMP Project start was only on October 1, 2012, FHI 360 assisted USAID in gathering data that covers October 1, 2011 to September 30, 2012 to complete the Indicator Data Collection templates. This entailed review of documents and interviews to report on the accomplishments for the HIV/AIDS program element indicators, calculation of accomplishments and projection of outyear targets (up to 2015). FHI 360 assisted USAID in drafting and finalizing the Key Issue Performance Narrative and the PIR powerpoint presentation.

- Assisted the Quezon City STD/AIDS Council (QCSAC) to plan for the 2012 World AIDS Day commemoration.

FHI 360 participated in several meetings to provide inputs on activity design and resource mobilization for World AIDS Day. The final activity designs were presented to the QCSAC on November 29, 2012, where the ROMP Project was also presented.

On December 3, 2012, the QCHD, with technical inputs from the ROMP Project, held a video presentation and provided STI/HIV information to 56 Barangay Health Workers (BHW) in the Quezon City Hall lobby. The activity aimed to increase the knowledge and awareness of the BHWs on STI/HIV for them to be allies of community-based MSM peer educators during peer outreach activities.