

NONCAPITAL PROJECT PAPER (PROP)

I. PROJECT IDENTIFICATION

1. PROJECT TITLE
 Institutional Utilization for Family Planning
 (University of Hawaii) *93011-570-952 (4)*

APPENDIX ATTACHED
 YES NO *22p*

2. PROJECT NO. (M.O. 1095.2)

3. RECIPIENT (specify)
 COUNTRY Worldwide
 REGIONAL INTERREGIONAL

4. LIFE OF PROJECT
 BEGINS FY 75
 ENDS FY 77

5. SUBMISSION
 ORIGINAL June 15, 1975 DATE
 REV. NO. _____ DATE
 CONTR./PASA NO. _____

II. FUNDING (\$000) AND MAN MONTHS (MM) REQUIREMENTS

A. FUNDING BY FISCAL YEAR	B. TOTAL \$	C. PERSONNEL		D. PARTICIPANTS		E. COMMODITIES \$	F. OTHER COSTS \$	G. PASA/CONTR.		H. LOCAL EXCHANGE CURRENCY RATE: \$ US (U.S. OWNED)		
		(1) \$	(2) MM	(1) \$	(2) MM			(1) \$	(2) MM	(1) U.S. GRANT LOAN	(2) COOP COUNTRY (A) JOINT (B) BUDGET	
1. PRIOR THRU ACTUAL FY	74 -	-	-	-	-	-	-	-	-	-	-	-
2. OPRN FY 1975	375	218	120	133	107	14	10					
3. BUDGET FY 1976	450	282	137	139	167	18	11					
4. BUDGET +1 FY 1977	450	282	134	139	167	18	11					
5. BUDGET +2 FY												
6. BUDGET +3 FY												
7. ALL SUBQ. FY												
8. GRAND TOTAL	1,275	782	391	411	501	50	32					

9. OTHER DONOR CONTRIBUTIONS

(A) NAME OF DONOR	(B) KIND OF GOODS/SERVICES	(C) AMOUNT
NONE	- -	- -

III. ORIGINATING OFFICE CLEARANCE

1. DRAFTER Joseph M. Loudis <i>JML</i>	TITLE Deputy Chief, PHA/POP/MI	DATE June 15, 1975
2. CLEARANCE OFFICER R. T. Ravenholt, POP <i>RTR</i>	TITLE Director, PHA/POP	DATE June 16, 1975

IV. PROJECT AUTHORIZATION

1. CONDITIONS OF APPROVAL

This grant is for the University of Hawaii/School of Public Health to utilize its established competencies in Population/Family Planning for implementing P/FP training programs primarily for LDC participants from East Asia and Pacific Regions.

2. CLEARANCES

BUR/OFF.	SIGNATURE	DATE	BUR/OFF.	SIGNATURE	DATE
POP/MI	Gerald F. Winfield <i>GFW</i>	6/17/75	NESA/TECH	George Coleman (phone)	6/25/75
POP/WA	C. Terry <i>CT</i>	6/18/75	EA/DP	William Lefes (phone)	6/24/75
POP/NESA	R. Y. Grant <i>RYG</i>	6/17/75	PPC/DPRE	John Welty <i>JW</i>	6/26/75
PHA/PRS	D. McMakin <i>DM</i>	6/18/75			

3. APPROVAL AAS OR OFFICE DIRECTORS

SIGNATURE <i>Harriett S. Crowley</i>	DATE 6/26/75
TITLE AA/PHA (Acting)	

4. APPROVAL A/AID (See M.O. 1095.1 VI C)

SIGNATURE	DATE

ADMINISTRATOR, AGENCY FOR INTERNATIONAL DEVELOPMENT

NONCAPITAL PROJECT PAPER (PROP)

Country: Worldwide

Submission Date: June 15, 1975

Project Title: Institutional Utilization for Family Planning
(University of Hawaii)

U. S. Obligation Span: FY 1975 - FY 1977

Physical Implementation Span: FY 1976 thru FY 1978

Gross Life-of-Project Financial Requirements: \$1,275,000

I. SUMMARY DESCRIPTION

The purpose of this grant is to enable East Asian and Pacific Basin LDC's to utilize established competencies and Institutional Response Capabilities developed by the University of Hawaii.

Earlier AID assistance to the University focused on institutional development. During this phase, the grantee developed and expanded its School of Public Health into a comprehensive center for Population/Family Planning research, training and advisory services. The center now functions as a major component of the University's Population/Family Planning Complex.

The AID intent now is to further utilize these capabilities. The necessary restructuring of grant assistance from the development to the utilization mode is endorsed by the University and supported by the AID/USAID evaluation recommendations attached to this PROP.

The new grant will capitalize on AID's previous (three year) institutional development investment by concentrating the University's newly evolved Population/Family Planning capabilities directly upon LDC needs.

The School has developed five options of specialization within its MS/MPH

degree program with emphasis in family planning. These are management and administration, health education/communication, biometrics, social work and public health nursing.

Short-term, non degree training will be provided to meet requests emanating from A.I.D. and LDCs, whether directly or thru other units, e.g., the East-West Center.

A Dr. P.H. degree program has been developed which emphasizes the health education and management aspects of family planning. A Ph.D program is being introduced for biometrics.

Short-term training for degree candidates from LDC's where collaborative relationships exist will be strengthened. The expected graduate student enrollment specializing in population is projected as follows: 1976-85, 1977-90, 1978-95. The short-term training enrollment 1976: 150; 1977: 150; 1978: 150.

Faculty and staff of the School will be further utilized to provide to A.I.D.-sponsored activities a broad range of consultants in all areas of public health as they relate to population/family planning.

All activities under this grant will be coordinated with other A.I.D. funded activities at the University of Hawaii and East-West Center complex.

A. Program Goal

1. Goal Statement: The Program Goal is to assist Asian and Pacific Basin LDC's to strengthen their capabilities to help poorest majorities achieve more manageable family size and attain a higher quality of life.
2. Measurement of Goal Achievement: Reduced family size and higher living standards could not be measureably attributed to one short-term assistance project. What may be measured is the impetus generated from expanding service delivery programs and activating new P/FP activities that will restrain population growth. It is expected that increased accessibility to FP/Health services will yield quantifiable changes in FP acceptor rates and fertility management behaviour. These will serve as indicators of population, health and economic trends.
3. Assumptions about Goal Achievements
 - a. LDC leaders in Population/Family Planning programs have identified major Population/Family Planning problems and are setting priorities for their resolution;
 - b. the development of indigenous capabilities for implementing population/family planning activities is given highest priority along with a planned and systematic phase out of foreign support.
 - c. LDC linkages with appropriate U.S. institutions are favored in developing cooperative and collaborative training and service programs which will better prepare LDC institutions to respond to P/FP problems in their own environment.

B. Statement of Project Purpose

1. The purpose: The project purpose is to concentrate U.S. institutional resources on educating and training population/family planning professionals required for LDC institutions to plan, implement and evaluate their own POP/FP programs.
2. Conditions Expected at End of Project:
 - a. Significant numbers of LDC population/family planning professionals have been trained and are at work in their own countries.
 - b. Evidence that LDC institutions have strengthened capabilities to solve population/family planning problems and to plan, implement, and evaluate their own teaching, research and service delivery programs.
 - c. Evidence that collaborative population/family planning programs in training and FP services are underway through formally established US/LDC institutional linkages.
3. Basic Assumptions About Achievement of Purpose
 1. Cooperative US/LDC education and training programs will better prepare LDC institutions to respond to POP/FP problems in their own environment.
 2. Asian/Pacific Basin countries are committed to further develop, support and draw upon their own resources as capabilities improve and donor assistance phases down.
 3. Established and existing agreements between the University of Hawaii and the Universities of Indonesia and Udayana and the Affiliation of Agreement between the School of Public Health,

University of Hawaii and the Institute of Maternal and Child Health, Philippines will continue to provide professional and scientific dialogue necessary for sustaining LDC institutional capabilities.

C. Project Outputs

1. Kind of Outputs:

a. Degree Training - Masters of Public Health (MPH)

The University of Hawaii, School of Public Health will provide Post graduate MPH degree fellowships for 25-30 selected LDC degree candidates from Asian and Pacific Basin countries and cooperating LDC institutions. Program emphasis will be on planning, organizing and implementing population/family planning programs. Curricula will include options in Managing/administering family planning programs and clinics, Health education/communication and motivation and population family planning education for rural FP service delivery programs. Other areas of emphasis will include advanced training in fertility management technology and other specialized courses collaboratively developed with appropriate LDC institutions.

b. Non-degree Training - The University Schools of Medicine and Public Health and Kapiolani Ob/Gyn Hospital will provide short-term training for 125-150 physicians, nurses, nurse-midwives and trainers of FP outreach and service delivery programs from Asian and Pacific Basin LDC's.

(1) On-site Observation/Training - Kapiolani Hospital

The Kapiolani OB/GYN Hospital will further expand its FP services to provide 1-3 weeks on-site observation or training for LDC physicians, nurses, hospital administrators and paraprofessionals who may require practical experience in FP clinic management and fertility management technology.

A major emphasis will be placed on providing practical experience for two sets of LDC physicians:

1. those who have completed their work at Advanced Technology Fertility Management (ATFM) Centers such as the Johns Hopkins University will participate in a short-term practicum, on the operational management of FP service delivery programs/clinics; and
2. (Asian) physicians who have not had previous ATFM training will be afforded demonstrations in the application of various fertility management techniques.

Under this arrangement, post-ATFM trainees who are returning to their respective countries may improve their management skills; non-ATFM trained physicians may visit Kapiolani to update fertility management knowledge and improve their management skills.

(2) On Site Training - Univ. of Hawaii Schools of Public Health and Medicine

Depending on previous training and experience, FP/Health nurses, nurse-midwives, administrators and others will participate in on-site programs for:

1. organizing service delivery clinics
2. establishing outreach and follow up programs
3. administration/management
4. communication/information techniques
5. client record and evaluation systems.

(3) Post Training Follow-up

As an extension of (1) and (2) above, trainees will be provided prototype kits of patient information and education materials and be instructed in data collection methods currently used by the University of North Carolina's International Fertility Research Program AID/csd 2979; Project 580-537. Trainees will be shown how to feed data into this system from their respective LDC FP facilities and how to use the produce for clinic and program management and evaluation.

c. Program Coordination

All degree-level training activities will be coordinated with East-West Center programs and will continue to follow existing areas of program cooperation with the East-West Population Institute. In so doing, the SPH shall continue to provide the East-West Center students with MPH/MS degree programs emphasizing population/family planning studies. Wherever practical, joint appointments within the University of Hawaii, East-West Center Complex, shall be made to ensure program integration and continuity. A major, and additional requirement will be to coordinate MPH curricula options with LDC participant needs. This will further strengthen collaborative LDC relationships and cross-training programs with Asian and Pacific Basin Institutions with whom University of Hawaii has established formal technical assistance and training agreements.

d. Advisory/Consultative Services

The grantee will continue to provide consultant and advisory services to A.I.D. and host country governments and their sponsored institutions involving planning, evaluation and training for family planning programs. The aforementioned consultant and advisory services will include but not be limited to the following areas of specialization: Public Health Administration, Maternal and Child Health, Health Education, Social Work, Communications, Demography, Planning and Management, Public Health Nursing and Epidemiology.

In addition to providing consultant services to LDC P/FP institutions and training programs, the University's SPH/Kapiolani consultants shall collaboratively assist the Batelle Institute (under its existing sub-agreement) to organize and implement an Asian and Pacific Basin Conference on Family Planning Technology.

The conference will involve LDC institutions with whom the University has strong institutional linkages. It will focus on recent advances in fertility management technology and incorporate private and public sector linkages, "social marketing" and considerations of increased availability/acceptability of FP technology in Asian settings.

D. Basic Assumptions about Production of Outputs

- a. The University of Hawaii, School of Public Health will exercise continued leadership within the University and its departments and East-West Center to provide graduate degree training to meet the specific and special needs of LDC population/family planning professionals.
- b. In keeping with the needs of LDC training programs, the School of Public Health will continue to develop and improve its management and evaluative capabilities; develop and produce advanced educational technology material; and developmental and organizational guides and manuals for advanced technology fertility management program and clinic.
- c. The School of Public Health and collaborating departments in the University will continue to adjust and articulate wherever possible, appropriate changes in curricula, training and research and institutional development activities to accomplish the changing LDC population/family planning needs.
- d. The School of Public Health will utilize University-wide research capability oriented towards institutional development, solutions to problems in technology, attitudes, management, policy and the environment which are impeding the successful implementation of population and family planning programs.

- e. In assisting the development of LDC institutions, the School of Public Health will maintain institutional linkages so an orderly and effective phase-out of donor assistance can be achieved.
- f. LDC institutions will continue to accept U.S. university assistance for resolving P/FP manpower training and program problems.

E. Project Inputs1. Kind of InputsA.I.D.

a. Grant Funding

- (1) Core funds
- (2) Consultant Services
- (3) Fellowships/participants
Short-term nondegree

Long-term degree

- (4) Library, reference;
Equipment/supplies
and rentals

b. Advisory Services

c. Program Monitoring

- d. Review Annual Workplans,
evaluate performance

Grantee

a. Staff Services

- (1) Core - administer, supervise and manage Grant Program: develop, implement training curricula, prepare annual workplans, budgets and fiscal reports

2. Magnitude of Inputs

- a. Approximately 1.5 millions covering total three years (FY 1976-78) of project.

Annual Input about \$450,000
on Fiscal Year basis

- (1) Approximately \$265,000 pa.
- (2) Approximately \$30,000 pa.
- (3) Approximately \$135,000 pa.
20 School of Public Health
50 Kapiolani Hospital
- 10 School of Public Health

- (4) Approximately \$20,000 pa.

b. Minor

- c. Program Monitor in direct liaison with SPH/Kapiolani staff and field personnel

d. Staff time

- (1) Approximately 18 professionals;
140 man services pa through FY1978

Director/Administrator (SPH)	- 1
FP Demography (SPH)	- 1
FP Integrated Health (SPH)	- 1
FP Evaluation (SPH)	- 1
FP Administration (SPH)	- 1
FP Health Education (SPH)	- 1
FP Prog. Operations (SPH)	- 1
FP Biostatistics/EPI (SPH)	- 1
FP Ob/Gyn (KAP)	- 1
FP Anatomy/Physiol. (Kap)	- 1
FP Nurse Trainer (Kap)	- 1
Audio Visual Specialist (Kap)	- 1

Medical Illustrator (Kap)	- 1
Adm. Assistant (Kap)	- 1
Steno/Secretaries (SPH)	- 3

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b. Advisory Services, Advise report and inform AID, USAID's and LDC's on new techniques and developments relating to POP/FP programs

b. Approximately 4 mm pa. Professionals as needed

c. Facilities

c. As needed to meet CORE and LDC education/training requirements

F. Basic Assumptions About Management

The School of Public Health, University of Hawaii, will:

1. Maintain administrative and management services to oversee the development of projects and programs.
 - a. A core staff will provide overall day-to-day administration/management of this program. It will coordinate all activities including those in the School of Public Health and the School of Medicine (Kapiolani Hospital), LDC institutional agreements and affiliations.
 - b. Core staff functions will be shared by the School of Public Health and the School of Medicine for appropriate activities.
 - c. Policy and guidelines for administrative and professional activities as they relate to the School of Public Health will be developed by a School-wide Population/Family Planning Committee.
2. Maintain and provide adequate research and training facilities and staff personnel for implementing training programs and projects.

- a. Instructional capability will be sustained and coordinated in the three departments of the School of Public Health, in the Department of OB/GYN of the Medical School and elsewhere in the University in order to meet the training objectives of this program.
 - b. Stipend and other financial support will be provided for up to 25-30 LDC (MPH) trainees over the three-year period and coordinated by the Admissions Committee.
 - c. Collaborative LDC cross-training and service delivery programs will be developed by faculty and staff and coordinated by the core staff.
3. Coordinate with the School of Medicine University of Hawaii at Kapiolani Hospital the training program on the management of advanced fertility techniques and development of educational technology.

LDC institutions will provide and manage their own funds for supporting jointly-planned subprojects.

AID will continue to review proposals, operational work plans and project reports to assure that implementation efforts and time schedules are in line with program objectives and levels of funding.

II. Program Inputs (Cont'd)

SCHOOL OF PUBLIC HEALTH
UNIVERSITY OF HAWAII
FY 75/76, FY 76/77, FY 77/78

PERSONNEL	Position Title	Name	FISCAL YEAR 1975-76			FISCAL YEAR 76/77			FISCAL YEAR 77/78			3-Year Total
			On Board 6/30/75	Man Months	Expenditures	On Board 6/30/76	Man Months	Expenditures	On Board 6/30/77	Man Months	Expenditures	
	Director/Administrator (SPH)		1	6.0	\$14,100	1	6.0	\$14,464	1	6.0	\$15,198	
	F.P. Demography (SPH)		1	6.0	14,100	1	6.0	14,464	1	6.0	15,198	
	F.P. Integrated Health Serv. (SPH)		1	6.0	12,600	1	4.0	8,720	1	4.0	9,052	
	F.P. Evaluation (SPH)		1	6.0	11,700	1	4.0	8,096	1	4.0	8,400	
	F.P. Administration (SPH)		1	6.0	12,600	1	6.0	13,020	1	6.0	13,030	
	F.P. Health Education (SPH)		1	6.0	12,600	1	6.0	13,080	1	6.0	13,080	
	F.P. Operations (SPH)		1	6.0	6,774	1	6.0	7,026	1	6.0	7,284	
	F.P. Biostatistics/Epi (SPH)		1	3.0	6,300	1	3.0	6,540	1	6.0	19,464	
	F.P. Ob/Gyn (KAP)		1	6.0	18,000	1	6.0	18,756	1	6.0	19,464	
	F.P. Anatomy/Physio (KAP)		1	3.0	8,750							
	F.P. Nurse Trainer (KAP)		1	12.0	15,753	1	12.0	16,212	1	12.0	16,824	
	A.V. Specialist (KAP)		1	12.0	10,464	1	12.0	10,860	1	12.0	11,374	
	Med. Illustrator (KAP)		1	12.0	10,056	1	12.0	10,464	1	12.0	10,850	
	Adm. Ass't/Fiscal (SPH)		1	12.0	14,860	1	12.0	15,420	1	12.0	16,092	
	Adm. Ass't. (KAP)		1	6.0	6,775	1	6.0	7,026	1	6.0	7,284	
	Stenographer (SPH)		1	12.0	6,984	1	12.0	7,092	1	12.0	7,452	
	Stenographer (SPH)		1	12.0	8,484	1	12.0	9,048	1	12.0	9,504	
	Stenographer (SPH)		1	12.0	8,484	1	12.0	9,048	1	12.0	9,504	
	SUB-TOTAL		18	144.0	\$199,404	17	137.0	\$189,456	16	134.0	\$189,580	
	Fringe Benefits (21% of Salaries & Wages)				41,875			39,786			39,812	
	Indirect Cost (12% of Salaries & Wages)				23,928			22,735			22,750	
	Consultants		10	4.0					10	4.0		
	Travel/Per diem				8,000			8,400			8,400	
	Faculty/Staff Travel				15,400			16,170			16,170	
	Fellowships/Participants				5,000			5,250			5,250	
	Short-term (20 SPH/50 KAP)											
	Long-term (SPH Approx 17 mos. @ \$10,000)		70	22.0	33,000	70	22.0	34,000	70	22.0	34,000	
	Communication		10	145.0	100,000	10	145.0	105,000	10	145.0	105,000	
	Equipment/Supplies				4,000			4,000			4,000	
	Library/Reference Materials				10,200			14,000			14,000	
	Space and Equipment Rentals				3,000			4,000			4,000	
	SUB-TOTAL				6,000			6,660			6,660	
	Battelle Sub-agreement											\$1,348,826
	TOTAL COST		108	315.0	\$528,747	107	308.0	\$449,457	106	305.0	\$449,622	78,940
												\$1,427,326

III. Project Rationale

- A. Objective - The long-range objective is to strengthen LDC capabilities to help their poorest majorities achieve more manageable family size and a higher quality of life.

To achieve this objective, the LDC's must be better prepared to conduct practical service delivery programs that meet the needs of the poor. They must improve their capabilities to plan organize and manage existing Pop/FP/Health programs and improve their institutional capabilities for training physicians, nurses, mid-wives, health/social welfare professionals and other support personnel necessary for effective program implementation.

- B. Strategy - Since LDC's are ill-prepared to solve these problems, the AID strategy is to afford key Asian and Pacific communities easier access to Pop/FP training and advisory services from established U.S. bases. This will allow the LDC's to draw upon U.S. institutions to train personnel needed for implementing FP/Health services and sustaining Pop/FP programs.

While increased accessibility to U.S. training and advisory services does not assure full LDC-use of these resources, there is demonstrated evidence that unique institutions (such as the University of Hawaii's Schools of Public Health and Medicine) which have been meeting the cultural, social and scientific needs of East Asian and Pacific Basin countries are being increasingly called upon to establish collaborative institutional relationships within this framework.

Because UH/SPH has integrated its education, training and research programs with the view toward Asian as well as domestic interests, the UH/SPH has been increasingly requested by LDC governments, agencies

and institutions to solve problems inhibiting the effectiveness of Family Planning and Health programs.

Thus, part of the AID strategy is to take full advantage of established LDC/UH-SPH relationships with the following institutions: The Department of Social Welfare and Health, Republic of the Philippines; The Institutions: The Institute of Maternal and Child Health (IMCH), University of the Philippines; Mary Johnson Hospital, Manila; and the Universities of Udayana and Djakarta, Indonesia.

Since these institutions invest their own limited resources in collaborative teacher and student exchange programs with UH/SPH, there is a continuous need for UH/SPH to be able to respond to increasing requests for additional degree-training, and advisory services.

To meet these requirements, AID propose to fund up to 25-30 MPH/LDC degree candidates during the three year life of this program. This will accommodate FP/Health teachers, programmers, program managers and policy makers who must be better prepared to conduct practical research, experiments, demonstrations, special studies, surveys and training programs that are required if FP/Health programs are to be successfully integrated into the country's way of life.

In addition, the plan capitalizes on continued feed-in from other LDC training programs on the mainland. During 1973-75, an AID institutional development grant enabled UH/SPH Kapiolani Hospital to develop on-site training programs for LDC physicians, nurses, nurse-midwives, hospital administrators and health professionals, who required practical experience in the operational management of FP service delivery programs and clinics. The Programs include:

- a. Organizing service delivery clinics,
- b. Establishing outreach and follow-up programs,
- c. administration/management,
- d. communication/information techniques,
- e. client record and evaluation systems.

The plan calls for continuation of the existing program which feeds in short-term trainees.

In sum, the plan proposes fuller utilization of the UH/SPH complex as an Asian/Pacific Population/Family planning training resource. It envisions continuation of AID support for on-going education and training programs that have been institutionally linked with established LDC/UH teacher-exchange, training and technical assistance programs. It capitalizes on both UH/SPH's geographical location and its ability to serve the Asian/Pacific community with uniquely tailored training programs that meet the social, cultural and scientific requirements of this community. It ensures that Asian and Pacific LDC's will have continued access to the UH/SPH complex and have fuller availability to services that focus directly on action programs for self-development.

C. Integration of Women

This project will effectively integrate more women into LDC training institutions and expand their employment opportunities in rural and urban FP/Health programs.

Since LDC nurse, nurse-midwives are already responsible for performing the majority of maternal-child health services as exist in the LDC's, this project seeks to persuade LDC physicians and Health/Medical institutions that trained women professionals can also organize, administer and manage training programs, clinics and services that have been traditionally administered by physicians.

D. Compliance with AID Policy

In accordance with Section 114 of the Foreign Assistance Act of 1961, as amended, the grantee is precluded from using project funds to:

C. Integration of Women

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D. Compliance with AID Policy

In accordance with Section 114 of the Foreign Assistance Act of 1961, as amended, the grantee is precluded from using project funds to:

- a. pay for the performance of abortions as a method of family planning or to motivate or coerce any person to practice abortions;
- b. procure or distribute equipment provided for the purpose of inducing abortions as a method of family planning;
- c. fund information, education, training or communication programs that seek to promote abortion as a method of family planning; ~~and/or~~
- d. pay women in the less developed countries to have abortions as a method of family planning; and/or
- e. ~~introduce~~ incorporate any coercive features relative to the practice of family planning or any mode thereof.

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- b. procure or distribute equipment provided for the purpose of inducing abortions as a method of family planning;
- c. fund information, education, training or communication programs that seek to promote abortion as a method of family planning;
- d. pay women in the less developed countries to have abortions as a method of family planning; and/or
- e. incorporate any coercive features relative to the practice of family planning or any mode thereof.

PROJECT DESIGN SUMMARY
LOGICAL FRAMEWORK

Life of Project:
From FY 1975 to FY 1978
Total U. S. Funding 1,348,886
Date Prepared: JUNE 1, 1975

Institutional Utilization for Family Planning
Project Title & Number: University of Hawaii AID/csd 3310; Project No.

NARRATIVE SUMMARY	OBJECTIVELY VERIFIABLE INDICATORS	MEANS OF VERIFICATION	IMPORTANT ASSUMPTIONS
<p>Program or Sector Goal: The broader objective to which this project contributes:</p> <p>The program goal is to assist Asian and Pacific Basin LDCs to strengthen their capabilities to help poorest majorities achieve more manageable family size and attain a higher quality of life.</p>	<p>Measures of Goal Achievement:</p> <ol style="list-style-type: none"> 1. Decreased fertility and population growth rates in geographical areas served directly by this program. 2. Increased FP service delivery activities made available by LDCs. 	<p>LDC Population/Family Planning Reports:</p> <ol style="list-style-type: none"> 1. Evidence of increased LDC support fertility management among the rural/ urban poor; 2. Evidence of increased LDC support for maintaining indigenous FP service delivery, education and training programs. 	<p>Assumptions for achieving goal targets:</p> <p>LDC leaders are prepared to prioritize their POP/FP problems and seek U.S. assistance to help solve these problems.</p>
<p>Project Purpose:</p> <p>The Project purpose is to concentrate U.S. institutional resources on educating/training POP/FP professionals required for LDC institutions to plan, implement and evaluate their own POP/FP programs.</p>	<p>Conditions that will indicate purpose has been achieved: End of project status.</p> <p>In Asian/Pacific Basin institutions a significant number of adequately trained personnel are planning, implementing and evaluating their own pop/fp service delivery programs. Collaborative pop/fp programs in training and fp services underway thru formally established US/LDC institutional linkages.</p>	<p>LDC Fiscal Support Budgets for P/FP Programs:</p> <p>LDC Institution Reports; Mission Reports Grantee Annual Reports; on-site evaluations.</p>	<p>Assumptions for achieving purpose:</p> <p>Cooperative US/LDC education and training program will better prepare LDC institutions to respond to POP/FP problems in their own milieu.</p> <p>Asian/Pacific Basin countries are committed to further develop, support and draw upon their own resources as capabilities improve and donor assistance phases down.</p>
<p>Outputs:</p> <ol style="list-style-type: none"> 1. U.S. Education for FP professionals involved in developing/managing LDC POP/FP programs. 2. Short-term training for FP professionals engaged in LDC service delivery programs. 3. U.S. consultant/advisory services for LDC/FP institutions and training programs and FP conferences. 4. FP curricula and training materials developed. 	<p>Magnitude of Outputs: During three-year Life of Project.</p> <ol style="list-style-type: none"> 1. 25-30 MPH/MS LDC degree candidates educated, 2. 125-150 doctors, nurses, nurse-midwives, trainers of trainers; receive clinical/management/program training at Kapiolani Hospital and the School of Public Health. 3. Up to 12 mm 4. FP curricula/training materials: produced/distributed to trainees and participating LDC institutions. 	<ul style="list-style-type: none"> o Numbers of LDC professionals educated/trained. o Numbers jointly developed institution-to-institution P/FP programs continued by LDCs following termination AID support o Follow-up conferences missions/LDC institutions o On-site visits, evaluations of UH training programs. 	<p>Assumptions for achieving outputs:</p> <p>Full range U.H. resources as needed drawn upon</p> <p>LDC institutions will accept U.S. university assistance for resolving P/FP manpower, policy and program problems.</p>
<p>Inputs:</p> <p>Grantee</p> <ol style="list-style-type: none"> 1. Administrative/supervisory/teaching staff for Education/Training courses. 2. U.S. consultant/program review personnel for LDC service delivery and training activities. <p>Office of Population</p> <ul style="list-style-type: none"> Grant funding/program monitoring 	<p>Implementation Target (Type and Quantity) Grantee</p> <ol style="list-style-type: none"> 1. Part-time administrative/supervisory personnel as needed; full-time Kapiolani Hospital nurse trainers, audio visual specialist, medical illustrators and Ob/Gyn staff as needed. <p>Office of Population</p> <p>Up to \$450,000 per year.</p>	<p>UH</p> <p>Annual Reports; Grantee staffing patterns; periodic UH/AID program evaluation.</p> <p>LDCs</p> <p>Cooperative P/FP program evaluation.</p>	<p>Assumptions for providing inputs:</p> <p>UH:</p> <p>Can plan, manage and implement LDC education/training programs. Maintain adequate research, training and consultant personnel cognizant of LDC, FP training needs.</p> <p>LDCs</p> <p>Provide and manage own funds for LDC POP/FP projects and training.</p>

Planned Activities - FAMILY PLANNING/POPULATION STUDIES PROGRAM

IV. Plan of Action

SCHOOL OF PUBLIC HEALTH, UNIVERSITY OF HAWAII
FY 76-78

Planned Activities	FISCAL YEAR 1976-77	FISCAL YEAR 1977-78	FISCAL YEAR 1978-79
<p><u>Long-Term Training</u> Between 25-30 M.P.H./M.S. degree candidates over three-year period (Specific Country Needs to be considered) (Possibility of Ph.D., degree, 1-3 candidates over 3-year period).</p>	<p>Provide Master of Public Health (M.P.H.) training for select LDC participants. Training in planning, organizing, and implementing family planning/population programs. Also, discussion on advanced fertility technology and education technology with some emphasis on rural family planning programs. Up to 10 M.P.H. (See Institutional Relationship)</p>	<p>Continue M.P.H. program activity. Continue discussion on specific country needs. Indonesia, Philippines, and Thailand - ongoing relationship (See Institutional Relationship). Up to 10 M.P.H.</p>	<p>Continue M.P.H. Program activity. Discussion on "beyond" family planning. <u>Up to 10 M.P.H.</u></p>
<p><u>Short-term Training</u> Between 125-150 Short-term participants over three-year period.</p>	<p>Provide on-site, short-term training and observation -- administration/management of family planning program including advanced fertility technology; educational technology; training trainers in human sexuality/family planning; social marketing. Identify country training needs.</p>	<p>Specific short-term training; e.g. Social Marketing/Distribution Human Sexuality/family planning Advanced family planning education technology. Identify specific program and institutional training needs, follow-up/evaluation.</p>	<p>Continuation, follow-up evaluation.</p>
<p><u>Institutional Relationships and Joint Collaborative Activities</u> (East-West Population Institute; EW Communication Institute; Universities of Indonesia, Iwagane, Philippines; Institute of Maternal and Child Health (Manila), Mary Johnston Hospital (Manila))</p>	<p>Collaborative projects with LDC Institutions in family planning/population program training, service, (consultation/advisory) and operational research/evaluation. Projects may include post MPH training; faculty/student exchange; specific family planning programs/projects, e.g. Mary Johnston Hospital; University of Indonesia Cross-Collaborative training.</p>	<p>Continue collaborative efforts to improve and build institutional capacity to respond to LDC population and family planning program/projects. Training/Educating, family planning program administrators/managers.</p>	<p>Continuation, follow-up, Evaluation</p>
<p><u>Advisory and Consultative Services</u></p>	<p>Expand capability for consultant and advisory services to AID and LDC host countries planning, implementing, evaluating family planning/population programs. Include but not limited to administration, MCH, Health Education, Epidemiology, Demography, Social Work, Communication, PH Nursing.</p>	<p>→ →</p>	<p>→ →</p>