

AID 1800-1
10-68

PROJECT AGREEMENT

4930283 (5)
A-11-728

BETWEEN THE DEPARTMENT OF STATE, AGENCY FOR INTERNATIONAL DEVELOPMENT (AID),
AN AGENCY OF THE GOVERNMENT OF THE UNITED STATES OF AMERICA, AND

PROAG

DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION

45p

AN AGENCY OF THE GOVERNMENT OF THAILAND

The above-named parties hereby mutually agree to carry out a project in accordance with the terms set forth herein and the terms set forth in any annexes attached hereto, as checked below:

- Project Description Annex A Foreign Currency Standard Provisions Annex
 Standard Provisions Annex Special Loan Provisions Annex

This Project Agreement is further subject to the terms of the following agreement between the two governments, as modified and supplemented:

ECONOMIC & TECHNICAL COOPERATION AGREEMENT DATED SEPTEMBER 19, 1950

MEMORANDUM OF AGREEMENT AS TO CONDUCT OF COUNTERPART PROGRAMS, DATED JULY 24, 1955

(other)

1. Project/Activity No.
493-11-580-0283

PAGE 1 OF 12 PAGES

2. Agreement No.
0283-6002

3. Original or Revision No. 1

4. Project/Activity Title

Population Planning

5. Project Description and Explanation

(See Annex A attached)

6. AID Appropriation Symbol

72-11X1024

7. AID Allotment Symbol

424-50-493-00-44-61

8. AID FINANCING

Dollars Local Currency

Previous Total (A)

Increase (B)

Decrease (C)

Total to Date (D)

(a) Total

7,800

2,883,000

2,890,800

(b) Contract Services

(c) Commodities

2,800,000^{1/}

2,800,000

(d) PIO/PS

7,800

83,000

7,800

(e) Other Costs

83,000

9. COOPERATING AGENCY FINANCING Dollar Equivalent

\$1.00 = 20.00 Baht

TOTAL RTG CONTRIBUTION

฿29,324,749

฿29,324,749

(U.S. Dollar Equivalent)

(US\$ 1,466,238)

(US\$ 1,466,238)

RTG PROJECT ACCOUNT FUNDS

฿ 6,445,949

฿ 6,445,949

RTG REGULAR BUDGET FUNDS

(US\$ 322,298)

(US\$ 322,298)

RTG REGULAR BUDGET FUNDS

฿22,878,800

฿22,878,800

RTG REGULAR BUDGET FUNDS

(US\$ 1,143,940)

(US\$ 1,143,940)

10. Special Provisions (Use Additional Continuation Sheets, if Necessary)

On 12/24/1975, AID/W approved JSOM's Project Paper for a new project in the family planning sector. Block Nos. 1, 2, 4 and 13 have been revised in accordance with this PP.

1/ \$2,700,000 of these funds are obligated by AID/W for centrally-funded commodity procurement.

11. Date of Original Agreement

September 8, 1975

12. Date of This Revision

March 31, 1976

13. Final Contribution Date

December 24, 1981

14. For the Cooperating Government or Agency

Xujati Pramoolpol

SIGNATURE: Xujati Pramoolpol

DATE: 3/31/76

TITLE: Director-General, DTEC

15. For the Agency for International Development

Charles S. Whitehouse

SIGNATURE: Charles S. Whitehouse

DATE: 3/31/76

TITLE: Ambassador

ED *J*
DMO = "
/PROG *10/1975*
/FIN *J*
TEC/P *1/16*
P.T.
MOPH

PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION

AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Project/Activity No.
493-11-580-0283

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0283-6002

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Population Planning

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3. Original or
Revision No. 1

I. PROJECT DESCRIPTION

This document records the agreement of the parties to embark on a Population Planning Project in Thailand which has as its goal the attainment of an annual population growth rate of not more than 2.1% by the end of CY 1981. This project of the Royal Thai Government will be implemented over the period 1976-1981 and is described in greater detail on pages 16 through 39 of the Project Paper entitled Thailand Population Planning Project which was developed jointly between USOM and the RTG.

The parties agree that, subject to the availability of funds, they will carry out the Project in the manner and in accordance with the plans set forth in the Project Paper as modified herein or by subsequent exchanges of letters.

The RTG assures the USG of its present firm intention to seek appropriations and, subject to the availability of such funds, to provide from its own appropriations or from other donor sources over the life of the Project the Baht equivalent of approximately \$24.4 million out of the estimated total project cost of \$32.7 million. RTG appropriated funds to be provided are currently estimated at \$21.1 million, or 65% of the total estimated project cost, well in excess of the requirement of Section 110 (a) of the U.S. Foreign Assistance Act of 1961, as amended, calling for such contributions to equal at least 25%.

In order to make certain the successful accomplishment of this Project, the RTG agrees that it will, acting through its appropriate agencies, take the following actions on a timely basis:

1. Establish procedures to ensure that no person shall be denied family planning services, including commodities, donated by the United States hereunder because of inability to pay for or to make a contribution in request of such services or commodities.
2. Establish over the life of the project, a program for family planning training for a minimum of 1,000 members of the Border Patrol Police, 4,000 tambon doctors and 7,000 traditional midwives, and authorize those successfully completing such training to dispense non-clinical contraceptives and family planning information.
3. Establish a schedule, based upon Civil Service Commission review with Ministry of Public Health (MOPH) of the National Family Planning Program (NFPP) headquarters requirements, for

For the Cooperating Government or Agency

SIGNATURE: _____ DATE: _____

TITLE: _____

For the Agency for International Development

SIGNATURE: _____ DATE: _____

TITLE: _____

AID 1980-1A (10-83) PROAG CONTINUATION SHEET ANNEX <u>"A"</u>	PROJECT AGREEMENT BETWEEN AID AND DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION AN AGENCY OF THE GOVERNMENT OF THAILAND	1. Project/Activity No. 493-11-580-0283	PAGE <u>3</u> OF <u>12</u> PAGES
		2. Agreement No. 0283-6002	3. <input type="checkbox"/> Original or Revision No. <u>1</u>
		3. Project/Activity Title Population Planning	

the transfer of appropriate Project Account-funded positions to Civil Service Commission-sanctioned permanent positions.

4. Establish a MOPH-approved plan for the supervision of family planning field operations, reporting and re-training. The plan should include identification of specific family planning supervisory responsibilities of doctors, public health nurses, and auxiliary midwives, with particular attention to the supervisory relationships between these personnel and non-MOPH personnel (BPP, tambon doctors, village midwives) being trained as family planning agents.
5. Establish a schedule for program expansion, to be jointly prepared by the NFPP and USOM, relating AID and RTG support in a given functional/geographic area to that area's adherence to the expansion criteria (supervision, training, contraceptive outlets, etc.) as outlined in the Project Paper.
6. Establish a system of collection, accounting and utilization of fees and service charges collected by MOPH and non-MOPH distributors of oral contraceptives for the purpose of creating through such collections an RTG fund to enable future RTG purchase of 100% of NFPP oral contraceptives requirements. Such system shall be subject to approval by A.I.D. Disbursement of A.I.D. funds and release of commodities under this Agreement will depend upon A.I.D. approval of the system referred to above.
7. Assure the availability of adequate RTG personnel to conduct biannual evaluations of the family planning program. These evaluations shall be conducted jointly with A.I.D.

II. RTG AND USG CONTRIBUTION

A. Oral Contraceptives

The Royal Thai Government, as a partial contribution to this Project, in FY 1976, agrees to purchase two million monthly cycles of oral contraceptives using RTG MOPH Regular Budget funds and one million monthly cycles of oral contraceptives from RTG Project Account Funds programmed in support of the National Family Planning Project (NFPP) for Thai Fiscal Year 1976.

For the Cooperating Government or Agency

For the Agency for International Development

SIGNATURE: _____ DATE: _____

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**PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
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Note: Since FY 1973, the RTG and the USG have agreed that the RTG would increase its purchase of oral contraceptives each year. Thus, the RTG, in accordance with this agreement, purchased one million monthly cycles of oral contraceptives in FY 1974 and two million cycles in FY 1975. RTG inputs for purchasing oral contraceptives for future years will be increased according to the jointly agreed upon formula contained in the table below:

	Plus: 50% of Projected Increased Usage for Each Year	Total
FY 1976 - 3 million cycles	2 million cycles	5.0
FY 1977 - 4 million cycles	4 million cycles	8.0
FY 1978 - 5 million cycles	4.5 million cycles	9.5
FY 1979 - 6 million cycles	5 million cycles	11.0
FY 1980 - 7 million cycles	5.5 million cycles	12.5
FY 1981 - 8 million cycles	6 million cycles	14.0

During any period in which the USG participates in financing the above requirements, should actual usage be lower than projected levels, decreased financing requirements will be shared between the RTG and the USG on a 50/50 basis.

The USG, as a partial contribution to this Project in FY 1976 agrees to provide 15 million monthly cycles of oral contraceptives, including the cost of transportation. AID/W will provide these contraceptives at an approximate cost of \$2,700,000. Funds are obligated by AID/W for centrally-funded commodity procurement.

B. Mobile Family Planning Units

The very limited availability of family planning services in rural areas is a major constraint to continuing fertility decline. The RTG plans to expand the use of mobile family planning units in remote Thai areas by distributing mobile units to provincial hospitals on a loan basis where the population is over one million or where demand exists for clinical contraception, as an interim delivery system pending the establishment of fixed local distribution system at which time the mobile units will be relocated in still more remote or underserved areas.

For the Cooperating Government or Agency

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AID 1980-1A (8-83) PROAG CONTINUATION SHEET ANNEX <u>"A"</u>	PROJECT AGREEMENT BETWEEN AID AND DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION AN AGENCY OF THE GOVERNMENT OF THAILAND	1. Project/Activity No. 493-11-580-0283	PAGE <u>5</u> OF <u>12</u> PAGES
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Staffing for each mobile unit will consist of 5-6 professional health personnel, including at least one doctor per unit, nurses, etc. The team will place particular emphasis on vasectomy and IUD insertion and travel to remote areas not served by permanent clinic facilities. The average size of population served by the mobile units will be 60,000 persons. On a typical visit, each mobile team will insert more than 200 IUD's and perform 60 vasectomies.

The RTG agrees to purchase 10 vehicles in FY 1976 and 10 in FY 1977. The USG agrees to match the RTG purchases by buying 10 vehicles in FY 1976 and FY 1977. This Project Agreement Revision obligates \$40,000 for the 10 USG financed vehicles purchases in FY 1976.

Further, the RTG through the Ministry of Public Health, will:

1. Provide regularly scheduled family planning services in remote areas, using mobile F.P. clinics staffed by doctors (at least one) and health personnel from provincial hospitals or First Class Health Centers;
2. Maintain a pre-arranged schedule of mobile Family Planning clinic visits. This schedule will include at least one visit per week to areas not currently serviced by an existing health facility;
3. Provide the additional budgetary resources needed to pay travel and per diem costs for mobile team personnel, for gasoline and oil, and for maintenance of the Family Planning vans to at least the levels indicated on the basis of paragraphs 1 and 2 above.
4. Rotate physicians, nurses and other professional staff assigned to the provincial hospitals or the First Class Health Centers to mobile clinic assignments on a routine and regular basis;
5. Direct the mobile teams to emphasize clinical contraceptive methods, with particular attention to vasectomy and IUD insertion;

For the Cooperating Government or Agency

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6. Ensure that the provincial hospitals and the first class health centers and the National Family Planning Project maintain service records and cost data on the mobile clinics to permit a cost-effectiveness evaluation of this method of delivery of Family Planning services.

C. Family Planning Medical Kits

Family Planning medical kits will be provided by the USG for hospitals and clinics, both private and public, where personnel have received training in their use. Recipients will report all operations done with equipment through the National Family Planning Service Statistics System. This Revision obligates \$60,000 to purchase the following Family Planning Medical Kits:

IUD Insertion	150
Vasectomy	300
Mini-Lap	<u>100</u>
Total Kits	550

RTG also agrees to provide training and follow-up for 400 nurse midwives in IUD insertion and 400 physicians in vasectomy and mini-lap techniques. Adequate stock control and utilization records for the Family Planning kits will be maintained.

D. Training Family Planning Workers - \$83,000

During the FY 1976-81 period, the NFPP plans to train approximately 400 nurse-midwives and 2,000 auxiliary midwives to perform IUD insertions at MOPH clinics, and 1,000 Border Patrol Police (BPP), 4,100 tambon doctors and 7,000 traditional (granny) midwives as village-level agents for family planning information and service (primarily pills and condoms).

In FY 1976, the NFPP has planned to train 200 BPP. The training will commence in July, 1976 at Hang Chat District, Lampang. The training schedule is shown below:

For the Cooperating Government or Agency

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Year \ Group	1	2	3	4	5	Total
1976	July 5-9 40	July 19-23 40	Aug. 2-6 40	Aug. 16-20 40	Aug. 30- Sept. 3 40	Sept. 13- 17 200

In addition, 360 senior nurses from every region will be trained as trainers during 1976. Upon completion of the training, the nurses will return to their respective provinces to train indigenous midwives and tambon doctors. The nurses will be divided into 10 groups, 36 nurses to each group. The duration of the training for each group is one week. The training schedule is shown below:

Group	Training Period	Province
1	March 15-19	Nakornsritamaraj, Krabi, Chumporn, Pang-nga, Fuket, Ranong, Surajtani.
2	April 19-23	Songkla, Trang, Naratiwas, Patani, Pataloong, Yala, Satoon.
3	May 17-21	Kon-Kaen, Udorn, Kalasin, Nakornpanom, Nongkhai, Mahasarakam, Loei.
4	June 14-18	Sakonakorn, Roi-Et, Nakornrachasrma, Chaiyapoom, Burirum, Srisaket, Surin.
5	July 12-16	Ubonrachatani, Yasotorn, Lampang, Lampon, Chiengrai, Chiang Mai, Nan.
6	August 16-20	Prae, Uttaradit, Mae-Hongsorn, Pitsanuloke, Pichit, Sukothai, Tak.
7	September 13-17	Kumpangpeth, Nakornsawan, Petchaboon, Uthaitani, Choburi, Chacherngsao, Rayong.
8	November 15-19	Chantaburi, Trad, Nakornayok, Prajinburi, Samutprakarn Rachaburi, Nakornpathom.

For the Cooperating Government or Agency

For the Agency for International Development

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AID 1990-1A (D-001) PROAG CONTINUATION SHEET ANNEX <u>"A"</u>	PROJECT AGREEMENT BETWEEN AID AND DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION AN AGENCY OF THE GOVERNMENT OF THAILAND	1. Project/Activity No. 493-11-580-0283	PAGE <u>8</u> OF <u>12</u> PAGES
		2. Agreement No. 0283-6002	3. <input type="checkbox"/> Original or Revision No. <u>1</u>
		3. Project/Activity Title Population Planning	

<u>Group</u>	<u>Training Period</u>	<u>Province</u>
9	December 13-17	Angtong, Singburi, Chainat, Lopburi, Saraburi, Patumtani, Nondhaburi.
10	January 10-14	Kanchanaburi, Prachuabkirikan, Petchaburi, Samutsongkram, Samutsakorn, Supanburi, Ayudhaya.
	February, 1977	Follow-up Evaluation

RTG hereby agrees to the cost-sharing formula indicated on page 32 of Thailand Population Project Paper which provides for local training programs for BPP, tambon doctors, traditional midwives, MOPH nurses, auxiliary midwives, and Ministry of Education teachers.

For the Cooperating Government or Agency	For the Agency for International Development
SIGNATURE: _____ DATE: _____	SIGNATURE: _____ DATE: _____
TITLE: _____	TITLE: _____

PROJECT AGREEMENT
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COOPERATION
AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Project/Activity No.
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2. Agreement No.
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3. Original or
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3. Project/Activity Title
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III. RTG Project Account Funds

RTG Project Account Funds will be used to finance the following:

RTG Codes	Rate	Period (Month)	No.	Total
Code 01 Salary				<u>฿284,949</u>

1. Special Project Section

Resource persons, Grade 1	2,236	9	1	20,124
Translators, Grade 2	1,975	9	1	17,775
Resource persons, Grade 2	1,750	9	1	15,750

2. Evaluation and Research Section

Resource persons, Grade 2	1,750	9	1	15,750
Evaluators	1,220	9	14	153,720

3. Administration & Finance Section

Accountant	1,750	9	1	15,750
Shipping personnel	1,460	9	1	13,140
Administrative officers Grade 1	1,220	9	2	21,960

4. Public Information Section

Assistant mechanic	1,220	9	1	10,980
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Code 02 Per diem, hotel allowances and travel expenses for 75 nurse-trainees for a period of 44 days (50 nurses in PC 3 and 4; 25 persons in PC 2). ฿441,000

- Per diem and allowances
PC 3 and 4: 50 persons, ฿130 each/day = 50x130x44 286,000

PC 2: 25 persons, ฿100 each/day = 25x100x44 110,000

- travel expenses

From southern region: 25 persons, ฿880 each 20,000

From other regions: 50 persons, ฿500 each 25,000

For the Cooperating Government or Agency

For the Agency for International Development

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**PROJECT AGREEMENT
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<u>RTG Codes</u>	<u>Total</u>
<u>Code 03</u> <u>Transportation of Things</u>	<u>฿ 100,000</u>
<u>Code 08</u> <u>Supplies and Materials</u>	<u>฿4,620,000</u>
1. Training materials	฿ 80,000
2. Fuel and POL for 10 vehicles, ฿4,000/each (for 6 months period).	40,000
3. Purchase of oral pills, 1 million monthly cycles.	4,500,000
<u>Code 09</u> <u>Equipment</u>	<u>฿1,000,000</u>
1. PV beds, ฿4,000/each for 50 each	฿ 200,000
2. Vehicles (van-type) 10 each, est. ฿80,000 each.	800,000
Total Project Account Funds	<u><u>฿6,445,949</u></u>

For the Cooperating Government or Agency

For the Agency for International Development

SIGNATURE: _____ DATE: _____
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SIGNATURE: _____ DATE: _____
TITLE: _____

**PROJECT AGREEMENT
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1. Project/Activity No.
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IV. RTG Regular Budget Funds

Regular Budget funds from the Ministry of Public Health will be used for the following during FY 1976:

<u>Item</u>	<u>Description</u>	<u>Amount</u>
1.	<u>Salaries, Temporary</u>	<u>฿ 1,016,900</u>
	- 45 positions carried over from last year	989,850
	- Hardship Incentive Pay for workers working in remote areas in certain provinces.	27,050
2.	<u>Salaries for Permanent Workers</u>	<u>฿ 2,588,700</u>
	- 165 positions carried over from last year	1,699,540
	- 64 new recruits x 9 months	755,900
	- Additional annual wages	128,940
	- Hardship Incentive Pay for workers working in remote areas in certain provinces.	4,320
3.	<u>Salaries for Temporary Workers</u>	<u>฿ 1,350,000</u>
	- Salaries for household visitors	1,350,000
4.	<u>Honoraria</u>	<u>฿ 80,000</u>
	- Provided mostly for trainers and lecturers.	80,000
5.	<u>General Expenses</u>	<u>฿ 2,700,000</u>
	- Per diem, travel and allowances	1,600,000
	- Transportation of Things	400,000
	- Advertising costs	300,000
	- Repair costs for vehicles and equipment	400,000

For the Cooperating Government or Agency

For the Agency for International Development

SIGNATURE: _____ DATE: _____

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PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION

AN AGENCY OF THE GOVERNMENT OF
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1. Project/Activity No.
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2. Agreement No.
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<u>Item</u>	<u>Description</u>	<u>Amount</u>
6.	<u>Supply Costs</u>	<u>฿15,000,000</u>
	- Contraceptives	12,000,000
	- Petroleum, Oils, Lubricants, Fuels	1,300,000
	- Printing Costs	600,000
	- Miscellaneous Office Supplies and Vehicles Spare Parts.	1,100,000
7.	<u>Equipment</u>	<u>฿ 143,200</u>
	- Typewriters	30,000
	- Office and Health Units Furniture	113,200
TOTAL RTG REGULAR BUDGET FUNDS		<u><u>฿22,878,800</u></u>

For the Cooperating Government or Agency

For the Agency for International Development

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

TITLE: _____

TITLE: _____

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1-1-88

PROAG

PROJECT AGREEMENT

BETWEEN THE DEPARTMENT OF STATE, AGENCY FOR INTERNATIONAL DEVELOPMENT (AID),
AN AGENCY OF THE GOVERNMENT OF THE UNITED STATES OF AMERICA, AND

DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION

AN AGENCY OF THE GOVERNMENT OF THAILAND

The above-named parties hereby mutually agree to carry out a project in accordance with the terms set forth herein and the terms set forth in any annexes attached hereto, as checked below:

- Project Description Annex A Foreign Currency Standard Provisions Annex
 Standard Provisions Annex Special Loan Provisions Annex

This Project Agreement is further subject to the terms of the following agreement between the two governments, as modified and supplemented:

ECONOMIC & TECHNICAL COOPERATION AGREEMENT DATED SEPTEMBER 19, 1950

MEMORANDUM OF AGREEMENT AS TO CONDUCT OF COUNTERPART PROGRAMS, DATED JULY 24, 1955

(other)

1. Project/Activity No.
493-11-58C-0283

PAGE 1 OF 31 PAGES

2. Agreement No.
0283-6002

3. Original or
Revision No. 6

4. Project/Activity Title

Population Planning
(Title X Funds)

5. Project Description and Explanation

(See Annex A attached)

6. AID Appropriation Symbol

72-11X1024

7. AID Allotment Symbol

424-50-493-00-44-61

8. AID FINANCING

Dollars Local Currency

Previous Total
(A)

Increase
(B)

Decrease
(C)

Total to Date
(D)

	Previous Total (A)	Increase (B)	Decrease (C)	Total to Date (D)
(a) Total	3,073,718.93	995,000.00		4,068,718.93
(b) Contract Services				
(c) Commodities	2,800,000.00	158,872.00		2,958,872.00
(d) PIO/Ps	51,350.00			51,350.00
(e) Other Costs	222,368.93	836,128.00		1,058,496.93

9. COOPERATING AGENCY FINANCING Dollar Equivalent

\$1.00 = B20.00

Total RTG Contribution	B31,530,509	B25,992,010.00		B57,522,519.00
U.S. Dollar Equiv.	(\$ 1,576,526)	(\$ 1,299,600.50)		(\$ 2,876,126.50)
RTG Project Account Funds	B 6,445,949 (\$ 322,298)			B 6,445,949 (\$ 322,298)
RTG Regular Budget Funds	B25,084,560 (\$ 1,254,228)	B25,992,010.00 (\$ 1,299,600.50)		B51,076,570.00 (\$ 2,553,828.50)

10. Special Provisions (Use Addition. Continuation Sheets, if Necessary)

This document records the agreement of the signatory parties to participate in certain Population Planning Project activities during the period July 1, 1976 to September 30, 1977 which are supplemental and additional to project activities already agreed to and recorded in the original Project Agreement and Revision No. 1. Specific

(See Continuation Sheet Page 2)

11. Date of Original Agreement
September 8, 1975

12. Date of This Revision
June 28, 1976

13. Final Contribution Date
December 24, 1981

14. For the Cooperating Government or Agency

15. For the Agency for International Development

SIGNATURE: *Xuiani Pramoolpol* DATE: 6/25/76
TITLE: Director-General, DTEC

SIGNATURE: *James E. Williams* DATE: 6/28/76
TITLE: Acting Director, USOM/Thailand

EDMO *AVE*

CONT *R*

O/PROC *AVE*

DTEC/P *AVE*

D. T.

MOPH

PROJECT AGREEMENT
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(Title X Funds)

Block 10 - Continued:

activities included under this Project Agreement Revisions are: (1) Expansion of Sterilization and IUD services; and (2) Expansion of Family Planning Training and Services in Hilltribe Regions, and Re-settlement areas. These supplemental programs are described in Annex A.

The RTG National Family Planning Program (NFPP) of the Ministry of Public Health has identified these two activities for program expansion following consideration of two priority-criteria of the population program during the Fourth Five Year Plan period (1977-81). These criteria are: expansion of services to geographic areas and ethnic groups not previously served (or inadequately served) by national family planning services; and greater reliance on family planning methods with proven cost-effectiveness. The new program activities described herein will deliver sterilization and IUD services -- previously provided mainly through the RTG provincial hospital system -- through rural and mobile units throughout the country; and extend non-clinical contraceptive services (pills and condoms) through village-level health/family planning workers and sterilization/IUD services through mobile units to population in Hilltribe regions, and resettlement areas, where such services are not currently available at the village-level. The demographic impact of the sterilization/IUD activity will be substantial: over 100,000 sterilization and 100,000 IUD insertions are expected to be performed in FY 1977, resulting in approximately 500,000 births averted in future years allotted for that year's services alone (each sterilization prevents 2.5 births each I.U.D. prevents 1 birth.)

This fertility impact of the latter activity -- expanded services for Hilltribes, and Resettlement area population -- will be less, (measured in terms of overall impact on national population growth rate, because the target population is smaller (total target population: approx. 1 million). Nonetheless, the micro or family-specific effect of the program will be of particular importance to rural families in these areas where inexpensive, safe and reliable family planning services are not now generally available.

The project activities described herein are consistent with NFPP and RTG Fourth Five Year Plan objectives to expand the coverage of family planning services to the lower-income rural population. The NFPP five-year plan describes the NFPP's intention to implement expansion programs over the Plan period; the sterilization/IUD project and the training/services project represent specific examples of this RTG/NFPP policy. Performance of these activities in FY 1976 and FY 1977 therefore represents not a departure or addition to the NFPP plan, but rather an important acceleration

For the Cooperating Government or Agency

For the Agency for International Development

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PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION

AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Project/Activity No.
493-11-580-0283

2. Agreement No.
0283-6002

3. Project/Activity Title

Population Planning
(Title X Funds)

3. Original or
Revision No. 6

of RTG efforts to achieve nationwide availability of effective family planning services by the end of the Fourth Plan period in 1981. Consistent with this program acceleration, the additional USG funds being committed this year do not represent an increase in the overall total U.S. contribution of \$8.3 million which was planned for the period FY 1976-81 as described in the Population/Family Planning Project Paper. Rather, USG funds committed in FY 1976 are a portion of this total 8.3 million originally intended for obligation over the FY 1976-81 period. Future RTG initiatives to accelerate population project planning and execution may allow further compression of the USG funding into a shorter time-frame, e.g., completion of the total USG grant contribution of \$8.3 million by the end of FY 1978.

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**PROJECT AGREEMENT
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1. Project/Activity No. 493-11-580-0283	PAGE 4 OF 31 PAGES
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Project Description

A. Expanded Sterilization and IUD Program

This project is primarily a sterilization subsidy and training program; the IUD component is an ancillary effort to encourage acceptance of IUD's by making IUD-insertions free (present client charge: \$1.00) to rural villagers.

1. Previous Activity

Sterilization is the most cost-effective means of family planning currently available. Generally, a national family planning program can be measured on a scale of effectiveness by observing the proportion of sterilizations as a proportion of total family planning methods accepted. In Thailand this proportion of sterilization is currently about 17% -- the largest in East Asia -- and appears to be growing. Provincial hospitals, which are the primary source of sterilization services at present, are maintaining two and three-month waiting lists of sterilization clients. Approximately 90% of sterilizations being performed in Thailand now are female sterilizations.

The most important factor explaining Thailand's successful sterilization program to date was the Thai Government's decision in 1972 to implement a national sterilization subsidy program. With financial assistance from UNFPA, the NFPP provided financial subsidies to government hospitals and health centers so that sterilization services could be provided to acceptors at a reduced cost. That is, it was estimated that the total institutional cost of performing a female sterilization was approx. ฿600/(\$30.00); and a vasectomy about ฿200 (\$10.00). The subsidy program (1) established a maximum fee to the acceptor of ฿150/(\$7.50) for female sterilization and ฿50/(\$2.50) for a vasectomy; and (2) reimbursed participating hospitals and health centers a like amount (฿150 for female sterilizations, ฿50 for male sterilizations) for each sterilization procedure performed at that institution. The remaining costs were borne by the institution as a part of normal operating costs. The effect of the program in reducing client costs for sterilizations generated an unexpectedly large demand for sterilization services. To date (end of May, 1976) almost 300,000 sterilizations have been performed, compared to an original program target of 130,000 procedures. (Numbers of procedures performed annually, 1972-75, are shown on Table I). According to birth-interval and age-specific fertility data prevailing in Thailand, it is estimated that these procedures have prevented some 700,000 births which would have occurred over the next 10 to 15 years.

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UNFPA funding (supplemented by UNDP funds to partially cover procedures performed beyond project targets) will terminate in September, 1976. For the ensuing FY 1977 (October 1976-September 1977) the NFPP has targeted 90,000 sterilizations, including 65,000 female procedures and 25,000 male procedures. The institutional subsidies (฿150 and ฿50 for female and male sterilizations, respectively) will be assumed by the RTG, using a supplemental allotment from the RTG Budget Bureau to the NFPP.

TABLE I: Sterilization Performance, 1972-75

Year	Actual Achievement			National Target
	F. Steril.	M. Steril.	Total	
1972	31,386	1,282	32,668	25,000
1973	46,804	2,802	49,606	30,000
1974	73,702	6,780	80,482	35,000
1975	81,888	7,453	89,341	40,000
1976				40,000
1977				90,000
1978				95,000

2. The Expanded Program

The sterilization subsidy program has demonstrated a strong demand for sterilization services in Thailand. So far, however, the program has been characterized by two limiting factors: (1) over 80% of sterilizations have been performed by 85-90 government hospitals and MCH centers which are located in urban or semi-urban areas; and (2) approx. 90% of all procedures have been female sterilizations, rather than comparatively simple and inexpensive vasectomies. As noted above, the hospitals have already reached what may be a service-saturation point, so prospects for greatly increased sterilizations by these institutions are not favorable. Further, a successful series of vasectomy-promotion campaigns in two Northeastern provinces of Thailand suggests a strong latent demand for this service.

The objectives of this new project are therefore (1) to increase the number of sterilizations performed at rural health stations and mobile

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units; and (2) to promote increased acceptance of vasectomy. The NFPP strategy to accomplish these objectives includes:

1. Selective use of sterilization subsidies to pay client costs if a sterilization is received outside a hospital (i.e. through a rural health station or mobile unit).
2. Payment of client cost plus institutional subsidy for all non-hospital sterilizations beyond the FY 1977 NFPP target of 90,000 procedures, and institutional subsidy only for all hospital-based sterilizations beyond the target.
3. Expansion of training for physicians (and on a research basis, paramedics) located at rural health stations to perform mini-laparotomies and vasectomies.

As a result of these additional program inputs, clients will be able to receive free sterilization services at rural, non-hospital health facilities, with the increased service-load at these institutions to be borne by newly-trained clinical staff. In addition, the NFPP will be able to promote sterilization aggressively with assurance that adequate resources will be available to cover the increased costs of sterilizations performed beyond the NFPP target of 90,000 procedures in FY 1977.

The projected effect of these re-orientations of the subsidy and training activities will be to re-direct program support away from the urban and semi-urban based at hospital system, and toward the rural poor populations served by rural clinics and mobile units. The availability of free sterilizations at the rural units is expected to make these services more attractive to village populations with less disposable income than urban and semi-urban dwellers. Client fees will continue to be charged at hospital and MCH facilities, while the RTG institutional subsidies will be provided to all units performing sterilizations. The resulting effect on the distribution of sterilization services is projected to be as follows:

NFPP target, FY 1977: 90,000 sterilizations

65,000 female
25,000 male

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Projected distribution by service unit:

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Rural Health Centers and Mobile Units	13,000	20,000	33,000
Hospitals/MCH Centers	<u>12,000</u>	<u>45,000</u>	<u>57,000</u>
Total	<u>25,000</u>	<u>65,000</u>	<u>90,000</u>

That is, the proportion of sterilizations performed in hospitals will decline from over 80% of total procedures to approx. 63%.

In addition the availability and advantages of sterilization--particularly vasectomy--will be the object of a specially-designed information/motivation campaign to be implemented by the NFPP (IE&C unit) in FY 1977. This will include the posting of notices, at all rural sterilization clinics, that free sterilizations are available therein. Thus the availability of free sterilization services at rural units is expected to push total sterilizations well beyond the NFPP target of 90,000 procedures in FY 1977. Again, the preponderant share of the excess beyond target is likely to be performed at non-hospital facilities. An adjusted projection of hospital-based and rural-clinic based procedures, assuming a total of 160,000 sterilizations, is as follows:

	<u>Male</u>	<u>Female</u>	<u>Total</u>
Rural Health Centers and Mobile Units			
Target	13,000	20,000	33,000
Beyond Target	15,000	10,000	25,000
Hospitals/MCH Centers			
Target	12,000	45,000	57,000
Beyond Target	<u>10,000</u>	<u>35,000</u>	<u>45,000</u>
Total	<u>50,000</u>	<u>110,000</u>	<u>160,000</u>

The funding implications for the USG and the RTG are expressed in Table II. The RTG share represents institutional subsidies for all sterilizations up to the 90,000 targeted for FY 1977. The USG share includes client costs for all sterilizations performed by rural clinic/mobile units; institutional subsidy plus client costs for all non-hospital procedures beyond the targeted 90,000 sterilizations; and institutional subsidy only for all

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hospital sterilizations beyond target. It is hereby stated that in entering this Agreement, the parties take special note of the fact that the number of sterilization procedures to be performed in FY 1976 will probably exceed the FY 1977 target of 90,000 sterilizations. It is apparent, then, that the 1977 target of 90,000 procedures is actually an under-estimate of the number of sterilizations which could realistically be expected in FY 1977, even in the absence of supplemental USG support for that year. Because the RTG/MOPH FY 1977 budget for institutional subsidies has been prepared on the basis of 90,000 sterilizations, the USG recognizes the necessity to accept this figure as representing the RTG budget allocation in FY 1977. However, it is agreed by the parties to this Agreement that sterilization targets for subsequent fiscal years (1978, 1979) will be reviewed with a view toward establishing significantly higher targets, consistent with availabilities of RTG and donor (including USG) resources. Specifically, it is agreed that NFPP/MOPH, USOM, NESDB, DTEC and BOB will meet within four months to review and revise future-year sterilization targets. It is further agreed that the NFPP/MOPH and the BOB will be prepared at that time to consider allocation of the additional regular-budget resources needed to continue expansion of the sterilization program. The USG will be prepared to consider additional support for RTG program performance which exceeds program target levels. (The USG suggests as tentative planning targets, subject to review and discussion by the conferees, of 300,000 sterilizations in FY 1978 and 600,000 in FY 1979. Considerations of the actual performance capacity of the MOPH and related health services may suggest an expanded role of private physicians -- in affiliation with the NFPP -- to achieve these increased targets).

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TABLE II: Direct Project Contribution

Service Unit	RTG		USG				Total
	Institutional Subsidies		Institutional Subsidies		Client Cost		
	Male (฿50)	Female (฿150)	Male (฿50)	Female (฿150)	Male (฿50)	Female (฿150)	
Rural Health Stations/Mobile Units							
Target	650,000	3,000,000	-	-	650,000	3,000,000	7,300,000
Beyond Target	-	-	750,000	1,500,000	750,000	1,500,000	4,500,000
Hospitals/MCH Centers							
Target	600,000	6,750,000	-	-	-	-	7,350,000
Beyond Target	-	-	500,000	5,250,000	-	-	5,750,000
Total	1,250,000	9,750,000	1,250,000	6,750,000	1,400,000	4,500,000	24,900,000

Summary:

RTG/฿11,000,000 (\$550,000) RTG: 44%
 USG/฿13,900,000 (\$695,000) USG: 56%
 Total: ฿24,900,000 (\$1,245,000)

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ANNEX "A"

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The respective USG-RTG project contributions indicated above are direct contributions only. As mentioned earlier, the total institutional procedure cost for a female sterilization amounts to approx. 8600 (\$30.00), while a male sterilization costs 2000 (\$10.00). Specific cost-components are shown on Table III. Thus, institutional subsidies plus client costs cover only one-half of procedure costs. Operating institutions will continue to assume the remaining 50% of costs under operating expenses. Therefore a sterilization program including 110,000 female sterilizations and 50,000 male sterilizations will require an additional indirect RTG contribution of (110,000 x 8300) plus (50,000 x 2100) or 838,000,000 (\$1,990,000). Total subsidy and procedure cost will therefore be \$3,800,000 of which the RTG will contribute \$3,105,000 or 82%.

a. Subsidy Reporting and Reimbursement Procedure:

The procedure for institutional reporting of sterilizations and requesting/receiving reimbursement will closely follow the system established by the previous UNFPA-NFPP project. Each participating institution will submit a monthly claim (including MOPH Forms ES 1 and ES 2) to the Central Office of the NFPP. The Central Office will match the claim against individual acceptor cards (NFPP standard form 01), which are submitted monthly as part of the reporting system of the NFPP. When all monthly sterilizations are verified the NFPP will reimburse the participating institutions. NFPP will request reimbursement from USOM on a quarterly basis, with copies of the NFPP request submitted on an information-basis to DTEC. USOM will make quarterly reimbursement to the NFPP for actual expenditures plus an advance of estimated costs for the ensuing quarter. A statement of quarterly releases shall be submitted by USOM to DTEC.

The reporting and repayment plan will be as follows:

<u>Activity</u>	<u>Responsible Office</u>	<u>Duration</u>
1. Report of acceptors (MOPH Form 01)	Provincial Chief Medical Officer (PCMO)	Monthly
2. Claims for Reimbursement (Forms ES 1 and ES 2).	PCMO	Monthly
3. Verification of claims	NFPP	Monthly
4. Payment of Reimbursement Claims to Participating Institutions.	NFPP	Monthly

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TABLE III: Estimates of Procedure Costs for Male and Female Sterilizations

When the original UNFPA-supported subsidy program was designed it was estimated that the cost of a female sterilization was \$630 and of a vasectomy \$210. Many of these costs represent the ordinary running costs of the institutions in terms of salaries and general costs of hospitalization and clinic operation. However, certain other elements constitute extraordinary expenses attributable directly to the surgical procedures. These may be summarized as follows:

<u>Item</u>	<u>Tubal Ligation</u>	<u>Vasectomy</u>
Anaesthetic drugs	100	15
Suture materials	50	20
Dressings	5	5
Antiseptics and sterile solutions	10	5
Postoperative analgesics	15	5
Syringes, scalpel blades, needles, etc.	10	10
Physicians' time	100	50
Time of operating room staff	150	75
Post-operative nursing care	100	25
Hospitalization	90	--
Total	<u>\$630</u>	<u>\$210</u>

It is likely that these costs have increased somewhat since 1972.

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<u>Activity</u>	<u>Responsible Office</u>	<u>Duration</u>
5. Report to USOM of expenditures and cost estimates for ensuing quarter (copy to DTEC).	NFPP	Quarterly
6. Reimbursement of expenditures and advance of estimated cost for ensuing quarter (copy to DTEC).	USOM	Quarterly
7. Audit	USOM	Feb., 1978
8. (Project Evaluation	NFPP/DTEC/USOM	March, 1978)

b. Sterilization Training Activities

To date approx. 450 physicians in government hospitals and clinics have been trained to perform mini-laparotomies. Most of these physicians were trained by a group of 70 trainers who were themselves instructed in the mini-lap method at Ramathibodi Hospital, under a training-support grant provided by the Association for Voluntary Sterilization (AID Contract No. AID/pha-1128). However, of these 450 trained physicians, only 60 are staff physicians from First Class Health Centers; the remaining 390 are from provincial hospitals. Whereas there are approx. 200 physicians assigned to First Class Health Centers, mini-lap training is still needed by 140 physicians who staff these clinics in rural areas. During the next 18 months the NFPP will implement a program to train these remaining 140 physicians in mini-laparotomy. This 18 month period includes approx. 6 months for training activities, and an additional year for follow-up and evaluation.

A vasectomy training program will be combined with mini-lap training to prepare the trainee physicians to perform both methods of surgical contraception. Technical assistance in vasectomy training will be available from the Urology Department, Ramathibodi Hospital, which has developed a vasectomy training and service program with support from the Pathfinder Fund (AID Contract No. AID/cm/pha-G-73-15).

The Ministry of Public Health/NFPP will identify appropriate regional sites for the combined mini-lap and vasectomy training programs for physicians from First Class Health Centers. Preliminary discussions with the NFPP suggest that six such training sites will be selected,

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including provincial hospitals and MCH centers staffed by qualified physician-trainers. The USG will support this training program by contributing modest training-support grants to the instruction-sites to compensate these institutions for incremental administration and overhead costs associated with the training programs. In addition, the USG will provide surgical contraception kits for use in performing sterilizations at the participating training centers.

The USG contribution for this sub-activity will include:

a. training support grants: 6 training institutions @ \$4,000 per institution \$24,000

b. 10 surgical contraception (mini-lap and vasectomy kits) for each training institution.

60 surgical sterilization kits @ \$150 ea. \$ 9,000

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Total \$23,000

The RTG/NFPP will share the cost of the training program by providing travel and per diem for 140 trainees; and by providing honoraria for institution-based instructors, RTG contribution will include:

Per diem: 140 trainees x 14 days x \$10.00 = \$ 19,600

Travel: 140 trainees x \$20.00 = 2,800

Instructor honoraria = 2,600

Total \$25,000

The Thailand Association for Voluntary Sterilization (TAVS) will provide technical and consulting assistance as requested by the NFPP. Costs of TAVS participation in the training program (travel, per diem, honoraria) shall be covered by an existing support grant provided to TAVS by the Association for Voluntary Sterilization (AVS), New York (AID Contract No. AID/pha-1128).

Concurrent with the above training program, the NFPP will conduct a research project to study comparative performance of physicians and public health nurses in performing mini-laparotomies and vasectomies. The MOPH/NFPP will examine the results of this study and, if feasible,

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ANNEX "A"

<p>PROJECT AGREEMENT BETWEEN AID AND DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION AN AGENCY OF THE GOVERNMENT OF THAILAND</p>	1. Project/Activity No. 492-11-530-0783	PROJECT OF INTERESTS
	2. Agreement No. 0283-6002	3. <input type="checkbox"/> Original or <input type="checkbox"/> Copy No. _____
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utilize the regional sterilization training facilities to provide vasectomy training for qualified paramedical personnel from rural health centers. The practice of mini-laparotomy, if approved for performance by paramedics, would still be restricted to a hospital environment.*

c. Sterilization Equipment

The USG will provide the sterilization equipment needed by the additional service units offering sterilization. These additional units include 140 First Class Health Centers (currently participating First Class Health Centers were provided sterilization equipment under an earlier Project Agreement), and twenty mobile sterilization/IBD units. (Ten of these mobile units were ordered under a prior FY 1976 project agreement; the RTG has agreed to purchase the other 10). Equipment will include:

4 surgical contraception kits per clinic (140 clinics)		
= 4 kits x 140 clinics x \$150.00	=	\$84,000.00
20 surgical contraception kits per mobile unit (20 units)		
= 20 kits x 20 units x \$150.00	=	\$60,000.00
Estimated transportation cost	=	\$ 5,871.50
Total		\$149,871.50

d. Special Provision: Expanded Sterilization Project

1. USG and RTG funds specified herein for male and female client subsidies and for institutional subsidies for female and male sterilizations were estimated on the basis of assumptions re: proportion of male vs. female sterilizations to be performed in FY 1977 (31% and 69%, respectively). However, if the proportionate relationship of male-female sterilizations is different from this projection, USG and RTG resources made available under this agreement may be utilized to support

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*In addition, the MOPH will endeavor to introduce mini-laparotomy and vasectomy training into the training of medical interns at all hospitals. In the longer term, such training will also be provided in the medical schools.

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ANNEX IIA

PROJECT AGREEMENT
BETWEEN AID AND
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AN AGENCY OF THE GOVERNMENT OF
IRVING

1. Project No.
20-100-0-4293

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2. Start Date
1977-01-01

3. Approved
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3. Project Activity Title

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the performance of sterilizations at other than the estimated proportions. Regardless of any possible variation in the proportion of male-female sterilizations, USG-provided subsidy funds will be restricted to uses described in the Agreement, that is (1) to support direct costs for sterilizations performed at rural health centers or mobile units; and (2) to support institutional subsidy costs for sterilizations performed beyond the FY 1977 target of 98,000 procedures. While the total amount of such USG provided subsidies may not exceed the amount provided herein, in the event that the number of sterilizations performed under the conditions of this grant would call for an amount greater than that provided herein, the USG agrees to consider providing additional funding.

2. USG funds made available under this Agreement for male and female sterilizations shall be utilized only for sterilizations actually performed subsequent to the approval-date of this Agreement.

Project Funding Summary: Expanded Sterilization Program

<u>Project Component</u>	<u>IRG</u>	<u>USG</u>	<u>Total</u>
1. Institutional Subsidies	\$ 550,000.00	\$400,000.00	\$ 950,000.00
2. Client Subsidies	-	295,000.00	295,000.00
3. Sterilization (procedure) costs not covered by subsidies.	1,900,000.00	-	1,900,000.00
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4. Training			
Travel & Per Diem	22,400.00	-	22,400.00
Honoraria	2,600.00	-	2,600.00
Institutional support	-	24,000.00	24,000.00
Equipment (training institutions)	-	9,000.00	9,000.00
5. Equipment (clinics) (Sterilization Kits)	-	149,871.50	149,871.50
6. Audit	-	10,000.00	10,000.00
Total	\$2,475,000.00	\$887,871.50	\$3,362,871.50

For the Cooperating Government or Agency

For the Agency for International Development

SIGNATURE: _____ DATE: _____
TITLE: _____

SIGNATURE: _____ DATE: _____
TITLE: _____

USG-1A (8-63) RFGAG CONTRIBUTION SHEET ANNEX "A"	PROJECT AGREEMENT BETWEEN AID AND DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION AN AGENCY OF THE GOVERNMENT OF TAIWAN	1. Project/Activity 193-11-557-0283	2. PROJECT NUMBER 6
		4. Document No. 1033-6002	3. [] Revision
		5. Project/Activity Title Population Planning (Title & Funds)	

2. Expanded IUD Services

(a) IUD Client Subsidy

Acceptance of IUD's has been static, or occasionally declining, over the past two years. It has been theorized that the current acceptance fee of 220/ (\$1.00) for an IUD-insertion may represent a constraint to acceptance among low-income rural women. This sub-activity will enable the NFPP to provide free IUD-insertions for up to 30,000 women who receive IUD's at rural clinics.

Similar to the sterilization subsidy program, client costs at hospital facilities are not included. If the client-subsidy for IUD-insertions at rural clinics results in significant gains in acceptance-levels, the NFPP will favorably consider eliminating the existing client-fee for IUD-insertions.

The U.S. contribution for this trial subsidy program will be \$30,000.

The RFG will provide IUD's and IUD-insertion equipment and supplies, plus the services of clinical personnel to perform the IUD-insertions. Value: \$30,000.

The reimbursement procedure to be followed will be a somewhat simplified variation of the reimbursement procedure used for the sterilization program. IUD-acceptor data will be reported monthly to the NFPP by the Provincial Chief Medical Officers. PCMO requests for reimbursement will be supported by a claim form to be developed by the NFPP. In view of the small amount of (per unit) reimbursement involved, the NFPP will not verify each insertion against client record forms, but will perform spot checks. The NFPP will forward reimbursements quarterly to the PCMO who will deposit the appropriate amounts in the accounts of participating clinics in the province. NFPP quarterly reports to USOM and requests for reimbursement shall follow the same procedure used for sterilization subsidies.

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(b) Training Support

Under an FY 1975 Project Agreement (No. 266.1-5015, Division No. 15) the USG agreed to support an NOPH program to train 525 nurses and nurse-midwives to perform IUD-insertions; To date, an initial group of 125 nurse-trainers has been trained; 400 additional nurse-midwives who will

For the Cooperating Government or Agency		For the Agency for International Development	
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TITLE: _____		TITLE: _____	

2014-01-14
 (1-13)
PROAG
 CONTRIBUTION
 SHEET
 ANNEX "A"

PROJECT AGENCY
 DEPARTMENT OF MEDICAL AND ECONOMIC
 COOPERATION
 AN AGENCY OF THE GOVERNMENT OF
 IRELAND

1. Agency No. 01-1-100-100	2. Agreement No. 01-1-1002	3. Project/Activity Title Population Planning (Family Planning)
4. Original or Continuation No. 6		

be trained by this first groups are now ready for field training. This latter group will be distributed at ten training facilities (hospitals and MCH centers) throughout the country.

The FY 1975 ProAg obligated funds to support the travel and per diem of all 525 trainees. The earlier ProAg also obligated funds for instructor fees for staff at Orla Naughton Hospital, the site of training for the initial group of 125 nurse-trainers. The FY 1975 Agreement did not, however, provide funds to support the institutional training costs at the ten centers which will provide 100 training for the next year. Each of 400 nurse-trainers.

This ProAg provides an additional \$10,000 (\$1,000 per training center) for training costs at these ten training sites.

Project Training Summary: Ireland IUD Services

	<u>WTC</u>	<u>HSG</u>	<u>Total</u>
<u>Project Comment</u>			
<u>Client Costs</u> (10,000 clients)		30,000	30,000
a. Subsidy for free service @ \$1.00/client.		(30,000)	
<u>Client Costs</u>	30,000		30,000
a. IUD supplies (30,000 IUD's; 300 inserts.	(4,500)		
b. Pharmaceutical costs	(500)		
c. Pelvic exam; IUD insertion costs not covered by subsidy.	(25,000)		
<u>Training Costs</u>		12,500	12,500
a. Institutional support for 10 training centers @ \$1,250 each.		(12,500)	
Total	30,000	42,500	72,500

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For the Cooperating Government or Agency	For the Agency for International Development
SIGNATURE: _____ DATE: _____	SIGNATURE: _____ DATE: _____
TITLE: _____	TITLE: _____

PROJECT NO. 100000	PROJECT AGREEMENT BETWEEN THE GOVERNMENT OF THAILAND AND DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION	Project No. No. 192-11-100000	PAGE 1 OF 1 PAGES
		Contract No. 100000	100000
PLANNING COOPERATION PROJECT	AN AGENCY OF THE GOVERNMENT OF THAILAND	Project Category Title Population Planning (Title I Family)	

B. Training and Service Program in Hilltribe Region and Resettlement Areas

The health/family planning services delivery system in Thailand is a four-level organization including provincial hospitals, First Class Health Centers, Second Class Health Centers and Midwifery Centers. The lower three components of the system include approximately 1,000 clinical facilities located in rural areas throughout the country. The MOPH has observed, however, that even this fairly extensive office system does not adequately reach the majority of Thailand's population located in 50,000 rural villages. Consequently, the MOPH has announced as one of its Fourth Five Year Plan goals the creation of additional cadres of village-level health workers who will provide continuing availability of simple medicines and non-clinical contraceptive services in villages not regularly served by or accessible to personnel of the stationary health clinics. In most instances these additional health/family planning workers (including village health volunteers, layon doctors, BPP, village "greeny" midwives) would represent of "fifth tier" of the health delivery system, and would be linked to the upper four levels of the system by clinician supervision and by their functions as referral agents for clinical medical/family planning cases.

Certain areas of the country present a particularly acute need for extension of basic health and family planning services to the village. In the Hilltribe areas there is a relative scarcity of the MOPH clinic infrastructure which in other parts of the country will eventually serve as the primary supervision and referral centers for village-level health workers. Extension of health and family planning services by regular clinical staff is further constrained by differences of religion and language, and in some instances by inadequate security for ethnic persons who might otherwise visit the more remote villages. For most of these areas, then, even periodic access to professional health/family planning services is difficult if not impossible. In these areas the potential impact of village-level health workers is extremely important. These workers may represent the only or chief source of basic health/family planning services to their neighbors.

In the 43 re-settlement areas (including approx. 1,000 villages) administered by the Department of Public Welfare, Ministry of Interior, the problems of language, religion and security do not present major difficulties. Because many of the re-settlement villages are relatively new, however, the MOPH has not yet extended its rural clinical infrastructure to these areas on a systematic basis. In many instances, the only permanent health facility serving resettlement villages is an assistant-nurse station (one per re-settlement area) supplied with basic non-

For the Cooperating Government or Agency	For the Agency for International Development
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 ANNEX 1111

PROJECT AGREEMENT
BETWEEN AND AND
DEPARTMENT OF HEALTH AND SOCIAL WORKS
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Title of Project: Population Planning (Title II Fund)
 2. Project Number: 22
 3. Project Start Date: 10/1/68
 4. Project End Date: 9/30/70

prescriptive medicine and, occasionally, non-clinical contraceptives. As in the Hilltribe regions, then, village-level health and family planning personnel will have an important, and essentially independent role in the way to ensure a continuing availability of simple medical and family planning services to these rural populations.

This project agreement describes the efforts of the MOH/ and the Ministry of Interior to train several categories of rural health personnel who will function as village-level health/family planning agents, (in the Hilltribe regions) or perform as population planning personnel for village-level personnel to be trained under a separate activity (Hilltribe areas). The training curriculum to be used for these personnel will be developed in consultation with the Project Director of the BPP (formerly BPP) Project to incorporate the UNFPA experience, to the extent practicable, into the existing programs. The two training programs include the following:

1. Health/Family Planning Agents: Hilltribe Regions

The Hilltribe population of Thailand includes approx. 300,000 persons located in about 2,000 villages in 21 northern provinces. The extension of health and development services in the Hilltribe areas is generally sporadic; with the exception of a BPP presence in the border areas, the RHC is most frequently represented among the Hilltribe by the Hilltribe Mobile Units of the Ministry of Interior.

These teams are comprised of four persons: a team leader (social worker), an agronomist/development worker, a health worker, and an assistant teacher. There are 200 teams, each team being responsible for 10 villages. The MOH and the BPP/ have planned a series of family planning programs to prepare three of the target categories of workers (team leader, health worker, and assistant teacher), as village family planning agents. In the case of the team leader (social worker), a three-day training program will be added to a two-week refresher-training program previously scheduled for 150 team leaders. The other two categories of development team staff -- health workers and assistant teachers -- will be specially trained in family planning at the Family Planning/Health Training Center in Bang Chat District, Lampang. On completion of their training, the Development Team staff will be provided with non-clinical contraceptives (orals and condoms) to distribute to Hilltribe villagers. The health worker (who has had six months prior training in basic health care) will also be provided with basic medical supplies. To ensure continued availability of non-clinical contraceptives

For the Government of Thailand	For the Agency for International Development
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U.S. AID
 PROGRAM
 COOPERATION
 SHEET
 APPENDIX "A"

PARTNERSHIP
 BETWEEN AID AND
 DEPARTMENT OF NATIONAL AND ECONOMIC
 COOPERATION
 AN AGENCY OF THE GOVERNMENT OF
 THAILAND

1. Project Approval No.
 2283-6003
 2. Project No.
 2283-6002
 3. Project Name, Title
 Population Planning
 (Title 8 funds)

PAGE 6 OF 6 PAGES
 6

In individual hilltribe villages, the development teams will also identify and establish "village depots" for oral and condoms. These depots, perhaps managed by the village leader or women, will function as contraceptive-supply sources for villagers who have obtained initial contraceptive supplies from the development teams. Dispensaries will be prepared for their contraceptive distribution functions by the development team health worker. A one-day briefing program -- similar to the briefing provided village health workers under the Community-Based Family Planning Services Project -- will be sufficient for this purpose.

The MOFH/NSFP will be responsible for provision to contraceptive supplies to the mobile development teams. Supplies will be forwarded from NSFP, Bangkok to the PCMO's in the participating 11 northern provinces; the PCMO's will provide contraceptives, as needed, to the mobile teams. The teams will maintain at least two months' supply of oral and condoms at each village depot.

During the first year of the teams' operations, their performance will be closely monitored and supervised by nurse-supervisor and local staff from the MOFH/NSFP and the Public Welfare Department, MOI. The focus of these supervision efforts will be the team health worker, who will have primary responsibility for maintaining the quality of family planning performance of the other team members, as well as for training and supervising village depot managers.

The budget and respective USG-RTG contributions for family planning training, Hilltribe Development Mobile Units, are as follows:

- a. Family Planning Training for Development Team Leaders
 1. 3 days family planning training.
 2. 150 team leaders.
 3. F.P. training will be additional to a two-week MOI training program in social work and development team management.
 4. Tentative starting date: August, 1976.

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For the Cooperating Government or Agency

For the Agency for International Development

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TITLE: _____

TITLE: _____

PROGAG
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ANNEX

PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
INDONESIA

1. Identification No. 11-500-0001	PAGE NO. 21 PAGES
2. Agreement No. 0202-5002	6
3. Project Activity Title Population Planning (Title X Funds)	

USG Contribution

1. Per Diem: (To be calculated in accordance with the government rates). \$ 3,016.50
 - a. Team Leaders \$2,925.00
(Est. \$6.50 x 3 days x 150 persons).
 - b. 4 NEPP lecturers \$ 78.00
(Est. \$6.50 x 3 days x 4 persons).
 - c. One Driver \$ 13.50
(Est. \$4.50 x 3 days x 1 person)
 2. Manpower: (To be calculated in accordance with the government rates). \$ 140.00
 - a. 4 NEPP lecturers \$ 140.00
(Est. \$5.00 x 7 hours x 4 persons).
 3. Manuals, leaflets \$ 450.00
 - a. Materials for 150 team leaders \$ 450.00
(\$3.00 x 150).
- USG Total \$2,906.50

BIG Contribution

1. Salaries \$2,258.50
 - a. Team leaders \$2,025.00
(\$4.50 x 3 days x 150 persons)
 - b. Lecturers (NEPP) \$ 258.00
(\$30 x 3 days x 2 persons)
(\$13 x 3 days x 2 persons)

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For the Cooperating Government or Agency
SIGNATURE: _____ DATE: _____
TITLE: _____

For the Agency for International Development
SIGNATURE: _____ DATE: _____
TITLE: _____

PROJECT AGREEMENT
BETWEEN AID AID
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Project Activity No.
492-11-500-0283
2. Agreement No.
0211-6002
3. Project Activity Title
Population Planning
(Title X Funds)

PAGE 21 OF 21 PAGES
3. Original or
6
Reproduction

c. Driver (\$4.50 x 3 days x 1 person)	\$ 13.50	
2. <u>Miscellaneous</u>		<u>\$1,290.00</u>
a. Training center support*	\$ 700.00	
b. Audio-visual aids and mobile training vehicle.	\$ 200.00	
c. Clerical costs (\$3.00 x 4 persons x 30 days)	\$ 260.00	
d. Gasoline for mobile team	\$ 20.00	
	<u>PTG Total</u>	<u>\$1,290.50</u>

*Site of training will be the Sawangkaniwat Training Center,
Bangpoo, Samut Prakan Province.

- b. Family Planning Training for Development Team Health
Workers
1. 7 days family planning/training.
 2. 200 health workers.
 3. F.P. training will be a specially-arranged program
at Family Planning/Health Training Center, Hang
Chat District, Lampang.
 4. Tentative starting date: July, 1976.

USG Contribution:

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1. Par Dien: (To be calculated in
accordance with government
rates). \$10,500
 - a. Health workers \$8,400
(Est. \$6.00 x 7 days x 200
persons).

For the Cooperating Government or Agency
SIGNATURE: _____ DATE: _____
TITLE: _____

For the Agency for International Development
SIGNATURE: _____ DATE: _____
TITLE: _____

**PROJECT AGREEMENT
BETWEEN AND AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
THE USA**

1. Project/Activity No. 492-11-290-0003	PAGE 3 OF 3 PAGES
2. Agreement No. 0200-0002	3. <input type="checkbox"/> Director Excluded No. 6
3. Project/Activity Title Population Planning (Title X Funds)	

b. 4 nurse supervisors (Est. \$7.50 x 2 trips x 15 days x 4 persons).	\$ 900
c. 4 M.D. supervisors, MOPH (Est. \$10.00 x 2 trips x 10 days x 4 persons).	\$ 800
d. 2 P.W.D. supervisors (Est. \$10.00 x 2 trips x 10 days x 2 persons).	\$ 400
2. <u>Travel Costs:</u> (To be calculated in accordance with government rates).	<u>\$ 8,500</u>
a. 200 health workers (Est. \$30 x 200).	\$6,000
b. 4 nurse-supervisors (Est. \$125 x 2 trips x 4 persons)	\$1,000
c. 4 M.D. (MOPH) supervisors (Est. \$125 x 2 trips x 4 persons)	\$1,000
d. 2 P.W.D. supervisors (Est. \$125 x 2 trips x 2 persons)	\$ 500
<u>USG Total</u>	<u>\$19,000</u>

RTG Contribution

1. <u>Salaries</u>	<u>\$13,080</u>
a. Health workers (\$3.00 x 200 persons x 7 days)	\$4,200
b. 4 Nurse-supervisors (\$5.00 x 4 persons x 30 days)	\$ 600
c. 4 M.D. supervisors (\$10.00 x 4 persons x 20 days)	\$ 800

<p>For the Cooperating Government or Agency</p> <p>SIGNATURE: _____ DATE: _____</p> <p>TITLE: _____</p>	<p>For the Agency for International Development</p> <p>SIGNATURE: _____ DATE: _____</p> <p>TITLE: _____</p>
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AID 1072-14 (10-83) FROAG CONTINUATION SHEET ANNEX "A"	PROJECT AGREEMENT BETWEEN AID AND DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION AN AGENCY OF THE GOVERNMENT OF THAILAND	1. Project/Activity No. 102-11-500-0283	PAGE 23 OF 21 PAGES
		2. Agreement No. 0283-6002	3. <input type="checkbox"/> Contingency Revisions No. 6
		3. Project/Activity Title Population Planning (Title X Funds)	

- d. 2 P.W.D. supervisors \$ 320
(\$3.00 x 2 persons x 20 days)
- e. Training Center staff \$2,160
(\$60/month x 6 persons x 6 months).
- f. 4 NEPP trainers \$3,600
(\$5.00 x 4 persons x 180 days)
- g. 4 P.W.D. staff \$1,400
(\$5.00 x 7 days x 10 groups x 4 persons).
- 2. Miscellaneous \$ 6,000
 - a. Hang Chat Training Center operating costs \$4,500
(\$450 x 10 training groups)
 - b. Manuals, teaching aids \$1,500
- RTG Total \$19,080
- c. Family Planning Training for Development Team Assistant Teachers
 - 1. 7 days training.
 - 2. 200 assistant teachers.
 - 3. Training site: Hang Chat Training Center.
 - 4. Tentative starting date: February: 1977
- USG Contribution
 - 1. Per Diem: (To be calculated in accordance with government rates). \$ 7,665
 - a. 200 assistant teachers \$6,300
(Est. \$4.50 x 7 days x 200 persons).

For the Cooperating Government or Agency	For the Agency for International Development
SIGNATURE: _____ DATE: _____	SIGNATURE: _____ DATE: _____
TITLE: _____	TITLE: _____

PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Project/Activity No. 403-11-590-0283	PAGE 24 OF 31 PAGES
2. Agreement No. 0283-6002	3. <input type="checkbox"/> Original or Revision No. 6
3. Project/Activity Title Population Planning (Title X Funds)	

b. 6 NFPP trainers (Est. \$6.50 x 7 days x 5 groups x 6 persons).	\$1,365
2. <u>Travel Expenses:</u> (To be calculated in accordance with government rates).	\$ 7,500
a. 200 health workers (Est. \$30.00 x 200 persons)	\$6,000
b. 6 NFPP trainers (Est. \$50 x 6 persons x 5 groups).	\$1,500
3. <u>Honoraria:</u> (To be calculated in accordance with government rates).	\$ 1,200
a. 4 lecturers, NFPP and Hang Chat Training Center (Est. \$5.00 x 5 groups x 4 persons x 12 hours).	\$1,200
4. <u>Teaching Materials</u>	\$ 600
a. Motivation manual (\$3.00 x 200 persons)	\$ 600
<u>USG Total</u>	<u>\$16,965</u>
<u>RTG Contribution</u>	
1. <u>Salaries</u>	\$ 6,665
a. Assistant teachers (\$1.50 x 7 days x 200 persons)	\$2,100
b. 6 NFPP trainers (\$4.50 x 7 days x 5 groups x 6 persons).	\$ 945
c. 4 NFPP/Training Center lecturers (\$10.00 x 4 persons x 2 days x 5 groups).	\$ 400

For the Cooperating Government or Agency	For the Agency for International Development
SIGNATURE: _____ DATE: _____	SIGNATURE: _____ DATE: _____
TITLE: _____	TITLE: _____

**PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF HEALTH AND ECONOMIC
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
THAILAND**

1. Project/Activity No. 493-11-000-0283	PAGE 25 OF 25 PAGES
2. Agreement No. 0283-6002	3. <input type="checkbox"/> Original or Reproduction. 6
3. Project/Activity Title Population Planning (Title X Funds)	

- d. Training Center staff \$ 720
(\$60.00/month x 6 persons x 2 months).
- e. NFPP Training Section \$1,800
(\$5.00 x 4 persons x 90 days).
- f. P.W. D. staff \$ 700
(\$5.00 x 7 days x 5 groups x 4 persons).

2. <u>Miscellaneous</u>		\$ 4,500
a. Training Center operation and maintenance.	\$3,000	
b. Manuals, teaching aids	\$1,500	
	<u>RTG Total</u>	<u>\$11,165</u>

Funding Summary: Family Planning Training for Team Leaders, Health Workers and Assistant Teachers of P.W.D. Hilltribe Mobile Development Teams:

	<u>USG</u>	<u>RTG</u>	<u>Total</u>
1. Team Leader	\$ 3,606.50	\$ 3,576.50	\$ 7,183.00
2. Health Worker	19,000.00	19,080.00	38,080.00
3. Assistant Teacher	<u>16,965.00</u>	<u>11,165.00</u>	<u>28,130.00</u>
Total	<u>\$39,571.50</u>	<u>\$33,821.50</u>	<u>\$73,393.00</u>
	(54%)	(46%)	(100%)

2. Family Planning Training: Resettlements

The MOPH/NFPP and the Department of Public Welfare, MOI, plan to extend non-clinical family planning services -- and in future, basic health services -- to the 1,000 resettlement area villages by conducting a series of family planning/health training programs for resettlement staff (supervisory level) and village health volunteers (operational level).

For the Cooperating Government or Agency

For the Agency for International Development

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PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION

AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Project/Activity No.
603-11-410-0283

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2. Agreement No.
0253-6002

3. Original or
Revision No. 6

3. Project/Activity Title
Population Planning
(Title X Funds)

Each of the existing 43 re-settlement areas is staffed by a Superintendent, who has general administrative responsibility for representing the Department of Public Welfare at the re-settlement. This project will provide 3 days training and orientation, at NFPP Headquarters in Bangkok, for the 43 Superintendents. The purpose of the one-time three-day session will be to enlist the support of the several superintendents in promoting the expanded family planning service program to be commenced in the re-settlement villages.

As noted earlier, the MOPH rural-clinic infrastructure has not yet reached the majority of rural villages included in the resettlement areas. In many instances, the only permanent health facility in the resettlement is an Assistant-Nurse Station (one located in each re-settlement). The assistant (practical) nurse is responsible for providing basic health and medical services, and for referring more complicated cases to larger and more distant MOPH health centers and hospitals. At present, the assistant-nurse is not being utilized as a supervisory level or distribution agent for non-clinical contraceptive services -- which are not generally available in the resettlement areas under her jurisdiction. This project supports a two-week family planning training program which will (1) prepare the assistant nurse as a local-level distribution agent for orals and condoms; and more importantly, (2) provide her with training skills which will allow her to recruit and train village-level volunteers who will act as re-supply agents for non-clinical contraceptives in the resettlement area villages.

The volunteers to be recruited by the assistant nurse (approx. 20-25 volunteers per nurse) will receive training in family planning from the assistant nurse; be provided an initial stock of orals and condoms; and be instructed in appropriate record-keeping and reporting procedures. For routine re-supply of contraceptives the village volunteers will return to the Assistant-Nurse Station, receive their supplies, and deliver their simplified project records to the Assistant-Nurse for forward submission to the PCMO and the NFPP. Eventually, the long-term MOPH plan to train and field village-health volunteers (VHV's) will reach the re-settlement villages. At that time the 1,000 village volunteers previously trained as family planning agents will receive the more extensive (two weeks) VHV training program still being designed within the MOPH. In the meantime, however, the rural populations residing in the resettlement villages will have had 3 to 5 years' access to effective family planning methods which otherwise would not be available until the complete VHV training program becomes operational.

For the Cooperating Government or Agency	For the Agency for International Development
SIGNATURE: _____ DATE: _____	SIGNATURE: _____ DATE: _____
TITLE: _____	TITLE: _____

PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Project/Activity No. 493-11-580-0283	PAGE <u>27</u> OF <u>31</u> PAGES
2. Agreement No. 0283-6002	3. <input type="checkbox"/> Original or Revised No. <u>6</u>
3. Project/Activity Title Population Planning (Title X Funds)	

The two training programs, and respective USC-RIG Contributions for each, are as follows:

- a. Family Planning Training for Resettlement Superintendents
- (1) 43 superintendents (plus 7 scheduled superintendents).
 - (2) 3 days training; 2 days travel-time.
 - (3) Training site: NFPP Headquarters, Bangkok.
 - (4) Tentative Date: March, 1977.

USG Contribution

- | | |
|--|--------------------|
| 1. <u>Per Diem:</u> (To be calculated in accordance with government rates). | \$ <u>1,894.50</u> |
| (a) 50 superintendents
(Est. \$7.50 x 5 days x 50 persons). | \$1,875.00 |
| (b) One driver
(Est. \$4.50 x 1 person x 1 day) | \$ 4.50 |
| (c) 2 NFPP trainees (field unit)
(Est. \$7.50 x 2 persons x 1 day) | \$ 15.00 |
| 2. <u>Travel Expenses:</u> (To be calculated in accordance with government rates.) | \$ <u>1,600.00</u> |
| (a) 50 superintendents
(Est. \$32.00 x 50 persons) | \$1,600.00 |
| 3. <u>Honoraria:</u> (To be calculated in accordance with government rates). | \$ <u>105.00</u> |
| (a) NFPP lecturers, 21 man-hours
(\$5.00/hour x 21 hours). | \$ 105.00 |
| 4. <u>Teaching Aids</u> | \$ <u>250.00</u> |
| (a) Training handbooks
(\$5.00 x 50) | \$ 250.00 |
| <u>USG Total</u> | <u>\$ 3,849.50</u> |

<p>For the Cooperating Government or Agency</p> <p>SIGNATURE: _____ DATE: _____</p> <p>TITLE: _____</p>	<p>For the Agency for International Development</p> <p>SIGNATURE: _____ DATE: _____</p> <p>TITLE: _____</p>
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PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION

AN AGENCY OF THE GOVERNMENT OF
THAILAND

1. Project/Activity No. 493-11-580-0283	PAGE 03 OF 31 PAGES
2. Agreement No. 0283-6002	3. <input type="checkbox"/> Original or Revision No. 6
3. Project/Activity Title Population Planning (Title X Funds)	

RTG Contribution

1. Stationery supplies	\$ 50
2. Field trip for trainees (bus hire)	\$ 180
3. Salaries, NFPP (est.)	\$ 500
4. Auditorium operating costs, NFPP	\$ 200
<u>RTG Total</u>	<u>\$ 930</u>

b. Family Planning Training for Nurse-Assistants

- (1) 43 nurse-assistants (plus 7 scheduled to be assigned).
- (2) Two weeks training program.
- (3) Training sets: Health/Family Planning. Training Center, Harry Chat, Lampang
- (4) Tentative date: April, 1977

USG Contribution

1. <u>Per Diem</u> : (To be calculated in accordance with government rates).	\$ 4,530
(a) Assistant-nurse trainees (Est. \$5.00 x 14 days x 50 persons).	\$3,500
(b) 4 trainers (Est. \$7.50 x 14 days x 4 persons)	\$ 420
(c) 2 P.W.D. supervisors (Est. \$7.50 x 14 days x 2 persons).	\$ 210
(d) 4 M.D. supervisors (Est. \$20 x 2 trips x 5 days x 2 persons).	\$ 400

For the Cooperating Government or Agency

For the Agency for International Development

SIGNATURE: _____ DATE: _____
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TITLE: _____

PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION

AN AGENCY OF THE GOVERNMENT OF
THAILAND

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Population Planning
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2. Travel Costs: (To be calculated in accordance with government rates). \$ 2,590.00

(a) 50 trainees \$1,750
(Est. \$35 x 50 persons)

(b) 4 trainers \$ 240
(Est. \$60 x 4 persons)

(c) 2 P.W.D. Supervisors \$ 120
(Est. \$60.00 x 2 persons)

(d) 4 M.D. Supervisors \$ 480
(Est. \$60.00 x 2 trip x 4/yr.)

3. Honoraria: (To be calculated in accordance with government rates).
(Est. \$2.50/hour x 35 man hours) \$ 87.50

* USG Total \$ 7,207.50

4. Travel and per diem for 1,000 village F.P. agents
(Est. \$10.00 x 1,000 persons) \$10,000.00

USG Total \$10,000.00

RTG Contribution

1. Salaries \$ 6,634.00

(a) 50 trainees \$2,100
(\$3.00 x 50 persons x 14 days)

(b) One project coordinator (MOPH) \$1,200
(\$100/month x 12 months)

(c) 4 NFPP trainers \$ 420
(\$5.00 x 21 days x 4 persons)

*This total represents the anticipated costs of recruitment and training, by the 50 assistant-nurses, of 1,000 village F.P. agents. Training details will be outlined in implementing documents prepared in furtherance of this Project Agreement.

For the Cooperating Government or Agency

For the Agency for International Development

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DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION

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Population Planning
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(d)	2 P.W.D. Supervisors (\$7.00 x 21 days x 2 persons)	\$ 294	
(e)	4 M.D. Supervisors (\$13.00 x 2 trips x 4 persons x 5 days).	\$ 520	
(f)	2 Follow-up supervisors (\$7.00 x 15 visits x 10 days x 2 persons).	\$2,100	
2.	<u>Training Facility Costs</u>		<u>\$ 2,720.00</u>
(a)	6 staff members	\$ 720	
(b)	Operating costs	\$2,000	
3.	<u>Miscellaneous</u>		<u>\$ 805.00</u>
(a)	Mobile motivation team (\$6.00 x 21 days x 5 persons)	\$ 630.00	
(b)	Travel costs, mobile motivation team.	\$ 175	
	<u>RTG Total</u>		<u>\$10,159.00</u>

Funding Summary: Family Planning Training, Re-Settlements

	<u>USG</u>	<u>RTG</u>	<u>Total</u>
<u>Project Component</u>			
Superintendent Training	\$ 3,849.50	\$ 930.00	\$ 4,779.50
Assistant-Nurse Training	7,207.50	10,159.00	17,366.50
Village F.P. Agent	10,000.00	(Contra- ceptives)	10,000.00
Total	<u>\$21,057.00</u>	<u>\$11,089.00</u>	<u>\$32,146.00</u>

For the Cooperating Government or Agency

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DEPARTMENT OF TECHNICAL AND ECONOMIC
COOPERATION
AN AGENCY OF THE GOVERNMENT OF
THAILAND

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Training of Provincial Logistics Personnel

Under this Project Agreement the Ministry of Public Health (MOPH) will assign one person from each Provincial Chief Medical Office (total 71) responsible for maintaining family planning supply and commodity records; financial record of contraceptives proceeds; reporting of family planning statistics; etc. Training of these personnel will be jointly conducted by NFPP/MOPH and the Bureau of Budget. USOM will fund \$4,000 for this training.

U.S. CONTRIBUTION

1. Per diem of the trainees 71 x government rate (Est. \$7.5)	=	\$4,000	=	532.50
Travel cost 71 x government rate (Est. 40)	=		=	2,840.00
Miscellaneous	=		=	627.50

RTG CONTRIBUTION

Salary of the trainees	=	568	=	\$3,918
Salary of the instructors	=	3,200		
Miscellaneous	=	150		

Total Project: Funding Summary

<u>Project Component</u>	<u>USG</u>	<u>RTG</u>	<u>Total</u>
1. Expanded Sterilization	887,871.50	2,475,000.00	3,362,871.50
2. Expanded IUD Services	42,500.00	30,000.00	72,500.00
3. F.P. Training, Hilltribe Regions	39,571.50	33,821.50	73,393.00
4. F.P. Training, Re-settlements	21,057.00	11,089.00	32,146.00
5. Training of Provincial Logistics Personnel	<u>4,000.00</u>	<u>3,918.00</u>	<u>7,918.00</u>
Total	<u>\$995,000.00</u>	<u>\$2,553,828.50</u>	<u>\$3,548,828.50</u>
	(29%)	(71%)	(100%)

For the Cooperating Government or Agency	For the Agency for International Development
SIGNATURE: _____ DATE: _____	SIGNATURE: _____ DATE: _____
TITLE: _____	TITLE: _____

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PROJECT AGREEMENT

BETWEEN THE DEPARTMENT OF STATE, AGENCY FOR INTERNATIONAL DEVELOPMENT (AID),
AN AGENCY OF THE GOVERNMENT OF THE UNITED STATES OF AMERICA, AND

DEPARTMENT OF TECHNICAL AND ECONOMIC COOPERATION

AN AGENCY OF THE GOVERNMENT OF THAILAND

IAG

The above-named parties hereby mutually agree to carry out a project in accordance with the terms set forth herein and the terms set forth in any annexes attached hereto, as checked below:

Project Description Annex A Foreign Currency Standard Provisions Annex

Standard Provisions Annex Special Loan Provisions Annex

This Project Agreement is further subject to the terms of the following agreement between the two governments, as modified and supplemented:

ECONOMIC & TECHNICAL COOPERATION AGREEMENT DATED SEPTEMBER 19, 1959

MEMORANDUM OF AGREEMENT AS TO CONDUCT OF COUNTERPART PROGRAMS, DATED JULY 24, 1959

(other)

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2. Agreement No.
0283-6002

3. Original or
Revision No. 4

4. Project/Activity Title
POPULATION PLANNING
(Title X Funds)

5. Project Description and Explanation
(See Annex A attached)

6. AID Appropriation Symbol
72-11X1024

7. AID Allotment Symbol
424-50-493-00-44-61

8. AID FINANCING

Dollars Local Currency

Previous Total (A)

Increase (B)

Decrease (C)

Total to Date (D)

	Previous Total (A)	Increase (B)	Decrease (C)	Total to Date (D)
(a) Total	2,993,350	40,000		3,033,350
(b) Contract Services				
(c) Commodities	2,800,000			2,800,000
(d) PIO/Ps	51,350			51,350
(d) Other Costs	142,000	40,000		182,000

9. COOPERATING AGENCY FINANCING Dollar Equivalent

\$1.00 = B20.00

	B30,193,389 (\$ 1,509,670)	B1,206,000 (\$ 60,300)		B31,399,389 (\$ 1,569,970)
TOTAL RTG CONTRIBUTION (a) US \$ Equiv.)				
(b) Technical and Other Services				
(c) RTG Proj. Acct. Funds	B 6,445,949 (\$ 322,298)			B 6,445,949 (\$ 322,298)
RTG REGULAR (d) BUDGET FUNDS	B23,747,440 (\$ 1,187,372)	B1,206,000 (\$ 60,300)		B24,953,440 (\$ 1,247,672)

10. Special Provisions (Use Additional Continuation Sheets, if Necessary)

This revision provides funding in the amount of \$40,000 to finance the study research entitled "Commercial Distribution Study in Nakorn Sawan". The study will be collaborately conducted by the National Family Planning Program, Mahidol University and local marketing and advertising agencies. Funds will be disbursed to DTEC for further disbursement to NFPP. This research proposal is subject to further review by MOPH, DTEC and USOM.

11. Date of Original Agreement
September 8, 1975

12. Date of This Revision
June 28, 1976

13. Final Contribution Date
December 24, 1981

14. For the Cooperating Government or Agency

15. For the Agency for International Development

SIGNATURE: *Kujati Pramoolpol*
Kujati Pramoolpol DATE: 6/24/76
TITLE: Director-General, DTEC

SIGNATURE: *James E. Williams*
James E. Williams DATE: 6/28/76
TITLE: Acting Director, USOM/Thailand

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PROJECT AGREEMENT
BETWEEN AID AND
DEPARTMENT OF TECHNICAL AND ECONOMIC
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THAILAND

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3. Project/Activity Title
POPULATION PLANNING
(Title X Funds)

PROJECT DESCRIPTION

At the request of the Royal Thai Government (RTG), the USG in FY 1974 ordered 150,000 gross condoms for the RTG National Family Planning Program on the basis that additional research be performed to identify barriers to usage and that a follow-up promotion campaign be developed to popularize condom usage. The study proposed in this Project Agreement is intended to increase and popularize usage of contraceptives, especially condoms by placing pills and condoms into the commercial sector, drugstores, and, in the case of condoms, in other types of outlets in one province. A promotional approach would be implemented emphasizing that pills and condoms can be obtained both in commercial stores and government clinics at a standard price, Sales in stores will be monitored and clinic records checked to see what effect the promotion has.

USG CONTRIBUTION

\$40,000

RTG CONTRIBUTION

฿1,206,000
(\$ 60,300)

- | | |
|--|----------|
| 1. Radio Time | ฿ 63,000 |
| 2. Salary of staff | 205,000 |
| 3. Office Space Cost | 200,000 |
| 4. Pills | 720,000 |
| 5. Transportation of pills and condoms, fuel for mobile teams to promote products. | 18,000 |

For the Cooperating Government or Agency

For the Agency for International Development

SIGNATURE: _____ DATE: _____
TITLE: _____

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