

I. PROJECT IDENTIFICATION

<p>1. PROJECT TITLE</p> <p style="text-align: center;">Evaluation of Family Planning Program Effectiveness</p>	<p>APPENDIX ATTACHED</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>2. PROJECT NO. (M.O. 1095.2)</p> <p>932-11-570-619</p>
<p>3. RECIPIENT (specify)</p> <p><input type="checkbox"/> COUNTRY _____</p> <p><input type="checkbox"/> REGIONAL _____ <input checked="" type="checkbox"/> INTERREGIONAL _____</p>	<p>4. LIFE OF PROJECT</p> <p>BEGINS FY <u>75</u></p> <p>ENDS FY <u>77</u></p>
<p>5. SUBMISSION</p> <p><input checked="" type="checkbox"/> ORIGINAL <u>5/16/75</u></p> <p><input type="checkbox"/> REV. NO. _____ DATE _____</p> <p>CONTR./PASA NO. _____</p>	

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

A. FINDING BY FISCAL YEAR	B. TOTAL \$	C. PERSONNEL		D. PARTICIPANTS		E. CC MOD-ITIES \$	F. OTHER COSTS \$	G. PASA/CONTR.		H. LOCAL EXCHANGE CURRENCY RATE: \$ US _____ (U.S. OWNED)		
		(1) \$	(2) MM	(1) \$	(2) MM			(1) \$	(2) MM	(2) COOP COUNTRY		
										(1) U.S. GRANT LOAN	(A) JOINT	(B) BUDGET
1. PRIOR THRU ACTUAL FY												
2. OPRA FY <u>75</u>	140	102	67				38	140	67			
3. BUDGET FY <u>76</u>	191	143	90				48	191	90			
4. BUDGET +1 FY <u>77</u>	166	125	67				41	166	67			
5. BUDGET +2 FY												
6. BUDGET +3 FY												
7. ALL SUBQ. FY												
8. GRAND TOTAL	497	370	224				127	497	224			

9. OTHER DONOR CONTRIBUTIONS

(A) NAME OF DONOR	(B) KIND OF GOODS/SERVICES	(C) AMOUNT
Ford Foundation, National Science Foundation	Graduate assistant-ships	

III. ORIGINATING OFFICE CLEARANCE

1. DRAFTER	TITLE	DATE
PHA/POP/DEMO, Richard M. Cornelius <i>RMC</i>	Project Monitor	5/16/75
2. CLEARANCE OFFICER	TITLE	DATE
PHA/POP/DEMO, James W. Brackett <i>JWB</i>	Chief, DEMO Division	5/16/75

IV. PROJECT AUTHORIZATION

1. CONDITIONS OF APPROVAL

LA/DR, JBreen (Draft 5/23/75)
 PHA/POP/LA, C. Johnson *CJ*

AFR/DR, R. Huesmann (Draft 5/29/75)
 PHA/POP/AFR, C. Miracle (Draft 5/20/75)

2. CLEARANCES

BUR/OFF.	SIGNATURE	DATE	BUR/OFF.	SIGNATURE	DATE
PHA/POP	R.T. Ravenholt <i>RTR</i>	5/19/75	GC/PHA	J. Miller <i>JM</i>	5/27/75
PHA/POP	S.R. Backlund/G. Gilmore	5/19/75	AA/PPC		
PHA/POP/EA	C. Terry <i>CT</i>	5/16/75	PEC/DPRE	J. Welty (draft)	
PHA/POP/NESA	R. Grant <i>RG</i>	5/12/75	EA/DP, WS	Defes (Draft) 5/27/75	
PHA/PRS	D. McMakin <i>DM</i>	5/19/75	NESA/DP	F. Correll <i>FC</i>	5/29/75
PHA/PRS	R. Martin <i>RM</i>	5/15/75			

3. APPROVAL AAS OR OFFICE DIRECTORS

SIGNATURE	DATE	SIGNATURE	DATE
<i>Harriet S. Crowley</i>	6/16/75		
TITLE		ADMINISTRATOR, AGENCY FOR INTERNATIONAL DEVELOPMENT	
AA/PHA			

Brief History

During the past decade, the Community and Family Study Center (CFSC) at the University of Chicago has been a pioneer in the field of family planning evaluation, and has directed a major portion of its activities in training and research toward advancement of this field.

Recognizing the need for evaluation as a component of any successful family planning program, AID contracted with the CFSC in FY 1969 in support of efforts to a) synthesize existing resources and research in evaluation, and b) through workshops, create a global awareness of the objectives and methods of family planning evaluation.

In FY 1971, a new PROP was written expanding the scope of work of CFSC to include the following new areas: a) development of new methodologies for family planning evaluation, b) computerization of new and existing demographic and evaluation methods, c) initiation of long-term collaboration agreements.

In FY 1974, CFSC was granted a one year no-cost extension of their contract to allow for the completion of valuable ongoing training, technical assistance, and methodological research.

This new PROP (May 1975) has been written to justify an additional three-year funded extension, which would continue some of the on-going activities, but would contain a substantial redirection of CFSC work, particularly to emphasize the measurement of the demographic impact of family planning programs.

PROP

Rapid Feedback for Family Planning Improvement

I. Program Goal

- A. Statement of Goal: Reduction of excessive fertility and growth rates in developing countries.
- B. Measures of Goal Achievement:
1. Population growth rates of developing countries commensurate with social and economic development goals.
 2. Accurate current and projected demographic and social economic data employed by developing countries in formulating national policy.

Assumptions:

1. Excessive population growth has a negative impact on social and economic development.
2. Availability of family planning programs will result in a decline in fertility and, in turn, a reduction in population growth.
3. Developing countries are willing to include demographic variables in their development planning.

II. Functional Goal

- A. Statement of Functional Goal: Generation and analysis of timely and reliable selected demographic data in developing countries in order to (a) measure the demographic impact of AID supported family planning programs, and (b) help develop and maintain population awareness among LDC officials.

B. Measures of Functional Goal Achievement:

1. Timely and reliable demographic data available for documenting and monitoring demographic changes prior and subsequent to the introduction of family planning programs.
 - 1.1. Decision-makers request, are provided with, and utilize for evaluating the impact of family planning programs, data which accurately reflect current demographic trends.
2. Timely and reliable demographic and social data available to and employed by developing country governments in formulating national development policies.
 - 2.1. Decision-makers request, are provided with, and utilize for planning purposes, data which accurately reflect current demographic and social trends.
 - 2.2. Population policies commensurate with the country's demographic situation established.

D. Assumptions:

1. Inadequate knowledge and lack of understanding of basic population characteristics and demographic processes and their effects continue to represent a major constraint on the development of improved public policies in the field of population.
2. Conventional systems for registering vital rates of the population are extremely slow in maturing, requiring decades even in developed countries, and therefore, new methods must be found which can shortcut this slow process for LDC's.
3. Removal of the constraint on development of improved public policies presupposes the development of indigenous LDC demographic research

institution, lodged where possible in official government agencies, and the staffing of these research institutions with manpower possessing high-level technical and analytical skills.

4. A successful attack on these problems may be efficiently carried out through a sustained program of well-designed, internationally integrated demographic research institutions, working individually and collectively on a common set of key data collection and methodological issues.

III. Project Purpose

A. Statement of Purpose: The purpose of this project is to insure the availability of demographic and program data to relevant LDC organizations and AID. The Community and Family Study Center (CFSC), University of Chicago, will seek to achieve this purpose through a) measurement of demographic impact of family planning programs in selected LDC's, b) development and computerization of evaluation methodology, and c) provision of support services (e.g., training and technical assistance) into to be unidentified LDC's or for LDC's in general.

B. Conditions Expected at End of Project

1. Current and reliable data on the demographic impact of family planning programs in selected LDC's will be widely available.
2. Capability in selected LDC's to evaluate family planning program data and to utilize this data in improving program management.
3. Methodologies synthesized and/or developed to measure a) changes in fertility, and b) family planning program performance.
4. New and/or existing methodologies for evaluation of fertility and program data computerized.

5. Improved family planning programs resulting from technical assistance and research in fertility and family planning.

C. Assumptions:

1. In-country resources for the collection and analysis of demographic data will be made available.
2. Sufficient prior demographic and statistical training of host country personnel has been accomplished to form an adequate base for external technical assistance.
3. The approaches used in the countries selected for this project can and will be generalized to other countries, as the contractor will not have sufficient resources to provide direct help to all countries in need of assistance.
4. Other contractors and donors will provide additional technical assistance resources in this area.

IV. Project Outputs

- A. Measurement of Demographic Impact: The contractor will establish collaborative arrangements with family planning and/or demographic-social research organizations in selected LDC's to assist them in the collection and analysis of demographic and related family planning data. The contractor will establish two-three such relationships in high priority countries and/or in countries where the measurement of the impact of family planning programs is likely to provide results in the short term. Such arrangements will last from one-two years, with the possibility of extension. The contractor will provide four types of assistance.

Where necessary the contractor will assist the host country in the collection of demographic and related data. This will be accomplished primarily via surveys and/or through the development of ongoing client record systems to monitor program output. In these instances the contractor will work closely with the host country institutions to insure their ability to assume eventual responsibility for the activity.

2. The contractor will assist the host country in the analysis of the data collected above and in many instances, of unanalyzed data already available.

This is probably one of the most critical areas of need. Time and again surveys, etc., have been carried out, only to have the data languish for years on someone's shelf. In order to prevent this pattern from continuing, analytical tools and assistance must be given to the appropriate host country institutions. The emphasis here will be on making the results of studies rapidly available in a form useful for program decision making. Again this work will be carried out with the host country institutions to insure their ability to continue the activity.

3. The contractor will also train host country personnel in the collection and analysis of data related to the demographic impact of family planning programs. The concept of training through cooperative work is embodied strongly throughout sections A.1 and 2 above. This "on the job" instruction is the most important component of the contractors training activities, but a parallel effort designed to augment

its effectiveness is needed. The contractor will conduct small, in - country seminars teaching the use of analytical methods and tools. The use of computers will be an important aspect of this instruction. These seminars will be brief and focus on very specific topics.

4. In many instances a relatively high level of technical competence may already exist in-country. In this instance often only a specific short term technical input is necessary to initiate work in determining the demographic impact of the existing family planning program. The contractor will be prepared to provide such assistance in the same general areas indicated under "long term technical assistance" (IV A. 1-3). Four or five individual trips of up to four weeks per country are contemplated, using multiple trips where additional input is required.

B. Evaluation of Family Planning Programs: On October 1973, Mr. Peter Way was stationed in residence in Indonesia. He is assigned to the research staff of the National Family Planning Board (BKKBN). His principle duties so far have been to assist the various agencies which are doing research under BKKBN. Presently, he is helping to design research studies, construct interviews, and collect, process, and analyze data from these projects in Indonesia.

In addition, Mr. Way is responsible for training staff members at the BKKBN on a) the use of the "Mini" series of computer programs, b) the methodology contained in the RFFPI manuals, and c) basic research methodology. He is also preparing family planning target projections

by province, and working on the design and implementation of a new national system of follow up studies of family planning acceptors.

Help on other BKKBN projects have been provided by both Mr. Way and by two senior members of the CFSC, Dr. Bogue and Dr. Sinquefield. Plans for future training sessions and research projects are now being made between BKKBN and CFSC. CFSC is playing a very important role in helping to supply some important technical needs in the short run, while helping in the planning and conducting of training programs that would eliminate them in the long run. We now estimate that in two years the BKKBN will have the necessary resources and expertise at hand to preclude the necessity of a CFSC resident advisor. Until then, it is imperative that Peter Way continue his work in Indonesia.

In addition to its activities in Indonesia, the CFSC is prepared to conduct a full scale evaluation of selected family planning programs. The CFSC will utilize RFFPI methodologies to systematically examine all aspects of these programs, make recommendations for improved operation, and aid in the implementation of program improvements. This evaluation activity will also emphasize efforts to create within the host LDC the capability to operate an ongoing evaluation system to monitor program performance and enhance program management.

The CFSC will conduct these evaluations in two-three high priority countries, including one or more of those selected for collaboration in the measurement of the demographic impact of family planning programs.

C. Support Services: In addition to the country-specific activities mentioned above, there are several ongoing activities which a) will be provided to as yet unidentified countries on an ad hoc basis or b) are soon to be completed. These include:

1. Development and Dissemination of Computerized Evaluation

Methodology:

Much of

the methodology for the determination of the impact of family planning programs already exists. Yet there are gaps and areas of potential that have yet to be explored.

Additionally, many of the existing approaches have yet to be fully tested in the field and translated into simple and readily usable tools with adequate backup documentation. The contractor will engage in the development, testing, and documentation of new and existing methodologies related to the demographic impact of existing family planning programs. Examples of areas of need are:

a. Birth Interval Analysis: This technique has the potential to become a useful yet simple approach to the measurement of fertility change. A manual on this methodology is being written by the contractor, complete with the related computerized analysis software. The contractor will then test this approach utilizing existing data, to demonstrate its practical application in LDC's.

b. Computation of Fertility Measures from Census and Survey

Data: Many countries are interested in obtaining more refined

fertility estimates from recent surveys and censuses. The contractor is developing a manual covering a variety of methodologies: a) the Bogue-Palmore regression equations b) the reverse survival technique for estimating fertility, c) the Coale-Demeny stable population analysis, and d) other methods of estimating fertility that have not been covered in existing RFFPI manuals, complete with computer programs usable in developing countries. Current, reliable estimates of fertility rates should not depend on U.S. based work, but be made practical within the LDC's.

- c. Package of Computer Programs for Demographic Research: The contractor will write a series of small computer programs that are not important enough to justify individual publication, but should be made available for use in LDC 's. He will combine these programs into a single manual for distribution. This manual would include programs on a) interpolation, b) graduation, c) life table construction, d) stable population analysis, and e) specialty editing and tabulation programs.
- d. Evaluation of Private Sector Performance in Family Planning:
In many LDC's a new emphasis is being given to the use of the private sector for promoting and/or delivering family planning. Yet data collecting instruments and systems for evaluating such programs have not been established. Procedures for evaluating the impact of using private physicians and medical facilities,

and of commercial systems of distribution are needed. A manual on determining the impact of private sector activities will be written and a test case using these procedures will be attempted.

- e. Synthesis of International Experience with Use-Acceptability of Various Contraceptive Methods: More and more countries are conducting studies of the use-effectiveness of various contraceptive methods. Little effort is being made to assemble and intensively analyze these data, to discover underlying causes of short and long-term continuation with particular methods. The CFSC will 1) assemble international data about each of the major methods: pill, condom, vasectomy, female sterilization, and 2) collaborate in a major use-effectiveness study in a particular country (Indonesia). Mr. Way is already working with the BKKBN on simple use-effectiveness studies. They are awaiting the completion of a manual on follow-up studies by Dr. Sinquefield--which includes a model interview for studying social and psychological sources of discontinuation--before doing more complex studies.

Due to the changing priorities of AID, further development of evaluation methodologies by the CFSC will be confined to that requested or formally approved by AID. Field testing of the above methodologies will be coordinated with the activities outlined in output B., "Evaluation of Family Planning Programs."

2. Training in Evaluation and Demographic Techniques: The concept

of training is embodied in nearly all of CFSC's activities, and will continue to be emphasized. Training by the CFSC will take the following forms:

- a. Short-Term Training: Brief, highly-focused seminars will be conducted overseas on a limited request basis. Instruction in a) the use of RFFPI computerized methods, b) survey research methods, and c) demographic analytical methods will be emphasized.
 - b. Summer Workshop: In 1975, the CFSC will host a summer workshop for LDC participants. These participants will have the opportunity to receive coursework in computer programming, survey research methods, evaluation methodology, and basic demography. Continuation of the summer workshops beyond 1975 will be contingent upon the needs and priorities of both AID and the CFSC.
 - c. M.A. and Ph.D. Training: The CFSC graduate curriculum in evaluation still represents the only integrated curriculum of its kind in the country. Some very able students have gone through this program, and many of the research and evaluation activities throughout the world are being directed by graduates of this training. AID will continue to provide limited support to approximately six students per year in this training.
3. Projections of Population and Family Planning Goals: The contractor will 1) revise and recompute its 1974 projections and 2) make functional population projections for LDC's as a means of helping these countries plan and prepare for the future.

During 1973-1974 the contractor made a series of population, family planning target projections for all LDC's having a population of one million or more. This cycle of projections has proved to be useful and informative. Because more information is accumulating about the birth and death rates of LDC's and their changing contraceptive "mixes," the present projections will become obsolete by the end of the coming fiscal year.

It is proposed that a new cycle of projections be undertaken in the spring of 1976, to be distributed world-wide as were the 1974 projections.

The contractor has also perfected techniques for making "functional" population projections--future requirements for specific activities or items based on age-sex projections. This system will be completely computerized. The contractor will use this system to produce functional projections of the following for every LDC of over one million population (approximately 94 countries):

- (a) Future requirements for food, subdivided by type
- (b) Future requirements for schooling to reduce illiteracy
- (c) Future requirement for medical facilities
- (d) Future labor force
- (e) Future housing needs
- (f) Future energy requirements
- (g) Future urbanization

These could be expanded to include additional items for all countries or particular items of interest in specific countries. The goal is to ultimately transfer this capability to the LDC institutions carrying out this type of activity.

4. Assumptions:

- a. Host countries will be interested in serving as test sites for the new methodologies and surveys.
- b. Viable approaches to the measurement of the demographic impact of family planning programs can be developed.
- c. Considerable data already exists on this question, but it has not been subjected to proper analysis.

V. Project Inputs

A. U.S. Inputs

	<u>7/1/75-3/31/76</u>		<u>4/1/76-3/30/77</u>		<u>4/1/77-3/30/78</u>	
	<u>Expenditures</u>		<u>Expenditures</u>		<u>Expenditures</u>	
	MM	\$	MM	\$	MM	\$
Project Director	2	5,889	2	6,300	2	6,740
Demographer-Sociologist	9	11,590	12	16,530	12	17,690
Demographer (Field)	9	11,225	12	16,050	12	17,170
Senior Study Directors (2)	6	4,440	9	6,330	9	6,780
Research Assistants (3)	6	3,510	9	5,000	9	5,360
Data Processing Supervisor	6	4,344	9	6,200	9	6,630
Publications Supervisor	4	2,888	6	4,120	-	-
Statistical Clerk	4	2,925	6	4,170	3	2,230
Spanish Translator	4	2,742	6	3,910	-	-
Editor	4	1,900	4	2,710	-	-
Administrative Assistant	4	4,500	6	6,420	6	6,870
Manuscript Typist (2)	9	3,400	9	4,850	4.5	2,600
<u>Total Staff</u>	<u>67</u>	<u>59,353</u>	<u>90</u>	<u>82,590</u>	<u>66.5</u>	<u>72,070</u>
Computer & Related Expenses		16,060		21,000		21,000
Printing of Manuals		5,000		5,000		-
Office Equip., Postage, & Supplies		5,164		6,800		5,000
Travel & Subsistence		11,875		15,000		15,000
Staff Benefits		7,384		10,500		9,150
Overhead		35,164		50,200		43,240
<u>Total</u>		<u>140,000</u>		<u>191,090</u>		<u>165,460</u>
<u>Total All Years</u>		<u>/ 496,550 /</u>				

This project does not involve the direct U.S. input of Training or Commodity resources.

B. Host Country Inputs

The nature of this project does not permit the detailed quantification of host country inputs. This will depend on the situation in those countries in which the contractor works. Yet, as indicated earlier, host country inputs will be crucial to the success of the project.

The host country must furnish the technical counterparts for the activities outlined earlier in the PROP. Without these resources, no residual competence will be created and the activities the project is designed to stimulate will collapse after the completion of the project.

In those instances where primary data collection is necessary, the host country will furnish the resources (interviewers, training, transportation, forms, etc.) necessary.

The host country will make data already collected available to the contractor (and host country counterparts) for the analysis outlined earlier in the PROP.

Much of the computerized data analysis will be performed in the host country, (again to insure that residual competence in this area is created). In most instances these local computer costs will be met by the host country.

C. Other Donor Inputs

No other donor inputs are required for this project, although the magnitude of the need is such, that additional resources could be utilized effectively in this area.

D. Assumptions about the Management and Availability of Inputs

- 1) The host country commitment will be sufficient that their inputs will be made available.

- 2) Present contractor key personnel are retained.

- 3) Much of the work outlined above can be accomplished on a TDY basis (rather than through the use of a full-time long-range advisor).

VI. Rationale

A. Background

To date the major focus of the LDC Population-Family Planning effort has been on getting action programs started. Because of the strong belief in the service—delivery approach and the immediacy of the population program, this was often accomplished before host country commitment had solidified and in advance of effective program planning and evaluation. As a result, there remain considerable doubts as to the impact of family planning programs. This is not to say that there are not strong indications in many countries that these programs have not affected birth rates, but that many critics feel that no concrete "proof" has been available. Further, even though indepth impact analysis has been available for a few countries (Korea, Taiwan, etc.), these are usually dismissed on the grounds that the countries are "not typical" or "more developed." Analysis of the impact of F.P. programs must be carried out on a wider basis (all programs should have some idea of the impact they are having).

B. Measurement of Family Planning Program Impact

Measurement of family planning program impact requires the collection and analysis of several types of data. First, timely and reliable family planning program output data must be obtained. At a minimum these data should include current and cumulative acceptor rates; however, other statistics on discontinuation, prevalence, woman-years of protection, program costs per acceptor, etc., also may be useful in determining the efficiency of a family planning program.

Additionally, timely and reliable demographic, social and economic data must be obtained and analysed in order to determine changes in age-specific fertility rates, contraceptive knowledge, attitudes and practice, child spacing and so forth. These data also provide information on social and economic determinants of fertility such as education, modernism, female labor force participation, urban/rural habitation, etc.

The final and most difficult step involves estimation of the separate and combined effects of a) family planning program outputs and b) social and economic determinants on any observed changes in fertility. Since the independent variables mentioned above are interrelated, it is often very difficult to separate out the effect on fertility of each set of variables. However, through statistical techniques (e.g., multiple regression, factor analysis, etc.) these separate effects can be estimated, and CFSC will place increasing emphasis on analysis of the role of family planning in changing fertility patterns.

C. The Need for Family Planning Evaluation

The general lack of this information has handicapped the family planning effort in two ways. First, the lack of hard data on the impact of family planning programs has given rise to doubts concerning the effectiveness of such activities. The evidence to date indicates that these programs do have a significant effect on fertility, but this impact is difficult to quantify. This uncertainty gives rise in some countries to an unwillingness to invest scarce resources in population activities. In a broader sense this same attitude is threatening the population resources available from the donor countries.

Secondly, the lack of knowledge about the factors contributing to the demographic impact of population programs has hindered the development of adequate population-family planning action strategy. Many countries even lack the basic program activity and output data, so important to informed and effective program administration.

This project is intended to meet these problems by helping both the host countries, AID, and other donors obtain information on family planning program activities and their impact.

VII. Course of Action

A. Implementation PLAN
in many respects

This project/is an ongoing activity, so many of the usual start-up delays and problems will not be encountered. The staff is in place, LDC contacts have been established, much of the method-

ological work is already underway, one long-term technical assistance site has been in operation over a year (Indonesia) with a full time advisor (Peter Way), one round of population and F.P. target projections has been completed. This PROP represents a continuation of these initiatives, accompanied by an increased emphasis on the measurement of the demographic impact of family planning programs. As a result, many of the operational strategies developed earlier in the project will be retained.

The early stages of the project will see the completion and testing of methodological developments including a) the analysis of Private Sector Performance, and b) Birth Intervals. Intensive work will be initiated in developing approaches to the measurement of the demographic impact of F.P. programs.

Travel to locate and establish a second site for long-term technical assistance will be ongoing at the time of the extension of the project. It is expected that this will take no more than 6 months (with the search for the 3rd long-term site to follow). Intermittent support (TDY) will be provided to the long-term sites over the life of the project. This approach can provide specific technical skills when and where they are needed in a cost effective manner. The impact study sites and likely the second long-term technical assistance site will

not have full-time advisors. This approach is necessitated by the low level of resources flowing into the project. They will be serviced entirely on a TDY basis.

Additional methodological development in fertility measures and general evaluative and analytical software will take place in the second year of the project, with any testing to occur subsequently. Methodological development will taper off in the final year of the project with an increased emphasis on field implementation of the approaches developed earlier.

One round of population and family planning target projections for 94 LDC's was finished in 1974. A similar exercise is scheduled early in 1976, before the end of the project. This subsequent round will incorporate more recent data and permit improvements in the analysis and the format of the presentation. It is expected that the contractor will provide additional assistance via TDY to host countries who request "tailor-made" projections. Where this is not possible, the projections will be made in Chicago using the specifications supplied by the local government. In the latter case, it would be preferable to have a local counterpart in Chicago to participate in the work and learn the methodology. Again the above reflects an attempt to build up host country capability.

B. Evaluation Plan

1. Continuous monitoring of project activities will be the responsibility of the AID/W technical division to which this project is designated (PHA/POP/DEMO).
2. Long-term and short-term technical assistance will be evaluated by AID/W and the concerned USAID to insure that:
 - a. technical assistance was performed by competent CFSC personnel;
 - b. the assistance was focused on the specific needs of the host country;
 - c. efforts were made to institutionalize in the host country the technical skills performed by CFSC;
 - d. the host country is satisfied with the assistance rendered by CFSC.
3. Additionally, an evaluation of this project has recently been completed. It primarily involves a summary of existing information on progress to date of the project and a site visit to Chicago to prepare a final report agreed to by CFSC and current as of June 30, 1975. Specific conclusions and recommendations outlined in the evaluation are reflected in this PROP.

VIII. Women's Impact Statement

The center is very conscious of the need for women to play a more important role in the operation of LDC institutions. As the principal advisor to all overseas activities, Dr. Jeanne Sinuefield reinforces this determination. In addition, the majority of the staff of CFSC and the participants from developing countries are women: e.g., of the 16 full and part-time staff members, 10 are women; of the 20 participants in the FY 1974 Summer Workshop

in Family Planning 12 were women; of the 25 students on the Master's level and five on the Ph.D. level who have specialized in family planning research and evaluation, more than half have been women.

IX. Abortion-Related Activities

This project is consistent with A.I.D. policies relative to abortion-related activities and with Section 114 of the Foreign Assistance Act of 1961, as amended. No funds made available under this project and subsequent contract will be used for the procurement or distribution of equipment provided for the purpose of inducing abortions as a method of family planning; for information, education, training or communication programs that seek to promote abortion as a method of family planning; for payments to women in less developed countries to have abortions as a method of family planning; or for payments to persons to perform abortions or to solicit persons to undergo abortions.

IMPLEMENTATION PLAN

FY 1976

7/1/76 - 6/30/77

7/1/77 - 6/30/78

	FY 1976	7/1/76 - 6/30/77	7/1/77 - 6/30/78
Measurement of the Demographic Impact of Family Planning Programs	<p align="center">Indonesia survey</p> <p align="center">Country X survey</p> <p align="center">Country Y survey</p>		
Evaluation of Family Planning Programs		Indonesia	
		Country X	
		Country Y	
General Support Services	<p>Population and F.P. Projections</p> <p>(as requested)</p>		
		<p>Summer Workshops and Graduate Program on Campus, and Specially Requested Overseas Workshops</p>	
	<p>Development and Dissemination of Computerized Evaluation Methodology</p>	<p>(as requested)</p>	

**PROJECT DESIGN SUMMARY
LOGICAL FRAMEWORK**

Life of Project:
From FY 1975 to FY 1977
Total U. S. Funding \$ 497,000
Date Prepared: 5/75

932-11-570-619

Project Title & Number: Evaluation of Family Planning Program Effectiveness

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>Reduction of excessive fertility and population growth rates in developing countries.</p>	<p>Measures of Goal Achievement:</p> <ol style="list-style-type: none"> 1. Population growth rates in developing countries commensurate with social and economic devel. goals. 2. Accurate current and projected demographic and social economic data employed by developing countries in formulating national policy. 	<p>Population growth estimates and socio-economic analyses.</p>	<p>Assumptions for achieving goal targets:</p> <ol style="list-style-type: none"> 1. Excessive population growth has a negative impact on social and economic development. 2. Availability of family planning programs will result in a decline in fertility and, in turn, a reduction in population growth. 3. Developing countries are willing to include demographic variables in their development planning. 																											
<p>Project Purpose: To insure the availability of demographic and program data to LDC organizations and AID.</p>	<p>Conditions that will indicate purpose has been achieved: End of project status.</p> <ol style="list-style-type: none"> 1. Current and reliable data on the demographic impact of F.P. programs in selected LDC's will be available. 2. Capability in selected LDC's to evaluate F.P. program data and to utilize this data in improving their programs. 3. LDC's utilizing manuals, computer programs and projections. 	<p>LDC and other published demographic and family planning program data. Evaluations</p>	<p>Assumptions for achieving purpose:</p> <ol style="list-style-type: none"> 1. Countries will provide local resources (particularly technical counterparts). 2. Some base of trained personnel already exists in the host country. 3. Approaches used can be generalized to other countries. 4. Other technical assistance resources will be devoted to this area. 																											
<p>Outputs:</p> <ol style="list-style-type: none"> 1. The contractor will establish collaborative arrangements with organizations in selected LDC's to assist them in the collection and analysis of demographic and related family planning data. 2. Evaluations of family planning programs. 3. Support Services: a) Development & dissemination of computerized evaluation methodology; b) Training in evaluation; and c) Population and F.P. projections. 	<p>Magnitude of Outputs:</p> <ol style="list-style-type: none"> 1. Two to three countries: At least one survey per country. 2. Same two-three high priority countries as those which have impact surveys. 3. a. At least four manuals completed and tested. b. At least one summer and four to five overseas workshops. M.A.'s and Ph.D.'s c. At least one series. 	<ol style="list-style-type: none"> 1. USAID's and AID/W site visits. 2. Mission reports. 3. CFSC semi-annual reports. 4. CFSC Manuals. 5. CFSC population and target projections. 	<p>Assumptions for achieving outputs:</p> <ol style="list-style-type: none"> 1. Host countries are interested in external assistance and will serve as test sites for new methodologies. 2. Improved approaches to the measurement of the impact of family planning programs can be developed. 3. Unanalyzed data already exists in the LDC's which can be used to address the impact question. 																											
<p>Inputs:</p> <p>A.I.D. Contract Personnel Costs</p> <table border="1" data-bbox="445 1224 984 1316"> <thead> <tr> <th colspan="6">Implementation Target (Type and Quantity)</th> </tr> <tr> <th></th> <th colspan="2">FY 1975</th> <th colspan="2">FY 1976</th> <th colspan="2">FY 1977</th> </tr> <tr> <th>MMs</th> <th>\$</th> <th>MMs</th> <th>\$</th> <th>MMs</th> <th>\$</th> <th></th> </tr> </thead> <tbody> <tr> <td>68</td> <td>110</td> <td>90</td> <td>200</td> <td>90</td> <td>200</td> <td></td> </tr> </tbody> </table> <p>Host Country</p> <p>Other Donors</p>	Implementation Target (Type and Quantity)							FY 1975		FY 1976		FY 1977		MMs	\$	MMs	\$	MMs	\$		68	110	90	200	90	200		<p>Most local costs - particularly counterpart e.g. Ford, NSF and others provide graduate assistantships.</p>	<p>Contracts, PIO/T's vouchers, personnel records, travel records, and contractor reports.</p>	<p>Assumptions for providing inputs:</p> <p>Contractor responsive to changing nature of PHA/POP needs and able to maintain the necessary staff to carry out the required activities.</p>
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