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EVALUATION

**PLANNED PARENTHOOD ASSOCIATION/CHICAGO AREA
FAMILY PLANNING TRAINING AND RESEARCH CENTER**

AID/csd-3421

FEBRUARY, 1975

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EVALUATION OF PLANNED PARENTHOOD ASSOCIATION/CHICAGO AREA
FAMILY PLANNING TRAINING AND RESEARCH CENTER
AID/csd-3421

I. INTRODUCTION

A. Background of Project

The Planned Parenthood Association/Chicago Area (PPA/CA) received a three-year contract (AID/csd-3421) from the U.S. Agency for International Development in 1972 to provide flexible training programs, tailor-made to meet the individual needs of participants sent from abroad to study in the field of family planning. Prior to this present agreement, AID had had two other contracts with PPA/CA dating back to 1968.

No in-depth evaluation had been made of either contract. A brief resume of the previous two contracts will be presented at the end of this report.

A gradual evolution from an elementary to a more sophisticated approach to Family Planning training can be charted. The original attempt to provide all encompassing courses in family planning gave way to the development of the present flexible, tailor-made programs based on the needs of the individual pursuant to training objectives of their sponsors.

The present three-year contract was signed in May 1972 to develop, establish and conduct a flexible set of training programs tailored to fit the individual needs of participants as well as cover general aspects of Family Planning activities. The contract was entered into because the Missions were requesting short-term (one to several weeks long) practical training in family planning in addition to academic or formalized training. Some PIO/P's specified the exact type of required training in detail. Others simply stressed a strong emphasis in family planning and population dynamics.

The contract is unique in that it requires PPA/CA to provide individualized training whenever the Office of International Training requires it. The contract does not limit the length of the participant's training. A program could be for one day or for one year.

The Training and Research Center, International Training, of PPA/CA is responsible for implementing the contract. The Training and Research Center is presently located at 1919 West Taylor Street on the campus of the University of Illinois Medical Complex. It has a core staff of six members, (one of whom is part-time); a cadre of 34 consultant faculty available for training on an ad hoc basis; twelve part-time clinic personnel. A demonstration clinic is on the ground floor at the Center. Two mobile clinics supported by the project operate once a month.

B. Purpose of the Evaluation

The purpose of the evaluation is to determine the extent to which project expectations have been fulfilled and any new directions that may be indicated. It will assess PPA/CA's capability to provide flexible, effective and practical training in medical and non-medical aspects of family planning.

II. PROJECT DESIGN AND PROGRESS-TO-DATE DETAILS

A. Program Goal

The goal is to meet the increasing demand for professional manpower trained to plan and to implement Family Planning Programs in developing countries where the reduction of the rate of population growth appears necessary.

The hope is that the successful completion of this project will contribute to the attainment of this goal. The only way to test the ultimate success or failure of training would be to assess the accomplishments of the participants once they have returned home. This evaluation is limited; however, to determine whether or not the project purpose has been met.

B. Project Purpose and Outputs

The purpose of this project is to establish and maintain an institutional capability within PPA/CA to provide a variety of training in Family Planning and related activities to LDC personnel and others.

The outputs of the project are the specific actions that are required of PPA/CA under the provisions of the contract in order to meet that purpose.

1. 0. A Staff Capability for Developing Course Materials and Training Participants

1. 1. Faculty - Consultants

Progress-to-date

In addition to its core staff, PPA/CA hires outside consultants to train in their area of expertise. The Project Director estimates about 65% of the participants' training sessions are conducted by consultants. The remaining third of the participants' training is divided between in-house training and on site visits to institutions such as clinics and hospitals.

Consultants are used on an ad hoc basis depending on the needs of the participants. The following is the current list of consultants categorized according to the subject matter they teach. A complete set of curriculum vitae is available in the Office of International Training and the Office of Population.

ADMINISTRATION:

Program Organization and Development

B. Baum, J. Wolfe, J. Wells, B. Warren, J. Ettlle

Program Planning and Budgeting Systems

L. Pryor, E. Moses, J. Wells

Administration of Family Planning Programs

B. Brandt, B. Baum, J. Wolfe, J. Wells

Health Delivery Systems

B. Warren, J. Glowan, J. Wolfe

Statistics

E. Moses, L. Pryor

Basic Demography

E. Gardner, P. Klaussen, B. Brandt, E. Moses

Over-Population's Effect on Natural Resources

P. Hauser, L. Babcock

Management Skills

J. Wolfe, B. Baum, V. Diefenbach, M. Albrecht, A. Singleton

Program Evaluation

J. Cannon, J. Wolfe, D. Bogue, B. Brandt

COMMUNICATIONS:

Communications Programming

J. LaBrie, E. Carter, R. Mulder, F. Keed, M. Snyder, J. Robinson

Materials Development

L. Yee, J. LaBrie, S. Kalmbach

MEDICAL:

Contraceptive Technology and Clinical Procedures

Dr. L. Keith, Dr. J. Swartwout, Dr. M. Arrata, Dr. C. Kai,
Dr. L. Hamilton, Dr. J. Biezanski, Dr. N. Bozorgi, Dr. L. Myers,
Dr. I. Bush, N. Maroni, A. Lebo

RESEARCH:

J. Glowan, S. Arnold, J. Swartwout

HEALTH EDUCATION:

J. Cannon, I. Boivin, B. Perez, L. Gurtu

GROUP DYNAMICS:

J. Cannon, P. Perez, A. Singleton, OASIS

HUMAN SEXUALITY:

J. Potter, D. Shaw, J. Levin

FINDINGS AND RECOMMENDATIONS

The consultants used have good academic and professional credentials. About 50% have overseas experience. Some, such as Dr. Bogue are internationally known for their work in Population. The consultant's involvement in a participant's training program could vary from an hour's lecture to a week long training session. The Project Director acts as a coordinator of the programs by attending sessions to insure that there is no overlapping of topics covered. The consultants have been invited two times to meet together as a group to discuss their findings and ideas about training. The consultants develop their materials. Coordination and organization of courses is done by the PPA/CA Core Staff.

It is recommended that the Project Director continue to seek consultants who have overseas experience.

1. 2. Courses Developed

A. Developed Tailor-Made Training Programs to Meet Specific Needs of Participants

Progress-to-date

From May 1972 to October 1974, 310 participants have been trained by PPA/CA. (See Appendix D for a listing.) A distinct program is designed for each participant or group of participants. Training programs could involve:

- 1) classroom sessions
- 2) observation trips
- 3) internship or on-the-job training

The content of each classroom session could be in one or more of five areas; administration and organization, communication, medical, research and education. Each area covers a variety of topics. (See Appendix A for listing.) The length of the programs ranged from one day to three months.

The contract also supports a Family Planning Demonstration Clinic and two mobile clinics one day a month. The clinics are used as training devices.

Complete medical examinations are given by doctors at the clinic. Individual doctors may allow AID intern-medical participants to insert IUD's and work under close

supervision. However, this is not common because of legal requirements concerning malpractice procedures. Abortions are not performed at PPA/CA clinics. Referral service is provided.

FINDINGS AND RECOMMENDATIONS

FINDINGS:

1. Auxiliary Training

Generally PPA/CA is used as a auxiliary rather than a primary training facility. In the past two years, the Project Director estimated that about eight programs have been arranged for participants who have gone to PPA/CA for their primary training in population. Most participants; however, are sent to PPA/CA for brief training sessions - often before or after an academic program.

2. PIO/P

To understand the training arranged by PPA/CA, one must refer to the PIO/P. It was because of the Missions' requests for brief periods of training in family planning that AID turned to PPA/CA. The PIO/P is the official training request documentation from the AID Mission, and it expresses the training requirements of the host government. It guides the DTS in arranging a state-side training program. It becomes a guide to PPA/CA when a DTS forwards it along with a request for training. A review of a sample of PIO/P's shows that there is no uniformity for requesting family planning training. Some PIO/P's detail the type and time to be spent on family planning. Others will add a general statement that two or three weeks of family planning orientation is requested. Some simply have a line saying "strong emphasis in family planning requested." Often practical family planning training is requested in conjunction with a degree program or a long-term specialized program offered under a training institution such as Meharry or Development Associates International.

Experience shows that many PIO/Ps do not give detailed, specific information as to the precise type of short-term family planning needed. To ensure that the training is relevant to the needs of the LDC and that it does not overlap with previous training received by the participants, PPA/CA must be aware of:

- 1) the LDC's situation, and
- 2) the type of training the participants have already received or will receive at the primary training facility.

In addition to the OIT Developer Training Specialist, the most immediate source of information is the participant. Routinely, PPA/CA Core Staff interviews each new arrival before the program is finalized. And at least one of the consultants, Dr. Jo Ann Cannon makes a point of talking with

each of the prospective students before meeting with them in a classroom situation to be able to relate her presentation to the past experience of the audience. Dr. Cannon's four years in Malawi and Ghana give her insight into the problems of Central and West Africa. About 50% of the consultants have overseas experience.

3. Logistics

It was noted that few PIO/P's specifically requested training in management relating to logistics of family planning -- especially the procedures necessary for adequate distribution of contraceptive materials throughout country programs. Special efforts should be made by PPA/CA to stress the logistics component of training for all trainees. Health resource management instruction provided by the Illinois School of Public Health could be expanded to cover problems of logistics management when requested by PPA/CA.

4. Mobile Clinics

Mobile clinics are seldom used. There has been little demand for them in the past few years. About three participants visited mobile clinics during the past year. They are not truly rural in nature and never were duplicative of the participants home country conditions. They do provide in-service delivery to remote communities lacking general health service. The two AID-sponsored clinics meet on the first Wednesday of each month. The days they are in operation do not necessarily coincide with days the AID participants may have wanted to visit a mobile clinic.

Mobile clinics are not necessary. The Demonstration Clinic at the Training and Research Center provide an adequate training setting.

Admittedly the Demonstration Clinic may not be similar to those in the participants home country, but the basic medical techniques and information given on family planning is. The Demonstration Clinic allows the intern participant to work in a clinic or a trainee to observe how one functions.

RECOMMENDATIONS

It is recommended that OIT give the Project Director a list of contractors who provide primary training to AID participants so that the Project Director establish contact with other AID-sponsored training facilities to become familiar with their programs to avoid duplication of training. Travel to those training centers not yet visited should be planned.

It is recommended that the PPA/CA staff continue to interview the participant prior to training to make each program relevant to the specific function the participant will return to.

It is recommended that mobile clinics no longer be supported by the contract.

It is recommended that the Administrative series and other training dealing in management of family planning programs identify logical *logical* problems involving distribution of contraceptives and training materials.

It is recommended that AID/W advise PPA/CA about the specific training desired for each participant. AID/W should also describe the training planned or already received at the primary training facility.

B. Provide Training of Various Durations

According to the contract, the type of programs to be developed (but not limited to) were as follows:

1) Impact Learning

Generally two to three days of condensed participation using such training methods as lectures, video tapes, in-depth discussions to keep the participant interested.

2) Observation

An on-site observational trip from one to two weeks duration wherein the participant will be exposed to clinic operations; counseling sessions; administrative procedures; and outside agency operations; such as day care centers and hospital clinics.

3) Internships

Training of a month or more under the supervision of a specialist in active participation in family planning or population services.

FINDINGS AND RECOMMENDATIONS

FINDINGS

1. The above definitions may help understand certain types of training offered. One cannot, however, build in a time restriction when each program is unique. An Internship, for example, may be for a period of less than a month. Any given program may be a combination to two or more types of training.

2. The first year of the contract, PPA/CA simply listed participants by name, area and length of training. At the request of AID, they began to record the participants according to the five categories of "impact;" "internship;" "observation;" "specialized;" and "combined." If a participant received both "impact" and "internship" training, he was listed twice. The PIO/P number was not used.
3. The Average Man Days of Training (MDT) has increased since the beginning of the contract. The first year, the average MDT was 4 days per participant. The second year jumped to 11 days per participant. The first half of the third year shows the average to be 6 days. The Project Director estimates that about 60% of the participants are now programmed for longer than a week. The remaining 40% received training for periods of one to five days. Statistics for the past three years show that the heaviest training occurs during the summer - especially in August and in December. Both time frames correspond to academic breaks for many universities.

RECOMMENDATIONS

It is recommended that the terms impact learning, observation, and internship be used to describe possible parts of a training program, but not be used to classify types of training programs with built-in time factors.

It is recommended that the participants be listed only once and the various aspects of training be checked. The PIO/P number which is essential in locating the participant documentation both in Washington and Overseas should also be recorded.

1.3 Clinical Facilities

Progress-to-date

There is a Planned Parenthood Headquarter's Clinic at 185 North Wabash. Next to the Demonstration Clinic, it is the most frequently utilized clinic. PPA/CA operates nine other clinics. Training sessions may be arranged in additional clinics with adequate lead time for scheduling. There are also cooperating facilities at the University of Chicago's Department of OB/GYN; Illinois Family Planning Council; Northwestern University; University of Chicago Hospital Laboratories; University of Colorado Department of Preventive Medicine; Michael Reese Hospital; Rush Presbyterian - St. Luke's Hospital; and the Concord Medical Center. These institutions provide a complete array of family planning services which can readily be worked into participants schedules for observations or extended training.

FINDINGS

1. Facilities are quite adequate, well organized and efficiently operated. The headquarters clinic at 185 North Wabash will probably move to more adequate and better organized space in a nearby location some time this year. The Chicago Board of Health is constantly expanding its comprehensive health center system, each of which will provide complete family planning services with referrals for vasectomy or menstrual regulations services.
2. Services routinely provided include a full range of patient examinations plus V.D.; sickle cell; and cancer screening. Foreign participants are advised that this examination represents the ideal acceptor work-up that undoubtedly cannot be duplicated in LDC clinics, but represents the full range of services that might be provided for prospective acceptors. Equipment is adequate, well managed and the essentials represent items routinely programmed into LDC operations.
3. Leadership throughout PPA/CA in clinical and non-clinical activities was found to be excellent. Clinic chiefs have a good background of training and experience, and have an excellent working relationships with staff. All staff areas were covered with well motivated, well trained and very pleasant and friendly personnel. Physicians contacted were part-time, well qualified and highly professional in their work. The nurse practitioner at the headquarters clinic was well trained, confident and worked well within her prescribed set of duties -- using physicians for consultations as necessary. The demonstrations of nurse utilization for clinical family planning services should be quite helpful to most observers from LDCs, although LDC physicians generally preferred to work with clinic physicians. Patient counseling was stressed at all clinics and it was emphasized that this aspect of acceptor management was generally neglected in LDC clinics, leading to an increased drop-out rate. The preponderance of young staff gave the entire clinic operation a vitality and rapport with patients that was refreshing.
4. Clinic operations utilized in training of participants were generally well staff and efficiently operated. Clinical, administrative and counseling staff were interested in trainees and adequacy of instruction provided for participants. Trainers worked with LDC and U.S. trainees, effectively, with full recognition of the trainees educational, professional and experience capabilities. While training efforts concentrated on the basics of service programs, there was adequate reference to research programs and the potential for problem solving in areas of data collection, contraceptive procedures and patient management.

5. Conversations with Dr. Murray Brown, Chicago Commissioner of Health, indicated the City of Chicago is well satisfied with the service and training role carried out by PPA/CA. Board of Health facilities are continually expanding their family planning services with heavy dependence upon PPA/CA for training of local personnel. Cook County Hospital OB/GYN department was training its patient counselors at PPA/CA clinics.
6. The Illinois School of Public Health, located adjacent to the PPA/CA clinic at 1919 West Taylor, makes a substantial contribution to the training programs at that address. Lectures generally include heads of departments from the School of Public Health and those contacted (Dr. Petersen - Dean; Dr. Diefenback, Health Resources Management; Dr. Gelfand - Epidemiology; Dr. Kamel - Population Sciences and International Health) feel that PPA/CA is providing an excellent service program as well as training program for local and international trainees. Most of this group have extensive international experience. Dr. Bogue, University of Chicago was also contacted and gave a favorable report on PPA/CA activities.

2.0 A Capable Administrative Organization and Staff

2.1 International Training Division PPA/CA

Progress-to-date

The International Training Division at PPA/CA consists of a core staff of six people. They work closely together, often functioning as a unit. One member is part-time. While their responsibilities are primarily administrative, they at times get involved in training. Mr. Andre Singleton, the Project Director estimates that about 85% of their participant's training is given by himself or his staff.

Andre Singleton, Project Director

Mr. Singleton has been Project Director since 1973. Prior to PPA/CA reorganization, he was Director of the Training and Education Department from 1970-1973. His professional experience includes four years as Executive Director of Lake County Community Action Project, Lake County, Illinois and seven years overseas as Field Director for the American National Red Cross. He has done post-graduate work in administration and management and has received his M.A. (Education) from the University of Wisconsin.

Mr. Singleton spends about a third of his time supervising the staff. The majority of his efforts go toward developing

participants's program. He spends about 10% of his time training in administration and group dynamics.

Dolores Griffith, Resources Coordinator

Ms. Griffith has a degree in Spanish. She has experience in social welfare services and specialized social work in community organization. Ms. Griffith is bi-lingual and has three years of family planning experience, both as a trainer and community organizer. She also taught at the University of Mexico. Most of her time is involved in developing and coordinating resources in the Chicago area. She spends about a third of her time assisting the Director in developing programs. She does some training which has averaged about 5% of her time. Her position replaced the Community Organization position.

Larry Gulian, Technical Assistant

Mr. Gulian has experience in radio announcing, engineering and copywriting. He has three years of experience with the International Training Division as Technical Assistant, participant programmer and trainer. He is responsible for the audio-visuals and spends about 10% of his time conducting training. He also gives a general orientation to Chicago for participants visiting the city for the first time. About one-third of his time is devoted to arranging participant programs under the direction of the Director.

Betty Perez, Health Educator/Trainer (Part-time)

Ms. Perez has twelve years of family planning experience as a nurse, trainer and health educator. She has five years experience working with international participants. She spends one-third of her time with the International Training Division. She is primarily a trainer. The curricula she has developed for PPA/CA domestic training are also used for AID participants.

Jan LaBrie, Communication Specialist

Ms. LaBrie has a degree in English and Education. Her experience includes work in information, education and communication with Planned Parenthood, East-West Communication Institute (IE & C) which included a field study in Taiwan. She has only recently joined PPA/CA and is presently involved in a special training four-month program for two Koreans in Communications and Family Planning.

Elena Young, Secretary

Ms. Young is responsible for the clerical support required by the staff.

The contract helps to support two mobile clinics operating once a month and a Demonstration-Training Clinic at 1919 West Taylor which includes a staff of Clinic Facilitator; Clinic Interviewer; Clinic Receptionist; a Nurse; Laboratory Technician and three Gynecologists. It is coordinated by Jean Broon.

Jean Broon, Clinic Coordinator

Ms. Broon has a degree in Social Work. She has extensive experience in counseling and family planning. She is currently pursuing an advanced degree in Business Administration.

FINDINGS AND RECOMMENDATIONS

The core staff is well coordinated. They share programming responsibilities under the general supervision of the Director. With the exception of one new employee, they all are experienced enough to understand completely how PPA/CA functions and the general needs of the participants. What they lack in overseas experience is compensated by dedication to their work and sensitive personalities.

It may be noted that a small percentage of AID participants are selected at the end of their training for an Exit Interview before leaving Washington. Of the five participants who commented on their experience at PPA/CA during the interview, two volunteered that they were impressed with efficient administration of the program.

It is recommended that the contract allow for the funding of a core staff. Continuity of leadership is vital to the program.

2.2 Other PPA/CA Staff

Progress-to-date

The participants have less frequent contact with other members of the PPA/CA staff who contribute to the program efforts in peripheral, rather than the direct way. Included in this group are:

Marilyn Notkin, Director of Training and Research Center

Ms. Notkin is trained as a sociologist, and has had experiences in social research, university instruction and administration.

Iris Boivin, Training Coordinator, State of Illinois

Ms. Boivin is a Health Educator/Trainer. She has experience with several statewide family planning programs in the area of program-planning design and evaluation and university instruction.

Rose Rubin, Training Manager, State of Illinois

Ms. Rubin is a public health professional, and has experience in social work and family planning.

Jeanne Glowan, Research Coordinator

Ms. Glowan is a social scientist, a medical sociologist with experience in the development and evaluation of health delivery services.

Geneva Jones, Administrative Assistance

Although Ms. Jones is not funded by AID, she devotes 80% of her time giving administrative and clerical support to the International Training Division.

Mary-Jane Snyder, Executive Director of PPA/CA

Mary-Jane Snyder is a communication consultant, well-known nationally and internationally in the family planning field. Mrs. Snyder has been involved in programs of AID for many years.

3.0 **A Capability to Organize Training Programs for Special Groups and Individuals on Short Notice**

Progress-to-date

One of the key factors in using PPA/CA according to the OIT Development Training Specialists is that PPA/CA can respond on short notice. The contract does not require any time. There is no indication that PPA/CA has ever refused to arrange a program for an AID participant.

FINDINGS AND RECOMMENDATIONS

PPA/CA maintains up-to-date records on consultants, as well as health and population institutions which offer services relevant to international training. Members of the staff are qualified to train in certain aspects of population education, communication, and health. The Project Director estimated that he, with the assistance of a member of his staff, could arrange a short-term uncomplicated training program in six to twelve hours.

The more involved the program, the more important the lead time becomes. He mentioned that on occasions, he and his staff have worked over the weekend to arrange a training program for a participant. He guessed that about a quarter of the programs are arranged with a week or less lead time.

A small sample (11) of participants files was selected to review. Every twenty-fifth name on a list of participants was selected.

One of the purposes was to see if the files revealed the amount of lead time given to PPA/CA. Two of the files had no documentation which would indicate the amount of advance notice given. The average time for the other programs was six weeks. No attempt was made to survey all the files.

It is recommended that the present arrangement be maintained. Although it may place a burden on the training facility at times, they have indicated that they are capable of working within this restraint.

4.0 An Effective System for Recruitment and Selection of Participants

Progress-to-date

PPA/CA accepts all participants sent by the OIT Project Manager. They have never refused to arrange a training program for a participant. They have no academic or prior work experience requirements which have to be met by the participant. Since the establishment of the Special Training Fund, they have had the possibility of selecting potential candidates and recommending them to the OIT Project Manager. The fund was established to cover the training expenses of non-PIO/P funded participants. It has only been used to fund 13 participants.

FINDINGS AND RECOMMENDATIONS

PPA/CA does not actually recruit or select participants. They depend on OIT to send them trainees.

It is recommended that money if available be provided for travel for the AID Project Director to advise USAID and host country personnel about training opportunities at PPA/CA. While abroad, he will become more familiar with USAID Projects and will be able to brief prospective participants and meet with returned participants.

4.1 Provide Family Planning Training for Other Than the AID Participant

Progress-to-date

PPA/CA was encouraged to offer their training services to other than the AID-sponsored participant. U.S. government personnel, non-sponsored foreign nationals visiting or working in the United States and other than AID-sponsored personnel were three categories. The OIT Project Manager was to approve each candidate.

FINDINGS AND RECOMMENDATIONS

To date the following have taken advantage of the PPA/CA's services.

AID Officials	7
Non-Sponsored Foreign Nationals	5
Other Than OIT	118

The table in Appendix B will show AID Contract Participants (Meharry, DAI, CFSC, etc.) who used PPA/CA as a training facility. The contractor contacts PPA/CA directly.

The bulk (62%) of the participants are programmed directly by OIT Development Training Specialist.

The Training and Research Center maintains liaison with National and International Family Planned Oriented Institutions such as University of Chicago's Community and Family Study Center; Planned Parenthood-World Population; International Planned Parenthood Federation; UNESCO; UNICEF; Population Council and Pathfinders. Participants have been referred for training by UNESCO; IPPF; UNICEF; Pathfinder; The East-West Center; University of Chicago; University of Michigan; Michigan State; University of Connecticut and Family Planning International Assistance Office.

Brochures are mailed routinely to approximately 90 national and international institutions who have family planning orientations. The program has been visited by approximately 25 representatives of national and international institutions over the past four years.

It is recommended that OIT encourage AID officials, who are actively involved in participant training, to visit PPA/CA to discuss the services available.

5.0 A Capability for Disseminating Knowledge About Programs to Population Program Staff Around the World

Progress-to-date

Brochures describing PPA/CA domestic and international program abilities and seminars produced by PPA/CA have been distributed to the missions via the OIT Program Manager, to International Organizations, to Foreign Governments interested in Family Planning and to training facilities that Mr. Singleton knows have a contract with AID to provide training. Personal contacts, and the International Dictionary of Population Resources are used. The AID Development Training Guide also lists PPA/CA.

FINDINGS AND RECOMMENDATIONS

The system is apparently functioning. While no great demand has been made for their services, there has been a steady increase in the number of AID contract participants attending PPA/CA.

The few visits made by the Project Director to sister family planning organizations under AID contract seem to have stimulated an awareness of the services which PPA/CA offers.

It is recommended that when funds are available, PPA/CA staff functioning as Program Officers, visit other facilities which provide primary training for AID participants.

It is also recommended that the Director of the International Programs, PPA/CA visit key AID Missions and Population Offices to discuss training offered by PPA/CA.

5.1 Produce Information Literature for Recruitment

Progress-to-date

Two brochures have been especially designed for the programs supported by AID - a yellow one entitled "Advances in Family Planning and Population Dynamics" and a green one called "Training for Family Planning and Allied Health Professionals - The Administrators Series." In addition, PPA/CA has several brochures on their organization and domestic training programs.

FINDINGS AND RECOMMENDATIONS

Both AID brochures are attractive and accurately describe the purpose and nature of programs offered. The original one is a general explanation of the training sponsored by AID. The most recent one, "The Administrators Series" describes a pilot program in management for top-level administrators in the field of population.

Two programs are being offered: one in February, the other in March, 1975. The seminars were developed because a need for training in management had been expressed to the OIT Development Training Specialists by the USAID Missions.

At the request of the OIT Development Training Specialist, a group of nurses and mid-wives who had just completed their four-month training in MCH/FP at Meharry Medical College were attending a "preview" of the two-week management seminar at the time the Evaluation Team was at PPA/CA.

The general feeling among the staff was that the group was not at a high enough level to follow the material developed for the original seminar. Although the basic design was kept, the teaching staff attempted to adjust their presentations for the group.

A questionnaire designed and administered by the Team (See Appendix D) indicates that the course was at the right level for the majority of them. This was the first time 75% of them had received any formal training in management. Over half knew they would return to a management position.

It is recommended that all training facilities offering courses in Family Planning for AID participants be sent a brochure on the management series. If enough interest is generated, continue to offer the two-week course in Management.

6.0 Trained Participants Returned to Their Country Positions and are Performing Family Service Skills in Satisfactory Methods and are Training Others in Their New Skills

Progress-to-date

There is no formal systematic follow-up of returned participants by PPA/CA or AID for those who have been trained in Chicago.

Informal contact is on a sporadic basis. Generally, the basis is social. However, PPA/CA is occasionally contacted by a returned participant in connection with his training. A dramatic example is that of Dr. Paul Evangelista of the Philippines who works in the field of leprosy. His observation that his patients who had vasectomies no longer ran positive tests, was of interest to Dr. Joseph Swartwout, a consultant, who helped on Dr. Evangelista's program. Dr. Swartwout volunteered the use of the University of Chicago's computer for analysis of data if Dr. Evangelista conducted a study to determine whether his observation could be correlated to the observed study. Dr. Evangelista is conducting such a study and is maintaining contact with PPA/CA.

FINDINGS AND RECOMMENDATIONS

A large number of participants programmed through the PPA/CA Training and Research Center receive their primary training in Family Planning at other facilities. PPA/CA feels that measuring the impact of training on later job performance attributable to a given setting or experience is usually not possible.

Other participants receive training in their principal discipline at other institutions and are sent to PPA/CA for an introduction to family planning. Family Planning is usually not their primary professional field.

Since clear cut goals for short-term training were often not put into the PIC/P, programs were arranged by PPA/CA after discussion with the OIT Development Training Specialist and the participant. It would be beneficial to learn how and to what extent the short term training was useful to the returned participants.

It is recommended that when USAID has available personnel overseas LDCs be sent a list of participants who have been trained during the past three years and be asked to contact the participants to determine their reaction to their current use of training. In the interim, AID in conjunction with PPA/CA could devise a brief set of appropriate questions to send to the Population Officers to determine their opinion of the PPA/CA training. (See Appendix D for a list of returned participants.)

C. Input

The combined total income (private and federal) for PPA/CA for FY 74 amounts to \$1,731,172. The AID/csd-3421 contract represents only about 8% of this figure. The bulk of PPA/CA's funding (92%) is derived from federal grants, contracts and reimbursements. In addition to AID, HEW channels monies via the Illinois Family Planning Council and Office of Equal Opportunity.

The Illinois Family Planning Council (IFPC) is the coordinating agency for family planning programs in the State of Illinois. It is funded by the U.S. Department of HEW. In mid-1973, the decision was made to place all available training funds into a centralized resource. The IFPC negotiated with the Office of Economic Opportunity, the Illinois Department of Public Health, and the Planned Parenthood Association of the Chicago area to effect such a plan. The IFPC transferred the operation of the Research and Training Center including the demonstration clinic to PPA/CA. About fifty-two family planning projects are funded by the Council.

The following chart lists the variety of HEW activities conducted by PPA/CA

FEDERAL CONTRACT FUNDS
ADMINISTERED BY PPA/CA
DURING FISCAL YEAR - 1975 *

AID	\$140,000
HEW	
IFPC Training Grant	48,870
IFPC Training Grant/Stateside	45,000
IFPC Special Research Projects	152,000
. Patient Education	
. Consumer Participation	
. Social Services	
. Abnormal Pap Smears	
. Male Services	
IFPC Service Grants	221,486
. Teen-Scene	
. Male Education	
. CCH Follow-up	
IFPC Roselan/Pullman Clinic	50,000
IFPC Uptown Teen-Scene (proposed)	21,000
OEO TRC Operational Budget	120,000
OEO Cook County	19,010
Lake County Community Action Project	35,000
Teen-Scene Membership Fees	13,000
TOTAL	\$865,366

* Contract periods vary. Figures shown, therefore, are annualized for convenience, based on currently budgeted monthly rates.

Although AID/csd-3421 is only about 14% of the FY 75 federal funding, it has a significant impact on the Training and Research Center of PPA/CA. The AID contract represents more than a quarter (27%) of the Center's income of \$505,070 in turn, reaps the benefit of the technical competence and professional standing of the entire Center itself - not just 27% of it.

The following is a table, listing the disbursement of AID funds during the life of the AID/csd-3421 contract:

AID (Contract csd-3421) \$373,608			
Budget Items	FY 73 (5/1/72-4/30/73)	FY 74 (5/1/73-4/30/74)	Estimated FY 75 (5/1/73-4/30/75)
Salaries and Wages	\$55,487	\$57,228	\$61,666
Home Ofc Professionals	\$20,500	21,000	23,468
Home Ofc Non-professionals	14,000	14,400	15,061
Field Staff Professionals	10,892	11,460	13,312
Field Staff Non-professionals	10,095	10,368	9,825
Consultant Fees (Faculty)	12,584	12,000	12,052
Clinicians	8,900	6,000	3,000
Travel & Transportation	600	1,000	2,096
Travel Allowances	300	200	-
Equipment, Vehicles & Supplies	4,909	3,340	2,367
Other Direct Costs	10,531	0,000	13,035
Fringe Benefits	5,600	5,336	5,874
Overhead	19,697	0,896	24,910
Special Training Fund			15,000
TOTAL	\$118,608	\$115,000	\$140,000

INPUT

Non-Financial Contributions made to AID Participants Programmed by PPA/CA

A. University of Illinois

- . Survey Research Laboratory gives technical assistance
- . School of Public Health allows participants to audit classes and has agreed to consider them as candidates in Master's degree program
- . Director of Population Studies (Wadie Kamel) heads PPA/CA Training Center's Advisory Council
- . Medical school allows use of PLATO for training

B. University of Chicago

- . Seminars and post graduate classes in Family Planning and Human sexuality are open to participants
- . Dr. Bogue, Director of Community and Family Study Center, is available to the Center

C. Illinois Family Planning Council

- . The fifty-two family planning projects funded by the Council can be used as working models for participants

D. Cooperating Agencies

- . About 65 resources in the Chicago area which provide training in family planning, e.g. hospitals, social welfare and related health agencies

E. PPA/CA

Non-international training resident staff of PPA/CA support the program. Although a time workload analysis has not been made on the staff, it is known that the Administrative Assistant spends about 80% of her time with the AID project

III. SUMMARY OF RECOMMENDATIONS

It is recommended that:

1. The Contract with PPA/CA be continued.
2. Future contracts with PPA/CA allow for the funding of an administrative core staff. Continuity of leadership is vital to the program.
3. The mobile clinics no longer be supported by the contract.
4. PPA/CA core staff continue to interview the participants prior to training to insure that programs are related to needs of LDCs and are not duplicative of previous training.
5. OIT give the AID Project Director a list of contractors who provide primary training to AID participants.
6. OIT send a copy of the Administrative Series (Management) brochures to all training facilities offering courses in Family Planning for AID participants.
7. The two-week course in management be continued if sufficient interest is generated.
8. The Administrative Series and other training dealing with management of family planning programs identify logistical problems involved in distribution of contraceptive and training materials.
9. OIT encourage AID officials who are actively involved in participant training facilities to discuss the training services available.
10. Funds be set aside for visits by the Core Staff to training facilities which have contracts to provide primary training for AID participants.
11. AID in conjunction with PPA/CA could devise a brief set of appropriate questions to send to the USAIDs' Family Planning/Population officers to determine their reaction to training.
12. The terms "impact learning," "observation," and "internship" be eliminated, and a new system for program classification be devised.
13. In the official records, the participants be listed only once and the various aspects of training be indicated. The PIO/P should be recorded.

IV PREVIOUS CONTRACTS

1. First Contract With PPA/CA (AID/NESA-380)

In June, 1968, AID's NESA Bureau signed a three-year contract (AID/NESA-380) with the Planned Parenthood Association, Chicago area, to provide specialized courses in family planning for participants from the Near East and South Asia region.

PPA/CA was to develop a Family Planning Training program and provide the necessary training facilities including a library and professionals, part-time specialists and consultants.

A. ACCOMPLISHMENTS

The contract was in effect for approximately two and a half years. (It was re-negotiated in October, 1970 to allow training of participants from regions other than NESAs.) During this period -

1. 127 participants were sent for training directly by AID/W. 316 "visitors" were also trained, but a record of their sponsor was not required. It is not known; therefore, how many of the "visitors" were actually AID participants whose programs had been farmed out to other contractors for training.
2. A teaching demonstration clinic was established. Four mobile clinics were set up.
3. An international training curriculum was developed consisting of a combination of lectures, seminars, OJT, and field trips relating to family planning.
4. Contracts with Chicago resources such as the Chicago Lying-in Hospital, the University of Chicago, G.D. Searle Company the Cook County Hospital were established.

B. PROBLEMS ENCOUNTERED

1. The record systems used did not accurately reflect the number of AID-sponsored participants trained at PPA/CA.
2. The Executive Director resigned approximately six months after the contract was signed and was not replaced until September, 1969.
3. The number of participants trained was less than anticipated (225 to 300 participants.) Because it was a NESAs Contract roughly about 84% of the participants were from NESAs countries.
4. Information regarding the specific objectives for training at PPA/CA was not always provided by AID. An initial program conference with the participant was held, therefore, before the program was finalized to avoid duplication of his or her training experience.

C. CHANGES SUGGESTED

With a view to reducing the workload caused by simultaneously training in various disciplines and increasing the enrollment, PPA/CA proposed that special programs for administrators, educators, and medical personnel be offered periodically for groups of participants from all regions. The contract was negotiated and resulted in AID/csd-2874 being signed in early 1971. The Office of International Training was asked to administer the new contract.

2. Second Contract With PPA/CA (AID/csd-2894)

In early 1971, contract AID/csd-2894 came into existence. It remained in effect until May 1972. The contract now covered multi-national leaders or trainers in this (family planning) activity.

PPA/CA was to develop three basic courses which would collectively encompass all family planning activities. The Courses would be in the fields of:

- 1) Medicine
- 2) Education
- 3) Administration.

Each course was to last four weeks, and be offered three times a year. Literature describing the three programs was to be sent to OIT.

A. ACCOMPLISHMENTS

Based on the final report submitted by PPA/CA the following were accomplished:

1. About 100 participants were programmed by PPA/CA during the 15 months of the contract. Most were for one-day observation.
2. A style of training called "Impact Learning" was developed. "This technique of training employs film, slides, charts, overhead transparencies, etc., as a way of condensing a large amount of information into a relatively short training time span."
3. The Family Planning Library was enlarged.
4. Detailed curricula for family planning programs in the area of medicine, communication and administration were developed "from which programs of any desired length and complexity can be built to suit the individual requirements of incoming trainees."
5. A new training brochure was devised and sent to Agencies within the US and abroad.
6. An in-house training program for the entire Training and Education Staff was conducted with the purpose of building a team approach and upgrading the staff's general training skills.

B. PROBLEMS ENCOUNTERED

1. The PPA/CA program for AID had three separate directors and was looking for a fourth during this period. This could have been the result of the fact that year-to-year funding of the contract prevented long-range planning. The relatively low salary level in conjunction with individual situations also were mentioned as possible reasons.
2. Scheduled specialized training courses were not conducted because not enough participants registered.
3. In spite of recruitment efforts a noticeable increase in participants did not occur.
4. Advance information about the needs, goals and previous experience of the participants was not generally sent to PPA/CA. PIO/P documentation was not sufficient.

- 5. Mobile clinics were available on the first and third Wednesday of each month. Frequently, trainee's schedule did not allow for observing the Mobile Clinic. Four rather than the two were in operation.
- 6. The record system did not indicate the sponsorship of the participants.
- 7. PPA/CA training staff had not been able to travel to become familiar with AID projects and AID officials involved in Family Planning programs in the United States or abroad.

C. SUGGESTED CHANGES

To strengthen the program and to insure maximum relevance, PPA/CA was asked to recruit a training faculty and develop curricula appropriate for international students in various aspects of family planning. Outside consultants were to be hired as needed. The key difference between this contract and the previous one was that each participant was to have a program tailored to his particular needs. This training could last from one day to a matter of months. No attempt would be made to offer "canned programs."

A P P E N D I C E S

ADMINISTRATION AND ORGANIZATION

Program Organization and Development
Program Planning and Budgeting Systems
Administration of Family Planning Programs
Health Delivery Systems
Statistics
Basic Demography
Over Population's Effect on Natural Resources
Management Skills
Program Evaluation

COMMUNICATIONS

Communications Programming
Analysis of Publics and Appropriate Media
Education for Public Opinion
Development of Materials
Public Speaking
Analysis of Communication Programs

MEDICAL

Medical Direction of Family Planning Clinics
Contraceptive Technology
Methods of Contraception
Surgical Methods of Birth Control
Clinical Procedures
Maternal and Child Health
Field Training

RESEARCH

Current Status of Family Planning Research

EDUCATION

Modern Training Techniques
Community Organization for Family Planning
Youth Education and Motivation
Venereal Disease
Field Work
Human Sexuality
Group Dynamics

PARTICIPANTS TRAINED BY PPA/CA (ANNUAL REPORTS)

B

Training Requested by	May, 1972 - April, 1973 FY '73	May, 1973 - April, 1974 FY '74	May, 1974 - Oct. 1974 FY '75
CIA	55	78	59
Other			
Asia Foundation		3	4
Center			
CIRG	59	1	1
Commerce		1	4
DHEW	1		
DAI		2	
East/West		1	
Univ. of Illinois	1		3
Meharry		2	
Church World Service	1		
NIH		1	
U.S. Dept. of Labor	1		
UN		5	1
U.S. Army	1		
UNESCO	3		
Dept. of Health/Canada	1	3	3
WHO		1	
Rural Indian Health	1		
Not Listed	5		
Self	2	1	1
Total	76		
GRAND TOTAL	<u>131*</u>	21	1
		<u>90</u>	<u>1</u>

* 44 participants are not included. Their files were lost during the office move from 185 Wabash.

QUESTIONNAIRE FOR PARTICIPANTS IN PPA/CA
ADMINISTRATORS SERIES/MANAGEMENT & ADMINISTRATION
(January 13-24, 1975)

Do not write your name on this sheet. Answer all questions as honestly and as frankly as possible. Check the one answer that seems best to you:

1. Was the length of your training here

too long? 1
about right? 1
too short? 18

2. For your work in your home country do you consider the level of the theories and techniques explained here

too advanced 4
about right 16
too elementary 0

3. During your training here, have you personally had the opportunity of expressing your opinions?

yes 17
no 2
NA 1

4. Have you had the opportunity of raising questions about something you wanted to understand better?

yes 20
no 0

5. Were the teaching methods used here appropriate for the kind of things you were learning?

yes 18
no 2

6. In your opinion, how was the time divided between "lectures" and "workshops" in your training?

<u>Lectures</u>	<u>Workshops</u>	
100%	0%	<u>1</u>
75%	25%	<u>4</u>
50%	50%	<u>13</u>
25%	75%	<u>0</u>
0%	100%	<u>0</u>
		NA <u>2</u>

7. In your opinion, how should the time be divided between "lectures" and "workshops?"

<u>Lectures</u>	<u>Workshops</u>		
100%	0%	a	<u>1</u>
75%	25%	b	<u>4</u>
50%	50%	c	<u>8</u>
25%	75%	d	<u>2</u>
0%	100%	e	<u>0</u>
		NA	<u>5</u>

8. Was the training you received here relevant to your needs?

yes 19
no 0
NA 1

9. Do you believe the things taught here will be applicable in your country after you return home?

yes 17
no 2
NA 1

10. On the following scale, (where 7 is high and 1 is low), circle the number which best reflects your overall satisfaction with this training:

		2	3	6	5	1	$\frac{N}{3}$
<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	
This training could not have been worse							This training could not have been better

11. Among other things, this training had certain goals or objectives which are listed below. Next to each, check the degree to which you think that goal was reached:

	<u>In large measure</u>	<u>Partially</u>	<u>Not at all</u>	<u>NA</u>
a. Helped me identify organizational objectives	<u>10</u>	<u>9</u>	<u>0</u>	<u>1</u>
b. Improved my understanding of goals, policies and procedures for an organization's basic strategy	<u>10</u>	<u>10</u>	<u>0</u>	<u>0</u>
c. Increased my knowledge of problem solving process for individuals and groups	<u>15</u>	<u>5</u>	<u>0</u>	<u>0</u>
d. Provided decision making methods	<u>9</u>	<u>10</u>	<u>0</u>	<u>1</u>
e. Explained environmental analysis and forecasting	<u>3</u>	<u>17</u>	<u>0</u>	<u>0</u>
f. Described the formal power relationships within an organization	<u>9</u>	<u>10</u>	<u>0</u>	<u>1</u>
g. Explained integrating strategy and an organization's structure	<u>8</u>	<u>12</u>	<u>0</u>	<u>0</u>
h. Enabled me to determine my leadership style and its effects	<u>11</u>	<u>9</u>	<u>0</u>	<u>0</u>
i. Improved my understanding of motivating employees	<u>14</u>	<u>6</u>	<u>0</u>	<u>0</u>
j. Improve my ability to counsel and interview	<u>10</u>	<u>9</u>	<u>1</u>	<u>0</u>
k. Increased my knowledge of effective communication	<u>7</u>	<u>12</u>	<u>0</u>	<u>1</u>
l. Explained nature and effects of the control process	<u>4</u>	<u>14</u>	<u>0</u>	<u>0</u>
m. Taught budgeting concepts	<u>6</u>	<u>14</u>	<u>0</u>	<u>0</u>
n. Explained personal reactions to the control process	<u>7</u>	<u>12</u>	<u>1</u>	<u>0</u>

12. Did you have any formal training in Management before coming to PPA/Chicago?

yes 4

no 15

NA 1

13. Will you assume a management position upon returning home?

yes 11

no 6

NA 3

Participants Trained by PPA/CA
 FY '73 (May -72 - April '73)

A. PROGRAMMED BY OIT

<u>NAME</u>	<u>COUNTRY</u>	<u>HOME COUNTRY EMPLOYMENT</u>
Nam Hoon Cho	Korea	FP Evaluation Officer
Ghulam M. Kamal	Bangladesh	Family Planning Officer
Maud S. Smith	Liberia	Head Nurse, PHS
Reynaldo Arciniegas	Colombia	Director, Juvenile Div.
Joaquin Bohorquez	Colombia	Chief, Human Resources
Eduardo Lourido	Colombia	Chief, Div. of Social Prom
Edison Daza	Colombia	Administrative Asst.
Maria Gomez	Colombia	Nutritionist
Julian Manrique	Colombia	Training Specialist
Francisca De Oliveira	Brazil	Statistician
Nguyen Thi Bach	Vietnam	Statistician
Nguy Thi Thanh Loan	Vietnam	Statistician
Dhruba Man Shrestha	Nepal	Medical Officer
Shiva Dhyan Prasad	Nepal	Medical Officer
Hari Nandan Uprety	Nepal	Senior Medical Officer
Joan Swamber	Guyana	Nurse
Perla B. Pinto	Philippines	Nurse
Liticia M. Franco	Philippines	Nurse
Paulus Laoda	Indonesia	Police Doctor
Joyce Ferguson	Jamaica	Midwife
Tomfort Asrofi	Ghana	Midwife
Roberto Chavez	San Salvador	Admin. Asst.

<u>NAME</u>	<u>COUNTRY</u>	<u>HOME COUNTRY EMPLOYMENT</u>
Yahaya A. Yusuf	Nigeria	Executive Secretary
Charles Nzoka	Kenya	Medical Officer
Edwin Mpate	Kenya	Medical Officer
Catherine Addo	Ghana	Training Officer
Orlando De la Cueva	Philippines	Health Educator
Savitri Goyal	India	Health Educator
Prasanna Gautam	Nepal	Medical Officer
Fernando Galich	Guatemala	Medical Advisor
Bui Thi Minh	Vietnam	Midwife
Cong Tang Hoa	Vietnam	Clinical Instructor
Ly Thi Hai	Vietnam	Midwife
Nongnuch Boonyakiat	Thailand	Principal, Midwifery School
Miriam Shanawaz	Afghanistan	Asst. Director, Nursing Sch.
Van Pheng Savanyenh	Laos	Chief, Pediatrics
Jamila Daftari	Afghanistan	Surgeon
Ratna Manandhar	Nepal	Medical Officer
Aristarchus Pongtuluran	Indonesia	Medical Officer
Manuel Juan, Jr.	Philippines	Chief, Hosp. Licensure
Halim Kesuma	Indonesia	Medical Officer
Eric Owens	Jamaica	Board Secretary
D. Nunez	Philippines	
S. Skulbham	Thailand	
A. Amir	Afghanistan	
Y. Khoo	Singapore	

<u>NAME</u>	<u>COUNTRY</u>	<u>HOME COUNTRY EMPLOYMENT</u>
Tahira Rahimi	Afghanistan	
Savitri Gurung	Nepal	
Perfecta Romero	Philippines	
Rosalina San Juan	Philippines	
Lucrecia Castillo	Philippines	
Felisa Guiano	Philippines	
P. Shakya	Nepal	
K. Singh	Nepal	
Dawn McNott	Jamaica	

PROGRAMMED BY OTHER ORGANIZATION

Lalit Niyamanont	Thailand (UNESCO)	Information Officer
Achara Bunnag	Thailand "	Information Officer
Amado Inciong	Philippines (Labor)	Under Secretary, Labor Dept.
Leonor Zamora	Philippines (UNESCO)	Health Educator Advisor
Guillerma Batto	Philippines (HEW)	Dir., Bureau of Trng&Research
Wanda Patton	Japan (CWS)	Missionary
Margaret Naqvi	India (Univ. of Ill.)	Social Worker
Karolyn Schultz	USA (US Army)	
Inge Feintner	Canada (Dept. of Health)	
Shirley Webb	Jamaica (Independent)	
Shashikala Bhide	India (Individual)	
William Renshaw	USA (Population Council)	
	India(RIDP)	Dir., Rural Indian Health Proj

<u>NAME</u>	<u>COUNTRY</u>	<u>HOME COUNTRY EMPLOYMENT</u>
Hafsan Shariat	Iran (IVC)	
Kazem Sahebkar	Iran "	
Hafezy	Iran "	
Roohani	Iran "	
A. Mohamedassem	Egypt (CFSC)	Dir., FP Office
A. Andrew	St. Lucia, W.I.(CFSC)	Midwife/Nurse
Janardan Apte	India (CFSC)	
Bahia Barada	Egypt "	Social Worker
Moti Basnyat	Nepal "	Executive Secretary
Gloria Bent	Jamaica "	Education Officer
Milton Berry	Jamaica "	Education Officer
Joseph Biney	Ghana "	Welfare Officer
Nguyen Bong	Vietnam "	Dir. Cultural&Social of V-Am.
Joseph Buadoo	Ghana "	Senior Welfare Officer
Vida Caulley	Ghana "	Regional Coord. P.P.
Gladys Darkwa	Ghana "	Regional Coordinator
Tita Datu	Philippines (CFSC)	Super. Info. Ofer. II
Affandi Djoko-Atmoko	Indonesia "	Editor, "Pedoman"
Mohamed El Aasar	Egypt "	Dir. Eval. & Statistics
Ahmed El Khazendar	Egypt "	Dir., Ex. Office, F.P.
Yimer Erku	Ethiopia "	Social Worker
Marcus Eruaga	Nigeria "	State Secretary
Sylvia Forte	Guyana "	Health Education Asst.
Luzviminda Gutierrez	Philippines "	Student

<u>NAME</u>	<u>COUNTRY</u>	<u>HOME COUNTRY EMPLOYMENT</u>
Mirian Hornsby-Odol	Ghana (CFSC)	Principal Public Health Nurse
Chun-Hsiung Huang	Taiwan "	Associate
Adamu Isyaku	Nigeria "	Asst. Info. Officer
Ambrish Johri	India "	Audio Visual Officer
Roberto Justiniani	Philippines (CFSC)	Medical Field Rep.
Shi-Tae Kim	Korea "	Dir., Field Operations
Rosemary Koinange	Kenya "	Senior Medical Officer
Sylvester Kwakye	Ghana "	Information Officer
Cleveland Miller	Jamaica "	Education Officer
Pat Mosena	USA "	Student
Erastus Muteru	Kenya "	Liaison Officer
Mary Mwamodo	Kenya "	Area Officer
Patsy Nesbitt	Jamaica "	Senior Field Officer
Purushottam Nishawan	India "	Chief Editor
Mangara Panggabean	Indonesia "	Div. Head, Min. of Info.
Pinarti Pranoto	Indonesia "	Bureau Chief
Sumetra Puri	India "	Asst. Info Officer
Manu Rena	Nepal "	Section Officer
Govinda Rao	India "	Tech. Asst. Dir. Media
Sergio Rodrigues	Brazil "	Student
M. Rokhani	Iran "	Chief of Publications
Synthia Royer	Dominica "	Ex. Officer
Ans Samarasinghe	Ghana "	Senior Public Health Nurse

<u>NAME</u>	<u>COUNTRY</u>	<u>HOME COUNTRY EMPLOYMENT</u>
Maria Santos	Philippines (CFSC)	Supervisor, Nursing
Madhukar Shrestha	Nepal "	F.P. Officer
Holil Soelaiman	Indonesia "	Teacher
Dioko Sukono	Indonesia "	Bureau Chief, Info.
Bouaphet Sygnavong	Laos "	Director
Moti Tuladhar	Nepal "	
Turipto	Indonesia "	Chief, Publications
Mallika Weerasekare	Ceylon "	Nurse; Research
Bernice Duncan	Sierra Leone "	Nurse; Welfare
Hussain Haji Ahmad	Malaysia "	Information Officer
Wah Soi Ong	Malaysia "	Information Officer
Leonard Victor	Malaysia "	Information Officer
Joan Bishop	Trinidad "	
Brian Copp	USA "	
Stanley Hudson	USA "	

Participants Trained by PPA/C
 FY '75 (May - Oct. '74)

PROGRAMMED BY OIT

<u>NAME</u>	<u>COUNTRY</u>	<u>HOME COUNTRY EMPLOYMENT</u>
Priya Kodippily	Sri-Lanka	Chairman-Info & Ed.
Bui Quang Hue	Vietnam	National Chief Midwife
Shahadat Hossain	Bangladesh	Medical Officer TB Control
Dilrose Banu	Bangladesh	Medical Officer TB Control
Muhiuddin Haider	Bangladesh	Student
Alice Cerdinio	Philippines	Nurse Midwife
Kumar Rana	Nepal	Public Health Officer
Joyce D'Souza	India	Student
Cassandra Lambert	Sierra Leone	Midwife
Madhesh Lamichhaney	Nepal	Head, Fiscal Adm., MCH
Chalapati Sophon	Thailand	Medical Doctor
Anant Lapsomtob	Thailand	Medical Doctor
Sala Choochongkol	Thailand	Sanitarian
Chalor Kupatawintu	Thailand	Regional Health Director
Haji M. Nek	Indonesia	Chief, Public Health Ser.
Habibur Rahman	Bangladesh	Divisional Officer
Wallop Sukonthachart	Thailand	Supv. Provincial health
Hoang T. Cuong	Vietnam	Head, PH Teacher
Jacob Williams	Ghana	Senior Com. Health Of.
Vichit Saithai	Thailand	Chief, So. Mobile HD Unit
Aroon Boonmark	Thailand	Sanitary Officer
Marus Doolyabhat	Thailand	Sanitarian Instructor
Sawas Prutaseranee	Thailand	Health Educator

A. PROGRAMMED BY OIT (cont'd)

<u>NAME</u>	<u>COUNTRY</u>	<u>HOME COUNTRY EMPLOYMENT</u>
Bassey Williams	Nigeria	Medical Doctor
Maria Clara Arango	Colombia	Student
Sans Soaloon Hutabarat	Indonesia	Student
Debbiche Manoubia	Tunisia	Student
Mercy Obeng	Ghana	Student
Jyoti Shrestha	Nepal	Student
Ernesto Walteros	Colombia	Student
Mohammad Ichsan	Indonesia	Lecturer
Seniz Besbudak	Turkey	Asst. Dir.-Fin. Dept
Quazi Emdadu Huq	Bangladesh	Medical Officer
Tae Sik Kwack	Korea	Research Assistant
Dahlan M. Satalaksana	Indonesia	Asst. Mgr. Econ/Stat. Dpt.
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Ruangwatanaporn Vira	Thailand	Hospital Director
Uthayopas Panas	Thailand	Hospital Director
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Participants Trained by PPA/CJ
 FY '74 (May '73 - April '74)

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M. Mendoza	Philippines	Associate Director
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Chusri	Thailand	Nurse/Midwife
Cheompol	Thailand	Nurse/Midwife
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Behboodien	Iran (CFSC)	
Othman	Malaysia (UN)	
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